

Copyright is owned by the Author of the thesis. Permission is given for a copy to be downloaded by an individual for the purpose of research and private study only. The thesis may not be reproduced elsewhere without the permission of the Author.

**Drunk Feminine Bodies:  
An Exploration of Young Women's Embodied  
Experiences of Intoxication**

A thesis presented in partial fulfilment of the requirements for the  
degree of

Master of Science

in

Psychology

At Massey University, Wellington,

Aotearoa/New Zealand

Alison Joy Ramsay

2014



## **Abstract**

Young women's frequent heavy drinking in New Zealand has increased substantially in recent years and is one of the country's leading health problems. Theorising drinking as an embodied experience bound up in social relationships offers valuable insights into the maintenance of this behaviour. This research utilised a theory of embodiment to better understand the physical pleasures and sensations involved in becoming drunk, and how experiences of being a physical body are intertwined with the social environment while drinking to intoxication. Five friendship discussion groups were conducted in Wellington and Dunedin with 23 women aged 19-26, and were audio recorded and transcribed verbatim. Thematic analysis revealed that the women's accounts of their drinking were highly contradictory, and two major contradictions were identified which demonstrated how the women negotiated different performances of femininity while drinking. Firstly, there was a strong emphasis on being heterosexually attractive in the discussions, which contradicted the idea that getting drunk allowed them to forget other people's judgements. Secondly, the importance of sharing the pleasure of drinking with friends was contradicted by descriptions of drunkenness as embodied and individual. The women also described two intricate and precarious 'balancing acts' they engaged in when drinking heavily. They discussed balancing between performances of acceptable feminine behaviour and risking 'looking tragic' when drinking to intoxication. Managing the physical effects of drinking heavily so as not to appear 'tragic', or have a hangover was also described as a well-learned balancing act, which the women were expected to expertly perform following years of training. This research offers valuable and novel insights into the social and embodied aspects of drinking that maintain young women's heavy drinking. It extends on previous research into the gendered nature of drinking practices and the embodied experience of intoxication, and how this assists in decisions to stop or slow drinking, and highlights the importance of understanding drinking from an embodied, gendered and social perspective. The findings could contribute to the establishment of more effective approaches to changing young women's harmful drinking practices.



## **Acknowledgements**

First and foremost I would like to thank my supervisor Dr. Antonia Lyons for your guidance, advice, teaching and support. Thank you for investing so much time into my learning, this has been such a valuable experience and I admire you greatly.

I would also like to sincerely thank the 23 women who generously gave their time and spoke so openly about their personal experiences.

Finally, I would like to thank my family, Mum, Claire and Jeff for your endless support throughout this process. You have helped me in every way to complete this project, and I could not have done it without you.



## **Table of Contents**

---

<b>Abstract</b>	<b>iii</b>
<b>Acknowledgements</b>	<b>v</b>
<b>Table of Contents</b>	<b>vii</b>
<b>Chapter 1: Contextualising Alcohol Consumption and Drinking Practices</b>	<b>1</b>
<b>Drinking Practices in New Zealand</b>	<b>3</b>
<b>Why Focus on Young People?</b>	<b>5</b>
<b>Reasons for the Culture of Intoxication</b>	<b>7</b>
<b>Drinking to Intoxication as a Social Activity</b>	<b>9</b>
<b>The Gendered Culture of Intoxication</b>	<b>10</b>
<b>Why Focus on Young Women?</b>	<b>12</b>
<b>Chapter 2: Drinking as an Embodied Experience</b>	<b>16</b>
<b>Embodiment Theory in Psychology</b>	<b>16</b>
<b>Embodied Drinking</b>	<b>17</b>
<i>Pleasure</i>	<b>20</b>
<i>Gendered and Embodied Drinking</i>	<b>22</b>
<b>Understanding Drinking as an Embodied Social Practice for Health Promotion</b>	<b>23</b>
<b>Research Aims</b>	<b>24</b>
<b>Chapter 3: Methodology</b>	<b>26</b>
<b>Epistemological Perspective</b>	<b>26</b>
<b>Design</b>	<b>28</b>
<b>Recruitment of Participants</b>	<b>29</b>
<b>Discussion Group Process</b>	<b>31</b>
<b>Ethical considerations</b>	<b>32</b>
<b>Analytic Approach</b>	<b>34</b>
<i>Identifying Patterns in the Data</i>	<b>35</b>
<i>Developing Themes</i>	<b>35</b>
<b>Positioning the Researcher in this Research</b>	<b>36</b>
<b>Chapter 4: Contradictions in Women's Talk about Drinking</b>	<b>38</b>
<b>Letting go, Forgetting Insecurities versus Drinking to be Attractive</b>	<b>38</b>
<b>Shared Buzz versus Individual Embodied Consequences</b>	<b>47</b>

<b>Chapter 5: Balancing Acts</b>	<b>58</b>
<b>Being “Flirty and Fun” or Being “Tragic”</b>	<b>58</b>
<b>Feeling “Tipsy” and then Knowing “There’s no going back”</b>	<b>64</b>
<b>Chapter 6: Discussion</b>	<b>73</b>
<b>Discussing the Findings</b>	<b>73</b>
<b>Implications of this Research</b>	<b>79</b>
<b>Considerations and Reflections on the Research Process</b>	<b>80</b>
<b>Conclusion</b>	<b>83</b>
<b>References</b>	<b>84</b>
<b>Appendix A: Information Sheet</b>	<b>92</b>
<b>Appendix B: Participant Consent Form</b>	<b>94</b>
<b>Appendix C: Discussion Group Schedule</b>	<b>95</b>

# Chapter 1: Contextualising Alcohol Consumption and Drinking Practices

---

This thesis reports on research that explores the New Zealand drinking culture, and young women's drinking particularly, from a health promotion framework. By investigating the embodied and gendered experiences that take place for young women within drinking practices, we can attempt to draw on our understandings to help change harmful drinking behaviour. Heavy drinking can be harmful but also very social, and therefore we need to look at ways of better understanding the social aspects of drinking to change the practices that take place. Many alcohol harm reduction initiatives focus on the negative outcomes of drinking for the individual and ignore the many positive social aspects that encourage drinking. The dominant strategy focuses on individual responsibility and uses biomedical measures to define harmful drinking (Jayne, Valentine, & Holloway, 2010), but such individualist approaches to health promotion have been largely unsuccessful (Lyons & Chamberlain, 2006). Challenging the social aspects of drinking is more likely change drinking practices than individual blame, as drinking for young people is an inherently social activity (Brown & Gregg, 2012). This chapter outlines the current context in which young New Zealanders are drinking alcohol, looking at the reasons for concern as well as the social influences maintaining this behaviour. It then traces the research on gendered aspects of alcohol consumption, focussing particularly on the experiences of young women. It is argued that a social, gendered lens must be used in order to understand drinking practices.

Heath (1995) pointed out that alcohol consumption is so pervasive around the world, that in almost every language when the verb "to drink" is used, this often implies alcohol over any other liquid. This highlights the normalisation of drinking alcohol in past and present society. New Zealand is often understood as having a new "culture of intoxication", within which drunkenness is not only accepted, but is the goal of a night out (McEwan, Campbell, & Swain, 2010).

This is not unique to New Zealand, but reflects a similar culture in other Western countries (ALAC, 2012; Griffin, Bengry-Howell, Hackley, Mistral, & Szmigin, 2009). Measham and Brain (2005) found that many people in the United Kingdom were not only going out drinking but going out to get drunk, and coined the term 'determined drunkenness'. Their study explored whether there is a new culture of intoxication, and stopped over 350 people at random in the city centre to ask how much they drink. Although the British government had stated that 'binge drinkers' were a small and antisocial minority, most people in the study fit this category. The average consumption for females in this study, according to national standards, was at the 'binge drinking' level, and the average male was above it. Similarly, an Australian survey of female university students found that 48% of those surveyed had engaged in binge-drinking at least once in the past two weeks, which they viewed as a positive, fun experience because their inhibitions were reduced (Johnston & White, 2004).

This culture of intoxication has raised concern about changes in how alcohol was being consumed over the past 30 years. Looking at New Zealand specifically, the drinking culture has received consistently negative attention in the media, politics and academic literature, as the consumption of and problems related to alcohol have increased (Schroder, Sellman, Frampton, & Deering, 2008). Alcohol related issues such as crime, death and hospital admissions cost New Zealand up to \$2.4 billion per year, and this is now one of the country's leading social problems (Schäfer, 2011). Furthermore, half of the arrests made in New Zealand involve the use of alcohol or other drugs (SHORE & Whariki Research Centre, 2011), and the New Zealand police estimate that over 300 alcohol-related offences are committed every day (ALAC, 2012). A considerable burden of illness is also caused by alcohol consumption, and in 2000 it was estimated that 3.9% of deaths in New Zealand could be attributed to alcohol (Connor, Broad, Rehm, Hoorn, & Jackson, 2005).

Considering these negative aspects of alcohol consumption, it is unsurprising that there has been an increase in government harm reduction strategies (Ministry of Health, 2013). However, the increased media attention around drinking is not concerned with alcohol consumption itself; rather, the drinking

*practices* and the way in which certain practices are privileged in social interactions have caused this concern. In the following sections I will discuss the particular problematic practices which have increasingly been taken up by New Zealanders in the past decade.

### **Drinking Practices in New Zealand**

Within the culture of intoxication it is particular *practices* that are problematic and of interest, not just alcohol consumption. This has been widely recognised in New Zealand by the government and health professionals, and was the centre of a very well-known harm reduction campaign that was launched in 2005 by the Alcohol Advisory Council (ALAC). The campaign featured a number of television and printed advertisements that sported the slogan “It’s not what we’re drinking it’s how we’re drinking”, which quickly became a popular catch phrase among the public. One television advertisement follows a male through the course of a night out which starts with drinking beer with friends and having a conversation around a table. The man continues to drink in the bar, becoming highly intoxicated, starting a fight and ending up on the bathroom floor with his young daughter looking at him frightfully, and finishes with the popular slogan. ALAC’s approach with this campaign was not to be anti-drinking, but to raise awareness about the dangers of heavy drinking, and encourage people to be responsible. The problem with this sort of campaign is that it assumes that people are individual, rational decision makers, whom if they were made aware of the negative consequences of a big night out, could choose to alter their drinking behaviour and decrease the risk. However, people are social beings, and drinking is a highly social practice with many social benefits, therefore rational decisions based on what benefits individual health are unlikely to take place (Niland, Lyons, Goodwin, & Hutton, 2013).

There are many terms used to describe ‘problematic’ drinking practices, and these are often used interchangeably in the media and in research literature. Regularly used terms are ‘binge’, ‘hazardous’, ‘risky’, ‘excessive’ and ‘heavy’ drinking. It is important to use these terms consistently and in relation to how alcohol consumption is being conceptualised when discussing issues around

drinking. Although the most commonly used term in both popular media and literature is 'binge drinking', there is no universal agreement on how to define this (Murugiah, 2012; Wright, 2013). A binge is often referred to simply as drinking a large amount in a single occasion, or more specifically; short-term drinking which leads to intoxication and/or increased risk of alcohol-related harm (Carey, 2001; McEwan et al., 2010). However, this gets complicated as understandings about what constitutes a large amount, an occasion, or even a drink, are different (Wright, 2013). Definitions of each of these factors vary between individuals, health professionals and organisations, therefore making it very difficult to pin down what 'binge drinking' really means (Hutton, Wright, & Saunders, 2013). In New Zealand, the Health Promotion Agency (2014) define binge drinking for people over 25 years old as the consumption of seven or more drinks in one occasion, and five or more drinks for people aged between 18 and 24 years. This is a useful definition, as they also define a standard drink as containing 10grams of alcohol, however, it does not take gender into account. Men's and women's bodies absorb, process and tolerate alcohol differently, and women are likely to have a higher blood alcohol level than men from the same number of drinks.

Other common ways of describing drinking practices are 'hazardous', 'risky' or 'excessive', and these terms are often used interchangeably in many governmental reports in New Zealand (MOH, 2013; MSD, 2010) and in academic literature (Kypri, Cronin, & Wright, 2005; Kypri, Langley, McGee, Saunders, & Williams, 2002). However, the use of these terms is problematic as they impose a pre-conceived judgement on drinking practices. For these reasons I will use the term 'heavy drinking' in this thesis to refer to any drinking practice that people engage in that leads to intoxication. The word 'heavy' is intentionally used as a loose term, which encompasses different levels of alcohol consumption and allows for variation in age, gender, experience and other factors that may influence drinking. As the aim of this thesis is to improve understandings relating to the social nature of drinking, it is not necessary to define specific measurements of alcohol or blood levels. Rather, 'heavy' drinking is used in this thesis as a term which incorporates all forms of alcohol consumption which lead to any level of intoxication.

It is important to look at the practices that people engage in when consuming alcohol because particular patterns of drinking are strongly related to the negative health consequences of alcohol consumption (Connor et al., 2005). It has been demonstrated that drinking patterns were the strongest indicators of whether someone experienced negative alcohol-related consequences in the last 12 months (Huckle, You, & Casswell, 2010). Drinking practices differ between social groups, and factors such as socio economic status (SES), gender, age and ethnicity impact the type of practices that take place. A New Zealand survey showed that income, education and occupation were strong predictors of the frequency and quantity that people drink in a typical session, and those most likely to experience heavy drinking patterns were from low SES groups (Huckle et al., 2010). High income groups drank more frequently than low income groups, but consumed less on each occasion. This was supported in a recent review which found that low SES groups drink less often but larger amounts on single occasions, and those most at risk of heavy drinking are more likely to be poor with low education (Rankine, Gregory, Tonks, & Thompson-Evans, 2013). It was also found that Maori drink less often than non-Maori, but are more likely to drink large amounts in one session (Rankine et al., 2013). Young people are a unique social group, and are regularly considered the most problematic drinkers in society. In the following section I discuss the causes for concern around young people's drinking in further detail.

### **Why Focus on Young People?**

Drinking is often understood as part of the transition to adulthood, and the teens and early twenties are periods where heavy drinking is normalised (Borlagdan et al., 2010; Seaman & Ikegwuonu, 2011). However, young people have increased the amount that they are drinking in recent years, and this regularly receives negative media attention in many western cultures (Borlagdan et al., 2010; Coleman & Cater, 2005; Connor et al., 2005; Kypri, Paschall, Maclennan, & Langley, 2007). Youth drinking rates in Australia have increased substantially in the past 20 years, with people starting at a younger age and engaging in more 'risky' drinking practices (Borlagdan et al., 2010).

Similarly in the United Kingdom, it has been observed that more young people are engaging in 'binge' drinking than before (Coleman & Cater, 2005). This concerning trend has been seen in New Zealand, where those most at risk of alcohol-related death are young adults (Connor et al., 2005). Many young New Zealanders start drinking before they are legally old enough, and a survey showed that 15 was the average age that females said they 'really started drinking' (Research NZ, 2011).

Increases in heavy drinking have been most significant for women, and those aged 18-29 are drinking more heavily than ever before (Lyons & Willott, 2008). With many social practices changing, such as the average age of first time mothers increasing from 22 in the 1960's to 30 in the 2000's (Statistics NZ, 2011), young women are more able to participate in social (drinking) activities than previously (McEwan et al., 2010). Ready to drink (RTD) beverages, a mixture of spirits and sugary fizzy drinks made up 70% of what girls aged 14-17 drank in 2004 (Huckle, Sweetsur, Moyes, & Casswell, 2008), and were the fastest growing alcoholic drink in New Zealand between 1995 and 2002 (Rankine et al., 2013). New Zealanders perceive RTDs to be mostly consumed by young women who are learning to drink because the taste of alcohol is masked (Fountain & Fish, 2010). This is concerning as people who drink RTDs are more likely to drink often and more heavily on a single occasion (Huckle et al., 2008; Rankine et al., 2013). There are positive social reasons for why young women are engaging in regular heavy drinking practices. Alcohol consumption is viewed as a fun, crucial part of their social lives, where responsibility is not a concern (Griffin, Szmigin, Bengry-Howell, Hackley, & Mistral, 2013; Sheehan & Ridge, 2001). The strong impact that gender has on young people's drinking practices is discussed more fully later in this chapter.

Within the young population, tertiary students have been identified as drinking larger amounts and more regularly than their non-student counterparts. In a study of student drinking practices in New Zealand, students drank 50-60% more than non-students, and heavy drinking was three times more prevalent among this group (Kypri et al., 2005). These researchers also found that 81% of male and female undergraduates drank alcohol in the previous month (Kypri et

al., 2009), and that heavy drinking was more likely among students living in halls of residence (Kypri et al., 2002). This is not surprising, as people tend to drink in synchronised patterns with their peers, and those in an environment with high levels of drinking are likely to drink more (Kypri et al., 2002). People of all ages engage in behaviour which poses a risk to their health, despite being aware the negative consequences, for many different reasons. I outline these below and demonstrate why it is important to understand drinking practices for health promotion.

