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An Experimental Test of the Role of Alcohol in Relationship Conflict

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The authors argue for a causal role of alcohol in exacerbating relationship conflict. Participants, after nominating a conflict in their romantic relationships, were assigned to a sober, placebo, or intoxicated condition and were then asked to evaluate the conflict they had previously nominated. Intoxicated participants reported more negative emotion surrounding the conflict and more negative perceptions of their partners' feelings. Consistent with Murray and Holmes' Dependency-Regulation Theory, intoxicated low self-esteem participants reported more insecurity in their partners' affections as a result of the conflict and blamed their partners more for the conflict incident. The implications for the relation between alcohol and violence in relationships are discussed.

Alcohol, according to popular culture, can turn an individual in a close relationship into either a doting, starry-eyed lover or an angry, quick-tempered tyrant. Given these seemingly contradictory conceptualizations of the influence of alcohol on relationship functioning, it is surprising that little experimental research has been conducted to clarify the effects of alcohol on close relationships (Leonard & Roberts, 1998). How would we expect intoxicated relationship partners to behave in a conflict? The present literature provides little evidence weighing directly on this question; experimental research has shown that intoxication leads to more aggression in general (Bushman & Cooper, 1990; Hull & Bond, 1986), and survey work has demonstrated that alcohol consumption is associated with an increase in the likelihood of violence within close relationships (Leonard & Senchak, 1996). Thus, the evidence we do have suggests that alcohol should

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serve to exacerbate conflict in relationships. The present study is one of the first designed to attempt to provide experimental evidence for a causal role of alcohol in heightening relationship conflict and to explore a possible mediating role for self-esteem. By applying Murray and Holmes' Dependency-Regulation Theory (Murray, Holmes, MacDonald, & Ellsworth, 1998) and Steele and Josephs' (1990) Alcohol Myopia Theory to the issue, we develop a working hypothesis of how alcohol can play a causal role in exacerbating relationship conflict.

DEPENDENCY-REGULATION THEORY

Murray and Holmes' Dependency-Regulation Model (Murray et al., 1998) provides insight into the mechanisms that permit close attachment in relationships. According to the model, romantic relationships are a ''high risk, high reward'' proposition. Close relationships require a deep level of intimacy and thus leave romantic partners extremely emotionally vulnerable to the prospect of rejection or loss. In order to manage the tension between their vulnerability and their dependence on their relationships, people need to feel certain that they are valued and cared for by their romantic partners. However, this sense of felt security is conditional, to a large extent, on a person's own sense of self-worth. People who feel positively about themselves can more easily accept that their partners would also view them positively. Free of fears of rejection, high self-esteem individuals can pursue the sort of closeness and intimacy that is integral to a satisfying romantic relationship. On the other hand, those who feel negatively about themselves are more likely to doubt that their partners can see them positively. Afraid of rejection from their partners, low self-esteem individuals adopt a defensive stance, reducing their dependence on the relationship and maintaining an emotional distance to reduce the sting such a rejection would bring. Unfortunately, such emotional distancing short-circuits the intimacy process and keeps low self-esteem individuals from experiencing the validation of a loving romantic relationship that they need.

This theory has been supported by recent research. While self-esteem has been shown to predict satisfaction in relationships (Kelly & Conley, 1987; Murray, Holmes, & Griffin, 1996), this link has been shown to be completely mediated by perceptions of partners' affections, or ''reflected appraisals'' (Murray, Holmes, & Griffin, in press). In a series of experimental studies, Murray et al. (1998) demonstrated an important way in which low self-esteem can disrupt intimacy in romantic relationships. In one study, half the participants received a threat to their self-esteem (failure on an academic test) completely unrelated to their current romantic relationship. Those in a control group received no such threat. Participants then evaluated their close relationship and relationship partners. Low self-esteem people who had experienced a self-esteem threat felt more insecure in their partners' affections as compared to controls. As the model suggests, those who experienced the threat distanced themselves from their relationships by devaluing the relationships' importance for their identity. High self-esteem people, on the other hand, did not have their confidence in their partners'

affections shaken and thus did not attempt to distance themselves from their relationships. Indeed, they used their perceptions of their partners' positive regard as a self-affirmational resource to diminish the relevance of their failure.

