

GAMBLING YOUR SOUL MATE: RISK-TAKING AND ATTITUDES TOWARDS
INFIDELITY

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GAMBLING YOUR SOUL MATE: RISK-TAKING AND ATTITUDES TOWARDS
INFIDELITY

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DEDICATION PAGE

I would like to dedicate this thesis to my parents, Hugh and Palma Tedeschi. I would not have made it through these past two years without their love and support.

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ABSTRACT

GAMBLING YOUR SOULMATE: RISK-TAKING AND ATTITUDES TOWARDS INFIDELITY

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Engagement in risk-taking behaviors by young adults, such as alcohol use and unsafe sex practices, is a public health concern. The purpose of the present study is to examine if there is a significant correlation between risky decision-making and the past occurrence of infidelity. One hundred and seventy three undergraduate students were recruited from Texas State University-San Marcos. The total sample consisted of 128 (74.4%) females and 44 (25.6%) males, with a mean age (\pm SD) of 21.75 ± 4.81 . All participants completed the Balloon Analogue Risk Task (BART), the Impulsive Sensation Seeking Subscale (ImpSS) of the Zuckerman's Sensation Seeking Scale, the Rutgers Alcohol Problem Index (RAPI), the Drug Abuse Screening Test (DAST-10), and an investigator created questionnaire that included questions on infidelity. A significant

correlation was found between problematic alcohol use (RAPI) and past occurrence of infidelity. A significant difference was also found between the mean score for the risk-taking condition (BART) for a physical act of infidelity compared to the combined condition of emotional and physical acts of infidelity. There was not a significant correlation found to support risk-taking behaviors, impulsivity and illicit substance use on committed infidelity. Because this is the first known study to examine the relationship between general risk-taking behaviors and the occurrence of infidelity, further research should be conducted to continue exploring potential relationships between these two variables.

CHAPTER I

INTRODUCTION

Adolescents continue to engage in sexual acts at younger ages as casual sex continues to become more common (Grello, Welsh, & Harper, 2006). The majority of adolescents have engaged in sexual activity by the time they have finished high school, and going off to college is a time for further experimentation (Grello et al., 2006). While in college, many students experiment with alcohol, and these students reported favoring the effects of disinhibition induced by alcohol (Ven & Beck, 2009). Students reported that alcohol use allows them to interact with members of the opposite sex more freely, and lowering of inhibitions often led to coupling (Ven & Beck, 2009). Because young adults are engaging in this type of behavior, they are putting themselves at risk for contracting sexually transmitted infections (STIs) such as HIV (Beadnell, 2007). This is especially true for individuals who are making the risky decision to engage in casual sex.

Purpose of the Study

Because many young adults engage in risky behaviors and infidelity is a concerning phenomenon from a public health standpoint, the purpose of the present study is to examine if there is a significant correlation between risky decision-making and the occurrence of infidelity. For the purpose of this study, infidelity can be considered breaking a relational commitment to a partner whether married or dating. Previous

studies have estimated that 20%-40% of men and 20%-25% of women will engage in an extramarital affair at some time in their life (Whisman & Snyder, 2007). A risk with infidelity is that it can cause the relationship to come to an end. More importantly, when infidelity occurs, the unfaithful partner may also put the relationship in danger by engaging in risky sexual behavior (Hall, Fals-Stewart, & Fincham, 2008). Eighty-nine percent of women had no idea they were at risk for contracting STIs because their husbands affair was unreported to them (Hall et al., 2008).

Significance of the Study

This study may show that there are relationships among risk-taking behavior, impulsive sensation seeking, and/or substance use and the occurrence of infidelity. Because previous research has shown that risk-taking and infidelity may lead to a higher risk of unprotected sex (Hall et al., 2008), individuals who are higher risk-takers may be placing themselves at a higher risk for contracting STIs. Thus, the present study can lead to future research on prevention of STIs. If there is a significant relationship between risk-taking and infidelity, future research can examine if reduction of risk-taking behaviors reduces occurrences of infidelity. The rate of STIs can be expected to decrease if there is a reduction in risk-taking behaviors and infidelity.

Overview of Methodology

The basic design of this study is a correlational design. One hundred and eighty participants were recruited from Texas State University-San Marcos undergraduate population. Participants completed the Balloon Analogue Risk Task (BART; Lejuez,

Read, Kahler, Richards, & Ramsey et al., 2002), the Impulsive Sensation Seeking Subscale (ImpSS; Zuckerman, Kuhlman, Joireman, Teta, & Kraft, 1993), the Rutgers Alcohol Problem Index (RAPI; as cited in White & Labouvie, 1989), the Drug Abuse Screening Test (DAST-10; Skinner, 1982), and an investigator-generated questionnaire that included questions on infidelity (see Appendix D). Participants ranged from 17 to 53 years of age. All participants were required to have been in at least one committed relationship. Participants were compensated with extra credit, and performance on the BART task was incentivized with a \$25 gift card.

Research Questions and Hypotheses

This study poses the question of the ability to determine a relationship between risk-taking behaviors, impulsivity, and substance use (alcohol and illicit drugs) with infidelity.

Hypothesis 1 (H1): It is predicted that there will be a significant relationship between risk-taking behaviors, measured by the BART, and infidelity measured by investigator created questionnaire that includes questions on infidelity.

Hypothesis 2 (H2): It is predicted that there will be a significant relationship between impulsive sensation seeking, measured by the ImpSS, and infidelity.

Hypothesis (H3): It is predicted that there will be a significant relationship between problematic alcohol use, measured by the RAPI, and infidelity.

Hypothesis (H4): It is predicted that there will be a significant relationship between problematic illicit substance use measured by the DAST-10 and infidelity.

Hypothesis (H5): It is predicted that there will be no significant relationship between the types of infidelity committed (physical and emotional) and gender differences.

Assumptions

Previous research findings have shown that alcohol consumption can lead to casual sex and infidelity. This leads to the assumption that alcohol consumption alone is considered a form of a risk taking behavior committed by individuals. Previous research has also shown that individuals who are open to casual sex are more likely to commit infidelity once in a committed relationship. Therefore, it may also be assumed that individuals who engage in casual sex are more likely to engage in infidelity. If being under the influence of alcohol and casual sex are considered risky behaviors, then this leads to the final assumption that general risk-taking behaviors are an underlying source for infidelity.