### **Reasons for the Culture of Intoxication**

A number of changes over the last three decades have affected the culture of intoxication and I outline two of the main ones that have been raised in the literature; the development of the night-time economy, and strategic alcohol marketing. Public drinking is now more acceptable than ever before, and the traditional norms which previously limited heavy consumption are being transformed through the development of bars and clubs in towns and city centres (Measham & Brain, 2005). We live in a consumer society, within which the phenomena of night-time economies has arisen. This night-time economy creates and facilitates excessive consumption which leads to intoxication. Late night bars are now “recreational spaces” for young adults, and although this is a popular way of socialising, it often creates problems of public intoxication, violence, accident and injury (Measham & Brain, 2005, p. 276).

Despite an increased acceptance of public intoxication, there are certain social constraints which regulate alcohol consumption and determine the boundaries of what is acceptable drinking. Consumption is bounded in many ways, from formal policing to social marginalisation, and as a result people conform to socially prescribed drinking practices (Measham & Brain, 2005). For this reason many ‘experienced’ drinkers exercise control over their consumption, and this is achieved in well-practiced and purposeful ways. Consumers decide when, where and how to drink, often choosing to indulge in heavy drinking, or what has been termed ‘calculated hedonism’ (Measham & Brain, 2005;

Szmigin et al., 2008). Although people enjoy 'letting go' when drinking, this is often managed carefully over the course of an evening, and on successful occasions a "controlled loss of control" is achieved (Measham, 2002). This behaviour has been described as "hedonistic yet bounded", as it functions within certain social constraints around public intoxication (Measham & Brain, 2005, p. 274).

Alcohol marketing also seduces the consumer and works to promote and maintain the culture of intoxication (Measham & Brain, 2005; O'Malley & Valverde, 2004). Increased competition between international companies which own alcohol labels and distributions has driven down the prices of wine and beer sold in supermarkets and liquor stores (Rankine et al., 2013). These discounts by large retailers have led to increases in drinking at home, or what is often labelled 'preloading' (NZ Law Commission, 2010), and now 70% of drinking takes place in people's houses (Collie, 2011). Messages sent to consumers through alcohol marketing promote drinking as a normal part of social life (Bancroft, 2012). Women are often targeted in campaigns which have developed 'feminine' alcohol products and female friendly pubs, bars and clubs. Such advertisements create the idea that only a small minority of drinkers experience alcohol problems and that those who do not participate in drinking activities are 'weird' (Bancroft, 2012). This increases the importance of alcohol in women's social lives and contributes to feelings of discomfort and isolation when choosing not to drink (Bancroft, 2012). Efforts of health promoters to reduce alcohol intake and change drinking practices are at odds with the interests of large scale companies who aim to increase sales (Babor, 2010). Alongside an increased acceptability of public drinking leading to the creation of night-time economies, and strategic marketing by alcohol companies, there are other contextual reasons for the culture of intoxication. In the next section I examine social factors that influence participation in the culture of intoxication.

## **Drinking to Intoxication as a Social Activity**

Consuming alcohol is a social activity and 92% of New Zealanders who drink, do so with other people (ALAC, 2012). For young people, heavy drinking is almost always done with friends in a social context (Borlagdan et al., 2010; Hutton et al., 2013; Seaman & Ikegwuonu, 2011). People of all ages drink to network, catch up with friends and be socially involved (ALAC, 2012), which also provides a sense of belonging and inclusion in social groups (Borlagdan et al., 2010; Sheehan & Ridge, 2001). Alcohol is often referred to as a social lubricant, as it allows people to be less inhibited and more able to have conversations, particularly with strangers (Borlagdan et al., 2010). In a study by Lyons and Willott (2008), young men and women described drinking as 'what you do' as a Kiwi. They drew on discourses of drinking as 'social lubricant' and 'fun' to talk about the social aspect of drinking, and emphasised the naturalness of getting drunk with friends.

A recent study of friendship groups in New Zealand found that for young people, the social aspect of drinking was so important that bad experiences were minimized and justified by good social experiences (Niland et al., 2013). Drinking was constructed as inherently social, rather than individual, and friendship was central to its enjoyment. Alcohol was considered an addition to the pleasure of socialising with friends, and a shared 'buzz' was the goal of having a good time together. Drinking with friends before going out, or preloading, is understood as an important ritual for achieving an equal state of drunkenness with friends and for building group cohesion (Bancroft, 2012). In a UK study focussed on pre-drinking, students described drinking as a relationship-based, group activity (Bancroft, 2012). Preloading most often took place in a familiar, comfortable environment in which students established trust with one another before embarking on the club scene. This increased the closeness of the group and limited the vulnerability that is experienced due to increased social surveillance in bars and clubs (Bancroft, 2012).

Engaging in the activity of drinking itself is not the only social aspect, but talking about drinking also plays a central role in the social world, particularly

for young people (Banister & Piacenitini, 2008; Griffin et al., 2009). Stories of drunkenness provide a source of entertainment amongst friends and can be used as material for further socialising and inclusion into groups (Griffin et al., 2009). Communicating these shared experiences has an inclusive function for those who were involved in the fun, and an exclusive and alienating function for those who were not (Banister & Piacenitini, 2008). Facebook provides a useful space for this reminiscing, especially for young women, and nights out can be documented for the sharing of good times and memories (Brown & Gregg, 2012; Niland, Lyons, Goodwin, & Hutton, 2014). These narratives do not only take place after a drinking occasion, but the planning and preparation of such events also provide opportunities for socialising and communication (Borlagdan et al., 2010). Gender is an inherently important part of socialising, and this plays a crucial role in how people of all ages experience drinking. The next section traces research into the gendered experiences that take place within social relationships and drinking practices.

### **The Gendered Culture of Intoxication**

Drinking is highly social, and is also a highly gendered activity (Lyons, 2009). In industrial societies beer and labour were integrally linked and drinking was a celebration of community, masculinity and work (Coffield & Gofton, 1994). Pub drinking was an apprenticeship for young men, which reflected the industrial world they worked in (Coffield & Gofton, 1994). This has changed remarkably as now public drinking is an identity marker for both men and women (Measham & Brain, 2005) and alcohol consumption is associated with letting loose, rewarding the self, celebrating and unwinding (ALAC, 2012).

Until the 1960's in New Zealand, alcohol was mostly consumed by men and this took place in hotels which excluded women (McEwan, Campbell, Lyons, & Swain, 2013; McEwan et al., 2010). New Zealand's national liquor law changes in 1967 which extended the 6 o'clock closing of bars to 10 o'clock allowed the growth of licensed venues and, in turn, created easier access to alcohol (Stewart, 1997). Drinking to intoxication during this time had a strong social

stigma, and although men were expected to drink heavily, it was not socially acceptable to display drunken behaviour (McEwan et al., 2010). A true sign of mature drinking was being able to 'hold' your beer (Hutchins, 2009), an expectation which has carried through to recent times, and is a marker of masculinity (Campbell, 2000). Conversely, in 2012 more than a quarter of New Zealanders over the age of 18 agreed with the statement that it is "okay to get drunk as long as it is not every day" (ALAC, 2012). There is now very little shame associated with public drunkenness in New Zealand (McEwan et al., 2010), a significant difference to what was socially acceptable 40 years ago.

Hegemonic masculinity is the term used to describe culturally specific ideal masculinities (Connell & Messerschmidt, 2005). Men are socialised in relation to the dominant definition of masculinity, which works to subordinate femininity and other forms of masculinity (Lyons, 2009). Drinking has long been interlinked with masculinity, and certain drinking practices can create, reinforce or challenge dominant gender systems (Peralta, 2007). Men perform particular masculinities through drinking, the most dominant form particularly relating to the ability to hold large amounts of alcohol and to enjoy heavy drinking (Peralta, 2007). The ideal male body is strong, powerful and can endure hardship, and this is demonstrated through holding one's liquor (Peralta, 2007). Campbell (2000) found that in New Zealand pubs, control was crucial to the public display of masculinity. Men positioned highest in the social hierarchy were those who were able to control their alertness, conversation, bladder and motor coordination whilst consuming large amounts of beer. Similarly, in a study of college men in England, male participants considered drinking large amounts of alcohol as the primary criterion for being a 'lad', and this was most likely to occur within sporting groups (Dempster, 2011). Heavy drinking was integral to the men's understanding of masculinity, and was used as a tool for demonstrating laddishness and being included in male peer groups (Dempster, 2011).

## **Why Focus on Young Women?**

Although drinking alcohol has traditionally been aligned with masculinity, heavy drinking is being undertaken increasingly by young women as well as men (de Visser & McDonnell, 2012; Rankine et al., 2013). This increase has been accompanied by a moral panic about girls and women drinking and regularly receives negative media attention (Cullen, 2011). The term 'ladette' is often used in the UK media to negatively portray modern girls who engage in hedonistic drinking behaviour. Ladettes are presented as rejecting the caring roles that are aligned with traditional femininity and disrupting the gender order (Jackson & Tinkler, 2007). Discourses around alcohol and gender work to enforce drinking as a male activity, and constructions of femininity as motherly and caring lead to the scrutiny of female alcohol consumption (Day, 2004).

In New Zealand, women increased the quantities they consumed in one session significantly from 1995 to 2004 (Huckle et al., 2010). Women's drinking practices, and in turn, alcohol related problems, are now converging with men's (McPherson, Casswell, & Pledger, 2004), and the most recent Alcohol Monitor Survey found that 42% of 'binge' drinkers were women (ALAC, 2012). Women have been found to be regularly engaging in heavy drinking, beer drinking and public drinking with friends for enjoyment - all practices traditionally considered as displays of hegemonic masculinity (Lyons & Willott, 2008). Young New Zealand women tend to drink more than older women, and although the proportion of non-drinkers has risen in the past ten years, women who do drink are starting at a younger age (Rankine et al., 2013). They are drinking more in one session, consuming beverages with higher alcohol content, and drinking to intoxication more often (Fergusson & Boden, 2011; Rankine et al., 2013). The number of women drinking to get drunk in a week has increased, and this is most common among women aged 18-24 (McEwan et al., 2010).

Both young women and young men are now actively involved in drinking practices which regularly lead to intoxication and this is viewed as fun,

pleasurable and being sociable (Griffin et al., 2009; Guise & Gill, 2007; Lyons & Willott, 2008; McCreanor et al., 2013; Szmigin et al., 2008). Research has demonstrated that alcohol consumption is a site for performing and producing identities (Willott & Lyons, 2012), particularly around gender and the reworking of femininities (Lyons & Willott, 2008; Rolfe, Orford, & Dalton, 2009). Rúdólfsdóttir and Morgan (2009) emphasised the important role that drinking plays in young women's social lives in the UK, how it assists with social confidence, as well as shaping constructions of their female 'self'. In their study, alcohol had an important role in performances of femininity, and made women appear more attractive and sophisticated. Both how it was consumed and what was consumed signified who someone was and their social position, in the same way that clothing and fashion can. In another UK study, teenage girls negotiated different versions of femininity through drinking narratives (Cullen, 2011). By using heteronormative discourses they were able to legitimise their alcohol consumption by avoiding the more masculine 'ladette' versions of femininity that are popularised in the media (Cullen, 2011). Women have also been shown to use a process of 'othering' when speaking about girls or women from lower classes who display drunkenness, to maintain a respectable reputation for themselves (Griffin et al., 2013). By labelling other women as 'scum' or 'chavvy' for displaying unfeminine drinking, women distanced themselves from more masculine and troubling identities (Griffin et al., 2013; Rúdólfsdóttir & Morgan, 2009).

Although women's drinking is converging with men's, the rules which shape their behaviour are different. Lyons (2009) identified boundaries to women's heavy drinking and found that compared to men, women tend to show more self-restraint and limit what they drink. It is less acceptable for women to lose control, or for older women to drink to excess, and although drinking 'like a guy' is celebrated in some contexts, this asserts a women's heterosexuality as it often achieves attention from men (Young, Morales, McCabe, Boyd, & D'Arcy, 2005). In a study conducted in Auckland, New Zealand, women feminised their drinking behaviours by drinking wine and cocktails out of certain glasses and by looking out for each other (Lyons & Willott, 2008). They described their public drinking by drawing on traditional femininity discourses which worked

in binary with the masculinity discourses such as 'in control and responsible' rather than 'out of control and irresponsible'. Another New Zealand study found that young women deliberately restrained their drinking through fashion constraints to appear controlled and feminine (Hutton et al., 2013). For example, high heels were worn to constrict women from getting too drunk and being unable to walk. These findings suggest that blanket approaches to changing drinking behaviour may not be suitable; as there are different rules and understandings which underlie men's and women's drinking practices.

Female drunkenness still has a stigma attached to it despite the increases in heavy drinking, and this discourages women from discussing or seeking help for problem drinking (Rankine et al., 2013). Alcohol related problems are considered unfeminine, leading to feelings of shame which hinder treatment seeking (Jakobsson, Hensing, & Spak, 2008). This is worrying as risks associated with drinking for women are numerous, and 30% of women over 18 said they had experienced problems from their own drinking in a 2007 New Zealand study (Meiklejohn, Connor, & Kypri, 2012). Potential alcohol-related problems can affect many aspects of women's lives such as sexual and domestic violence, injuries from traffic crashes, assaults and fighting, family breakdowns, compromised parenting, breast cancer, FASD, increased social inequities, alcohol poisoning, unplanned pregnancies, STIs, self-harm and suicide, brain damage, inability to work and financial problems (Rankine et al., 2013).

Although women's drinking has increased substantially, the amount women drink is still only one third of what men drink, causing a lack of attention to women's increased drinking (Rankine et al., 2013). Until the late 1990's, alcohol researchers and policy makers only studied men, and did not take gender into account. When research into women's drinking did begin, it was mostly quantitative, which often portrays groups as homogenous and ignores the diversity of SES, culture and education (Sheehan & Ridge, 2001). Young women are exploring new versions of femininity and social behaviours which are acceptable (Rúðólfsdóttir & Morgan, 2009), and therefore, may be more open to positive health interventions, but it is important to investigate what

would be effective from their perspectives. There has been minimal theorising from an embodied perspective, some research has explored pleasure and drinking but relatively few have examined gender, embodiment and drinking. One way we might be able to help develop understandings of drinking practices that young women are engaging in is to look at embodied pleasures, so the next chapter explores the notion of embodiment in relation to alcohol consumption practices.

## **Chapter 2: Drinking as an Embodied Experience**

---

In the first chapter I outlined reasons for the culture of intoxication and described it as a social and gendered activity. I argued that health promotion initiatives need to develop a social approach to understanding drinking. Successful health promotion campaigns also need to consider the embodied experience of drinking, and in this chapter I outline this conceptual framework and why it could be highly valuable. I describe how embodiment theory has been used in psychology and how this could be useful for research on drinking practices and alcohol consumption. This leads to an explanation of the gendered aspects of embodied drinking and why it is important and timely to examine young women's embodied experiences specifically. I then state the research aims of the current study.

### **Embodiment Theory in Psychology**

The notion of embodiment describes how people know and experience the world through their bodies (Watson, 2000; Wilde, 1999). It focuses on the corporeal aspects of experience and is closely linked to the philosophy of Merleau-Ponty who posited that not only do we have bodies, we are bodies (Matthews, 2002; Stephens, 2008). Traditional psychology has a "tendency to peel experience away from its lived, embodied medium of expression", but the subjective, physical body is bound up in social processes, and this needs to be recognized (Brown, Cromby, Harper, Johnson, & Reavey, 2011, p. 496).

Merleau-Ponty challenged the traditional philosophy of psychology which splits the body and the mind, instead arguing that our experiences of the world are grounded in our physical bodies, and also limited to these (MacLachlan, 2004). He distinguished between the objective, physiological body and the subjectively experienced body, the latter which he viewed as a tool for being-in-the-world (Merleau-Ponty, 1996). As subjective bodies our experiences of the world are created from the physical form we take, and therefore being a subject in the world must be embodied (MacLachlan, 2004). Our being-in the world is

constituted through our personal experiences; hence we are constrained by our embodied form. We can only know through our bodies, and consequently our subjectivity is created from this perspective. This view of humans as beings-in-the-world also relates to Husserl's phenomenological philosophy which understands the everyday world as a lived experience, and suggests the two cannot be separated (Crotty, 1998; Stephens, 2008). Phenomenology understands the social and the biological as inseparable; it is a return to the body. From the phenomenological perspective lived experience is valued as knowledge, and also as historically and culturally mediated (Solomon, 2006).

Embodiment is a multi-disciplinary term which has been used differently across many fields of research. Within psychology, embodiment is often described in relation to cognition, in which the body is viewed as an object or machine that is part of a mind-body dualism (Kiverstein, 2012; Sampson, 1996). This emphasis on cognition focuses on motor and perceptual systems, rather than the lived experience explored in phenomenological research. From Merleau-Ponty's perspective, the body is intertwined with identity and culture, and hence needs to be considered in research on social practices. However, research into the corporeal sensations of the socially constructed body are few (Cromby, 2004), and often ignore positive embodied pleasures, instead focussing on illness and disability (Monaghan, 2001). Lived bodies experience desire, pleasure and enjoyment in everyday life, and therefore theorising about any health behaviours should take physical bodies into account (Lyons, 2009). These conceptualisations could usefully be employed to theorise drinking as an embodied pleasure, to better understand the lived experience of drinking, and these understandings could shape health promotion campaigns to reduce heavy drinking.