MacDonald and Holmes (1999) provided an even more direct test of the theory. High and low self-esteem participants were asked to describe a conflict in their relationships. Participants in the ''negative reflected appraisals'' condition completed a biased scale describing their partners' behavior during the conflict and were given bogus feedback that indicated their partners had been extremely upset with them during the conflict. Those in the control condition did not complete the scale and did not receive any feedback about their partners. Low self-esteem participants in the experimental group reacted to the feedback as if it were a personal rejection. They became defensive, blaming their partners more for the conflict, and devaluing their relationships, as compared to controls. In contrast, high self-esteem participants dealt with this threat to their reflected appraisals in a compensatory manner, indicating even more optimism about their relationships and more positive attitudes toward their partners. This study provides another example of low self-esteem individuals reacting to a threat in a manner that may give them temporary relief from their worries, but in the long term will likely lead to more stress within their relationships. On the other hand, high self-esteem people, even facing the prospect of an angry partner, were able to maintain composure and avoid a defensive and blaming reaction. In fact, by actually increasing their positivity toward their partners, high self-esteem people should be more motivated to settle the issue at hand.

We believe that low self-esteem individuals often interpret relationship conflict as a threat to felt security, or reflected appraisals. This may lead to more negativity in relationship conflict for at least two reasons. First, low self-esteem individuals are more likely to react to conflict by blaming their partners for the incident (MacDonald & Holmes, 1999). If these individuals believe that their partners are at fault for a conflict incident, they may feel more justified in expressing negativity. Further, low self-esteem individuals distance themselves emotionally from their relationships in the face of a threat to reflected appraisals. By devaluing the importance of their partners, these individuals may perceive fewer costs to expressing negativity. While we believe that overreaction to relationship conflict is often a response to a perceived threat to reflected appraisals, we further believe that this reaction is made even more likely by the presence of alcohol.

ALCOHOL MYOPIA THEORY

Steele and Josephs' Alcohol Myopia Theory (1990) posits that alcohol reduces cognitive functioning and thus leaves one able to process only a limited amount of information at one time. Thus, intoxicated individuals' decision making will be most influenced by whatever environmental cues are most salient to them, and these individuals will ignore more subtle, but potentially important information. For example, G. MacDonald, T. MacDonald, Zanna, and Fong (1997) found that intoxicated individuals were more likely to endorse unprotected sex than sober

individuals, but only if they were sexually aroused. It was theorized that these intoxicated individuals attended to the most salient cue in their environment (their own sexual arousal), ignoring more subtle cues such as the danger of sexually transmitted diseases or of an unwanted pregnancy. Interestingly, participants who were intoxicated but not sexually aroused indicated that they were somewhat *less* likely to engage in unprotected sex. This is an important aspect of Alcohol Myopia Theory—it posits that by making inhibiting cues (such as negative arousal or the threat of STD's) salient to intoxicated individuals, they can be guided to make better decisions.

Consistent with Alcohol Myopia Theory, we believe that alcohol intoxication can lead to increased negativity in relationship conflict by focusing individuals more exclusively on their negative feelings. That is, because negative emotion is a highly salient experience during a relationship conflict, intoxicated individuals should be more likely to attend to negative emotional cues and thus report more negative feelings about the conflict than sober individuals. Further, because a partner's expressions of negativity should also be relatively salient in relationship conflict, intoxicated individuals should also be more likely to attend to their partners' negative cues and thus report perceiving their partners to be more upset about the conflict than sober individuals. However, according to Dependency Regulation Theory, perceiving your partner to be upset with you represents a threat to reflected appraisals. Intoxicated, low self-esteem individuals, whose confidence in their partners' affections is easily shaken, should therefore report less security in their partners' affections in response to this threat, and as participants in MacDonald and Holmes' (1999) relationship conflict study, distance themselves from their relationships by becoming more blaming of their partners for the conflict incident. High self-esteem people, who are more confident in their partners' feelings for them, should remain secure in their partners' affections when intoxicated and thus not defensively blame their partners for the conflict.