Key Terms

The primary investigator defines infidelity as breaking a relational commitment to a partner whether married or dating. Going on a date, emotional feelings, kissing, oral sex, and sexual intercourse while committed to a partner are all components of breaking a relational commitment. Emotional infidelity can be defined as “being involved with someone other than a partner that may be in the form of feeling, thought or in the form of physical exploration” (Singh, Singh & Goyal, 2008, p.1). Risk-taking is defined as “the participation in potentially health-compromising activities with little understanding of, or in spite of an understanding of, the potential negative consequences” (Wyatt & Peterson, 2005, p. 229). Impulsivity is defined as “a predisposition toward rapid, unplanned reactions to internal or external stimuli without regard to the negative consequences of

these reactions to the impulsive individual or to other” (Moeller, Barratt, Dougherty, Schmitz, & Swann, 2001, p. 1784). Sensation seeking is defined as “a trait defined by the seeking of varied, novel, complex, and intense sensations and experiences, and the willingness to take physical, social, legal, and financial risks for the sake of such experience” (Zuckerman, 1994, p. 27).

CHAPTER II

LITERATURE REVIEW

Young Adults and Sexual Risk-taking

Young adults often act on impulse rather than taking into consideration the long-term consequences of their actions (Green, Fry, & Myerson, 1994). Seeking short-term, immediate gratification makes young adults a difficult population in which to promote safe sexual behavior (Plant & Plant, 1992). Informing young adults about safe sex practices is important, because this is often a time when sexual experimentation occurs. The majority of young adults experience their first sexual encounter before they graduate high school (Kaiser Family Foundation, 2003). Nationally representative surveys have reported that 70-85% of sexually active adolescents and young adults, 12-21 years of age, have had intercourse with a casual partner in the past year (Grello, Welsh, Harper, & Dickenson, 2003; as cited in Grello et al., 2006). Samples from college students suggest that 70% of college students report having had intercourse with a casual partner (Feldman, Turner, & Araujo, 1999). Relationships with a casual partner tend to be based on sexual desire and are often impulsive (Regan & Dreyer, 1999) and/or often involve drugs or alcohol (Desiderato & Crawford, 1995). Sixty-five percent of undergraduate students reported using drugs or alcohol either before or during their last casual sexual encounter (Grello et al., 2006).

Sexual risk-taking and Substance Use

High levels of impulsivity have been seen in individuals with higher problematic alcohol use (Dom, D'haene, Hulstijn & Sabbe, 2006). High levels of impulsivity have also been seen in individuals who report early experimentation with illicit substances, as well as those who are at high risk for developing a substance use disorder (Holmes, Bearden, Barguil, Fonseca, & Monkul et al., 2009). Individuals with impulsive sensation seeking tendencies and with higher problematic alcohol use or problematic illicit substance use may be more likely to engage in impulsive sexual risk-taking behaviors. Hall et al. (2008) found that alcoholic males were more likely to commit infidelity, and participants reported that they were not consistently using condoms.

Another problem with combining substance abuse and impulsive sexual risk-taking behaviors is young adults may disregard the actual risks involved. A sample of female drug users, who reported high rates of drug use and sexual risk-taking behaviors, also believed they had less than a 25% chance of contracting HIV (Singer, Dai, Weeks, & Malave, 1998). There have been different findings for females' perceived risks to contracting HIV. Studies have reported females who believe they are less likely to contract HIV from high-risk sexual behavior than from injection drug use (IDU), while IDU women, also engaging in high-risk sexual behavior, reported a greater perceived risk to contracting HIV from high-risk sexual behavior (Mitchell & Latimer, 2009). Mitchell and Latimer (2009) found that 53.5% of their participants who were IDUs either knew someone with HIV or had HIV themselves. The majority of participants (70.5%) had engaged in casual sex, and 79.5% of these individual did not consistently use condoms.

Males reported more instances of casual sex than females, which can be problematic when they did not perceive themselves to be at higher risk for contracting HIV even though they reported a lack of condom use.

Decision-making

When making the decision to have casual, unprotected sex, individuals must weigh the anticipated reward against the risk involved. The decision involves weighing the pros and cons and may occur primarily in the early stages of risk-taking behaviors (Sweeny, 2008). The satisfaction from continued risk-taking eventually becomes a habit, and the deliberation between opportunity, approach, and consummation no longer occurs (Zuckerman & Kuhlman, 2000). The habit of risk-taking may come to outweigh societal norms. An intervention should occur during the early stages of risk-taking behaviors to prevent risk-taking from becoming a habitual act. While 90% of Americans say it is “always” or “almost always” wrong to be unfaithful (Smith, 1994), couples do not always keep their commitment of faithfulness to each other. Men not only report more opportunities for extramarital sex than women do, but they also report a greater desire for opportunities (Johnson, 1970). Previous studies have estimated that 20%-40% of men and 20%-25% of women will engage in an extramarital affair at some time in their life (Whisman & Snyder, 2007).

Gender Differences

There have been conflicting results when comparing males to females with infidelity behaviors and beliefs. Previous literature has found that women tend to be hurt

more by their partner's affair when there is an emotional connection (Atkins, Yi, Baucom, & Christensen, 2005). Men are usually unfaithful for sexual reasons (Whisman, Gordon, & Chatav, 2007), and may view the physical act of sex as more threatening to lose their partner (Harris & Christenfeld, 1996). This threat is perceived because some men may believe that women only have sex when they are in love; therefore, sexual infidelity may lead a husband to believe that his unfaithful wife is in love with someone else (Harris & Christenfeld, 1996). Women may view their partner's emotional connection to another woman as more threatening to losing their partner because they may feel that men often have sex without being in love. Thus, there is no reason for a woman to believe that her husband is in love with someone else (Harris & Christenfeld, 1996).