### **Embodied Drinking**

Theorising embodiment is fundamental to understanding the culture of intoxication, as it considers the corporeal, emotional and social aspects of drinking practices which are central to the maintenance of this behaviour

(Lyons, Emslie, & Hunt, 2014). This approach to theorising drinking practices incorporates emotions, feelings and pleasures as central to the social experience. It allows us to access the taken-for-granted and see how drunkenness is bound up with sensations, acts and performance (Jayne et al., 2010). This framework also gives insight into the decision making aspects of drinking, and how bodily sensations inform how much people drink and acceptable ways of behaving (Lyons et al., 2014).

By exploring drinking as an embodied experience, we can better understand why certain decisions and behaviours take place, and the meanings these have for people consuming alcohol. We can also examine the embodied gender relations that accompany drinking and how alcohol alters feelings (for example, confidence and aggression, Leyshon, 2008). The embodied experience is a highly relevant aspect of consuming alcohol and making decisions about slowing or stopping consumption during the course of a night out. As discussed earlier, many drinkers exercise a controlled loss of control over their drinking. This was discussed in relation to social constraints, in which people control their intoxication levels to decrease social marginalisation or getting in trouble with the police. Measham and Brain (2005) further explored the reasons for controlled loss of control and found that people also controlled their drinking for safety reasons and to ensure that they were sober enough to get home. Health was another reason for controlling drinking, and people also limited consumption to improve sporting performance or to minimize the hangover the next day. People also used strategies such as withdrawing certain amounts of cash before a night out to limit their spending on alcohol and thus reduce consumption.

It is also important to explore the corporeal signals that are used to stop or slow drinking during the course of a night out and how bodily sensations may be used by people as a signal. Decisions about what, when and how to drink (including when to stop), are embodied and gendered decisions (Lyons et al., 2014). An Australian study found that young people pursued a particular 'state of mind' when drinking (Borlagdan et al., 2010). Maintaining this ideal level of drunkenness throughout the night was a highly valued goal of the evening for

these young people (Borlagdan et al., 2010). This research is useful for enhancing our understandings about the embodied experience that takes place within social relationships and drinking practices. However, very little research has explored the processes through which embodied experiences influence slowing down or stopping drinking, and the role of physical bodies in this decision making. Conceptualising drinking in this way could offer valuable insight into the maintenance of this behaviour. One study has explored embodied drinking with middle-aged adults in Glasgow recently, and is discussed below.

In their study, Lyons and colleagues (2014) examined the material limits to alcohol consumption, how bodies are affected and the meanings that these effects have for middle-aged adults. They examined the subjective embodied experience of drinking and factors that influenced participant's reducing their intake. The mid-life adults in the study demonstrated control over their drinking, but still often drank to excess. They described a 'point' which they reached in which they were 'in the zone', but knew that passing this point would have negative consequences (such as a hangover, feeling ill, not being able to fulfil responsibilities). This was described as the point at which they stopped or slowed their drinking, and as something that they accomplished through experienced knowledge of their own physical bodies. Particular physical signs led people to change the pace of their drinking or stop for the night, and this depended on where they felt they were placed in relation to the ideal level of intoxication. The middle aged men and women in this study considered themselves experienced drinkers who know their bodies and how to maintain desired levels of drunkenness. This perception of the self worked to position the drinkers outside of the 'problematic' category, and therefore enabled them to ignore health messages. Young women in Scotland have also been shown to position themselves in contrast to 'serious' or 'anti-social' drinking (Guise & Gill, 2007), which is useful for health promoters to know, as it could help inform the framing of future messages.

Research similar to Lyons and colleagues that focusses on younger adults is necessary, as age influences the ways in which health is constructed and

explained (Charles & Walters, 1998). Drinking practices and the embodied experiences tied up in these may be very different for young people. Lyons and colleagues (2014) argued that in order to advance an understanding of drinking practices, physical and lived bodies must be seriously considered. An important aspect of the embodied experience of drinking is pleasure. People consume alcohol for pleasure, they pursue heightened sensory joys, and experience euphoria from intoxication (Fry, 2011). Seeking and experiencing pleasure is central to the maintenance of certain drinking practices, and understanding these pleasures could broaden our understanding of drinking practices.

### *Pleasure*

Pleasure is not taken into account in many studies about drinking, and this reflects a wider lack of consideration of pleasure, as the motive for consumption is often silenced by governmental discourses (O'Malley & Valverde, 2004). Similarly to safe sex discourses which ignore the fact that sex can be pleasurable, heavy drinking is not examined as a pursuit of pleasure or happiness. The notion of hedonism conflicts with discourses of responsibility, being rational and reasonable, and therefore drinking is not often viewed as the pursuit of pleasure, but as relief from other aspects of life. However, when responsibilities have been taken care of, luxuries can be afforded and pleasure can then be associated with a form of 'rational' and 'responsible' enjoyment (O'Malley & Valverde, 2004).

In a study of the lived experience of drug use (other than alcohol), people often had difficulty articulating the pleasures they experienced from taking drugs (Duff, 2008). They did, however, describe the feeling of having a deeper connection to their bodies and experiencing their own bodies in new ways. Recreational drug users expressed an enjoyment in experiencing new corporeal sensations, and the pleasures associated with drugs came from the types of experiences they facilitated (such as dancing at a rave), as well as the ways they made people feel. New versions of the self and subjectivity were made possible

through the social and embodied practices involved in drug taking. The experience of otherness or difference from what is known and usually experienced was described as exciting and pleasurable by most of the participants (Duff, 2008).

Sharing these bodily experiences with others is important, and sometimes central to, the enjoyment of such moments. Alcohol is often referred to as a facilitator of togetherness, and shared experiences give people a sense of closeness and community (Jayne et al., 2010). Having a night out is experienced as a positive embodied and affective experience in which social boundaries can be crossed and people can interact with friends as well as strangers (Jayne et al., 2010; Szmigin et al., 2008). This sense of cohesiveness and intimacy is so alluring that unpleasant aspects of consumption can sometimes take a backseat. Drinking to the point of vomiting and passing out is not understood as pleasurable, but people still engage in these unpleasant embodied experiences for social and storytelling purposes (Griffin et al., 2009). For example, drinking was experienced as “bad but good overall” by some young New Zealanders, who described keeping a balance between good and bad experiences (Niland et al., 2013, p. 534). Negative experiences were justified by ‘fun’ times, and although things often went wrong during a drinking session, the unpleasant aspects were minimized by overall ‘good’ experiences. Similarly, in Bancroft’s (2012) UK study, students experienced drinking as a dualistic pleasure. Drinking with friends and going out to the clubs was described as both exhilarating and repulsing. There was an element of disgust in the student’s accounts of alcohol consumption, especially when a night out turned bad. Young women in this study described the club as a distasteful environment where unwanted sexual advances from men were normalised and acceptable. Despite the unpleasant and negative effects that these students experienced from drinking, they were described as short term, minor consequences. The young people justified unpleasant experiences as the cost of having fun with friends, and contrasted themselves with problematic drinking patterns. Experiencing pleasure and drinking as a lived body is highly social, and therefore also gendered. In the following section I will discuss the

gendered differences in embodied drinking, and why it is important to explore young women's drinking separately to men's.

### *Gendered and Embodied Drinking*

Masculinities and femininities are embodied differently. Men's and women's bodies are not only biologically different, but the meanings they hold are different, as gender is performed through masculine and feminine bodies (Lyons, 2009). Ideal masculine bodies are understood to be hard, strong, dry and active, whereas feminine bodies are understood as the opposite; soft, weak, leaky, and passive (Lyons, 2009). It is important to consider young women separately to young men in regards to alcohol consumption, as their relationships to their bodies, gender expectations and drinking practices are different to males (Cullen, 2011; Lyons & Willott, 2008; Rolfe et al., 2009).

The social position of girls and young women is changing, and women are exploring drinking practices which were previously not acceptable for females (Rich & Evans, 2013). A study of heavily-drinking women showed alcohol consumption as a source of leisure and pleasure, which these women considered to be a reward (Rolfe et al., 2009). However, the new drinking practices women are undertaking have been surrounded by a moral panic about their bodies and lifestyles, and place pressure on young women to regulate their bodies (Rich & Evans, 2013). Alcohol consumption is embedded in masculine discourses, which positions women who drink heavily as problematic or pathological (Day, 2004). Female pleasure and indulgence is also often associated with negative discourses, as this is understood to be a male domain (Day, 2004). Understandings of women as motherly and nurturing further conflicts with acceptance of female pleasure, and causes women's drinking to become subject to scrutiny (Day, 2004). The notion of "ladettes" positions female drinkers in a masculine discourse and portrays excessive drinking behaviour as unruly and grotesque (Waitt, Jessop, & Gorman-Murray, 2011).

As a result, women have to manage conflicting expectations and norms when making decisions about what, when and how to drink (Bancroft, 2012). They are still creating and establishing their own 'rules' for drinking in public, and are exploring new versions of social behaviours which are acceptable (Rúdólfsdóttir & Morgan, 2009). During the course of a night out women actively negotiate their feminine identities within a myriad of available discourses. These decisions about drinking are closely interlinked with the performance of femininity and the embodied experience of drinking (Waitt et al., 2011). Therefore, theorising women's drinking through embodiment is crucial to understanding why young women are drinking so often and so heavily. An exploration into the corporeal aspects of alcohol consumption, including sensations and pleasures, may give insight into these practices. Lyons et al.'s (2014) study provides a very useful starting point for understanding the material limits of drinking, but we need to gain an understanding of young women's social relationships and drinking practices, and how this shapes their experiences of their feminine bodies.

### **Understanding Drinking as an Embodied Social Practice for Health Promotion**

Understanding the social nature of drinking is essential for implementing effective health promotion campaigns which could reduce the harm of heavy alcohol consumption. However, many harm reduction initiatives are built on blame, and only emphasise the negative outcomes of the culture of intoxication (McEwan et al., 2010). This type of approach has been ineffective as it fails to recognise the context and meanings involved in drinking and approaches drinking as an individual behaviour resulting from a rational decision (Lyons & Willott, 2008). Individualistic approaches to many health related issues have been unsuccessful and are criticised for conceptualising people as rational individuals rather than social beings (Lyons & Chamberlain, 2006). Drinking needs to be considered as not independent from social identities and relationships, but bound up in the social environment and the bodies in which we live (Lyons et al., 2014).

Health promotion campaigns will not be successful if they continue to conceptualise alcohol consumption as the result of rational decision making and ignore the pleasurable embodied experience of drinking. Understanding the important role that alcohol plays in social life, the physical sensations and joys felt in intoxication are vital to facilitating change and decreasing the amount people are drinking (Duff, 2008; Monaghan, 2001). Consuming alcohol has a meaningful role in friendships and closeness with others, and women make choices based around these meanings. Young people do not consider long term harm as an outcome of drinking, but instead their lived experience focuses on the embodied enjoyment and relationships associated with alcohol consumption (Sheehan & Ridge, 2001). It is therefore important and timely to understand how these decisions are made and the role that embodied experience plays in making such decisions. Health promotion messages need to be structured in ways that understand the sociability of young women's drinking practices and acknowledge the pleasurable embodied aspects of drinking in order to disrupt these harmful patterns.

## **Research Aims**

The current study aimed to understand drinking as a social practice, in which individual behaviour is fully intertwined with the social environment and the physical body. It aimed to explore the embodied and gendered experiences that take place for young women within social relationships and drinking practices to help further understand the young women's meanings of their drinking practices. This study also aimed to investigate the corporeal pleasures and sensations young women experience when they are consuming alcohol and becoming drunk, to help understand how these encourage heavy drinking. Building from Lyons et al.'s (2014) findings related to the 'point' at which people cease drinking, this research aimed to explore the bodily processes and the material limits that young women considered to be involved in their continuing alcohol consumption during a night out. The research aimed to assist with informing public health understandings of alcohol consumption for this group. Ultimately the study sought to identify possible effective health

**promotion approaches that might contribute to decreasing alcohol consumption in young women.**

## **Chapter 3: Methodology**

---

In this chapter I explain the research process. Firstly I describe the epistemological perspective from which I have based this research, and how this lead to a particular research design. Next I discuss the recruitment process and describe the young women who participated in the research. I then describe the processes of data collection and the ethical considerations which were involved here. Following this, I explain how the data was analysed and the steps involved in producing the findings. I conclude with some reflexive considerations of my own position and role in this project.

### **Epistemological Perspective**

Understanding the lived experience of alcohol consumption as a meaningful phenomenon requires an approach which views human experience and meaning as valid information. It also requires an approach which can give the researcher an insider's view of the world as it is experienced by the insiders themselves. The phenomenological perspective allows us to do just this. It allows us to make sense of the world through immediate and lived experience (Crotty, 1998), and is a useful framework for this study because the meanings and interpretations of drinking practices are the topic of interest.

Phenomenology posits that the object and subject cannot be separated, as consciousness is always conscious of something and objects do not exist without subjects to perceive them (Crotty, 1998). Phenomenology requires us to make sense of phenomena in our world directly and immediately, and examines what we experience before we apply interpretation and meaning (Crotty, 1998). It requires us to break away from our usual preconceptions and culturally ascribed meanings of phenomena and experience them as the 'things themselves' (Crotty, 1998). The interest of phenomenology to explore the meaning each individual ascribes to phenomena is a useful framework for the aim of this study. With this approach to knowledge, I was able to explore the

experiences which take place for young women within social relationships and drinking practices.

The study was also informed by a social constructionist perspective, which focuses its attention on how people account for the world and come to understand it (Gergen, 1985). This approach to knowledge production claims that meanings and knowledge about the world exist as a result of human construction (Crotty, 1998). This view is based on anti-essentialism and anti-realism; there is no pre-given or determined nature to the world and our knowledge is not derived from reality (Burr, 2003). From this perspective meanings and knowledge are socially produced rather than coming from within an individual (Burr, 1995). All knowledge is created by humans, and does not exist independently of human and social interaction with the natural world. Therefore, people are context-bound and they make meanings from social interaction (Parker, 1998).

The social constructionist epistemology challenges the traditional view that scientific knowledge is derived from unbiased observations of the world, and instead assumes that knowledge is created through social processes (Burr, 2003). Our understandings and representations are also historically and culturally contingent, and can change over time (Gergen, 1999; Jørgensen & Phillips, 2002). Therefore social processes involved in constructing meanings also work to maintain our understandings about particular phenomena or to change them (Gergen, 1985). Performing research with a social constructionist perspective is inherently different to empirical science as it enquires into meaning and action and is sensitive to the contextual nature of these (Misra, 1993). It does not focus on motivation or knowledge that resides within an individual, but rather theorises the sociocultural contexts which enable the individual to make meanings (Braun & Clarke, 2006).

In light of these two perspectives, Cromby's (2004) notion of embodied subjectivity is important to draw on for this research. Cromby (2005) argues that we cannot theorise as if the body gains its meaning purely through social construction, rather, bodies are the core of our knowing and fully contribute to

the meanings we make. In order to take the materiality of lived experience into account, the corporeal body must be recognised and understood as socially and historically contingent. Theorising embodied subjectivity is necessary, as “subjectivity itself is always already embodied” (Cromby, 2005, p. 4). However, social constructionism often fails to theorise subjectivity, disregarding the lived and experienced body.

Our embodiment is socially produced. Our understandings and meanings of our bodies are not given, but are learnt. For example, women display embodied forms of femininity by taking up less space than men; sitting with crossed legs and walking with their arms close to their sides. From a young age girls throw a ball differently to boys, and this is not because their arms are weaker but because their gendered upbringing teaches them this (Young, 1990). Embodiment is not merely visible in gestures and mannerisms, it also involves feelings (such as whistling a happy tune or stomping angrily). Therefore, our biological and physical bodies must influence our psychology and emotions because they are the basis of who we are. It is at the intersection of embodiment and the social world that embodied subjectivity takes place (Lyons & Cromby, 2010).

## **Design**

This study sought to gain in depth insight into young women’s meanings of their drinking practices, and employed a focus group discussion design. This design allowed me to gather a rich data set from a small number of participants by asking them to recall their sensations and feelings experienced while drinking. Group discussions reflect an everyday form of communication in which conversation can be free flowing and can therefore tell us more than individual interviews about what people experience (Kitzinger, 1995). They are also useful in creating a natural environment for participants and producing more data than individual interviews (Litosseliti, 2003). With the use of existing friendship groups, I was able to explore how subjective embodied experiences are linked with being social and maintaining friendships. This

encouraged the sharing of experiences from times when they had been drinking together, and provided insight into shared understandings and meanings. As drinking is a shared social practice, it was appropriate that the participants were able to draw on these shared experiences, and using friendship discussion groups was the most useful way of gaining insight into this.

