

# CHAPTER V

## SUMMARY

## AND

## CONCLUSION

## **Summary of the Results:**

Differentials in drinking patterns and problems might be narrowing, but women alcoholics are traditionally lumped together with male alcoholics in both research and treatment efforts. However, women have been noted to show differences in the pattern and etiology of excessive drinking. In general women alcoholics have a high incidence of alcoholic parents and are more likely than men to begin drinking heavily in response to a specific environmental stressor, such as divorce or death in the family. They tend to become problem drinkers at a later age than men. Moreover alcoholics are not a homogeneous group and to be most effective, collegiate alcohol policies and programs must reflect these continuing differentials. In this chapter, a brief summary and conclusion of results is presented along with the limitations of the study and the scope for future research.

The main aim of this study was to devote research attention to women's alcohol consumption while investigating differences between male and female respondents on alcohol expectancies, social cultural variables, stress and coping indicators as various antecedents to alcohol consumption and psycho social consequences that arise; with levels of alcohol consumption (hazardous, harmful use and alcohol dependency), as the dependent variable, within Goan society. The research was conducted on a sample of 300 respondents of which 150 were females and 150 were males. Of the 150 female respondents 75 respondents were categorized as high risk by the AUDIT scores and 75 as low risk. Similarly a response from the male population of 75 high risk and 75 as low risk respondents was obtained. The age range of the respondents was from 16 years to 75 years. They lived either along the coastal, rural or urban Goa. They were of varied religious affiliations, either single or married with one of divorce status and were Some of the respondents were still studying, while others were either employed or at home.

The following questionnaires used were selected keeping in mind the aims and objectives of the study:

The AUDIT distinguished between levels of alcohol consumption.

The alcohol expectancy questionnaire scored cognitive motivators and beliefs which people have about alcohol consumption.

The brief stress and coping inventory by Richard H. Rahe was used to find out different areas of stress and coping skills. The balance obtained would give the risk for health in terms of risk for illness or injury during the coming year.

The social cultural variable and psycho social consequences questionnaire was used to find out variables in the environment that would influence alcohol consumption.

Of the 7 main hypotheses framed, 6 hypotheses were assessed using the t-test for comparison between males and females on levels of alcohol consumption, alcohol expectancies, stress, coping, social cultural influences and consequences. While stepwise multiple regression analysis was used to identify the variables that would significantly contribute to the dependent variables as indicated by hypothesis number 7.

Following were the results obtained:

1. Difference between male and female respondents is significant in all the dimension and overall AUDIT i.e. hazardous indicator ( $t=2.34$ ;  $p<0.05$ ), harmful drinking ( $t = 3.28$ ;  $p<0.01$ ), dependency ( $t=2.40$ ;  $p<0.05$ ) and overall AUDIT ( $t=2.78$ ;  $p<0.05$ ); when compared to female respondents.

2. The difference between male and female respondents is significant on the following dimension and overall total of the alcohol expectancy questionnaire. It is found that male respondents have shown higher significance in global positive indicator ( $t=3.11$ ;  $p < 0.01$ ), social enhancement ( $t= 2.75$ ;  $p < 0.05$ ), and alcohol expectancy positive total ( $t=1.602$ ;  $p < 0.05$ ); when compared to female respondents.
3. Difference between male and female respondents is significant on the following dimension and overall total of the stress indicators. Female respondents have shown higher significance in who am I index ( $t= -3.795$ ;  $p < 0.01$ ), physical symptoms ( $t= 1.496$ ;  $p<0.05$ ), psychological symptoms ( $t= -4.23$ ;  $p<0.01$ ) and total stress scores ( $t= -2.249$ ;  $p<0.01$ ) when compared to male respondents. Whereas male respondents have shown higher significance in behavior and emotion dimension ( $t= 2.426$ ;  $p<0.01$ ) when compared to female respondents.
4. The difference between male and female respondents is found to be significant on the following dimension and overall total of the coping indicator. Male respondents have shown higher significance in health habits index ( $t=1.394$ ;  $p<0.05$ ) when compared to female respondents and female respondents have shown a higher significance in response to stress index ( $t= 1.341$ ,  $p<0.05$ ) when compared to the male respondents. Additionally the difference between male and female respondents on the stress and coping balance is not significant. Since the overall total balance for both the genders is negative indicating a greater risk of illness or injury in the upcoming year.
5. The difference between male and female respondents is significant on the following dimension and overall total of the social cultural indices. Female respondents have shown higher significance in age of initiation to alcohol ( $t=2.06$ ;  $p<0.05$ ), availability of alcohol ( $t= -4.22$ ;  $p < 0.01$ ) and family influence ( $t=-4.301$ ;  $p < 0.01$ ) when compared to male respondents whereas

it is found that male respondents have shown higher significance in the dimension of peer pressure (3.263;  $p < 0.01$ ) when compared to female respondents.

