

# Van gangbaar tot problematies drankgebruik

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## SUMMARY

### From everyday drinking to problematic drinking

This study deals with the following interrelated questions:

- I. Which drinking patterns are prevalent in the populations studied?
- II. Which social factors are associated with differences in drinking patterns?
- III. Which factors contribute to an intensification of the use of alcoholic beverages?
- IV. Which factors, other than consumption level, contribute to the likelihood that the use of alcohol will lead to harmful effects?
- V. Which factors, other than harmful effects, contribute to the chance that drinking is disapproved by the social environment and/or the drinker worries about his drinking?

In the first four chapters hypotheses related to these problems are generated.

The first hypothesis states that the variety of drinking behaviour of individuals can be reduced to a restricted number of drinking patterns.

Drinking patterns are described as "styles" of drinking, characterized different aspects of drinking behaviour. The aspects of drinking behaviour used in this study to define drinking patterns are (1) amounts consumed on weekdays and (2) weekenddays, (3) frequency of drinking and (4) place of drinking (at home or public places).

The hypothesis about common drinking patterns might seem to be in contrast with the finding that there do not seem to be general norms regulating concrete aspects of drinking behaviour like amounts permitted to be consumed on various occasions or frequency of drinking. Two reasons are given for the expectation that, although explicit norms concerning drinking behaviour are lacking, individual drinking behaviour will in fact tend to be conform to one of several prevalent drinking patterns:

- the individual will tend to follow the example of others in his reference group in order to give a risky habit like drinking a meaningful place in his life style

- it is of some importance that the social environment of the drinker is able to recognize that the individual drinks in a socially acceptable way. This is only possible if there is some uniformity in the social acceptable ways of drinking, viz drinking behaviour is organized in a restricted number of drinking patterns.

Socially acceptable ways of drinking, should not be identified with -from the public health perspective- responsible ways of drinking. These drinking patterns, because they are defined as socially acceptable make it legitimate to avoid to a certain extent questions about harmful effects rather than prevent harmful effects.

Regarding the second problem, it was hypothesized that status groups defined in terms of one or more of the variables sex, age, social class and religion, tend to differ in drinking pattern.

This hypothesis is derived from the role-theory of the German sociologist U. Gerhardt (1971). She distinguishes three types of roles which have different functions for the individual:

- statusroles: expectations based upon social characteristics which the individual himself is (hardly) able to influence i.c. social class, sex, age and religion. Status roles provide the individual with a general orientation of how to behave in a large variety of social situations;
- position roles: expectations based upon the position a person occupies in a social network, such as a family or a workorganization. Position roles structure the everyday life of the individual with meaningful activities.
- situation roles: the social expectations which make it possible to interact in short-term situations in which people pursue and attain specific goals. Visiting football matches or bars and driving a car are examples of situation roles.

The use of alcoholic beverages belongs in the context of situation roles. However, statusroles indicate in which situations the use of alcohol is considered appropriate, in their function of giving a general orientation. Statusroles indicate how to integrate drinking as a meaningful element of the life style.

Two hypotheses have been formulated concerning factors contributing to an intensification of alcohol use.

It is expected that people with a somewhat less-structured everyday life will tend to intensify their consumption. Those people might tend to use situation roles, including those in which alcoholic beverages are used, to give some structure and meaning to their everyday life. The score on the variable degree of structure of everyday life is measured by the following number of position roles of the respondent: working outdoors, living with a partner, care for children at home.

The second hypothesis states that in small communities the consumption level will be lower than in cities (more than 30.000 inhabitants) because social control in small communities is more intense.

Besides level of consumption, the following factors are expected to influence the harmful effects of drinking.

Status factors associated with differences in drinking pattern. A consumption of twenty glasses concentrated only on two weekkend days is more likely to lead to for example drunkenness or accidents than if the consumption of 20 glasses is evenly spread over the seven days of the week.

The degree of structure of everyday life

For the following-three reasons it was hypothesized that people with a less structured every day life are more vulnerable to the harmful effects of drinking:

- because of the lack of meaningful activities they are likely to experience more stress, possibly making them vulnerable to the effects of alcohol;
- they might more often engage in binge drinking than people with a more structured everyday life.

The consumption on binges was not determined directly, although such harmful effects as for example tremors, blackouts were measured;

- the lack of meaningful activities possibly leads to a more emphasized registration of the effects of alcohol.

Acquired tolerance, (indicated by the length of time people drink the same amounts) is thought to be of influence because clinical studies show that heavy drinkers have to drink increasing amounts to experience the same effects.

The likelihood that with a similar degree of harmful effects, a person worries about his drinking or experiences disapproval, is expected to be influenced, by an almost

identical set of factors as mentioned before: status factors, degree of structure of everyday life and duration of present drinking habits.