Safe, familiar environments encourage rapport between group members (Hyde, Howlett, Brady, & Drennan, 2005), and can also encourage disclosure of information (Barbour & Kitzinger, 1999). Using friendship groups and conducting the discussions in a group member's home reflected a familiar and safe environment for open discussion and rich data. Furthermore, many of the stories that were shared were experienced as a group, making it less embarrassing for participants to discuss than if they were in a one-on-one interview. The discussions were semi-structured to encourage natural conversation that related to the research questions. Semi-structured discussions unfold naturally and allow the researcher to keep the participants on topic while also allowing the discussion to take unexpected angles and turns (Longhurst, 2003).

### **Recruitment of Participants**

The study took place in Wellington and Dunedin, New Zealand, and involved friendship groups of women aged between 18 and 26 years old. It was required that participants considered themselves regular drinkers and were able to speak fluent English, due to the conversational aspect of the study. Participants were recruited through my own personal networks using convenience sampling and snowballing techniques. It was desirable that the participants varied in socio-economic status, ethnicity and education backgrounds to gather rich and varied data; therefore I approached a wide range of people and places to achieve this. I asked work colleagues and friends to identify any young women who may be interested in taking part, approached the Marae at the Wellington Massey University campus, and a local Maori community centre.

When a point of contact had been made with someone who was interested, they were asked to invite between three and four female friends of a similar age who regularly drink alcohol, to participate. Some of these points of contact were acquaintances of mine (e.g. younger sisters of my friends), but none were close friends. I met the remainder of the friendship group members on the day of the discussion groups. In two of the groups I had not met any of the members before, but was put in contact with them through work colleagues and friends. All of the members within each group had been friends with each other since high school, which was not a criteria for recruitment but an added bonus because they had spent a lot of time together and knew each other very well.

Recruitment continued while some group discussions had already occurred because the focus groups often took place within a few days of contact being made. When five focus groups had been arranged, recruitment ceased. Participants were 23 young heterosexual women of New Zealand European ethnicity. Structure of the groups, and ages and occupations of the participants can be seen in Table 1 below.

Table 1

*Description of discussion group participants*

Group	Members	Ages	Occupation
1	3	26	Lawyer, Accountant, University Student
2	4	19-20	University Students
3	4	24	Travel Agents, Legal Secretary, Nurse
4	4	22-23	Vet Nurse, Teachers College Student, Project Coordinator, Hairdresser
5	4	20-22	University Students

## **Discussion Group Processes**

Group discussions took place in locations which were convenient for the participants, and this was usually in the home of one of the group members. Four of the discussion groups were in one of the participant's homes, and one of them was at my house. Participants were sent an information sheet (see Appendix A) from me via email, prior to the discussions. The information sheet informed them that they would be audio and video taped, the discussions were confidential and that they could withdraw from the study at any time up until the end of the discussion. Before the discussions commenced I reminded the participants that they would be recorded, the discussion was confidential and they could withdraw, to which all of the participants agreed and gave written informed consent (see Appendix B). Although I did not organise specific seating arrangements, all of the groups sat on couches around a coffee table with food and refreshments, which created a relaxed atmosphere. The discussions began with the participants being offered something to eat and drink, which I had provided, and these were consumed throughout the discussion. I turned on the audio and video recorders during this time and informed the participants that the video data was solely to aid transcription. The audio recorder was placed on the table in the middle of the group and the video recorder was placed further away from the group on any ledge in the room that was at an appropriate level to capture the participants sitting down. The participants were not asked to orient themselves towards the camera, or to speak towards the audio recorder.

As the discussion groups were social interactions themselves, I was careful not to impose an 'expert' position in the groups. I spoke as little as possible during the discussions, aiming to understand the subjective experience of the participants and the constructions of meaning that shaped these. To facilitate discussion I used open questions to encourage participants to talk about their drinking experiences. I asked the groups about their alcohol consumption; how it affects their bodies, how they know when they are drunk and the physical sensations involved in drinking. Following this, I asked them what information is used when deciding to stop drinking and how they make these decisions. I

also asked about their socialising, the involvement of alcohol in their social life and the differences between men and women's drinking. The discussion schedule that was used as a guide is shown in Appendix C. To encourage a natural flow of conversation, not all questions were asked to all of the groups, depending on what was relevant to the conversation. In many cases the question topics were covered without me asking, in which case I skipped certain questions.

The groups were told in the information sheet and reminded prior to discussion that I estimated that the discussion would last for around one hour. There was no pressure to continue talking for a specific amount of time, and as a result the discussions lasted between 40 and 90 minutes. Conversation flowed differently in all of the groups. The discussion which was the longest was the group of 26 year olds, who spoke very freely and gave detailed accounts of their experiences with very little encouragement from me. The youngest group also shared many stories and the discussion flowed very easily. The group which lasted the least amount of time were more reserved in their discussion and often gave very short answers, requiring me to use many regular prompts and questions. I concluded the group discussions by asking the participants if they had anything more that they would like to add. The discussions continued until everybody agreed that we had covered everything, and following this I turned off the voice recorder and video camera. Each of the participants were given a \$20 supermarket voucher to thank them for their time and cover any travel costs incurred. I gave each participant a sheet with a list of available support services related to drinking issues and made sure this was done in a casual manner to avoid embarrassment for anyone.

### **Ethical considerations**

This was a minimal risk study in which no physical or other harm came to the participants. The research followed the principles of the Massey University Code of Ethical Conduct for Research, Teaching and Evaluations Involving Human Participants. It also upheld the Treaty of Waitangi, which is recognised

as the basis of respect between Maori and Non-Maori in New Zealand. The study respected the principles implicit in the Treaty of Waitangi, and the concepts of protection, participation and partnership. During the recruitment process for this study I sought to include participants from any class, culture and religious backgrounds, and invited any Maori who were interested during the recruitment process to participate. Ethnicity information was collected to describe the sample of participants, but was not included in any data analysis. Prior to the study commencing I sought Maori cultural advice from a staff member in the School of Psychology at Massey University to discuss any issues which may have been raised and to respect the dignity and needs of Maori. We discussed possible bicultural issues which may have affected the interests of Maori participants and the possibility of different life realities for Maori women in relation to whanau and times of gathering. Although I was unable to recruit any Maori participants, I demonstrated sensitivity to diversity and different needs of my participants.

I informed the participants of their right to confidentiality and anonymity prior to each discussion group commencing. Participants were also informed that they had the right to withdraw from the study up until the end of the group discussion, without explanation. The groups were informed of their right to privacy regarding the use of transcripts and personal information, and were given the opportunity to choose their own pseudonyms. Most of the participants opted for me to select a pseudonym on their behalf. The participants were informed in the information sheet and at the end of each group discussion that they were welcome to request a summary of the research findings on completion of the study. None of the participants have requested a summary yet. Written informed consent was obtained from each of the participants prior to the discussions beginning. Personal information was not disclosed to any third party during or after this study. All databases which hold consent forms and interview transcripts are secure and password protected. Pseudonyms have been used throughout the remaining process of the study and transcripts have had all identifying information such as ages and locations changed. No deception was used, and no conflict of interest for this study has been identified. All groups and participants were treated fairly and equally. To

protect participants' safety, I provided a list of available support services to all participants at the end of the group discussion. In the event that a participant became distressed while recalling events that occurred while intoxicated, I was prepared to remind the participants that they could withdraw from the discussion. Fortunately, none of the participants became distressed during the discussions or withdrew.

## **Analytic Approach**

Data for this study was written texts, which I transcribed directly from the audio and video tapes of the discussions. I transcribed the discussions using a computer program called 'Express Scribe' which allowed me to listen to the audio recordings and pause and rewind when necessary. I played the video recordings on the video recorder at the same time as the audio recordings to assist with identifying the speaker. The transcription notation I used accounted for overlapping talk, and I placed brackets where this occurred. I also noted any sounds that the participants made, such as laughter. To analyse the data I followed the steps of thematic analysis outlined by Braun and Clarke (2006). Thematic analysis identifies patterns of data and organises it into detailed themes. It is a flexible analytic technique which can be used with different theoretical frameworks and epistemologies. As stated earlier, this study was informed by phenomenological and social constructionist epistemologies. Phenomenology focuses on the lived experiences of people (Crotty, 1998), which is useful for understanding embodied experiences of drinking. Social constructionism claims that meanings and knowledge about the world exist as a result of human construction (Crotty, 1998). Working from these two perspectives, and their particular combination, using Cromby's 'embodied subjectivity' framework, I utilised thematic analysis to understand lived and embodied experiences of drinking, and the meanings these have for young women.

### *Identifying Patterns in the Data*

I started to become familiar with the data as I transcribed the audio recordings. When the data collection and transcription processes were complete, I read and reread the entire data set several times to thoroughly familiarise myself with it. During this stage I kept a notebook of observations and thoughts that came to mind as I reread the transcripts. The next phase involved systematically coding interesting features and patterns of the data, for which I followed Braun and Clarke's (2013) guidelines. Firstly, I hand-wrote code names alongside each line of speech on the transcripts, and then I put all of these codes in an excel spreadsheet and grouped them with sub codes. At this stage there were 20 codes and 180 sub codes. I then used 'Dedoose', an online qualitative analysis program to organise the codes and link specific excerpts with codes. During this phase I collapsed many of the codes together where I saw repetition, and regrouped them into a more manageable set. Using the online program I was able to assemble all of the excerpts within each code together, and read them as a group. I took note of patterns that I identified during this process, and possible conceptual frameworks for interpreting the data which related to my research questions.

### *Developing Themes*

I identified similarity and overlap between the codes and searched for central organising concepts which several codes related to. This was a time consuming and labour intensive task, as there were 250 pages of data (from the five transcripts, each around 50 pages long). Following Braun and Clarke's (2013) guidelines, I identified central organising concepts and developed these into candidate themes. Initially there were three central organising concepts but these were very broad and lacked coherence and boundaries. I identified the relationship and overlap between these concepts and developed them into six candidate themes. As I began working with the candidate themes I collapsed them together where overlap occurred and then defined four main themes, which I discuss in the following chapters.

## **Positioning the Researcher in this Research**

A central assumption of social constructionist and phenomenological perspectives is that research is a social interaction itself, and researchers are active participants in the construction of knowledge. It is therefore relevant that I acknowledge my own life experiences and be reflexive about the influence that these had on my production and interpretation of the data. Reflexivity assists in helping the reader understand my motivation and interest behind this research and making my interpretation valid.

As a 26 year old woman who grew up in Dunedin, a university town renowned for excessive student drinking, I have experienced first-hand the drinking culture of young people that raises concern in the media. Perhaps the most valuable aspect of my experience is having travelled extensively over the past few years and seeing how the New Zealand drinking culture differs from many other countries. With this experience, I have an in-depth understanding of young people's drinking culture in New Zealand as well as a critical outsider's perspective, which many of my participants did not have. I have been able to take a step back from understanding our drinking culture as 'normal', and to use my knowledge of health psychology to understand young New Zealanders' drinking as a highly gendered, socially bound practice. My interest in gender stems from my undergraduate studies, during which time I explored many fields of study that I thought were interesting, and found gender studies the most exciting. I have since had a keen interest in how gender relates to health psychology, and am drawn to research which examines how masculinities and femininities influence health. I am equally interested in men's and women's drinking practices, but given the current changing context of young women's drinking and my connection to this group, I chose to investigate women specifically.

I approached this project as a feminist, critical health psychologist with the aim of gaining better understanding and insight into the embodied and gendered experience of young women's drinking practices. My gender, age and background helped me build a rapport with the participants, and to feel

comfortable talking with the groups. The participants in one group were the same age as me, which may have helped them relate to me more, and could be why they spoke more freely than the other groups. I purposely refrained from sharing any of my own personal experiences in the discussions, and I believe that this combined with my question asking gave the impression that I was unfamiliar with the types of drinking practices we were discussing. As a result, the participants were 'experts' on the topic, and this encouraged them to explain their stories in more detail. My aim for this research was not to point blame or pass judgement on any drinking behaviour, or to put a stop to alcohol consumption. Rather, I understand that although heavy drinking can cause serious health problems, it is an inherently social activity which brings about many positive social and embodied pleasures. Therefore, my goal was to understand this better and encourage safer drinking practices by decreasing the amount or changing the way in which young women are drinking.

## **Chapter 4: Contradictions in Talk about Drinking**

---

During the analysis a number of contradictions appeared in the women's talk that seemed to be analytically significant because they were so pervasive, so I focused on these. The young women's accounts of their drinking were complex and contradictory. There were many inconsistencies in how drinking practices were talked about, and the rules which shape the women's drinking behaviour were precarious. Although women can take up numerous forms of femininity, their talk suggested that there is a fine line between what is considered acceptable and unacceptable ways of behaving for women while out drinking alcohol. Women have to carefully manage this by monitoring their own and each other's behaviour. In examining the embodied and gendered experiences of drinking, I identified two major contradictions in how young women make meaning of the drinking experience in their discussion group talk, which I discuss in this chapter. I also identified two balancing acts that the women used to manage these contradictions, and these are discussed in the next chapter. The two major contradictions are: Letting go, forgetting insecurities versus drinking to be attractive, and shared buzz versus individual embodied consequences.

### **Letting go, forgetting insecurities versus drinking to be attractive**

The women talked about drinking as an escape from normal, everyday life and the usual expected pressures involved in femininity. They discussed feeling less constrained when they are drunk, forgetting about their appearance and most importantly, what other people think of them. Being drunk allowed the women to break normal social and bodily boundaries, for example, enabling them to dance freely without feeling judged. It also gave them confidence to meet new people and have conversations they normally would not have. However, this was contradicted by their talk that gaining confidence from drinking makes them more attractive to others. The women placed a strong emphasis on

heterosexual attractiveness and how confidence assists with talking to and getting close to men. Below I discuss this contradiction firstly by showing how the young women described drinking as key to letting go, not worrying about what people think, dancing, meeting people, improving conversations and social situations. I then demonstrate how they discussed confidence as attractive, and how improved confidence is aligned with heterosexual attractiveness and prevails over worsened appearances due to drinking. I also outline the limits to forgetting one's insecurities and how this contradicts the idea of letting go.

The women described being drunk as enabling them to "let loose" and forget their insecurities. They can dance freely without worrying about being the object of the gaze, and forget about the usual bodily constraints of performing femininity, such as taking up small amounts of space. Getting drunk allowed them to experience the male domain of pleasure seeking without feeling "judged". The following extract demonstrates these ideas.

- Lucy: Yeah, it just feels different when you're dancing on the floor drunk and then dancing on the floor sober, [because, I dunno, I dunno what it is but...
- Alicia: [yeah<sup>1</sup>
- A<sup>2</sup>: A confidence thing?
- Lucy: Yeah, I don't know if it's just that you know that people are watching you when you're sober but [when you're drunk it's like ahh, I don't care!
- Alicia: [but no one really is watching anyway
- Lucy: No!
- Alicia: Yeah but when you're sober it's like "Oooh they're all looking at me"

*Group 4*

Lucy describes how drunkenness makes her feel "different" about herself and dancing in public. She is unsure what feels different but then adds that it relates to the surveillance of other people. This is not constructed as being attractive, but as an escape from being "watched", or the object of the gaze.

---

<sup>1</sup> Brackets show overlapping talk

<sup>2</sup> 'A' is the researcher

Worrying that “they’re all looking at me” implies that she is concerned about others passing judgement on her. However, Lucy is able to forget about what other people think when she is drunk, and public surveillance is no longer a worry when dancing. Alicia points out that “no one really is watching anyway” and Lucy quickly agrees. However, the two women both state that although they know people are not watching, they feel like they are objects of the gaze when they are sober, and this inhibits their ability to feel comfortable dancing. Similarly, in the following extract Sarah states that although she enjoys dancing, she “would never dance sober”, and the feeling of being “judged” when she is sober inhibits her ability to dance.

Sarah: I like dancing, but I would never dance sober, I’m probably a terrible dancer whereas when you’re drunk you just kind of let loose and have fun and it doesn’t really matter, no one, yeah you don’t feel judged, definitely, that’s a big thing.

*Group 2*

Sarah describes drunkenness as enabling her to “let loose and have fun”. This implies that she is less able to enjoy herself when she is sober. The feeling of being “judged” by other people restricts her from letting loose and dancing, which she enjoys. Drinking to intoxication is constructed as a positive facilitator of “having fun” and forgetting what others think. Gaining confidence was described as one of the best things about drinking in the discussion groups. The women discussed increased confidence as making them “feel like you’re awesome”, as Tash describes:

Tash: Yeah, you feel like you’re awesome, but I don’t think you feel like you’re more sexy or whatever, but you just think yeah I’m the best singer or yeah I’m the best dancer, everyone should be like me, but you’re probably not, you just look like a dick  
(laughs)

*Group 3*

Tash describes the feeling of ‘awesomeness’ as a non-sexual feeling. She does not feel more attractive, “sexy or whatever”, but she feels great about herself.

She describes this heightened feeling as a false sense of the self, but one in which the opinion of others does not matter. Being drunk enables her to think highly of herself without caring about how she looks or what others may think. In the next extract, the women describe gained confidence as one of the best things about drinking. They discuss how increased confidence facilitates conversations and “meeting new people”.