6. The difference between male and female respondents is significant on the following dimension of the psycho social consequences of alcohol consumption i.e. male respondents have shown higher significance in the trouble with legal /law index ( $t=4.228$ ;  $p < 0.01$ ) and trouble with finances ( $t= 4.221$ ;  $p < 0.01$ ), when compared to female respondents. But there was no significance observed with the consequences indices of family relationship, social relationship and absence from work.
7. Using the stepwise method, a significant model emerged from the data obtained using regression analysis when AUDIT was taken as dependent variable. ( $F_{9, 290} = 155.784$ ,  $p < 0.005$ ). Adjusted R square = .823. Consequences on occupation i.e. work study, Alcohol expectancy total, ,consequences on social Relationships, consequences on finances, Peer pressure, alcohol expectancy negative family influence , gender and stress totals influenced alcohol consumption . levels of significance at ( $p < 0.005$ ), whereas Coping Totals, Stress and Coping Balance, Availability, Family Influence, and Trouble with the Law was not a significant predictor in this model.

### **Women and alcohol consumption:**

The research study thus brings forth some variables that are unique to women's alcohol consumption.

While some of these findings were consistent with previous research others were culture specific. Amongst the more common findings was that men were more likely to drink than women, and

male drinkers consumed alcohol more frequently and in larger amounts, and were more likely to have alcohol-related problems than female drinkers.

But these gender differences are closing up in many middle class urban parts of India. Young women are today bingeing or drinking three to four times a week, large amounts that will cause them harm and eventually lead to dependency.

The research data further indicates that amongst high risk drinkers, 44% of the women that consumed alcohol at high risk levels reported drinking alcohol under the hazardous levels of AUDIT and maximum number (75%) of the female respondents from the age bracket of below 25 years fell in this category. Of the 38% female respondents that consumed alcohol at harmful levels most fell in the age bracket of 25 to 45 years and of the 17% that reported levels of dependency maximum belong to the age category of 35 onwards. Such findings are indicative of future trends of alcohol consumption amongst women. Hazardous consumption is a step towards dependency and if more women are drinking at hazardous levels now than before than gender gaps in alcohol consumption might decrease at alarming rates unless the issue is addressed through social policy and interventions.

A salient cultural specific indicator that is significant is the belief women have about alcohol having health benefits. While social pressures and relief of tension are quoted as important factors for initiation of drinking in the West ( Wilsnack S.C. 2000 ), expectancy that alcohol will cure physical ailments like cold, fever, and reduce pain seem to stand out as the influences that initiate hazardous alcohol consumption amongst women in Goan society. In general, women perceive moderate alcohol consumption as positive. However drunkenness amongst women is

not tolerated and this dual approach to alcohol consumption present a barrier to the appropriate diagnosis of women as alcoholics.

The greatest concern thus is that since women see moderate consumption of alcohol as having health benefits. Very often they may not realize that the risk to addiction of alcohol is greater for them than a male counterpart. Additionally, because of the stigmatic approach to alcohol dependency for women, seeking help and receiving treatment is not easy.

Another variable that is significant amongst high risk female alcohol consumers in the population sample are the stress levels which indicate future health risks. Women scored a higher mean total which is a negative number (-2.47) indicating a risk for illness or injury in the coming year. These scores are further significant in women with alcohol dependency. Areas of stress that were investigated show early childhood abuse, both emotional and physical, which was seen to be high amongst respondents that drank at high risk levels and in general these respondents showed higher stress scores than low risk female respondents. High levels of stress and lack of coping skills indicate certain life skills which are being left out of daily life. How does one cope with death of a husband who was also the sole earning member of the family or death of a loved one? How does one cope with marital separation or marital stress?

Life satisfaction was low across all the respondents where the ability to feel fulfilled and satisfied in areas such as health, work, relationships and financial matters were considered. Such satisfaction is obtained from one previous experience or through modeling from role models. Do we have role models in our society that are able to portray values? Or does everybody seek instant gratification. How do we balance our life goals, aspirations and be happy? A lack of

purpose and connection influences alcohol dependency and both males and females are equally influenced by this indicator of coping with stress.

Family influence is seen as a psychosocial variable to influence alcohol consumption through hazardous consumption, harmful use and alcohol dependency. Children of parents who drank were less likely to view drinking as harmful (Hawkins et al., 1997). The fact that the parent may also consume alcohol might also be responsible for the more biased positive attitude to alcohol consumption. Drinking by family members is seen to have a significant influence on women alcohol consumption than in men and this influence is seen across all the levels of alcohol consumption categorized by AUDIT i.e. hazardous consumption, harmful use, and alcohol dependency. Beside a genetic predisposition that the child may inherit, parents' drinking becomes vicarious learning for children but more importantly for women it could be a liberal permission to drink alcohol or get drunk; which is otherwise generally prohibited. The immediate environment can also increase the probability of alcoholism amongst women. Those women who socialize, or live romantically with their spouse tend to drink in excess, whether dependent or not. These women are more likely to put themselves at risk for alcohol abuse and alcoholism.