Harris and Christenfeld (1996) believe that men and women should equally be threatened by both emotional and sexual infidelity. Men should reason that women may have sex without being in love, and women who believe that men who are in love are certainly having sex will be concerned with both sexual and emotional infidelity (Harris & Christenfeld, 1996). Grello et al. (2006) did not find a gender difference related to the occurrence of infidelity, but men and women have reported different emotions and reasons for why they commit infidelity. Women tend to have lower self-esteem (Paul, McManus, & Hayes, 2000) and symptoms of depression while engaging in casual sex, while the opposite was reported for men (Grello, 2006). Men who engaged in more casual sex behaviors reported the least amount of depressive symptoms (Grello et al., 2006). Men involved in affairs reported alcohol and substance abuse, along with dissatisfaction, which women do not report. Men reported cheating because of

dissatisfaction, but women did not report this, leading to the idea that there is a difference in motivation for men and women to cheat (Whisman et al., 2007).

Past research has looked at the difference in decision-making between men and women. The Iowa Gambling Task (IGT; as cited in Hubley, 2004) is a measure used by several researchers to determine risk taking in individuals. When participating in the IGT, men and women both eventually caught on to choosing more advantageous cards; however, there was a significant difference in men choosing advantageous cards compared to women (Overman, Graham, Redmond, Eubank, & Boettcher, et al., 2006). When women were attracted to the high-reward value, there was an increased activation in the left-medial orbital prefrontal cortex. When men were attracted to high-reward value, there was increased activation shown in the right lateral orbital prefrontal cortex (Overman et al., 2006). This seemed to indicate that women were influenced more by their emotions than men during the IGT (Overman et al., 2006).

Impulsivity and Risk-taking

While impulsivity and sensation seeking overlap with risk-taking, they do not fully capture the multidimensional nature of risk-taking (Lejuez et al., 2002), although it is thought that there is a high correlation found between impulsivity and an inclination to risk-taking behavior (Holmes, Bearden, Barguil, Fonseca, & Monkul et al., 2009).

Impulsivity is also seen in those with psychiatric disorders that are characterized by risk-taking behaviors, such as bipolar disorder and substance use disorders (Moeller et al., 2001). When looking to differentiate impulsivity and risk-taking behavior, impulsivity can be defined as, “a predisposition toward rapid, unplanned reactions to internal or

external stimuli without regard to the negative consequences of these reactions to the impulsive individual or to other” (Moeller et al., 2001, p. 1784). Risk-taking behaviors are those that hold a possibly of danger or harm but also provide an opportunity to gain a reward (Lejuez et al., 2002).

A commonly used behavioral risk-taking measure is the Balloon Analogue Risk Task (BART; Lejuez et al., 2002). The BART has been found to be related to self-report of real-world risk behaviors found in young adults (Holmes et al., 2009; Lejuez et al., 2002). These risk behaviors include alcohol and other substance use, cigarette smoking, sexual risk taking, such as the number of sex partners in the previous year and lack of condom use, sensation seeking and impulsivity (Holmes et al. 2009; Lejuez et al., 2002). These data suggest that the BART shows a promising ability to assess risk-taking behaviors, and the BART can be combined with other risk-taking related measures to improve the assessment of a range of real-world risk behaviors (Lejuez et al., 2002). Risk-taking is measured by subjects clicking the computer mouse to pump up a balloon. The subject earns points for each pump, and the points are lost once the balloon pops (Holmes et al., 2009).

Holmes et al. (2009) used the BART to compare risk taking behaviors among Bipolar Disorder patients with a prior history of alcohol use disorder (BD-A), Bipolar Disorder patients with no prior history of alcohol use disorder (BD-N), and healthy control (HC) subjects. The BD-A subjects took significantly more risks on the BART than the BD-N and HC subjects who had roughly equivalent scores on the BART. Researchers noted that a significant finding was the BD-A group did not show learning behavior from the BART (Holmes et al., 2009); they did not alter their behavior as a

result from a negative consequence during a previous trial, as the BD-N and HC groups did (Holmes et al., 2009).

Purpose of the Present Study

Because many adolescents engage in risky behaviors and infidelity is a notable public health concern, the purpose of the present study is to examine if there is a significant correlation between risky decision-making and the past occurrence of infidelity. Past research should be informing researchers and the population about the significance of issues on sexual risk-taking and infidelity. The proposed study will contribute to this field and help with future prevention of sexual risk-taking behaviors and STIs.

CHAPTER III

METHODS

The purpose of this study is to determine if there is a relationship between risk-taking behaviors, impulsive sensation seeking, problematic alcohol use, and/or illicit substance use and the past occurrence of infidelity. This chapter will discuss the research methodology that will be used to conduct this study. This includes the purpose of this study, participants selected, measures used, procedures, and data analysis.

Research Design

This study is a non-experimental between-subjects design. The between-subjects factor is gender (male or female) for H5, and the between-subjects factor for all other hypotheses is past infidelity (ever committed or never committed). A non-experimental design was chosen because all factors included in this study are not manipulated. Every participant was given the Impulsivity Sensation Seeking Subscale (ImpSS), the Rutgers Alcohol Problem Index (RAPI), the Drug Abuse Screening Test (DAST-10), the self-report infidelity survey, and the Balloon Analogue Risk Task (BART).

Research Questions and Hypotheses

This study poses the question of the ability to determine a relationship between risk-taking behaviors, impulsivity, and substance use (alcohol and illicit drugs) with past occurrences of infidelity.

H1: It is predicted that there will be a significant relationship between risk-taking behaviors, measured by the BART, and infidelity, measured by investigator created questionnaire that included questions on infidelity.

H2: It is predicted that there will be a significant relationship between impulsive sensation seeking, measured by the ImpSS, and infidelity.

H3: It is predicted that there will be a significant relationship between problematic alcohol use, measured by the RAPI, and infidelity.

H4: It is predicted that there will be a significant relationship between problematic illicit substance use, measured by the DAST-10, and infidelity

H5: It is predicted that there will be no significant relationship between the type of infidelity committed and sex.