The present study is designed to test these hypotheses. The study itself had a simple design; participants were assigned to an alcohol, placebo, or sober condition and were asked to evaluate a real conflict in their relationships.

METHOD

Participants

Male students enrolled in introductory psychology classes at the University of Waterloo who indicated in a mass testing session that they were involved in an exclusive dating or marriage relationship were selected for recruitment. They were contacted by telephone, at which point they were asked if they were presently involved in a heterosexual relationship of at least 6 months duration and if they consumed alcohol. Those who met both criteria were invited to participate. Those who agreed to participate were given one course credit, as well as $5 for those assigned to the sober condition or $15 for those assigned to the placebo or intoxicated conditions. Fifty-six men agreed to participate. Four participants in the placebo condition were removed due to suspicion that their drinks did not

actually contain alcohol. Participants averaged 20.1 years of age and had been involved in their relationships for an average of 21.7 months. Because of the potentially negative health consequences of consuming alcohol during pregnancy, female participants were not included in this experiment.

Procedure

Participants were run in groups of up to four people. The study began in a common room, where the procedure was explained and informed consent was obtained. Those in the placebo and alcohol conditions were weighed at this time so that an appropriate amount of beverage could be prepared. Each participant was then taken to an individual room to complete a series of premeasures assessing general relationship and self-views. The final page of this package asked participants to nominate a serious conflict that had occurred in their relationships, one for which both they and their partners were somewhat at fault. Further, to minimize the amount of thought participants would give to the conflict at that time, participants were instructed to describe the conflict briefly, in objective terms, without writing about their own reactions to the incident.

Those in the *intoxication* condition ($n = 18$) returned to the common room after completing the premeasures and were given a dose of alcohol (vodka, 40% alc/vol), which was measured so as to bring their blood alcohol level (BAL) to approximately 0.08% (the legal limit in Ontario). Lemon-lime soda was used to dilute the alcohol, with 2 parts soda per 1 part alcohol. Each participant consumed three drinks, with 20-min intervals between each. Twenty minutes after the final drink, participants were taken back to the room in which they had completed the premeasures. They were instructed to reread their conflict nominations, then complete a new packet of questionnaires. This package, containing the dependent measures, assessed participants' evaluations of the conflict incident, and the relationship as a whole. After completing these questionnaires, participants once again returned to the common room and their BAL was measured using an Alco-Sensor IV breathalyzer (manufactured by Intoximeters, Inc.). The BAL for participants in the intoxication condition was 0.076% ($SD = 0.010$). These participants estimated their BAL to be 0.108% ($SD = 0.043$).

The procedure for participants in the *placebo* condition ($n = 15$) was identical to that in the intoxication condition, with the following exceptions. Rather than alcohol, flattened tonic water was mixed with the soda for placebo participants. Further, alcohol was sprayed in the common room so that the smell of alcohol would be present. Finally, drinking glasses were rimmed with alcohol, and a very small amount of alcohol was floated on top of the drinks so that participants would smell and taste alcohol when taking their first sip of each drink. On average, placebo participants estimated their BAL to be 0.046% ($SD = 0.029$).[1] Participants in the *sober* condition ($n = 19$) completed the series of dependent measures immediately upon completing the conflict nomination.

[1] Although participants in the placebo condition were not breathalyzed, previous research using the same procedure (MacDonald et al., 1996, 1995) found placebo participants' actual BAL was never higher than .001%.

Independent Measures

The following two measures were assessed before the alcohol manipulation.

Self-esteem. Participants completed the Rosenberg (1979) Self-Esteem Scale (Cronbach's $\alpha = .91$). The scale consists of 10 questions (e.g., ''I take a positive attitude toward myself''), and answers were given on a 9-point scale (1 = *very strongly disagree* to 9 = *very strongly agree*). Participants were classified as either low self-esteem ($M = 6.51$) or high self-esteem ($M = 8.43$) based on a median split.