- A: What’s the best and worst things about drinking?  
Lisa: One of the best is the confidence I guess.  
Sarah: Yeah you’re kind of meeting new people, you go to a party where you know people, you wouldn’t normally talk to them but it’s fun  
Chloe: You have less inhibitions, you’re just like oh yeah I’ll just go chat to this person even if you don’t know them at all

*Group 2*

The women describe how increased confidence allows them to break social barriers and talk to people they “wouldn’t normally talk to” when sober. Sarah states that “it’s fun” being able to meet “new people”, and gaining confidence from drinking makes her feel more comfortable doing this. Chloe feels that having “less inhibitions” enables her to “go chat” to people she doesn’t know, implying that she has more inhibitions when she is sober. This also implies that meeting and talking to new people are important parts of social life for these young women, but they are less able to do this without drinking. Being drunk was also described as a facilitator of conversations and social situations, as shown in the extract below.

- Tamara: I really really enjoy getting drunk. Although, I’ve gotta say sometimes if I get a little bit angry or annoyed or someone hurts my feelings or something I’ll react to it worse when I’m drunk  
Janelle: Yeah  
Anna: Definitely.  
Tamara: And other people do as well. [Cause that’s, you know, it’s a depressant  
Janelle: [Yeah  
A: What do you enjoy about it?  
Tamara: I guess I enjoy the fact that you lose your inhibitions a bit and other people do and it makes conversations flow a bit more easily with people you don’t necessarily know. And with people

you do know well it's just really funny. Everything's a lot funnier

Anna: Mmm

Janelle: Yeah. Makes me more relaxed in social situations.

*Group 1*

Tamara enjoys “the fact that you lose your inhibitions” when she is drunk, even though this can have negative effects on her behaviour, such as reacting worse to things. She also notes that the loss of inhibitions that she experiences helps “conversations flow a bit more easily”, implying that she finds this more difficult when she is sober. Janelle also describes feeling “more relaxed in social situations” if she is drunk, supporting the idea of letting go and forgetting insecurities. As shown in the extracts above, the women described drunkenness as helping them to loosen up and escape the usual pressures of socialising, having inhibitions, and feeling judged. However, this idea of being freed by alcohol was contradicted by their talk about confidence being attractive to men, which I discuss next.

Although the women described drinking as a freeing escape from the usual pressures of femininity, they simultaneously spoke about appearing attractive to men while drinking. The extracts below show how gained confidence works to attract men. Tamara describes feeling the desire to impress guys when she drinks with them. She wants the guys to pay her attention, think she is “really funny”, and then “fall in love” with her:

Anna: When I'm with girls I'll generally talk about more intelligent things than when I'm with girls and guys, you kind of think about, but then again you're drinking, I generally just drink with people who I'm close to and therefore feel keen to bring up certain things

Tamara: I agree. And you also, I feel like when you've had a few drinks and the guys are around I want them all to think I'm really funny. Because I've got quite a loud mouth personality, so I'm like “Notice me, listen to me, I'm hilarious! It's just a matter of time and you'll fall in love with me”

Everyone: (Laughing)

*Group 1*

Tamara says that when she drinks with guys she wants “them all to think I’m really funny”, which contradicts the idea of drunkenness allowing the women to forget what other people think. She describes actively trying to impress guys and gain attention from them. She orients to the other, male gaze while drinking, which contradicts letting go and not being the object of surveillance. Rather, this particular gaze is welcomed and heightened. Tamara describes wanting to appear attractive to guys while drinking, and her increased confidence helps her to do this. Similarly, in the extract below, the women discuss a heightened desire to “kiss someone” when they are drunk. They describe how gaining confidence encourages them to be more sexually confident.

Ella: I find I often wanna kiss someone when I’m drunk  
Kendall: Yep  
Heidi: Yeah  
Kendall: The drunker you are the more you want to  
Ella: You kiss someone that sober you would be like “don’t do it!”  
Kendall: Yeahhhh  
Ella: But drunk you’re like “do it!”  
Heidi: Yeah

*Group 5*

Ella describes a heightened feeling of wanting to “kiss someone when I’m drunk”. Her decision making is different when she is drunk because if she was sober she “would be like ‘don’t do it!’”, and this enables her to break bodily boundaries with people. Kendall describes drunkenness as increasing sexual confidence because “the drunker you are the more you want to”, and the other women agree. These extracts show that letting go is not about being like men or masculine, it is about being heterosexually attractive and breaking norms that usually constrain their behaviour. Although the women talked about forgetting what other people think, this was contradicted in their talk about orienting to the male gaze and having increased sexual confidence. In the following extract, Tamara and Janelle construct gained confidence as heterosexually attractive. Janelle feels that her “personality would be more attractive” because she is “a more fun, confident person” when she is drunk. Tamara feels that guys “probably like me more” because her “self-confidence goes up”, showing that other people’s judgements are not forgotten.

A: Do you feel more attractive when you're drinking?  
 Tamara: Yes. I think my self-confidence goes up  
 Janelle: Yip definitely  
 Tamara: I don't know if I feel more [attractive  
 Janelle: [I don't know about that yeah, not  
 sure  
 Anna: I get more confident but I don't, it doesn't affect the way, how  
 attractive I feel  
 Tamara: Maybe I feel less self-conscious about like [is this dress too  
 tight?  
 Anna: [Yeah  
 Tamara: I'm kind of just like "rock it"  
 Anna: Yeah. Yeah you definitely lose your inhibitions and get more  
 confident [but you don't look at yourself [and think damn girl  
 and that kind of thing  
 Tamara: [Yeah  
 Janelle: [I don't think.  
 Yeah  
 A: Do you feel like you get more attention?  
 Janelle: Yeah I think when you say attractive, yeah I think my  
 personality would be [more attractive because I'm a more fun  
 confident person. In terms of looks, I'm not really thinking  
 about that when I'm drunk  
 Anna: [Yeah  
 Tamara: I'm thinking they probably like me more  
 Anna: Yeah  
 Janelle: Yeah they like me more because I'm having, I'm more fun. [I'm  
 a more fun person than I normally am  
 Anna: [Yeah  
 Group 1

The women illustrate in their discussion that gaining confidence from drinking is heterosexually attractive. Janelle feels that her personality becomes "more attractive" because of her increased confidence, and that she is "a more fun person than I normally am" when she is drunk. This implies that she feels she is less fun and her personality is less attractive when she is sober. It also shows that sometimes women discuss "having fun" as not about letting go and forgetting insecurities, but they also link it strongly to being sexually attractive. As Tamara states "I'm thinking they probably like me more", demonstrating the importance of appealing to males while drinking. Increased confidence takes precedence over physical appearance, as Janelle describes "in terms of looks, I'm not really thinking about that when I'm drunk". This is shown further in the following extract where the women discuss feeling less physically

attractive when they are drunk because of the effects alcohol has on their bodies, such as “drunk eyes”. However, these worsened appearances due to drinking are justified with the idea that “you’re more confident so it kind of evens out”.

- A: Do you feel more attractive when you’re drinking, or drunk?  
Lisa: I would think, no! I look at myself and I think what are you doing? Cause I go really red. So it’s bad (laughs)  
Sarah: Yeah I get a little, one of my eyes is, [it’s not that noticeable but it goes a bit  
Lisa: [It gets a bit lazy (laughs)  
A: So do you think you’re *less* attractive when you’re drunk?  
Lisa: Definitely  
Sarah: But then... [Sometimes you’re more confident  
Lisa: [Especially when you’re sloppy or something  
Kate: Yeah that’s embarrassing  
Sarah: Yeah  
Lisa: But you’re more confident so it kind of evens out (laughs)  
Sarah: Yeah in the morning I was like oh you looked tragic last night, that’s awful, but at the time I’m definitely more confident. [You know, I talk to people, well not that you wouldn’t talk to... but you’d be more willing. Yeah. Yeah you’re friendlier.  
Kate: [Yeah  
you’re friendlier and more open  
Lisa: And I feel like drunk eyes, even if you look less attractive boys don’t really see a difference between that and your normal self because you’re suddenly confident and they have drunk eyes so they don’t really see what you look like, so it’s good

*Group 2*

This extract shows that the women think about the embodied physicalities of alcohol consumption when they drink. Lisa says she goes “really red” when she drinks alcohol and Sarah begins saying that one of her eyes “goes a bit”, and Lisa finishes her sentence with “it gets a bit lazy”. Being able to finish each other’s sentences in this context highlights that the women know each other’s outward physical responses to alcohol well. Lisa laughs as she describes these bodily effects, but also describes them as “bad”. She describes that when she looks at herself she notices these embodied reactions and thinks “what are you doing?” This shows that the women are paying attention to the physicalities of drinking and their appearance, but as they conclude, appearance is less important in the heterosexual drinking context. Lisa and Sarah initially

construct attractiveness in terms of appearance, and discuss how they feel drunkenness decreases their physical attractiveness. This is justified by using a behavioural version of attractiveness, because although they look worse, their increased confidence makes up for this, “so it kind of evens out”. They become aware of the negative consequences of lost inhibitions, for example, thinking in the morning “you looked tragic”, but are able to justify this because they were “friendlier and more open”. Similarly, in the following extract, Chloe describes becoming aware of how she looks during a night out and being horrified by this, suggesting that physical appearance is important and not forgotten, despite opposite claims earlier, as shown in the contradictory talk below.

Chloe: When you said about feeling more attractive yourself when you’re drinking, that’s the only thing, do you guys find that you’re drinking and feeling great and it’s not until you go and look at yourself in the mirror and you’re like “shit!”?

Everyone: Yeah!

Chloe: And you have this kind of feeling like ohh I’m on top of the world, having a good time, cause you don’t have any sort of, not feeling insecure cause you’re just completely not even thinking about it and then it’s not until you suddenly see yourself you’re like “oh my god do I look like that?”

Lisa: That’s for sure yeah

Kate: When you go into McDonalds or [something with fluorescent lights you’re like “Ohhhh I should go home”

Chloe: [yeah is this how I actually look?

*Group 2*

Chloe illustrates that hedonistic performances of femininity are embedded in heterosexual norms of attractiveness. Although she is letting go, forgetting her insecurities and “completely not even thinking about it”, when she sees herself in a mirror she is not only made aware but shocked by her appearance. The other women in the group quickly agree, suggesting that this realisation is a common experience. This contradiction shows that the women are torn between two conflicting performances of femininity when they are drunk. On one hand they are able to indulge in having a great time, and take up more pleasure seeking versions of femininity. On the other hand they are not able to fully let go because they are still performing femininity in ways which are attractive to men. There are limits to their ability to be hedonistic and forget

their insecurities, because coming face to face with a mirror reminds them of this. Next I discuss the second major contradiction that was evident in the women's discussion group talk.

### **Shared Buzz versus Individual Embodied Consequences**

The women talked about drinking to intoxication as a shared experience but also as having individual embodied consequences. Heavy drinking is described as a highly social practice, which "brings people together" to experience the pleasures of intoxication and fun of socialising. Friends aim to share "the buzz" of intoxication with each other, maintaining similar levels of drunkenness and feeling the same level of enjoyment. This is contradicted with experiencing and embodying drunkenness individually. The negative consequences of drunkenness were described as embodied and individual, such as hangovers, memory loss and weight gain. Women pay the price with their bodies for the benefit of socialising, and drinking to intoxication is discussed in terms of a cost/benefit analysis with the embodied consequences. I discuss this contradiction firstly by discussing the idea of sharing the buzz and then by describing individual embodied consequences.

Alcohol consumption was described as an important component for "bringing people together" and enabling friends to catch up. In answering the question "What is the best thing about drinking?" participants discussed how drinking together "makes us all hang out" and can "improve friendships", as shown in the following extracts.

Cindy: I like the dancing and the social thing and [hanging out together, it makes us, you know if there's something that we're going to it makes us all hang out

Amy: [Yeah

*Group 3*

Alicia: The social time  
Everyone: Mmm  
Gemma: Brings people together  
Alicia: Hanging out with your friends

*Group 4*

Prue: Best things, umm, definitely group [mentality, like ohh we're just there together as a group  
Heidi: [Yeah! seeing... being able to see  
Kendall: Real good social lubricant  
Heidi: Yeah  
Prue: Yup  
Heidi: You can improve friendships

*Group 5*

Drinking is described as an inherently social activity and a highly important aspect of social life for these young women as it provides opportunities for spending time together. The women discussed “group mentality”, “being able to see” each other and “hanging out with your friends” as the best aspects of drinking alcohol. Group cohesion and belonging have been found to be strong motivators for heavy drinking amongst young people in other studies (Borlagdan et al., 2010; Sheehan & Ridge, 2001). The women also discussed the importance of being on the same “drunk level”. This shows it is not just about consuming alcohol, but about consuming it so you all feel the same level of intoxication, as shown below:

Ella: Oh we try and be on the same level [when someone's really drunk we're like “uh this is boring” and if they're just like “woohoo!”, that sucks. You wanna be on the same buzz  
Prue: [Yeah  
Heidi: Yeah, we wanna all feel the same  
Ella: We're normally pretty good at evening it out

*Group 5*

Tamara: Yeah if I see one of my mates getting drunk though, I will definitely be like “Hey lets go to the kitchen, I'll get you some water,” cause I know that's it's not going to be fun for them, or the rest of us, if they're on a whole different drunk level

Janelle: Yeah

Tamara: Sometimes it's funny when one person's wayyy drunker

Everyone: (Laughing)

Anna: Yeah. That's true cause, yeah

Tamara: But yeah I'd say that in general it's about being on the same page as everyone else

Anna: Yeah, if everyone's the same drunk it doesn't matter how much you've been drinking. But if everyone's at the same level then I think its fine, its *better*

*Group 1*

Drinking to intoxication is about experiencing pleasures together and being on the “same buzz” with friends. Ella says that they “try and be on the same level” of drunkenness, and they are “usually pretty good at evening it out,” which shows that this is well practiced. Tamara discusses “whole different drunk levels”, and employing strategies such as getting a friend water when they are on a different level of drunk to bring them back to an equal level with everyone else. Other strategies that the women described are discussed more fully in the next chapter. Tamara and Anna discuss being on the “same page as everyone else” and Anna adds that “it's better” if everyone is “at the same level”. They describe being at the same level of intoxication as the goal of drinking heavily with friends, because if people are on a different level “it's not going to be fun for them, or the rest of us”. The women's talk shows that heavy drinking is not just about consuming large amounts of alcohol together, it is about being at the same level of intoxication and they use specific strategies and work actively throughout the course of the night to achieve this.

Although heavy drinking is described as a highly social practice in which people can come together and share the buzz of being drunk, the experience and consequences of drunkenness are also described as embodied and individual. Next I discuss how the women's accounts show their drinking to intoxication as embodied on an individual level. I then illustrate that the negative consequences of heavy drinking are often embodied consequences, and how women demonstrate that their bodies pay the price of a good social time.

A: How do you know when you're drunk?  
Chloe: You just kind of seem more in your own head

*Group 2*

Chloe's describes knowing that she is drunk as seeming "more in your own head". This contradicts the idea that drunkenness is about sharing the experience with others because it is not about sharing the buzz at all if you are "in your own head". It implies that if you get too drunk you are on your own, in your own head, and no longer sharing the buzz. Similarly, Anna described her experience of drunkenness when drinking sugary drinks as unpleasant because she goes "into this little world of my own", as shown below.

Anna: I can't have too much sugar. So that's why I'm not going to have any more [Scrumpy. Yeah it's the sugar content, I can't drink any like mixes or like  
Janelle: [(Laughing)  
Tamara: Whys that? Does it affect your skin or something?  
Anna: Yeah. Heaps. But also it's the kind of drunk that I get. When I drink sugary drinks  
Tamara: Oh you get too drunk?  
Anna: I go into this little world of my own and I don't pay attention to anything. And my memory, honestly, I do one lap of a fishbowl and I can't remember anything that's been said a couple of minutes before that.

*Group 1*

Anna states that is she is "not going to have any more Scrumpy" because of how it affects her. She describes going into a "little world of my own" and not paying "attention to anything" as unpleasant, implying that it is not socially good to be in a world of her own. Anna describes being a certain "kind of drunk" which is linked to specific types of alcoholic drinks, and which can be very anti-social, defeating the purpose of drinking to be social. The women construct different kinds of drunk, showing that being drunk is not straightforward, there are different kinds and different levels. People tolerate alcohol differently, have their own preferences and feel different when they are drunk, and this depends on their body as well as their mood. Passing out or vomiting can put an abrupt end to a drinking occasion, but only for the individual. Friends look out for each other and ensure their safety, but the

social fun carries on without those who are not physically up to it, as shown in the extract below.