Participants, Population, and Sample

One hundred and eighty undergraduate students were recruited from the psychology department at Texas State University-San Marcos. Within the total sample, 95 (53.4%) were Caucasian, 52 (28.9%) were Hispanic, 11 (6.1%) were African-American, 5 (2.8%) were Asian-American, 2 (1.1%) were Native American, and 13 (7.3%) reported they were some other ethnicity. Two participants did not report their ethnicity. The total sample consisted of 128 (71.4%) females and 44 (25.6%) males, and

a mean age (\pm SD) of 21.72 ± 4.76 . Students received extra credit for participating in the study. Participation was considered voluntary; students who did not want to participate in the study were offered another opportunity to earn extra credit.

Research Variables

Based on the research questions and hypotheses for this study, there are two between-subjects factor and four within-subjects factors. The between-subjects factor is gender (male or female) for H5 and past infidelity (ever committed or never committed) for the other hypotheses. The outcome variables are risk-taking behaviors (measured by the BART), impulsivity (measured by the ImpSS), alcohol use (measured by the RAPI) and illicit drug use (measured by the DAST-10).

Research Instruments

Balloon Analogue Risk Task (BART): The BART is a computerized task that measures risk-taking. There are 30 trials where the participant pumps up a balloon, earning two points for each pump. If the balloon pops, the participant loses all the collected money. The participant will be told he/she can pump the balloon as much as wanted, but the balloon will pop at some point that is predetermined and unknown to the participant. The participant can press 'stop' on the computer screen, and the accumulated money will be saved. Once saved, the accumulated money cannot be lost in future trials. Participants do not receive practice trials to evaluate risk (by popping the balloon) before the task starts. Scores are collected by the total number of times a balloon was popped (explosions) and the total number of times a balloon was pumped when the balloon did

not pop. A second outcome measure is the number of pumps on trials where the balloon does not burst (adjusted pumps). The BART has been associated with self-report, real-world tasks, including substance use, cigarette smoking, and the number of sex partners in the previous year.

Impulsivity Sensation Seeking Subscale (ImpSS): The ImpSS is a 19-item, self-administered measure that is used to measure impulsive behavior. Participants must mark true or false, whichever corresponds to their personal experiences. The ImpSS has 2-reverse scored items, with scores calculated by summing the number of “true” items endorsed (with the exception of the reverse scored items). See Appendix A for a complete copy of the measure.

Rutgers Alcohol Problem Index (RAPI): The RAPI is a 23-item, self-administered measure that is used to assess problem drinking in adolescents, young adults, and college students. Participants must circle the number that corresponds with number of times they have experienced the problem stated in each question. Scoring takes place by adding the coded numbers for all items (0-3) and summing the item scores. See Appendix B for a complete copy of the measure.

Drug Abuse Screening Test (DAST-10): The DAST-10 is a 10-item, self-administered measure that is used to assess problematic drug use. Participants must circle yes or no, depending on whether or not they have experienced the problem stated in each question. The DAST-10 is scored by adding the number of “Yes” responses, with scores of 3 or greater signifying problematic drug use. See Appendix C for a complete copy of the measure.

Self-report Infidelity Survey: The primary researcher composed the self-report infidelity survey (see Appendix D). The survey consists of 22 items that measure whether the participant has committed infidelity at any time. The survey also includes items asking if the alcohol or any illicit substance was consumed at the time infidelity was committed. Some items required a “true” or “false” response while other items were short answer.

Procedures

Participants were recruited through class announcements in the courses through the Department of Psychology (Abnormal Psychology, Introduction to Statistics, Experimental and Research Design, Brain and Behavior, and Human Sexuality). Participants came to a computer lab at Texas State University-San Marcos in small groups (2-10), where they were given information on the consent form and signed the consent form if they wished to participate. After signing the consent form, participants were given a form containing directions how to sign in to Survey Monkey a secure the website where the study was posted. Participants first completed the ImpSS from Zuckerman’s Sensation Seeking Scale (SSS-V) to measure impulsivity. Second, participants completed the Rutgers Alcohol Problem Index (RAPI) and Drug Abuse Screening Test-10 (DAST-10) to measure their current levels of problematic drug use. Finally, participants completed a self-report survey on infidelity behaviors. Once participants completed these four computer surveys, the researcher set up BART and gave directions on how to complete the task. After the BART was completed, participants signed an optional form to record their BART score for a chance to win the \$25 give card drawing. The participant who earned the most amount of money on the

BART was rewarded with the gift card. The gift card was used as an incentive to reduce the chance of task-aversion. After all data collection was complete, researchers informed the winner that s/he won the gift card.

Statistical Analysis

A one-way ANOVA was conducted to test if there is a significant relationship between risk-taking behaviors, impulsive sensation seeking, problematic alcohol use, or problematic illicit substance use and past occurrence of infidelity. A Scheffé Post-Hoc was conducted to determine if there was a significant effect for risk-taking behaviors, impulsivity, problematic alcohol use, and problematic illicit substance use on the type of infidelity committed (physical act vs. emotional; between-subject factor). A Pearson's Chi-Square was conducted to determine if there was a significant relationship between the type of infidelity committed and gender.

Setting and Environment

Participants completed this study in a computer lab in the Department of Psychology at Texas State University-San Marcos. There were eleven computers in the computer lab, so the primary researcher had 11 participants at a time sign up for each session. Because some participants did not show up to their session, there were between 1 and 11 participants at each session. When there were a greater number of participants in the lab (e.g., 10), validity could have been decreased due to the social desirability bias. Cheating on a partner and substance use may not be considered acceptable behaviors, so participants might have lied by responding in a manner that is favorable to the participant

sitting next to him or her. Although the computer lab was reserved for the study, students who were not participating in the study entered the lab. Students entering the lab while the study was ongoing may be a confounding variable to this study.

Bias and Error

A potential source of bias that may have occurred in this study is the social desirability bias, here aimed at preventing responses from the experimenter or one's self. Some participants may not have been willing to admit to committed infidelity, excessive alcohol use, or illicit substance use. Researchers must rely on participants to tell the truth, which can be difficult when dealing with a sensitive subject area. Participants were assured that their responses would not be tied back to them. Participants did not report any identifying information on their survey, which increased privacy and confidentiality and prevented individual responses from being tied back to the participant. These procedures are believed to increase the likelihood of honest responding. Another potential source of bias is the experimenter bias. Directions, for each task, were posted clearly on Survey Monkey to help reduce experimenter bias. A potential error is that the primary researcher composed the self-report infidelity survey, so this survey has not been tested for validity and could possibly result in misleading results.