Love for partner. The love scale (Cronbach's $\alpha = .86$) consisted of three items (e.g., ''I am very much in love with my partner'') designed to measure participants' love for their partners. Responses were provided along a 9-point scale (1 = *not at all true* to 9 = *extremely true*). The love measure was used as a covariate in our analyses. We believed that it would be valuable to control for individual differences in relationship quality. Specifically, given our emphasis on the centrality of emotion in relationship conflict we believed it to be important to hold initial feelings of love for partner constant. Love was not significantly related to self-esteem condition, alcohol condition, or their interaction, all F's < 1.7, *ns.*

Dependent Measures

The following six measures were assessed following the alcohol manipulation.

Self-emotion. Using a single-item measure, participants were asked how thinking about the reasons that the conflict occurred made them feel. Participants responded to the item, ''When I think about the reasons behind the conflict I feel . . .'' on a 9-point scale (1 = *more positively* to 9 = *more negatively*).

Partner's emotion. Participants rated their perceptions of their partners' emotional reactions to the conflict on a four-item scale (Cronbach's $\alpha = .67$). Participants evaluated such dimensions of their partners' emotions as ''angry'' and ''forgiving'' (reverse scored) on a 9-point scale (1 = *not at all* to 9 = *very*).

Insecurity in partner's affections. The general insecurity scale (Cronbach's $\alpha = .63$) consisted of eight items (e.g., "This conflict made me wonder how much my partner wanted to be with me," "My trust in my partner was damaged by this conflict'') designed to measure participants' level of insecurity in their partners' affections. Responses were provided along a 9-point scale (1 = *not at all true* to 9 = *very true*).

Blame. The blame measure (Cronbach's $\alpha = .57$) consisted of six items (e.g., ''My partner is responsible for the conflict,'' ''This conflict had a negative effect on my relationship'') designed to measure participants' level of anger surrounding the conflict. Responses were provided along a 9-point scale (1 = *not at all true* to 9 = *very true*).

Conflict seriousness. Participants evaluated the seriousness of the conflict incident using a single item, ''How serious a conflict was this?''. Responses were provided along a 9-point scale (1 = *not very serious* to 9 = *very serious*). This measure was used to classify incidents as either high seriousness ($M = 7.29$) or low seriousness ($M = 3.36$) based on a median split. Although the seriousness

TABLE 1
Means for All Measures When Not Collapsing Sober and Placebo Conditions

	Condition					
	High self-esteem			Low self-esteem		
Measure	Sober	Placebo	Alcohol	Sober	Placebo	Alcohol
Self-emotion	4.86	4.64	5.71	4.91	5.78	6.54
Partner emotion	4.66	3.98	4.92	3.72	4.23	5.60
Insecurity	3.77	3.55	3.35	3.75	2.79	4.74
Blame	4.11	4.42	3.94	4.19	3.72	4.99

Note. Higher scores mean more negative emotion, insecurity, or blame.

measure was administered after the alcohol manipulation took place, it was not significantly related to alcohol condition, self-esteem condition, or their interaction, all F's < 1, *ns.*

RESULTS

Initial analyses showed no significant differences between the sober and placebo conditions on any measure, arguing against an expectancy effect (see Table 1). Thus, for efficiency of analysis and communication, the sober and placebo groups were collapsed into one ''no alcohol'' group ($n = 34$), and analyses were conducted using a 2 (alcohol condition: alcohol vs no alcohol) $\times$ 2 (self-esteem: low vs high self-esteem) analysis of covariance (ANCOVA) with the love variable as the covariate.[2]

The ANCOVA revealed a significant main effect of alcohol condition on the measure of participants' own feelings about the conflict, $F(1, 47) = 4.66$, $p < .05$. Participants who had consumed alcohol ($M = 6.13$) reported feeling more negatively about the conflict than those who had not consumed alcohol ($M = 4.93$). The covariate was not significant for the self-emotion measure, $F < 1$, *ns.* A significant main effect of alcohol condition was also found for participants' evaluations of their partners' emotions surrounding the conflict, $F(1, 47) = 7.41$, $p < .05$. Those who had consumed alcohol ($M = 5.26$) reported that they perceived their partners to be more upset about the conflict than those in the no alcohol group ($M = 4.06$). The covariate was significant for the partner emotion measure, $F(1, 47) = 5.33$, $p < .05$. Participants who reported more love for their partners believed their partners to be less upset about the conflict.