Family and social relationships are seen to be affected by alcohol consumption across all the levels of alcohol categorization and for both genders. Although men are significantly influenced by finances and trouble with the law; women are more concerned about their relationship with family and friends and absenteeism from work or bunking class because of a hangover. Gender specific roles were not discussed but a study conducted in Bangalore with a limited sample shows that despite the severity of drinking problems and impaired functioning amongst women, these women appeared to be able to handle and function in their respective roles (Prasad S.,

1998). The reasons being the onus to run a family is shouldered by the women, even in their drunken stupor. This also reflects the differences that exist in gender roles of a society.

As a society, largely due to millions of rupees invested in alcohol advertising campaigns, there is a perception of alcohol use amongst women being associated with glamour, attractiveness and success, and these lingering subconscious perceptions are influencing these women to try alcohol at a young age and continue to drink more than they should throughout life.

### **Limitations of the Study**

Despite detailed study and careful implementation of research design, there were many limitations to the study. Most of these limitations occurred because of the nature of the topic under investigation.

Presented below are some of the limitations of thesis research study:

1. Alcoholism by itself is a vast domain,
2. Additionally to discuss this behavior is difficult because of the taboo associated with drunkenness
3. It is a known fact that respondents especially women undersize reports of the quantity of alcohol consumption. So women might report having one or two drinks of 30 ml each instead of reporting the two drinks of 60 ml each. Such underreporting can give unreliable results.
4. The study was conducted on a convenient sample.
5. The sample selected represented middle to high socioeconomic background with higher educational levels and not representative of the population at large. Therefore the results of these finding need to be accepted and interpreted with caution

6. The number of respondents at each level was not balance with each other
7. Hazardous drinkers were highest amongst women whereas male respondents had more alcohol dependent respondents; thus patterns of drinking between males and females could be misrepresented.
8. Alcohol expectancy questionnaire could be made into a more exhaustive tool to include more number of items of each of the indices.
9. The social cultural variables could include other indices to strengthen this index and especially to understand the influence of family and peers
10. The psycho social consequences could have included more variables for the study.

The recommendations suggested are:

1. A larger sample of high risk female respondents in the categories of harmful consumption and alcohol dependency to be included that would further strengthen the results and help with generalizations of the research study.
2. Increasing the number of questions per index of the alcohol expectancy questionnaire, social cultural variables and psycho social consequences questionnaire would have given a better understanding of the influence of the studied antecedents and consequences.
3. Women's alcohol consumption could be rigorously studied by focusing on each of the antecedent and consequences and in more detail. Longitudinal studies in this area may provide more clarity on the effects of mediators on the relationship between stress and alcohol use.
4. The use of self-report measures may be problematic as they are reliant on the memories, perceptions and emotions of respondents. Therefore information obtained may not always be accurate. Indeed previous research has indicated that people may often underestimate their alcohol intake, incorrect reporting, such as these, may cause inaccuracies in results. Finding

ways to measure the quantity of alcohol consumed by respondents would have given a more accurate picture of women's alcohol consumption.

The research study thus helped in gaining a better perspective of women's alcohol consumption in Goa and bring to fore a topic that has been left out of scientific discussion until recently.

Antecedents responsible for high risk consumption of alcohol unique to women and the psychosocial consequences of it were delineated to further understand women's alcohol consumption.

Overall this study provides the preliminary understanding of women's alcohol consumption in Goa. It however raises many questions that can be investigated in future studies.

### **Scope for Future Research**

1. The above research study can be used on a larger sample of women across other states in India to find out the influence of the antecedents and psychosocial consequences of alcohol consumption.
2. Drinking patterns and behavior of Indian women needs reference.
3. Behavior intervention research is needed to identify the optimal strategies for altering alcohol outcome expectancies to reduce overall alcohol use.
4. The connection between stress and alcohol consumption can be explored further.  
Longitudinal research may also offer some insight into the pathways for addiction/dependence and stressors which may encourage addiction.
5. Since childhood abuse and neglect were seen as significant variables amongst women who drank at high risk levels, further research in this area need to be encouraged and efforts initiated to help abused and neglected females (both adolescents and older women) such as teaching them coping skills so as to reduce their risk of adult alcohol problems .

6. Research should also further examine life skills intervention that increases life satisfaction with women who are under treatment for alcohol dependency.
7. Treatment utilization by women with a drinking problem needs to be researched.
8. Research should examine the stigmatic attitudes that women face while seeking treatment and the other variables that hinders women from seeking help
9. Research should examine the effectiveness of prevention programs for alcohol consumption that incorporate the myths of alcohol expectancies since alcohol expectancies have shown high levels of significance especially with regard to health benefits.

Women alcoholics have historically been underrepresented in research studies certainly not sufficiently in proportion to the differences in male / female prevalence rates. This disparity suggests the subtle sex bias that exists while dealing with women who have a drinking problem. Thus in conclusion bringing women in as research subjects in alcohol studies is a step towards addressing the emerging concerns of women with drinking problems in India.

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