Only as far as status groups differ in the prevalence of harmful effects of drinking (because of differences in drinking patterns) can statusfactors be thought of as influencing worries and/or disapproval. It is thought likely that status groups with a high prevalence of harmful effects, will tend to be more reluctant to worry about one's own or to criticize the other's drinking.

It is expected that in the case of a less-structured everyday life, the drinker and/or his social environment experience harmful effects of drinking as a more outstanding feature of the present lify style than if (in spite of harmful effects) a person still fulfills concrete social obligations.

The duration of present drinking is expected to influence worries and/or disapproval because it is thought to be likely that the longer one drinks to excess, the more difficult it becomes to avoid criticism or worries.

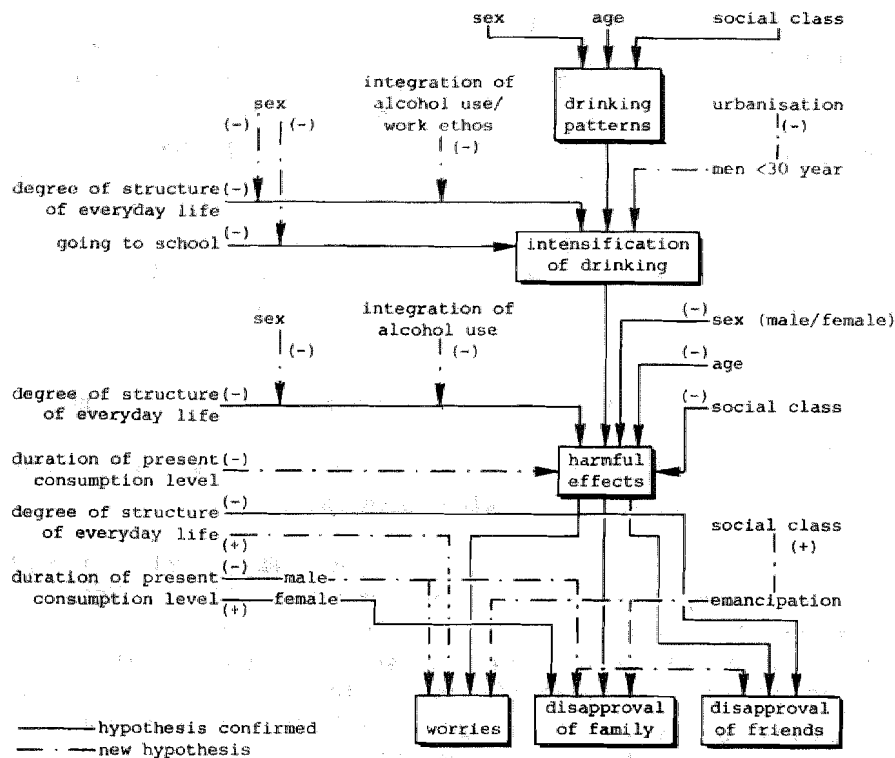
To test these hypotheses data from two identical surveys conducted in the province of Limburg and the city of Rotterdam respectively are used. In two aspects there are rather large differences between these two regio's. In Limburg 90% of the respondents professes to belong to the Roman Catholic church. In Rotterdam 56% of the respondents says they have no religious denomination (however, probably raised by parents of Protestant background); 27% of the respondents says they are Protestant. A further difference is that Rotterdam is the biggest city in the Netherlands while in Limburg mainly small communities are found.

In all analyses concerning factors influencing harmful effects, level of consumption was statistically controlled for. In all analyses concerning disapproval of or worries about drinking, the degree of harmful effects was controlled for.

Except for the analyses concerning the influences of sex, all analyses have been carried out seperately for men and women in Limburg and Rotterdam.

Results

The results are presented in the figure underneath.



Firstly the influence of status factors and duration of present consumption on the set of dependent variables will be discussed. Following this the influence of degree of structure of everyday life, going to school and urbanisation will be discussed.

The hypotheses concerning the existence of drinking patterns and differences in drinking pattern between status groups were confirmed.

In Limburg and Rotterdam, the drinking behaviour of the large majority agrees with one of the three prevalent drinking patterns in these areas. Two drinking patterns are the same in Rotterdam and Limburg: 'incidental moderate use' (average frequency of 3 times a month and average consump-

tion per drinking occasion of about 1 glass) and 'daily drinking at home'. Another drinking pattern, called 'periodic drinking' was only found in Limburg. The main characteristic of this drinking pattern is that the consumption on two weekenddays greatly exceeds the consumption on the preceding five weekdays. In Rotterdam a third drinking pattern, called 'mixed style of drinking' was found. The "mixed style of drinking" is characterized by a higher number of drinking days than incidental moderate use and a lower number of drinking days than daily drinking at home. Incidental moderate use is the dominant drinking style of women in Limburg and Rotterdam. Daily drinking at home occurs more frequently in the older age groups, especially those of the higher social class. Periodic drinking in Limburg and the mixed style of drinking in Rotterdam is found more often in the younger age groups. Compared with the mixed style of drinking, the drinking pattern of periodic drinking in Limburg contains clearer indications of how to drink. This fact and the fact that the differences in drinking pattern between status groups in Limburg are stronger than in Rotterdam, led to the conclusion that drinking in Limburg is a more clearly defined and integrated element of the status role.