Further analyses revealed a significant interaction of alcohol condition and self-esteem on the measure of general insecurity in partner's affections, $F(1, 47) = 4.74$, $p < .05$. As seen in Fig. 1, low self-esteem individuals (LSEs) who had not consumed alcohol ($M = 3.53$) and high self-esteem individuals (HSEs)

[2] In an analogous analytic strategy, contrasts comparing the combination of the sober and placebo conditions to the intoxicated condition produced virtually identical results to those reported in the results section.

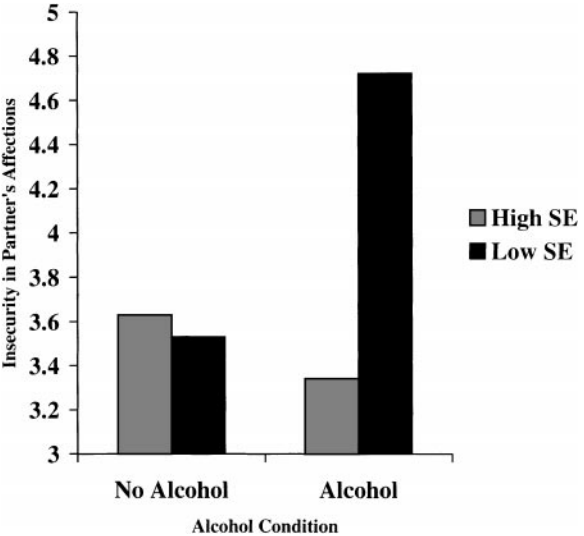

FIG. 1. Insecurity in partner's affections ratings as a function of alcohol condition and self-esteem.

who had not consumed alcohol ($M = 3.63$) reported similar levels of insecurity, $t(47) = 0.19$, *ns.* However, intoxicated LSEs ($M = 4.72$) reported significantly higher levels of insecurity than intoxicated HSEs ($M = 3.34$), $t(47) = 2.54$, $p < .05$. Phrased differently, HSEs in the alcohol group reported similar levels of insecurity as those HSEs who had not consumed alcohol, $t(47) = 0.58$, *ns.* However, LSEs, who had consumed alcohol reported significantly higher levels of insecurity than LSEs in the no alcohol group, $t(47) = 2.43$, $p < .05$. The covariate was not significant for the insecurity in partner's affections measure, $F(1, 47) = 2.21$, *ns.*

A marginally significant interaction was revealed for the measure of blame, $F(1, 47) = 3.17$, $p < .08$. Although simple effects tests yielded marginal results, a more focused test revealed that LSEs who had consumed alcohol ($M = 4.98$) reported significantly more blame than the other three cells combined ($M = 4.15$), $t(47) = 2.06$, $p < .05$. The covariate was significant for the two-way analysis of the blame measure, $F(1, 47) = 5.58$, $p < .05$. Participants who reported more love for their partners were less blaming of their partners for the conflict incident.

Based on findings from past research (MacDonald & Holmes, 1999) showing that low self-esteem individuals responded to an experimental manipulation of conflict seriousness by becoming more blaming of their partners in the face of a more serious conflict, we believed it would be valuable to examine the influence of conflict seriousness on the blame measure.[3] To this end, a 2 (alcohol condition:

[3] The three-way analysis was also conducted for the other dependent measures. A significant main effect of conflict seriousness was found for the self-emotion measure, $F(1, 43) = 7.76$, $p < .01$, such that participants felt more negatively about more serious conflicts ($M = 5.93$) than less serious

alcohol vs no alcohol) × 2 (self-esteem: low vs high self-esteem) × 2 (seriousness of conflict: high vs low seriousness) ANCOVA was conducted. A significant three-way interaction was found, $F(1, 43) = 4.17$, $p < .05$. Of particular interest in this analysis were the blame ratings for highly serious conflicts. When not intoxicated and evaluating a conflict of high seriousness, LSEs ($M = 3.96$) and HSEs ($M = 4.67$) were equally blaming, $t(43) = 1.24$, *ns*. However, when intoxicated and evaluating a conflict of high seriousness, LSEs ($M = 5.50$) were significantly more blaming than intoxicated HSEs ($M = 3.69$), $t(43) = 2.35$, $p < .05$. No differences were found for conflicts of low seriousness.[4] The covariate was marginally significant for the three-way analysis of the blame measure, $F(1, 43) = 3.71$, $p < .06$.