Validity

Data from the RAPI have shown to replicate data from other studies of problematic drinking over the life course (White & Labouvie, 2000). White and Labouvie (1989) gave participants a 53-item measure of alcohol use, and found that the

RAPI is an appropriate empirical measure of adolescent and young adult problematic alcohol consumption. The 23-item RAPI did not lose much information when compared to the 53-item measure, and the RAPI covered all DSM-III-R criteria for diagnosis of Alcohol Dependence. Finally, there was a comparable correlation with the RAPI and alcohol use intensity when compared to other measures of problematic alcohol use (Baer, Kivlahan, Blume, McKnight, & Marlatt, 2001).

Criterion validity of the DAST was high in discriminating patients with the DSM-III Substance Abuse diagnostic criteria (Cocco & Carey, 1998; Stanley & el-Guebaly, 1990). Cocco and Carey (1998) found a high correlation on both the DAST-20 and DAST-10 with the Michigan Alcoholism Screening Test (MAST; Selzer, 1971) score and ASI-Alcohol composite score. There have also been strong correlations between the DAST-20 and other substance abuse measures such as the Marijuana Screening Inventory (Alexander and Leung, 2006).

The ImpSS has good internal validity, face validity and concurrent validity with the Eysenck Personality Questionnaire-Revised (Zuckerman et al., 1993; Schepis, Desai, Smith, Cavallo, and Liss et al., 2008). Schepis and colleagues (2008) found that concurrent alcohol and cigarette use in adolescent participants were associated with higher scores on the ImpSS.

The BART has good construct validity (Hopko, Lejuez, Daughters, Aclin, and Osborne et al., 2006) and convergent validity, as it is consistently correlated with self-report risk-taking measures (Lejuez et al., 2002). Behaviors included in the self-report risk-taking measures that had a significant correlation with the BART included alcohol use, cigarette use, the number of drug classes attended in the past year, and the number of

partners participants had sexual intercourse with without using a condom in the past year (Lejuez et al., 2002).

Reliability

The RAPI provides internal consistency as a measure of problematic drinking. Scores from the RAPI have been moderately stable over a 10-year span, measuring from late adolescence into adulthood (White & Labouvie, 2000). Test-retest reliability was obtained by administering the RAPI online and as a paper-base form with a one-week follow-up. There was no significant difference found between test administration techniques, although participants reported preferring an online measure (Miller, Neal, Roberts, Baer, Cressler, Metrik, & Marlatt, 2002).

The DAST showed high internal consistency on both the 20-item and 10-item versions, and these finding were also consistent with Stanley and el-Guabaly (1990) (Cocco & Carey, 1998; Skinner, 1982). There have not been any reports of test-retest reliability for the DAST (Skinner, 1982).

The BART had good test-retest reliability, and “rank-ordered individual differences” risk-taking behaviors found from the BART and are suggested to be stable and reproducible over time (White, Lejuez, & de Wit, 2008).

CHAPTER IV

RESULTS

Summary of Methodology

This study began in September 2010, with a convenience sample of one hundred and eighty participants who were recruited from the undergraduate population of Texas State University-San Marcos. The study was held in a computer lab in the Psychology building. Participants completed the Balloon Analogue Risk Task (BART; as cited in Lejuez et al., 2002), the Impulsive Sensation Seeking Subscale (ImpSS; as cited in Zuckerman et al., 1993), the Rutgers Alcohol Problem Index (RAPI; as cited in White & Labouvie, 1989), the Drug Abuse Screening Test (DAST-10; as cited in Skinner, 1982), and a investigator-created questionnaire including questions on infidelity (see Appendix C). Participants ranged from 17 to 53 years of age. All participants were required to have been in at least one committed relationship.

Participants

After removing data from participants who endorsed never having been in a committed relationship (7 reported never having been in a committed relationship), data from 173 undergraduate participants remained. Within the total sample, 93 (54.1%) were Caucasian, 50 (29.1%) were Hispanic, 10 (5.8%) were African-American, 5 (2.9%) were Asian-American, 1 (.6%) were Native American, and 13 (7.6%) reported other. One

participant (.6%) did not report their ethnicity. The total sample consisted of 128 (74.4%) females and 44 (25.6%) males. One participant (.6%) did not report sex. There was a mean age (\pm SD) of 21.75 ± 4.81 . Students received extra credit for participating in the study.

Results

ANOVA

A one-way ANOVA was conducted to determine if differences existed in risk-taking behaviors, impulsivity, problematic alcohol use, and illicit substance use in between those who committed infidelity in the past and those who did not. Supporting H3, there was a significant difference of problematic alcohol use scores between those who had and had not committed infidelity $F(2, 167) = 3.054, p = .050$. There was not a significant difference to support risk-taking behaviors for explosions $F(2, 159) = 1.571, p = .211$ or adjusted average pumps $F(2, 161) = 1.614, p = .202$ on the BART for those who had committed past infidelity. There was not a significant difference between impulsive sensation seeking by past infidelity status $F(2, 167) = .917, p = .402$. Finally, there was not a significant difference in illicit substance use by past infidelity status $F(1, 91) = .291, p = .591$ (Table 1).

Post Hoc Testing

A *post hoc* comparison using the Scheffe test was conducted to determine if there was a difference in the type of infidelity committed (physical vs. emotional). The mean number of explosions in those who committed physical act of infidelity ($M = 4.15, SD =$

2.41) was significantly lower than the mean number of explosions in those who committed both emotional and physical acts of infidelity ($M = 7.22$, $SD = 3.03$).

Chi-Square

A chi-square was conducted to determine the effect gender has on the type of infidelity committed. Supporting H5, there was not a significant relationship between gender and the type of infidelity committed, $\chi^2(3, N = 167) = 1.56, p = .67$.