- A: What happens if someone gets too drunk?  
Cindy: A few of us would take them home usually aye?  
Tash: Yeah  
Amy: Yeah  
Tash: Or I took (friends name) to hospital  
Amy: Or go get something to eat or  
Cindy: Yeah, a couple of times one of the girls has taken them in a taxi home and then come back to town

*Group 3*

Cindy describes how friends look out for each other because if someone gets too drunk, they “take them home usually”. The women agree that they take care of each other and Amy suggests that getting a drunk friend “something to eat” is also a useful strategy for helping them sober up. However, sometimes drinking too much only brings the night to an end for the person of concern. The fun does not necessarily stop for their friends, who can easily “take them in a taxi home and then come back to town”. This shows that the consequences of getting too drunk are suffered only by the individual. Similarly, memory loss is an individual consequence which the women described as “scary” and “annoying” because the previous night was “pointless”, as shown below:

- A: So what’s it like to forget the previous night?  
Janelle: I find it quite scary because I worry about myself.  
Anna: I just get annoyed with myself cause I know that I had a good time and I know that I was with my friends and funny things [happened and it was a good night, and you can’t remember it and so it just seems kind of pointless to have done it all if you can’t remember the fun that you had  
Janelle: [Yeah  
Tamara: I completely agree, that’s true. Especially for the hangover you have the next day  
Anna: Yeah. It’s not worth it. And that’s yeah and that’s part of why sometimes I get real angry. That’s why I hate my hangover and get angry that I got drunk, so drunk, that I can’t remember the fun

*Group 1*

Anna describes a forgotten night as “pointless” and “not worth it” because she cannot remember the fun social time that she had. Tamara agrees with Anna and adds “especially for the hangover you have the next day”, showing that the consequences are embodied individually, at the cost of having a good time. Forgetting a night out strongly contradicts the reasons women talked about for going out drinking. As Gemma demonstrates in the next extract, forgetting the previous night’s behaviour can have potentially long term negative consequences for her.

- A: What’s it like to forget the night before?  
Lucy: It’s horrible  
A: Why?  
Lucy: I suppose you don’t know if you’ve done, well, you don’t know if you’ve done anything wrong  
Gemma: I always wake up thinking... first I kick my foot out, it’s ohh good he’s still there, that’s a good sign (laughs)  
Everyone: (Laughing)  
Gemma: And then I find out what I’ve done, if I’ve annoyed anyone or... texts  
Alicia: Yeah check your texts, what did I send?

*Group 4*

Lucy describes feeling “horrible” when she forgets a night of drinking because “you don’t know if you’ve done anything wrong”. Gemma worries that she might have “annoyed anyone” or sent text messages that she will regret. She also describes kicking her foot out of bed to check if her boyfriend is still there, implying that she worries she may have jeopardised their relationship when she was drunk. This shows the individual consequences of forgetting a night out from drinking too much. It contradicts their talk about alcohol “improving friendships” and sharing the good buzz. Embodying the consequences of a good night out is accepted as a cost of enjoying a good social time. As shown below, Chloe described making the decision to drink similarly to a cost/benefit analysis, where the benefit of a good night out drinking heavily with friends comes at the cost of feeling “so ill” and “so much pain”.

- Chloe: Because I got glandular fever, when I drink I’m like ok well I may as well cause it’s not going to happen for a while, and then I feel so bad I’ll just literally just lie there because I feel so ill and you just feel so much pain you can’t concentrate on

anything at all. So I know I've got that, so that's why when I do it, it's really bad. But it's like I won't drink at all, when I go to a party, I'm like I'm not going to commit myself I'll just have a fun time being sober. But if I drink I'm like right I'm going to make the most of it, New Zealand binge drinking, have a good night, which is why I can't remember things.

*Group 2*

Chloe describes “committing” to getting drunk as being accompanied by negative embodied consequences. She talks about weighing up the fun of a “good night” in relation to the inevitable, “really bad” consequences, and feels she has to “make the most of it” if she drinks. She describes having two options, to not drink at all or to “New Zealand binge drink”, showing that moderate drinking is not an option for her. Rather, the cost of sharing a good buzz with friends is endured on an individual level, and is an embodied cost. Chloe describes feeling “so bad I'll literally just lie there” the day after drinking, and this is the predicted and accepted price of a good time. The women discussed many unpleasant embodied feelings they experience after getting drunk such as a “dehydrated mouth”, and a nose that is “boogery and dry”, which are shown in the excerpt below.

A: So what does alcohol do to your body?  
Cindy: Fills you with a lot of sugar  
Amy: Yeah, a lot of sugar  
Cindy: I reckon most of the hangovers sugar  
Tash: Kills your liver  
Cindy: Cause you don't feel like water you just feel like fizzy  
Amy: Yeah the next day. I can't think of anything worse if I'm hungover than having a glass of water, even if I know it's what I should have, I have to have something, cause I think that when you're drinking it you're so dehydrated that you're just like swishing all of the bad flavours into your mouth, it's so gross. Your drink tastes like your dehydrated mouth pretty much, and last night's alcohol  
Tash: Definitely, your skin feels...  
Amy: Really dry  
Cindy: Yeah  
Amy: Yeah you feel like [all oily, and like just scodey  
Tash: [oily  
Eve: Like dirty

Amy: Yeah, dirty, you definitely need a shower, my nose always feels all, it's disgusting but like boogery and dry  
Everyone: (Laughing)  
Tash: Yes you always get the worst crusties!  
Amy: Yeah you feel like you need to be scrubbed from the inside out  
Cindy: Full exfoliation  
Tash: Yeah

*Group 3*

The effects of alcohol after getting drunk are embodied and unpleasant. The women describe feeling “dirty”, “oily” and “scodey” the day after they drink. They discuss the negative effects alcohol has on their liver, skin, nose and mouth, and describe feeling “so dehydrated”. When speaking about the hangover from heavy drinking, they focussed on their bodies, showing that the consequences of getting drunk are physical and experienced by the individual. However, the women share this knowledge and inherently understand what each other is talking about, suggesting that although its experienced on one's own, it has shared meaning and understanding within the group. Similarly, they described being able to “eat and eat and eat” the next day, and then getting “fat”, as shown below.

A: So what does alcohol do to your body?  
Ella: Makes you feel physically drained  
Kendall: Yes, physically poisoning yourself. You are poisoning yourself with poison (laughs)  
Heidi: It just makes me so hungry, I just wanna eat  
Ella: Yeahhhh  
Kendall: You make your body ill  
Ella: You turn into a black hole, the next day [I can eat, I can just eat and eat and eat and eat  
Heidi: [You can eat sooo much  
Prue: Drink so much water  
Ella: And then you get fat

*Group 5*

Ella describes feeling “physically drained” after getting drunk, and Kendall adds “yes, physically poisoning yourself”, “you make your body ill”. The women answered the question “what does alcohol do to your body?” in terms of the negative consequences, rather than the embodied pleasures experienced when drunk. This implies that the most prominent embodied aspects of alcohol

consumption are negative. The women also discussed struggling with the contradictory nature of trying to lose weight while also being sociable and drinking alcohol. Being slim, monitoring the body, weight and food and drink intake are signs of femininity, and women compromise their efforts to have slim bodies by drinking heavily. In the next excerpt, Janelle, Anna and Tamara discuss being “more health conscious now” as a reason for drinking less than they used to.

Janelle: And also we're all way more health conscious [now than we used to be  
Anna: [Yeah that's true, very true  
Tamara: Yeah, absolutely  
Janelle: We are all quite health freaks. We all exercise a lot and  
Anna: Yeah, we eat healthy  
Janelle: Well you're really careful about what you eat Anna, and Tamara and I eat vegetarian food, so  
Anna: Yeah  
Tamara: Yeah  
A: So alcohol defeats the purpose of doing that all week?  
Janelle: Yeah  
Tamara: Yeah, I'm also very aware when I'm drinking alcohol that I don't have any soft drink with it, I have soda water or something. Or I drink red wine, and if I have a beer I'm really treating myself  
Anna: Yeah I only drink red or cider  
A: Is that because of the calories?  
Tamara: Yeah

*Group 1*

Janelle and Anna discuss being “health freaks” and exercising a lot, as reasons for drinking less alcohol, because of the negative effects it has on their bodies. Being a “health freak” is compromised by drinking large amounts of alcohol, and the women described this as something they now consider when making decisions about drinking. Tamara says she is “very aware” about the types of drinks she has and the calorie content of these. She considers drinking beer to be “really treating” herself, because it has more calories than red wine and soda water. Similarly, the women discussed how alcohol “makes you fat”, in the following extracts.

A: So what does alcohol do to your body?  
Kate: Makes you fat  
Sarah: (Laughing)  
Lisa: Yeah  
Kate: Sluggish, unmotivated, depressed, (laughs) great things  
Sarah: Mmm, yeah

*Group 2*

Amy: I quite often now go out and don't drink or just have one glass of wine. Just because, or, I also do it because, sounds stupid but I know that alcohol is bad if you're trying to lose weight and I'm usually one of those people that's always trying to lose weight, so I try and avoid alcohol.

*Group 3*

Kate answers the question about what alcohol does to her body with "makes you fat". This shows that women think about the negative effects on their bodies and are caught in a contradiction between not wanting to get fat and drinking to be social. She jokes about the "great things" alcohol does to her body to justify this contradiction. Amy describes "trying" to avoid alcohol to support her efforts to lose weight. She describes this as something she manages to achieve sometimes, but not always. Trying to avoid weight gain is a common part of women's experiences and is tied into traditional femininity. These discussions about trying to maintain a feminine body and also engaging in hedonistic practices demonstrate the embodied conflict women are faced with. It shows the embodied contradiction that takes place when moving between different performances of femininity while drinking heavily.

This chapter demonstrated the contradictory talk that the women engaged in when discussing their drinking and shows that women's accounts of their drinking are complex. The first contradiction was between social aspects of drinking and demonstrates the difficulty of engaging in particular performances of femininity. The women described social rules which shape their behaviour, and their talk highlighted the emphasis on heterosexual attraction in drinking practices. The second contradiction was between drinking to be social and embodying the consequences of drinking on an individual level. Although drinking was described as a social activity which

women share together, the experience and consequences of being drunk that they discussed were embodied and individual. The women described an embodied conflict of drinking heavily for positive social reasons and paying the price of this with their bodies. Their efforts to have slim, healthy bodies are compromised by consuming large amounts of alcohol, and the women described struggling to manage this. Alongside these conflicts, the women discussed balancing acts that are required of them to manage the contradictions, and I outline these in the next chapter.

## **Chapter 5: Balancing Acts**

---

The young women described their drinking practices in contradictory ways, and they also discussed balancing performances of different femininities to overcome this. From the analysis I identified two main balancing acts that the young women discussed. The first is a social balancing act between being seen as having the ‘right’ kind of fun and being judged “tragic”. The second is an embodied balancing act between maintaining a pleasurable level of intoxication and passing a point where there is “no going back”.

I use a seesaw metaphor to describe these two balancing acts. The women stand in the centre of the seesaw with one foot on either side, aiming to keep the seesaw level. If it tips too far to one side and hits the ground, it is a failed attempt and the women face negative social or embodied consequences. The women positioned themselves as experienced drinkers who can balance the seesaw more easily than when they were younger. I discuss each of these balancing acts in turn below.

### **Being “Flirty and Fun” or Being “Tragic”**

The women discussed having to carefully manage how they appear to others when they are out drinking. This balancing act is based on social rules and norms about acceptable ways of behaving when drunk. Young women are still establishing rules for drinking in public and ways of maintaining respectable femininities while engaging in hedonistic practices. This balancing act is about being “fun and bubbly”, and being able to flirt successfully with men without looking “tragic”, as shown below.

- A: Do you think guys think you’re less feminine if you’re drunk?  
Heidi: I don’t... the guys we’re friends with don’t but certain guys would, some guys  
Kendall: I think it depends if they’re sober or not  
Ella: Depends how drunk you’re getting, if you look like a mess and you’re walking around thinking that you’re the man [then it’s

kind of like really unattractive but if you've just had a few drinks and you're being flirty and fun and bubbly then that's nice, guys like that, so, just don't get too drunk

Kendall: [It's pretty tragic  
Heidi: Yeah

*Group 5*

The women's attempts to impress men while drinking mean they have to balance having a good time with appearing in particular ways and risking appearing tragic. Ella gives advice for how to balance this: "If you've just had a few drinks and you're being flirty and fun and bubbly then that's nice, guys like that, so, just don't get too drunk". Her advice demonstrates the balancing act that is required between "being flirty" and "tragic". It also implies that this is all about what "guys like", rather than what women themselves like or want. There is a lot of pressure to be "fun and bubbly", and this contradicts the idea of really having fun, letting go and not caring what others think, as discussed in the previous chapter. There are rules about how to act when drinking, for example "just don't get too drunk", and the women balance their behaviour and drinking according to these rules. However, the women discussed how having fun and flirting also required careful balance to ensure they did not look "trashy" or "trying to flirt obviously", as shown below:

A: Is it feminine to get drunk?  
Cindy: No  
Amy: No  
Tash: No  
A: Why not?  
Cindy: Cause you can look trashy  
Tash: Yeah  
A: Do you think it's different for guys and girls?  
Cindy: Yeah cause boys would feel more manly, like blokey, I reckon  
A: But it's trashy for girls?  
Cindy: Trashy if they're being [silly and their dress is too short and their boobs are hanging out  
Tash: [Stupid  
Amy: Yeah  
Tash: If they're trying to flirt obviously  
Cindy: And you're falling in the gutter that's not nice

*Group 3*

Tash says that women risk being trashy “if they’re trying to flirt obviously”, implying that they should be subtle when flirting with men. This demonstrates the balancing act that is required between flirting successfully and being regarded as “trashy”. It also shows the gender performances that take place when drinking heavily, because women are considered “silly”, a patronising and condescending term, when they are drunk, and men are not. Being drunk can “look trashy” for women, but “more manly” for men. Cindy demonstrates that when traditional feminine performances are in place, such as wearing a short dress and a having a bust, and this look slips due to intoxication, it becomes “trashy”. The women also discussed balancing being “less attractive” if you’re “really drunk” and being judged as “uptight” and “boring” if you don’t drink.

- A: Do guys think you’re less feminine if you’re drunk?  
Tamara: I don’t know less feminine... But maybe  
Anna: They might lose a bit of respect for you [depending on what you’re doing  
Tamara: [less sexy  
Anna: Yeah  
Tamara: Less attractive  
Anna: Yeah  
Janelle: If you’re really drunk. But then if a guy knew a girl that never drank they might think they were a bit uptight.  
Anna: Yeah  
Tamara: Yeah true. And [a bit boring  
Janelle: [And a control freak  
Anna: Yeah  
Tamara: Yeah yeah  
Anna: It just depends on what you’re doing as a person. What you’re doing, if you’re sitting and engaging in conversation and just having a generally good time but maybe slurring your words a little bit too much, then its fine but if you’re one of those girls that’s going to be standing by the ipod putting on Justin Bieber screaming, dancing round, breaking stuff left right and centre then like its different. It just depends on what you’re doing I guess.

*Group 1*

Anna says that men “might lose a bit of respect for you” if a women is drunk, and states that this “depends on what you’re doing”. The other two women agree, but then Janelle suggests that guys might judge a woman as “a bit uptight” and “a control freak” if they never drink alcohol. Tamara agrees with

this and adds that they might consider a non-drinker to be “a bit boring” too. This demonstrates the two ends of the seesaw that the women balance between when drinking. They engage in heavy drinking to avoid being judged a “control freak”, but risk losing men’s respect if they get too drunk, Drinking and maintaining a good level of fun is about being heterosexually attractive and flirtatious, and the women described monitoring their behaviour based on how men view them. Anna demonstrates the rules which shape women’s behaviour and states “it just depends on what you’re doing”. She describes “sitting and engaging in conversation” as an acceptable behaviour, and “screaming, dancing round, breaking stuff” as unacceptable. Anna shows that these rules are specific to performances of femininity, by saying “one of those girls”, and not including men.

Women use ‘othering’ to monitor their own behaviour by judging themselves against other unknown women. This works to distance them from troubling femininities, maintain their own respectable femininities and justify the types of behaviour they engage in. In the focus group discussions, the women described other women’s drinking behaviour as “tragic” and “trashy” to distance themselves from these identities. The following extract shows Janelle using othering to monitor her own behaviour, by labelling “really drunk girls” as “embarrassing” and “disgusting”.

A: Is it feminine to get drunk?