DISCUSSION

The data support the hypothesis that alcohol can play a causal role in exacerbating relationship conflict. Intoxicated individuals in our study felt more negatively about a conflict incident. Importantly, in their state of reduced cognitive functioning, these intoxicated participants seemed to project this negativity onto their partners and indicated a belief that their partners were also more upset about the incident.

Taken in the light of Dependency-Regulation Theory (Murray et al., 1998), this focus on a partner's negativity carries with it dangerous consequences. An angry partner can also be a rejecting partner. Because a partner's anger can be a sign of dissatisfaction with the relationship, it can serve to act as a threat to felt security. Our data show that although high self-esteem served as a resource that buffered individuals from this threat, low self-esteem individuals, without such a buffer, reacted in a maladaptive fashion. Low self-esteem participants who had consumed alcohol became more insecure about their partners' feelings for them. This insecurity led low self-esteem participants to adopt a defensive posture, as revealed in their self-protective tendency to blame their partners for the conflict incident. Further, this blaming reaction was especially true for those low self-esteem individuals who perceived the conflict to be a serious one, paralleling the findings of MacDonald and Holmes (1999) in which conflict seriousness was manipulated experimentally.

Unfortunately, low self-esteem individuals' reaction to this threat to their felt security could very well lead to a self-fulfilling prophecy. By expressing anger and blame in the middle of a heated, serious conflict, people with low self-esteem are unlikely to defuse the situation and may well heighten the level of conflict. High self-esteem individuals, on the other hand, evidence a more adaptive response to the reflected appraisals threat. Although alcohol did cause even those

conflicts ($M = 4.71$). A significant main effect was also found for the insecurity measure, $F(1, 43) = 4.51$, $p < .05$. Participants felt more insecure about more serious conflicts ($M = 4.10$) than less serious conflicts ($M = 3.43$). However, no higher order interactions were found on any dependent measure other than the blame measure.

[4] Blame ratings for conflicts of low seriousness were as follows: no alcohol LSEs ($M = 4.46$), no alcohol HSEs ($M = 3.43$), intoxicated LSEs ($M = 4.45$), and intoxicated HSEs ($M = 4.22$).

with high self-esteem to perceive their partners as being upset about the conflict, by not turning this perception into insecurity about their partners' affections they were able to ward off a defensive reaction. High self-esteem participants, if anything, became more secure in their partners' affections after consuming alcohol. Thus, these high self-esteem participants, even while intoxicated and facing a serious conflict, did not increase the amount of blame they attributed to their partners. By not blaming their partners, and thus not putting their partners on the defensive, high self-esteem individuals can use their cognitive and emotional resources to defuse a conflict situation and keep their relationships intact.

Alcohol Myopia Theory (Steele & Josephs, 1990) was useful in predicting that intoxicated participants would become more upset about a relationship conflict due to a focus on salient, negative cues. However, this theory is not the only, nor even the most parsimonious, means of predicting those specific results. Indeed, the data suggest the possibility that alcohol simply increased emotional negativity in general rather than led to a restricted cognitive focus (Weisman & Taylor, 1994). Although we concede this to be entirely plausible, we still believe Alcohol Myopia Theory provides the best explanation for the effects of alcohol on relationship functioning in general. The difference between the two explanations would be most apparent in research investigating both negative and positive aspects of relationships. If alcohol serves to heighten negativity generally, then both negative and positive interactions should suffer when relationship partners are intoxicated. However, if alcohol causes a focus on salient cues, negative events should become more negative under the influence of alcohol and positive events should become more positive. For example, it would be interesting to investigate relationship partners' overt expressions of affection during a positive interaction while under the influence of alcohol. We would expect partners to become more affectionate under these conditions, consistent with Alcohol Myopia Theory.