Correlation Matrix

A Pearson's correlation was conducted to determine if there was a relationship among the variables of interest: risk-taking, impulsive sensation seeking, problematic alcohol use, and problematic illicit substance use and past infidelity. Correlations revealed that impulsive sensation seeking was significantly associated with problematic alcohol use, ($r = .361, p = .000$) and with problematic illicit substance use, ($r = .216, p = .036$). As expected, explosions on the BART were significantly associated with pumps adjusted on the BART ($r = .604, p = .000$), and problematic alcohol use was significantly associated with problematic illicit drug use ($r = .519, p = .000$). No other correlations were significant.

Table 1

ANOVA Results for Risk-taking Behaviors and Past Committed Infidelity

	<i>df</i>	<i>F</i>	η_p^2	<i>p</i>
DAST-10	1	.291	.003	.591
RAPI	2	3.054	.035	.050
ImpSS	2	.917	.011	.402
BART (Pumps)	2	1.614	.019	.202
BART (Explosions)	2	1.571	.020	.211

Table 2

Correlation Matrix of Risk-taking Behaviors and Past Committed Infidelity

	1	2	3	4	5	6
BART (Explosions)	1	.604**	.052	.098	.191	-.076
BART (Pumps)		1	.097	.112	.163	-.099
ImpSS			1	.361**	.216*	.093
RAPI				1	.519**	.054
DAST-10					1	.056
Infidelity						1

** . Correlation is significant at the 0.01 level (2-tailed).

* . Correlation is significant at the 0.05 level (2-tailed).

CHAPTER V

INTERPRETATION AND RECCOMENDATIONS

In this final chapter, conclusions, study limitations, and implications for future research will be addressed. This research was designed to determine if there is a significant relationship between risk-taking behaviors, impulsivity, problematic alcohol use, or illicit substance abuse and past acts of infidelity. Three conclusions that were derived from the present study include: 1) participants who scored higher in the problematic drinking inventory reported a greater likelihood of previous acts of infidelity; 2) there was a significant difference in risk-taking between participants who committed a physical act of infidelity and those who committed both a physical and an emotional act of infidelity; and 3) gender did not have a significant effect on the type of infidelity committed (physical or emotional).

Discussion of Results

The first conclusion is there was a significant difference on problematic alcohol use scores between those who did and did not commit infidelity in the past. People who scored higher on the problematic drinking measure reported a greater likelihood of having committed infidelity. This generally agrees with past literature that alcohol consumption is a predicting factor of infidelity (Hall et al., 2008; Atkins et al., 2005); however, we cannot conclude that alcohol is a predicting factor of infidelity because the

present study examined current alcohol use and past occurrences of infidelity. Alcoholic men who engaged in infidelity reported a higher frequency of unprotected sex (Hall et al., 2008). This is consistent with findings from Graves (1995) that heavy drinkers are more likely to have more sexual partners and report less condom use. Unsafe sex practices can put the unfaithful individual's partner at risk, as a large number of HIV positive women contracted HIV from their primary partner (O'Leary, 2000). Men and women who have problems with alcohol need to understand the relationship between problematic alcohol use and unsafe sex practices while committing infidelity. The present study found a significant relationship between problematic alcohol use and the likelihood of committing infidelity in the past.

Fals-Stewart, Birchler, Hoebbel, Kashdan, Golden, and Parks (2003) found that women who were aware of their husband's sexual risk-taking behaviors were more likely to use condoms during sexual intercourse with their husbands. Fals-Stewart et al. (2003) suggests educating couples on high-risk behaviors, and having couples complete a safety contract, which is used in behavioral couples therapy for substance abusers. The safety contract is an agreement between both partners that they will not engage in high-risk behaviors. Individuals need to first focus on limiting problematic alcohol use. If problematic alcohol use is limited, it is possible that sexual risk-taking behaviors will also be reduced.

The second conclusion is that there is a significant difference between participants who committed a physical act of infidelity and those who committed both a physical and an emotional act of infidelity on the BART risk-taking measure. Participants who scored higher on the BART explosions reported a significantly greater number of both physical

and emotional acts compared to physical acts alone. This may suggest that participants who committed emotional infidelity were more invested in their extra-relational affair, and they were more willing to take the risk of jeopardizing their current relationship by committing infidelity. For someone to be more invested in an extra-relational affair means that person is less committed to his or her partner; there is a psychological attachment and greater motivation to endure the extra-relational affair (Drigotas & Barta, 2001).

There are other explanations for why an individual may have committed both emotional and physical acts of infidelity. The descriptive approach states that those who are less committed might be more likely to be unfaithful because they are dissatisfied with their relationship. Finally, participants who reported a greater likelihood of both emotional and physical acts of infidelity might have done so because of the normative approach, stating that some individuals may be more likely to commit infidelity because of societal norms (Drigotas & Barta, 2001). An individual who knows someone who has committed infidelity may also be more likely to commit infidelity (Drigotas & Barta, 2001).

The third conclusion is that gender did not have a significant effect on the type of infidelity committed, and males and females reported an equal occurrence of infidelity. Although this supports previous literature that found no gender difference in occurrence of infidelity (Hill, 2002), it is important to note that there were more than twice as females than males in the present study. The small sample size of males makes it less likely to find a significant difference by gender if one exists.

The final conclusion is that participants who scored higher on impulsivity also scored higher on the problematic alcohol consumption and illicit drug use scales. This supports past research that impulsivity is seen in individuals with substance use disorders (Moeller, Barratt, Dougherty, Schmitz, & Swann, 2001). It may be unclear whether impulsivity increases the probability of substance use, or if substance use facilitates impulsive behavior (Rogers, Moeller, Swann, & Clark, 2010); that said, Holmes et al. (2009) found that alcohol use was a trigger to impulsive behavior.

We did not find a direct significant relationship between current impulsivity and past likelihood to commit infidelity, but there may be an indirect relationship between these two variables. Finding a significant relationship between impulsivity and alcohol use and between alcohol use and likelihood of committed infidelity may indicate that there is an indirect relationship between impulsive sensation seeking behaviors and the likelihood to commit infidelity. Researchers can argue that impulsive sensation seeking, problematic alcohol use, problematic illicit drug use, and infidelity are all forms of risk-taking behaviors. Substance use may lead to impulsivity and acts of infidelity, and impulsivity and acts of infidelity may lead to unsafe sex practices. These four variables may all be considered acts of infidelity.