Anna: No

Tamara: Ohh... I guess it’s not lady like but it’s totally

Janelle: But when you

Anna: It doesn’t make you masculine (laughs)

Janelle: When we were in (city name) and you saw really drunk girls on the street, you know, walking down (street name) really wasted and, I’m not meaning to flash people, really short dresses and falling over or vomiting, I was embarrassed, really, kind of embarrassed of my sex, that those girls were so [disgusting, I found it quite disgusting

Anna: [that’s what happens to us when we’re drunk. Yeah

Tamara: I guess it’s more shameful for a woman to be absolutely off her face than it is for a man

Anna: Yeah

Janelle: [I guess it’s more dangerous

Tamara: [It’s really unfair actually

*Group 1*

Janelle's statement that she was "embarrassed of my sex", shows that she compares herself to other girls who behave in unacceptable ways. She uses the strong descriptor, "disgusting" to distance herself from the problematic type of femininity associated with "falling over or vomiting". Anna challenges this idea by arguing "that's what happens when we're drunk" and Janelle is caught in a contradiction. She justifies this by deciding it is unacceptable because it is "more dangerous" for women to be drunk than men. This shows the justifications that are involved in the balancing act between being "lady like" and "disgusting". Tamara illustrates that the judgements around being drunk are highly gendered, and states that it is more "shameful" for women to be intoxicated. In negotiating new versions of femininity for drinking, the women have to draw on different notions of femininity, such as traditional "lady like" femininities. Maintaining certain performances while drunk enables the women not to be "shameful", and implies that not being able to achieve this is something to be ashamed of. The following extract shows a clash between hyper- and traditional femininity in Ella's statement that drunkenness is not feminine, "especially in heels teetering along".

- A: Is it feminine to get drunk?  
Ella: I don't think so cause [it makes you sloppy  
Kendall: [I wouldn't say so  
Ella: Just really not attractive  
Kendall: No  
Prue: No  
Heidi: Especially because I walk home from work and I just see drunk people stumbling through town [I'm just like oh my god I don't wanna look like that  
Kendall: [yeah  
Ella: No, especially in heels teetering along

*Group 5*

High heels are a marker of a traditional femininity performance, but can also mark hyper-femininity if paired with a short skirt and scantily clad top. Ella demonstrates that the worst look for a woman is when carefully constructed femininity performances are attempted via heels, skirts, hair and make-up and this fails due to an inability to maintain it because of intoxication. Heidi states "I don't wanna look like that", showing that other, troubling femininities are

used as a point of reference to distance herself from and monitor her own behaviour.

As a result of these contradictions and rules, the young women have to engage in balancing acts to participate in the drinking culture whilst still appearing feminine and attractive, which is a difficult thing to do. Behaving in a tragic way and doing “embarrassing” things was described as more acceptable when young people begin drinking because they are “learning to handle” alcohol. However, they are expected to be expert balancers when they reach their twenties, “because they’ve had a lot of practice”, and this is shown in the excerpts below.

Kate: I think when you’re younger and learning to handle your alcohol that’s sort of what shows you how much you can drink cause you do stupid things and then you’re like oh no I don’t wanna do that, that’s embarrassing, so then you drink less.

*Group 2*

Kate describes being younger as an experimental period where people are “learning to handle” heavy drinking. She describes this as a time where you can “do stupid things”, learn that you “don’t wanna do that” and alter your behaviour accordingly. Similarly, in the following extract the women discuss how the expectations of drunk behaviour have changed since they were younger.

Janelle: At our age you don’t know like, a lot of our friends will drink a lot but they won’t be really embarrassing or socially awkward even though they’re really drunk because they’ve had a lot of practice and they know how to look after themselves when they get into that situation

Tamara: Yeah, and sometimes if they are and they behave really really badly, people think that there might be something more serious going on in [their lives. Whereas at uni and high school and stuff that was just not a question that was asked

Janelle: [Yeah

Anna: It would’ve been normal six years ago

A: So you kind of expect people to peter out a bit?  
Anna: Yeah  
Tamara: You do. Settle down a bit, stable out  
Janelle: Yeah  
A: And if they don't?  
Anna: They haven't really grown up and done the responsible thing  
Tamara: Absolutely yeah

*Group 1*

Janelle says that people her age “know how to look after themselves” and “won't be really embarrassing or socially awkward even if they're really drunk”. Tamara adds that this has changed significantly since they were at university and high school when behaving “really really badly” was acceptable. She says that if people behave badly now, it is seen as problematic, and assumed that there is “something more serious going on in their lives”. They discuss the expectation that as they get older they are expected to “settle down a bit, stable out” and “grow up and do the responsible thing”, which implies not behaving “badly” or being “embarrassing” when drunk. Although people in their twenties have “had a lot of practice”, it can be challenging to appear “responsible” whilst managing the physical effects of alcohol. The women also discussed another embodied balancing act which requires them to physically manage the effects of alcohol and keep their drunkenness at the ideal level. The following section explores this embodied balancing act between feeling “tipsy” and drinking to the point where “there's no going back”.

### **Feeling “Tipsy” and then Knowing “There's no going back”**

This balancing act is about managing the embodied pleasures of alcohol without drinking too much and being physically unable to enjoy the experience. The seesaw metaphor is useful to demonstrate how women balance their levels of drunkenness so they can experience the embodied pleasures of alcohol to the fullest. The other side of the seesaw is drinking too much and having an unpleasant embodied experience. Age is also an important factor in this balancing act because the women described how they use embodied knowledge, acquired through “training”, to do this. I begin demonstrating this

balancing act by discussing the embodied pleasures of drinking in the extracts below.

Gemma: I like getting tipsy, when you're on the, when you know you're talking rubbish  
Lucy: Mmm  
Alicia: And you've got grins  
Everyone: (Laughing)  
Lucy: Get the grins on  
Penny: Everything's hilarious

*Group 4*

Heidi: It warms you up  
Ella: Yip. [Keeps you warm  
Heidi: [Get a tingly  
Prue: Oh yeah  
Kendall: Makes you all like, [you start relaxing  
Heidi: [Feel all light headed and relaxed. Yeah  
relaxed yeah  
Ella: You get kind of happy  
Prue: Yeah

*Group 5*

Getting drunk or “tipsy” is experienced as an embodied pleasure. The women describe a “warm”, “relaxing” feeling as well as feeling emotionally “happy”. However, it is difficult to maintain this happy level of tipsiness during the course of a drinking session. Women have to balance their alcohol intake and drink the right amount to enable themselves to loosen up, but not drink too much. Tipping too far onto the unpleasant side of the seesaw and reaching a point where “there’s no going back” can occur if this is not well managed, as shown in the following excerpts:

A: So how do you feel when you're really drunk?  
Tash: This woosh feeling, it's like do you know what I mean?  
(laughs) I don't know how else you, you know when you've had like  
Eve: I feel light headed  
Amy: Yeah that one too many or whatever and you know that there's no going back and it's just, I dunno, in you (laughs)

*Group 3*

Kendall: And if you drink too fast you get to a memory loss point without even sometimes without even getting [the chance to register that you're drunk. Usually I have the switch but I have had a couple of times where I've been like you, and I've got to that point where it's already past that switch and I don't even know it and then the next day I have memory blanks, that doesn't happen very often, but if you drink too fast you can get

Ella: [yeah like don't even realise you're drinking

Heidi: You can accidently destroy yourself (laughs)

Kendall: Yeah

*Group 5*

Tash finds it difficult to explicate the feeling she gets when she is really drunk and instead uses the sound “woooosh”, showing that drinking is embodied and personal. Similarly, Amy tries to describe the feeling that alcohol is just “in you”. She demonstrates the precariousness of balancing on the seesaw between feeling good and passing a point where “there’s no going back”. Kendall describes how quickly the point of no return can be passed, “sometimes without even getting the chance to register you’re drunk”, and Ella describes this loss of control when you “don’t even realise you’re drinking”, like an out of body experience. Heidi says “you can accidently destroy yourself”, showing how unstable balancing on the seesaw can be, and the negative embodied consequences that result.

Despite these descriptions, the women construct themselves as experienced drinkers who regularly use embodied signals to recognise this tipping towards unpleasantness, and stop drinking. This relates to Lyons, Emslie and Hunt’s (2014) findings about mid-life adults “staying in the zone, but not passing the point of no return”. The adults developed embodied feelings of knowing how to “stay in the zone”, and used this to stop or slow drinking accordingly. In the following extract, Kendall describes her ability to stop drinking when she reaches this point as an “automatic response.”

Kendall: I have an automatic response I think that a lot of the time I just trust my body and I just automatically stop drinking. And sometimes I don't know why, I think my body just decides, and

suddenly I find myself asking for water [and that's when I know that I've just decided

Ella: [Yeah me too

A: Not a conscious decision?

Kendall: No I don't think it is *Group 5*

Kendall feels she subconsciously makes the decision to stop drinking. She says "I just trust my body", and feels that her body 'knows' when she has had enough alcohol and "just decides" to stop. In the following extracts the women describe how they "just kind of know" when they have reached the tipping point in their drinking.

Tamara: I'll stumble or I'll tip something over, and then I'll be like ooo maybe a water now

Janelle: I just get a buzz in my head, it's just a feeling inside that I'm drunk

Anna: I just kind of know. You just get to that feeling

Tamara: Yeah I guess the stumble part is like I'm at [the feeling

Anna: [It's a symptom

Tamara: Yeah

Janelle: Yeah

Tamara: I get the feeling but I maybe haven't actually thought are you drunk yet?

Anna: Yeah

Janelle: Yeah if I drink really really fast I'll miss that feeling of that recognition in my brain that I'm drunk, [and then I'll get soooo drunk. And I won't remember the night. That only happens very rarely but it's when I drink really fast and I miss that whole ohhh... that little light bulb

Anna: [Yeah that's true

*Group 1*

Amy: There's like that line that if you cross its [you've gotta go home

Tash: [it's like you're ruined.

Yeah

A: Can you describe that line? How do you know?

Eve: You can just sort of

Cindy: Tripping over

Amy: Yeah you can just sort of tell if you have one more [it's going to be too much, you're just at a real happy medium

Tash: [One more

drink and its

Cindy: Yeah

*Group 3*

The women have a feeling of 'knowing' when they reach their limit, which they say is learned from bad experiences. They describe an imaginary line as the tipping point between feeling good and feeling unpleasant. It was difficult for the women to explicate the feeling of knowing, similarly to the mid-life adults in Scotland (Lyons, Emslie & Hunt, 2014). The women describe this as a "feeling inside" and say you can "just sort of tell" and "just kind of know". Sometimes the women can tell exactly if they "have one more it's going to be too much", and can use their embodied knowledge to slow down or stop drinking when they reach this point. However, as discussed earlier, this can be difficult to manage. When caught up in social situations and losing track of how much or how fast they're drinking, the "feeling of that recognition", or "light bulb" can easily be missed.

The women think about the negative physical consequences of drinking too much whilst enjoying the embodied pleasures of being tipsy. They described how they try to maintain an ideal level of intoxication throughout the night and discussed strategies for managing this balancing act, which are learnt over a period of time. The next excerpts show the strategies that the women talked about using to balance the embodied pleasures with unpleasantness.

Amy: Definitely if I'm starting to feel like a little bit queasy then I'll just get a glass of water or something and sometimes that can take you back to a good place. Or if there's food around then I'll eat something  
*Group 3*

Amy described eating food and drinking water to counter balance the effects alcohol has on her body. This shows that it is possible to tip back "to a good place" after drinking too much. However, this strategy only "sometimes" works, demonstrating the precariousness of the balancing act. Kate suggests that vomiting also seems to be a useful tool for feeling better after drinking too much for some women, and is disappointed that she is unable to vomit strategically, as shown below.

Kate: I hardly ever, I could probably count on less than one hand the number of times I've vomited. I'm someone who just doesn't, and I kind of wish I did cause people seem to feel a lot better.  
*Group 2*

Being able to balance ideal levels of intoxication is constructed as an individual difference, and Kate feels that in terms of vomiting she is “someone who just doesn’t”. The women describe the ability to manage the self while drinking heavily as largely individual. In the following extract Kendall and Ella position themselves as experienced balancers who can “automatically” stop drinking when they reach an “unpleasant feeling”, but Heidi feels she is “missing” this automatic function.

Kendall: See, I’ve got an automatic thing that stops me drinking after a certain point

Ella: Yeah me too

Heidi: I don’t have that switch, I’m missing it and I’m really sad about it

Ella: Yeah I can feel it and then I’m like woooohhh, and I then I instantly stop and that’s when I know that’s enough. Last night that’s exactly what happened, I had that much beer left, but I just started feeling it, my head was going a bit buzzy and I was like woooo put it down

A: Was it a bad feeling?

Ella: It was, yeah it was, slightly dizzy. I haven’t got that drunk for quite a while and I was just like drink drink drink drink, just letting it go and then as I just had that last bit of drink I was like ooh, no. It was this kind of unpleasant feeling now, and you know that you’re going to start to feel headachey or sick, so I just left it at that.

*Group 5*

Kendall and Ella discuss having an “automatic thing” which takes over at the exact moment where drinking must cease to avoid negative consequences. Heidi describes this as a “switch” and constructs this is something that some people have and others don’t. This further supports the concept of how individual bodies experience and balance the effects of alcohol differently. The women in this study emphasised that although they still sometimes pass the point where “there’s no going back”, it does not happen as often as it used to. Similarly to the social balancing act discussed earlier, age is an important factor in being able to balance embodied pleasures. The women discussed being teenagers, when drinking excessively, vomiting and doing embarrassing things were acceptable. This is constructed as a rite of passage, and “it’s not embarrassing cause everyone’s” doing it, as shown next.

Kendall: I used to without fail spew every single day after, but I haven't done that for ages so I either grew out of it or stopped drinking as much or, I think I just grew out of it  
 Heidi: Yeah like 14 or 15 you get drunk quickly  
 Ella: Really quickly  
 Kendall: [Have a half a bottle  
 Prue: [One or two and you're goneskis  
 Heidi: Lots of vomiting. A lot of vomiting  
 Ella: It's not embarrassing cause everyone's, you're at someone's house and then you look around there's loads of people leaning against stuff, all on the ground, and that's what we were all like  
 Kendall: Yeah

*Group 5*

The women discuss getting drunk “really quickly”, and this resulting in “a lot of vomiting” when they were young. They spoke about this in hindsight, and Kendall states “I haven't done that in ages...I think I just grew out of it”. They are expected to have learnt how to balance embodied pleasures without tipping over into unpleasantness when they get older. However, although they have learnt ways of managing their drunkenness, they still get “too drunk” occasionally, as shown below:

Tamara: I guess binge drinking has dramatically [slowed down. I mean there are still, I would say this year there have been times where I have gotten too drunk, but, I've had almost a decade of training so it happens less  
 Anna: [yeah totally  
 Janelle: (Laughing)  
 Anna: Yeah

*Group 1*

Tamara says that although “this year there have been times where I have gotten too drunk”, this now “happens less”, and even though she has “had almost a decade of training” in drinking, she has merely “slowed down” how often she gets drunk. This shows that learning to balance the embodied aspects of drunkenness does not stop binge drinking completely, it just happens less regularly. The tipping point also implies that time is an important factor in the balancing act. Tipping over does not happen in the first hour of drinking, it usually occurs later in a night out. Predicting just when this might occur over the course of an evening is described as difficult, and depends on the drinking context as shown in the following extract.

Tamara: I don't know what the pin point moment is though. It changes depending on the situation, and how long your night's going to be

Anna: Yeah

Tamara: If you were going to have a reallllllllly really long night, you can be quite drunk at one stage and then just slow down a bit [to get back to not being very drunk. You can go a little bit like

Anna: [Yeah

*Group 1*

Tamara demonstrates the precariousness of the embodied balancing act and says "it changes depending on the situation". Her description demonstrates how women balance on a seesaw of being "quite drunk at one stage" and then getting "back to not being very drunk". Time is a crucial aspect of this balancing act because it depends on "how long your night's going to be". The balancing act she describes takes place throughout the course of a drinking occasion, with a short term goal of maintaining ideal intoxication levels. The women also discussed longer term balancing acts where they manage having a good level of fun during the night, whilst considering the next few days which follow. The following excerpts demonstrate the longer term balancing act which takes place in addition to the short term ones.

Lucy: I like to stop, well pretty much at least an hour or so before I go home. But you never know what time you're going home anyway. But it's just the worst thing trying to get into bed and your head's still

Penny: I think you know when you've had enough. I stop when I know, that's... you're still drunk but you're not

Alicia: Yeah. I guess just, you can kind of feel, know what you're going to feel like the next day

A: Is it all to do with the next day?

Alicia: Yeah

Lucy: Yeah

Alicia: 90% of it

*Group 4*

A: So what's the reason for going home earlier now?  
Amy: I get tired  
Eve: Yeah  
Tash: Too many things to do on a Sunday  
Eve: Yeah. Don't wanna be  
Cindy: Hungover  
Amy: And still be hungover on Monday as well  
Tash: Yeah going back to work hungover is not fun

*Group 3*

The women discussed taking the following days into account when drinking. They described carefully considering how their hangover was going to affect their weekend and going back to work. This had to be balanced with the fun and embodied pleasures that they were experiencing. Alicia noted that consideration of the following day is “90%” of the decision to stop drinking during an evening. They discussed this as something they do now that they are older, with responsibilities, and described having “things to do on a Sunday” as a reason for going home earlier. They discussed having to manage their drinking throughout the course of a night in relation to how they ‘know’ they will feel the following day, to avoid wasting a whole Sunday.