In any event, more research should be conducted to examine the mechanics of the relation between intoxication and blame in relationship conflict. One interesting question is what specific negative emotions were experienced by intoxicated participants. Although our results showed that intoxication led to more negative emotion, because our measure of emotion was general in nature, it is unclear as to what specific negative emotions participants experienced. A different interpretation of the results emerges if the participants were experiencing anger, as opposed to sadness, shame, or some other negative emotion. Clearly, future research on alcohol and relationship conflict would benefit from more specific measures of emotion.

Our results suggest that alcohol serves to increase the perception of threat to reflected appraisals, but does not necessarily influence how individuals respond to that perceived threat. Murray et al. (1998) contend that high self-esteem provides, at least in part, a buffer against relationship negativity via generous motivated cognitions. For example, a high self-esteem person should be more likely to reframe a partner's negative qualities (e.g., arrogance) as more positive qualities (e.g., confidence). Participants in both the present study and in MacDonald and Holmes' (1999) relationship conflict study experienced a reflected appraisals threat, the

former due to intoxication and the latter due to an experimental manipulation. However, participants in the present study responded to that threat while under the influence of alcohol and thus responded with reduced cognitive capacity. It might, then, be expected that intoxicated participants in the present study would show a more exaggerated blaming reaction due to the effects of alcohol than participants in the MacDonald and Holmes study who were not intoxicated. In fact, it was possible that even intoxicated high self-esteem participants in the present study, without their usual arsenal of cognitive maneuvers, might show a blaming reaction to the reflected appraisals threat. This was not the case. Despite the cognitive restrictions imposed by alcohol intoxication, high self-esteem people were able to withstand a reflected appraisals threat and not become blaming of their partners. This suggests that high self-esteem provides as much of an emotional buffer against relationship negativity as a cognitive one. Of course, it should be noted that the level of intoxication participants reached in this study might well be deemed ''mild'' by many social drinkers. It is an open question whether high self-esteem individuals would still be able to maintain their felt security in a conflict situation at increased levels of intoxication.

An interesting potential application of the present results is to the question of alcohol's role in domestic violence. Although alcohol use has been shown to predict domestic violence, even controlling for factors such as history of violence within the family and conflict styles (Leonard & Senchak, 1996), there is still debate as to what the form of that relation is. Specifically, does alcohol somehow cause such violence or do abusers drink to give themselves an excuse for their behavior? We have shown that alcohol can cause increased blame in relationship conflict, especially for people with low self-esteem. Although blame clearly would not necessarily lead to violence, it has been shown that high levels of conflict, and especially maladaptive conflict styles (like low self-esteem people seemed to demonstrate in our study), are predictive of violence in relationships (Leonard & Senchak, 1996). Further, the fact that alcohol has been shown to lead to more aggression when individuals are provoked (Bushman & Cooper, 1990; Hull & Bond, 1986) makes it seem more likely that intoxicated, low self-esteem people, who are more likely to become insecure and blame their partners for relationship conflicts, might well be more likely to resort to aggressive tactics in relationship conflicts. This is an interesting prediction, as it seemingly contradicts Baumeister, Smart, and Boden's (1996) contention that it is, in fact, high self-esteem people who should be more likely to be aggressive. However, these authors concede that, ''domestic violence seems like the most promising milieu in which to find evidence of aggression by people who lack self-esteem'' (p. 7). Further, in their review of the self-esteem and domestic violence literature, they claim that much domestic violence arises out of situations where the abuser is of lower status than the abused. They interpret this to mean that the violence arose out of a threat to self-esteem. We view this same data as more likely representing a threat to reflected appraisals. Partners who are of higher status will have more alternatives and more opportunities to leave the relationship. Indeed, it is low self-esteem people who should be more likely to feel this kind of a reflected

appraisals threat. Nevertheless, future experimental research on alcohol and conflict would benefit from the inclusion of measures designed to assess aggression.

The present study is one of the first to provide experimental evidence for a causal role of alcohol in exacerbating conflict in relationships, as well as to identify self-esteem as a possible mediating mechanism. While several questions surrounding the mechanics of the relation between alcohol and conflict remain, we hope that this study provides one model for how future experimental research on the topic can begin to answer them.

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