Harmful effects are measured by the score on an index in which psychological dependence (or escape drinking), symptoms, problems with health/accidents and frequency of drunkenness/hangover are combined. Status groups with a restricted frequency of drinking -the younger and the lower social classes- experience more harmful effects at similar amounts of consumption. At a similar level of consumption men report more harmful effects than women, possibly because the consumption on binges is not systematically asked for, whereas harmful effects like drunkenness or black-outs are; and/or because women tend to stronger underreporting of adverse consequences of drinking.

The younger were also expected to experience less worries or disapproval than the older. This hypothesis was not confirmed: there were no differences. Social class, for which no differences were expected, appeared to be of influence. In Limburg women of the higher social classes more often worry or experience disapproval from family than middle or lower class women.

Further analysis showed that, compared with Rotterdam, women of the higher social classes in Limburg are less emancipated concerning the use of alcohol. A process of emancipation which has started but not yet led to equal rights, might contribute to an increased likelihood of worries about or disapproval of drinking.

Acquired tolerance did not have the expected influence on harmful effects, probably because duration of present consumption is not a valid indicator for acquired tolerance. More specific analysis showed, however, that duration of present consumption is of influence on one category of harmful effects: psychological dependence. Those who drink the same amount of alcohol for a shorter time had a higher score on psychological dependence. The following new hypothesis was formulated: those who recently started heavy drinking, are still more inclined to appreciate the tension-reducing effects of alcohol as a solution for their problems.

The influence of the duration of present consumption on worries and disapproval appeared for men to be opposite the hypothesis: a diminishing likelihood if present (heavy) consumption lasted longer. For women the results were conform the hypothesis: the longer women drink the same amounts, the more likely they are to worry or receive criticism from their family.

To explain the findings for men, it was reasoned that heavy drinkers tend to select as friends those who do not express disapproval and that the family gets tired of criticizing if they notice that it does not result in any change in drinking. The drinker himself probably under estimates the health risks of his present consumption.

The variable "degree of structure of everyday life" had the expected influence on intensification of drinking (defined as the 10% with the highest consumption), harmful effects and disapproval of friends.

The use of logit-analysis to analyze the influence of the degree of structure of everyday life on intensification of drinking, showed that the influence is u-shaped rather than linear. Those with a less-structured everyday life are overrepresented in the category of the very light drinkers as well as the category of heavy drinkers. The same was



found when the influence of the three indicators for structure of everyday life, outdoor work, partner, care for children, were analysed separately.

The influence of structure of everyday life on worries appeared to be contrary to the original hypothesis. A new hypothesis was formulated which stated that if there are more people dependent on an adequate performance of position roles, the likelihood of worries about drinking is higher.

The extent to which there are differences in intensification of drinking and vulnerability for harmful effects according to degree of structure of everyday life, is influenced by sex and integration of drinking.

The results showed that the influence of degree of structure of everyday life on intensification and vulnerability for harmful effects, was less strong for women than for men. Probably women do experience more social pressure to keep to moderate drinking which might influence the extent to which differences in intensification and vulnerability for harmful effects will develop.

For men in Rotterdam greater differences in intensification of drinking and vulnerability for harmful effects were found than for men in Limburg. In Limburg the better integration of alcohol use in the status role of men, might to a certain extent prevent people with a less-structured everyday life to use alcohol as compensation for lack of structure and meaning.

The degree of the integration of drinking might also influence the likelihood that people with a less structured everyday life drink for personal effects or go on binges, viz. influence the reporting of harmful effects at similar consumption levels.

The stronger (secularized) Calvinistic work ethos in Rotterdam possibly contributes to the greater manifest ambivalence towards and lesser integration of alcohol use in Rotterdam.

Younger men going to school drink less than young men who work. For women no differences were found. In Limburg the lower consumption of those going to school is probably due to the fact that they have less money; in Rotterdam it is probably due to the fact that the average age of those going to school is lower.

The influence of urbanisation on consumption level is different from what was expected: younger men from small communities drink more than younger men from cities. For women and older men no differences in consumption according to urbanisation are found. In a new hypothesis it is suggested that compared with cities, drinking alcohol is a much more stressed element in the status role of younger men living in small communities.