Implications for Further Research

Future research should use the results of this study to design a prevention program for sexual risk-taking behaviors and STIs. Previous research that supports a relationship between alcohol use and infidelity can be used to educate others about safe sex practices for those engaging in sexual risk-taking behaviors. One way to determine if problematic

alcohol use is a causal factor in the act of infidelity is by conducting a study that focuses on the reduction of alcohol use. Decreasing problematic alcohol use may be the key in decreasing occurrences of infidelity since the current study found a significant relationship between these two variables. In addition, future research should include a sample that is a better representation of the population. A sample with an equal number of males and females and a wide range of ethnicities should be recruited. Future research should also include a sample with a wider age range. If there is still no correlation between risk-taking behaviors and infidelity, researchers should focus on the more general question of why infidelity occurs.

Past research presents the issue of dissatisfaction in the relationship as one cause to infidelity, so future research can be conducted on types of treatment to resolve dissatisfaction in the relationship. Determining what factors contribute to infidelity can be used as education tools to prevent sexual risk-taking behaviors such as lack of condom use. It is important to determine the causation for infidelity to try to prevent individuals from placing themselves and their partners at risk. It is essential that promotion for safe sex practices occurs among youth, and further research is needed to better understand their risk-taking behaviors because of the occurrence of HIV and other sexually transmitted infections (STIs). Research that is conducted to better understand risk-taking behaviors leading to unsafe sex practices can also be used as education tools to promote safe sex practices among adolescents and young adults. Finally, future research should include longitudinal studies to determine if risk-taking behaviors, impulsive sensation seeking, problematic alcohol use, and problematic illicit drug use are stable factors. This research could also investigate the potential causal roles of these variables on whether an

individual commits an act of infidelity.

Limitations

One limitation to this study is the data are self-report in nature. Because this study involves reporting sensitive information, participants could have misreported information either because of memory biases, like retrospective bias, or social biases, such as social desirability. A second limitation to this study is the environment in which participants completed data intake. The environment made it difficult to control for extraneous variables. One to eleven participants, at a time, would complete the study in a computer lab. Participants may have felt that others were reading information being reported, which could have led to misreporting. There could have also been a distraction from students, who were not participating in the study, entering the computer lab. A third limitation to this study is the unequal number of males and female. The primary researcher wanted to compare study outcomes among males and females; however, more than half of the sample was composed of females.

A fourth limitation to this study is risk-taking was measured through a computer gambling task. Participants might have reacted differently if they were at risk of losing their own money compared to losing simulated money in a computer game. Furthermore, there are other risk-taking measures that could have been used. Discounting behaviors, gambling tasks and financial simulations are all used to measure risk-taking, and we only used the BART to measure risk-taking. A fifth limitation to the present study is that participants are a convenience sample-undergraduate psychology students recruited from Texas State University-San Marcos; therefore, results are only representative of this

sample population.

The greatest limitation to this study is that we are using instruments that measure current behavior and personality, and we are relating this to past committed infidelity. This leads to the assumption that risk-taking, impulsive sensation seeking, and substance use are stable behaviors. Past research has shown that risk-taking, impulsive sensations seeking, and substance use are more prevalent in adolescence and young adulthood; therefore, these variables may not be very stable.

Summary and Conclusion

The purpose of this study was to determine if there is a significant correlation between risk-taking behaviors, impulsivity, alcohol use, or illicit drug use and past acts of infidelity. There was a significant relationship between problematic alcohol use and past acts of infidelity. There was also a significant correlation seen between impulsivity and problematic alcohol use and between impulsivity and problematic illicit drug use. Finally, the mean score for the BART explosions in those who committed a physical act of infidelity was significantly different than the score in those who committed both emotional and physical acts of infidelity.

Although there was not a significant correlation between risk-taking on the BART and occurrence of infidelity in the present study, we cannot make the conclusion that there is no relationship between risk-taking and infidelity. Some may view problematic alcohol use and problematic illicit substance use as a form of risk-taking; and although impulsive sensation seeking does not fully cover the multidimensional nature of risk-taking, the two variables overlap (Lejuez et al., 2002). It is believed that there is a high

correlation between impulsive sensation seeking and risk-taking behaviors (Holmes et al., 2009). This is the only known study to examine the relationship between risk-taking behaviors in general and infidelity. It can be argued that participants who scored higher on the BART but did not commit infidelity may be a little higher than the population's baseline for risk-taking but not as high as those who committed infidelity. While past research informs researchers and the population about the significance of issues on sexual risk-taking and infidelity, future research should work towards preventing sexual risk-taking in order to decrease STI rates.

APPENDIX A

Impulsive Sensation Seeking Subscale

The following section, you will find a series of statements that people might use to describe themselves. Read each statement and decide whether or not it describes you. If you agree with a statement or feel that it describes you, mark TRUE. If you disagree with a statement or feel that it does not describe you, mark FALSE.

I tend to begin a new job without much advance planning on how I do it.

True False

I usually think about what I am going to do before doing it.

True False

I often do things on impulse.

True False

I very seldom spend much time on the details of planning ahead.

True False

I like to have new and exciting experiences and sensations even if they are a little frightening.

True False

Before I begin a complicated job, I make careful plans.

True False

I would like to take off on a trip with no preplanned or definite route or timetable.

True False

I enjoy getting into new situations where you can't predict how things will turn out.

True False

I like doing things just for the thrill of it. I tend to change interests frequently.

True False

I sometimes like to do things that are a little frightening.

True False

I'll try anything once.

True False

I would like the kind of life where one is on the move and traveling a lot, with lots of change and excitement.

True False

I sometimes do "crazy" things just for fun.

True False

I like to explore a strange city or section of town by myself, even if it means getting lost.

True False

I prefer friends who are exciting and unpredictable.

True False

I often get so carried away by new and exciting things and ideas that I never think of possible complications.

True False

I am an impulsive person.

True False

I like "wild" uninhibited parties.

True False

APPENDIX B

RUTGERS ALCOHOL PROBLEM INDEX RAPI (23-item version)

Different things happen to people while they are drinking ALCOHOL or because of their ALCOHOL drinking. Several of these things are listed below. Indicate how many times each of these things happened to you WITHIN THE LAST YEAR.

Use the following code:

0 = None

1 = 1-2 times

2 = 3-5 times

3 = More than 5 times

HOW MANY TIMES HAS THIS HAPPENED TO YOU WHILE YOU WERE DRINKING OR BECAUSE OF YOUR DRINKING DURING THE LAST YEAR?

0 1 2 3 Not able to do your homework or study for a test

0 1 2 3 Got into fights with other people (friends, relatives, strangers)

0 1 2 3 Missed out on other things because you spent too much money on alcohol

0 1 2 3 Went to work or school high or drunk

0 1 2 3 Caused shame or embarrassment to someone

0 1 2 3 Neglected your responsibilities

0 1 2 3 Relatives avoided you

0 1 2 3 Felt that you needed more alcohol than you used to in order to get the same effect

0 1 2 3 Tried to control your drinking (tried to drink only at certain times of the day or in certain places, that is, tried to change your pattern of drinking)

0 1 2 3 Had withdrawal symptoms, that is, felt sick because you stopped or cut down on drinking

0 1 2 3 Noticed a change in your personality

0 1 2 3 Felt that you had a problem with alcohol

0 1 2 3 Missed a day (or part of a day) of school or work

0 1 2 3 Wanted to stop drinking but couldn't

0 1 2 3 Suddenly found yourself in a place that you could not remember getting to

0 1 2 3 Passed out or fainted suddenly

0 1 2 3 Had a fight, argument or bad feeling with a friend

0 1 2 3 Had a fight, argument or bad feeling with a family member

0 1 2 3 Kept drinking when you promised yourself not to

0 1 2 3 Felt you were going crazy

0 1 2 3 Had a bad time

0 1 2 3 Felt physically or psychologically dependent on alcohol

0 1 2 3 Was told by a friend, neighbor or relative to stop or cut down drinking

APPENDIX C

Drug Abuse Screening Test (DAST-10)

Skinner, H.A. (1982). The Drug Abuse Screening Test. *Addictive Behaviors*, 7, 363-371.

In the last 12 months,

1. Have you used drugs other than those required for medical reasons?... Yes/No
2. Do you abuse more than one drug at a time? Yes/No
3. Are you always able to stop using drugs when you want to?.....Yes/No
4. Have you had "blackouts" or "flashbacks" as a result of drug use?Yes/No
5. Do you ever feel bad or guilty about your drug use?Yes/No
6. Does your spouse (or parents) ever complain about your involvement with drugs? Yes/No
7. Have you neglected your family because of your use of drugs? Yes/No
8. Have you engaged in illegal activities in order to obtain drugs? Yes/No
9. Have you ever experienced withdrawal symptoms (felt sick) when you stopped taking drugs? Yes/No
10. Have you had medical problems as a result of your drug use (e.g. memory loss, hepatitis, convulsions, bleeding, etc.)?..... Yes/No

Scoring:

Interpretation (Each "Yes" response = 1)

Score Degree of Problems

Related to Drug Abuse

0 No Problems Reported

1-2 Low Level

3-5 Moderate Level

6-8 Substantial Level

Suggested Action

None At This Time

Monitor, Reassess At A Later Date

Further Investigation

Intensive Assessment

APPENDIX D

Infidelity Survey

1. I am currently:

- Not in a committed relationship but have previously been in one
- In a committed relationship (boyfriend/girlfriend)
- Married
- I have never been in a committed relationship

2. What physical/emotional acts do you consider to be unfaithful?

3. Have you ever been unfaithful towards someone you were in a committed relationship with?

- Yes
- No

4. Gone on a date with someone other than your significant other?

- True
- False

5. Been emotionally involved with someone other than your significant other?

- True
- False

6. Kissed someone other than your significant other?

- True
- False

7. Had oral sex with someone other than your significant other?

- True
 False

8. Had sexual intercourse with someone other than your significant other?

- True
 False

9. If intercourse occurred, was some form of contraception used?

- True
 False
 NA

10. If you answered YES to any of the above questions 3-8, do you believe you were justified in doing so? Answer YES or NO and explain.

11. If you answered YES to any of the above questions 33-38, was alcohol or some other illicit substance involved?

- Yes
 No
 NA

12. If you answered YES to question 41, how many times was a substance involved out of the number of unfaithful acts?

Ex: A substance was used 2 out of the 3 times I was unfaithful.

13. If you answered YES to question 41, what substances were used?

In the past 30 days, have you used

__yes __no Alcohol

__yes __no Marijuana

__yes __no Hashish

__yes __no Cocaine (as powder or freebase)

__yes __no Crack Cocaine

- yes no Amphetamines (e.g. speed)
- yes no Metamphetamines (e.g. Methedrine, crystal meth)
- yes no Ecstasy
- yes no Hallucinogens (e.g. LSD, peyote)
- yes no Amyl Nitrate (e.g. poppers)
- yes no Nitrous Oxide
- yes no Heroin.
- yes no Others _____

14. If you answered YES to question 41, do you think you would have committed the unfaithful act if you had not been under the influence of a substance?

- True
- False
- NA

15. To the best of your knowledge, has any partner (current or past) you have been committed to ever been unfaithful?

- Yes
- No

16. Have you ever forgiven your significant other for being unfaithful?

- Yes
- No
- NA

PLEASE ANSWER THE FOLLOWING IF YOU ARE MARRIED OR HAVE EVER BEEN MARRIED. IF YOU HAVE NEVER BEEN MARRIED, CLICK DONE AT THE BOTTOM OF THIS PAGE.

WHILE YOU WERE MARRIED (you do not have to be currently married), have you ever...

1. Held hands as a romantic gesture with someone other than your significant other?

- Yes
- No

2. Gone on a date with someone other than your significant other?

- Yes
- No

3. Been emotionally involved with someone other than your significant other?

- Yes
- No

4. Kissed someone other than your significant other?

- Yes
- No

5. Had oral sex with someone other than your significant other?

- Yes
- No

6. Had sexual intercourse with someone other than your significant other?

- Yes
- No

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