In summary, the women's accounts demonstrated intricate and precarious balancing acts that they engage in to manage the contradictions they face when drinking. These balancing acts are specific to performances of femininity and are embodied. The women described age and time as important factors in managing these balancing acts well, and this is learnt through a lot of practice. Young women's drinking practices are complex, contradictory, precarious and difficult to manage. Women engage in heavy drinking amidst a myriad of social and embodied pressures and contradictions, yet still often manage to balance this well. This insight into their drinking practices is highly useful in gaining a better understanding of why young women are drinking so heavily despite the negative effects.

## Chapter 6: Discussion

---

This study conceptualised heavy drinking as a practice which is bound up in the social environment and the bodies in which we live, and gained understanding into the important role that alcohol plays in social life and the meanings it has for young women. Relatively little research has examined how embodied experiences influence slowing down or stopping drinking, and the role people's embodied states and sensations play in this decision making. Theorising drinking in this way provides valuable insight into the maintenance of this behaviour and has much to offer health promotion work. By acknowledging the embodied aspects of drinking and exploring the physical sensations and pleasures felt during intoxicated states, this study may usefully inform public health understandings of alcohol consumption and possible effective health promotion approaches to disrupt harmful drinking patterns in young women.

### Discussing the Findings

These findings challenge the conceptualisation of alcohol consumption as a straightforward behaviour, and reinforce the view that individually focussed health behaviour messages may be inappropriate. The analysis revealed that the women's talk about their drinking was highly contradictory, and the women engaged in intricate social and embodied balancing acts when drinking to intoxication. The contradictory nature of the women's talk around gender performances supported the view that contemporary femininity "has become an increasingly difficult and even impossible space to occupy, yet girls and women do find ways of inhabiting this profoundly dilemmatic space" (Griffin et al., 2013, p. 3). The findings of this study provide insight into the complexities of drinking and how these complexities are managed and justified. The contradictions in the women's talk highlight the pressure on women to engage in certain drinking practices, and give insight into *why* this behaviour is maintained. The balancing acts and justifications explain *how* this behaviour is

maintained, and demonstrate the well-practiced processes involved in managing drunkenness. I discuss these findings more fully below. Decisions about drinking have previously been conceptualised as being closely interlinked with the performance of femininity and the embodied experience of drinking (Waitt et al., 2011). Theorising women's drinking through embodiment is crucial to understanding why young women are drinking so often and so heavily, and the findings from this study offer valuable insights into this. The contradiction between letting go, forgetting insecurities and drinking to be attractive showed that meeting and talking to new people are highly important to the young women, but they feel less comfortable doing this when they are sober. They described not having the confidence to meet new people and have conversations they want to have unless they are drunk. This draws attention to the problematic nature of social life without drinking for these young women. Previous research has also found that alcohol is used to meet new people and facilitate conversations with other people, particularly strangers (Borlagdan et al., 2010). This study also offers insights into why young women feel heavy drinking is helpful for socialising, as they described feeling "judged" and constantly under scrutiny of the gaze when sober. Furthermore, the analysis showed they emphasise behaving in ways which are sexually attractive to men when drinking, reinforcing heterosexual gender performances and hegemonic masculinity, which subordinates femininity. These performances of femininity are so restricting that a freeing escape from this is welcomed, despite its negative consequences. Previous research in the USA found that drinking 'like a guy' was not to become masculine, because this questioned a woman's sexuality. Rather, women drank heavily to be 'liked by a guy', reinforcing their heterosexuality (Young et al., 2005). Similarly, a study of bachelorette parties in the UK found that although women constructed the parties as an opportunity to be hedonistic and loosen up, they were also highly sexual and structured around flirting with men (Montemurro & McClure, 2005). The women in the current study discussed engaging in heavy drinking practices, despite its difficulties, to avoid being labelled a "control freak" by men. These findings show that drinking is not an escape from pressures of performing femininity at all, but may be viewed as an inflated version of these pressures.

Shields Dobson (2014) also described modern women's drinking practices as constricting, where there are few options for women to take up different feminine identities. She examined whether 'laddish' performativity by young women on social networking sites was a rebellion against femininity or a 'giving in' to certain forms of masculinity. Shields Dobson used the term "performative shamelessness" to describe intentionally 'grotesque' representations of female bodies. She argued that women engage in these laddish performances due to a lack of autonomy and choice in a context of intense scrutiny and objectifying gazes. Although the women in this study did not describe 'laddish' behaviour, Shields Dobson's theorising aligns with the finding that the women drink heavily to engage in hedonistic activities and escape the gaze. Their discussions highlighted a lack of autonomy in performing femininity whilst participating in the social, drinking scene. The vomiting and 'disgusting' behaviours that the women described are examples of performative shamelessness, as these behaviours would otherwise be shameful, and they are in other women, but not in intoxicated contexts. This research and the other recent research I have described outline the difficult space young women occupy when engaging in hedonistic and social practices.

Despite the complex and contradictory nature of drinking practices that were described, the young women were expected to expertly manage their drunkenness, and their accounts demonstrated the intricate ways they negotiate their position in this contradictory space. This research found that decisions to stop drinking are embodied decisions, and the women use well-learned embodied signals of 'knowing' when they have had enough alcohol. They positioned themselves as experienced drinkers who can balance the seesaw of intoxication level well, following a "decade of training". These findings are similar to the study with mid-life adults in Scotland, who also positioned themselves as experienced drinkers that can call on embodied feelings of 'knowing' when to stop drinking (Lyons et al., 2014). This embodied knowledge positions the women as 'experts' and enables them to ignore health messages. However, the balancing acts the women discussed were precarious and difficult to manage, and the ability to do this was constructed as an individual difference. Balancing between feeling tipsy and knowing there's no going back

is also described as being very difficult, and there are times when they are unable to do this successfully. Similarly, the mid-life adults described occasions when they still passed a physical “point of no return” in their drinking. This shows that although people position themselves as experts, the physical balancing act involved in heavy drinking remains difficult across the lifespan, and experience in drinking may not change this. Despite the difference in age, culture and geographic location of this study and Lyons, Emslie and Hunt’s (2014) research, the findings obtained were very similar. This suggests that it is not just the young women in this study who use embodied knowledge to manage heavy drinking and distance themselves from health promotion messages. This practice may be common to people of different ages, genders and cultures and could be a fruitful avenue for future research to explore. Challenging the idea that experienced drinkers know best and can expertly manage intoxication, and highlighting the precarious nature of alcohol consumption, could be a useful approach to decreasing heavy drinking.

Heavy drinking has been conceptualised as a controlled loss of control (Measham, 2002) which is ‘hedonistic yet bounded’ (Measham & Brain, 2005). Previous research has offered reasons for why people control their drinking such as decreasing social marginalisation, avoiding trouble with the police, to ensure they are sober enough to get home, improving health and sporting performance, and minimizing the hangover the next day. However, the research has paid little attention to the embodied experience of heavy alcohol consumption and the processes through which controlled drunkenness is achieved. These findings shows that theorising drinking as an embodied, gendered experience is highly useful for gaining insights into the decision making involved in this behaviour. This research offers in-depth insight into how gender performances and being a physical body influence alcohol consumption and making decisions about stopping or slowing drinking during a night out. The women discussed controlling their drinking to avoid looking “tragic” and to appear attractive, flirty and fun. They use embodied knowledge learnt over a number of years to avoid passing a point where there’s no going back and to avoid individual embodied consequences. They think about this

more as they get older, and consider the days which follow when drinking heavily. As noted by Lyons (2009), compared to men, women demonstrated more constraint and control in their drinking. Research has also found that it is less socially acceptable for women to drink to excess and lose control than it is for men (Young et al., 2005), therefore future research could usefully explore the differences between men's and women's management of drunkenness.

Previous research has found that drinking to the point of vomiting and passing out is not understood as pleasurable, but people still engage in these unpleasant embodied experiences for social purposes (Griffin et al., 2009). It was also found that students experienced drinking as a dualistic pleasure, and going out to clubs was described as both exhilarating and repulsing (Bancroft, 2012). Although young people are aware of the negative aspects of heavy drinking, the positive social outcomes that it provides outweigh this.

Theorising drinking as an embodied experience offers further insight into the experience of the unpleasant aspects of drinking and why this justification is made. In this study, although the negative consequences of drunkenness were described as embodied and individual, sharing the same level of intoxication was considered one of the best things about drinking. This highlights the power of friendship and socialising, as the women accept unpleasant bodily consequences as the price of having fun with friends. However, experiencing the consequences on an individual level contradicts the idea of sharing the buzz, and the young women described becoming less willing to do this as they get older. This contradiction could usefully inform health messages, highlighting the embodied conflict of drinking to be social. Challenging the idea of sharing the buzz could make women question whether drinking really does facilitate 'quality time' with friends. A possible health promotion message using these ideas could show a young woman spending time alone and unable to communicate while drinking heavily and use the slogan 'Is this really quality time with friends?'

Research has demonstrated the meanings around drinking which work to justify heavy and harmful drinking practices for young people. Niland et al.

(2013) focussed on how drinking relates to friendship in young New Zealanders, and found that drinking with friends was considered “bad, but good overall”. The young people balanced positive and negative drinking effects, and justified unpleasant experiences by describing the night as “good overall”. Similarly, a recent New Zealand study found that young people used conflicting discourses to describe their drinking behaviour (Chainey & Stephens, 2014). They constructed drinking as ‘social lubricant’ but also distanced themselves from negative discourses which construct alcohol as ‘bad’, using sophisticated positioning to construct their drinking positively. These studies examined both young men and women, and showed that they construct their heavy drinking in similar ways, however, they fail to consider the embodied experiences involved in alcohol consumption. Conceptualising drinking as an embodied practice allows fuller understanding into the ‘bad’ side of drinking that young people often describe. An important finding of the current study was that negative embodied consequences of alcohol consumption were the most prominent in the women’s descriptions about what alcohol does to their bodies. The women discussed unpleasant outcomes such as hangover, memory loss, weight gain, and feeling “dry” and “scodey”. This is important because it reveals how women think about their bodies in relation to drinking large amounts of alcohol, and shows that the physically unpleasant experiences are highly memorable. This could be a useful avenue for health promotion messages, which could emphasise the unpleasant physicalities of heavy drinking. The women also described a conflicting decision between drinking alcohol and trying to lose weight or be healthy. This embodied conflict plays an important role in the decisions women make about when and how to drink, and becomes more prominent in their decisions as they get older. Age is an important aspect of decision making around drinking, as some of the women discussed how their drinking practices have changed significantly since entering their twenties. They described how social expectations change, they have become more “health conscious” and consider the consequences of a hangover more. The women discussed thinking more about the negative embodied consequences of alcohol during a night out, and considering the days following. In fact, fulfilling responsibilities and avoiding a hangover was described as “90%” of the decision to stop drinking during an evening. Health

promotion messages which reinforce the unpleasant, individual and embodied consequences of drinking could remind women of the high price their bodies pay for a night out, and make them think twice about drinking so heavily.

### **Implications of this Research**

The findings of this research have implications for women's rights to make autonomous decisions. The women's accounts showed that they are under enormous pressure to perform particular femininities, they are unable to really 'let go' and their decisions about drinking are influenced by fear of negative judgement. There is very little autonomy for ways of behaving when drunk, and women risk negative social consequences for taking up unacceptable feminine performances. Their right to choose not to drink is undermined by the concern of being labelled a "control freak" or "uptight", and being sober is not considered a viable option. Women who do decline alcohol may become subject to social stigma and negative attitudes. This is highly problematic, as it demonstrates social power which privileges insider knowledge and works to exclude people who do not drink.

Another implication of these findings is the construction of heavy drinking as commonplace and normal. Previous research in New Zealand has found that both young men and women considered heavy drinking as 'what you do' as a Kiwi (Lyons & Willott, 2008). Heavy alcohol consumption was constructed as the default option for socialising and having fun among these young women, which raises concern about the condition of social life without drinking. The women described drinking as a rite of passage for growing up in New Zealand, and described this period as "training". That alcohol is constructed as a necessary component for having confidence and facilitating conversations is concerning. This highlights the important role alcohol has in young women's learning of social skills, self- and feminine identity when growing up. They described regularly engaging in harmful drinking practices when they were teenagers, and suggested that "everyone is doing it". Although the women discussed getting "too drunk" less often now, they still engage in heavy

drinking to gain confidence and socialise. The construction of drinking to intoxication as a rite of passage for young people may influence the way they learn to socialise, and result in feeling the need to drink for confidence when older.

That the women embody the negative consequences of intoxication, and drinking “too much” has merely “slowed down”, has implications for women’s health. Managing heavy drinking was constructed as a practice that one must learn on their own, through inevitable negative experiences. A common understanding was that everyone necessarily has these experiences, which are extremely harmful to their health, to become an expert drinker. The women discussed inflicting harm on their bodies and their health in order to socialise, meet people and have good conversations. Despite being aware of the harmful effects on their bodies and being caught in an embodied conflict of trying to be healthy or lose weight, women sacrifice this to be social.

### **Considerations and Reflections on the Research Process**

The embodied subjectivity framework used in this study was extremely useful, provided novel insight into the lived experiences of drinking and brought the phenomenological and social constructionist approaches together. This framework could be usefully employed in future research into drinking practices of Maori, young men, different SES and low education groups. Using existing friendship groups to discuss both embodied and social experiences of drinking was a strength of this research. Group discussions with friends were a rich source of data as they encouraged in depth discussion of personal and shared experiences of times when they had been drunk together. The women felt comfortable talking with friends and this approach was useful for enabling them to draw on shared experiences and giving insight into shared meanings. Conducting the discussion groups in two locations, Wellington and Dunedin, was advantageous for gaining diverse insight into understandings and meanings around drinking. Taking a unique, embodied approach to understanding drinking was a key strength of this research as it allowed me to

access the lived experiences of drinking to intoxication and being drunk for the young women.

Although the use of existing friendship groups was advantageous, it may have limited the disclosure of certain private or embodied experiences due to embarrassment. Using one-on-one interviews in future research could encourage further disclosure of personal material. Another limitation of this research was that it included only heterosexual women, and therefore the emphasis on heterosexuality in these findings must be considered in this context. Homosexual women's meanings and embodied experiences of drinking would be useful to explore in the future. Another limitation of this study was that the relationship status of the participants was not recorded or considered. Future research could beneficially examine single women and women in relationships separately, as flirting with men was an important aspect of the findings which may differ between these two groups. All of the women in this study were New Zealand European, and members from four out of five groups were University educated. This topic could be usefully explored with Maori women and groups with different education status. Another consideration for future research expanding on these findings could examine the women's accounts in relation to the amount they drink. Some of the participants in this study described drinking much more heavily than other women in the group, and this could influence the meanings they attach to drinking. Future research could also beneficially examine a specific night of drinking in more detail with groups, as this may encourage more in-depth discussion and detailed explanation of embodied experiences.

In conducting social constructionist research, the role of the researcher must be considered. Within the discussion groups, I was also a participant in the group's talk and the construction of knowledge. Although the setting was familiar, relaxed, and took place in one of the participant's homes, this was not a normal get together between friends. The fact that I was a researcher, video and audio recording the discussion and reimbursing the participants for their time, meant that the discussions were more formal than casual. My gender, ethnicity, age and role as a university student collecting data would have

influenced the way the participants interacted with me and the particular information they shared. I had briefly introduced myself to the groups prior to the discussions, so the participants knew that I come from Dunedin, which all of them either currently or previously lived in. I was the same gender and ethnicity as all of the participants, the same age as one of the groups and only a few years older than the other groups. Having these things in common with the women would have elicited specific talk or sharing of particular stories and may have made them feel more familiar and comfortable with me. The women may have viewed me as a peer, and shared more information with me than they may have with an older researcher, a male or someone from a different ethnic background. The women were also aware that I was researching women's drinking, which may have lead some of the participants to share stories of drinking with girl friends rather than with other, male friends. The participants were very open about their experiences and most of the groups spoke freely and in a relaxed manner. Their role as 'experts' of these particular drinking practices allowed me to take up a naïve role, and not impose an expert or powerful position. These factors also influenced my interpretation of the data, as I used my own experience and understanding of drinking practices and gender performances as a reference to interpret the women's talk. My first-hand experience in the University drinking culture, and the different practices that take place in the twenties, meant I was familiar with the practices the women described, and this would have influenced how I understood and interpreted the discussions. As I stated earlier, my experience from travelling abroad also allowed me to be critical and have an outsider's perspective of the practices that were being discussed.

During the discussions, and sometimes after the discussion finished, most groups had a conversation about New Zealand's drinking culture. I was surprised that most of the women felt that there was no problem with New Zealand's drinking culture, and that it was no worse than any other countries. They also did not think there was a problem with their own drinking practices, they emphasised how normal "binge drinking" is and said they had not really thought about it before. Prior to conducting this research I have always had the personal opinion that the drinking culture in New Zealand was problematic,

but also thought that this was a well-known fact. I realised during this research process that my opinion was not shared by many of my friends and peers, which surprised me greatly. With this knowledge I have been more careful not to make assumptions about other people's opinions based on my own. Participating in this study and having these conversations may also influence the way the women now think about their drinking practices, and may have encouraged deeper consideration of the experience of being drunk. Undertaking this research has influenced how I see the world. During the research process I began to notice certain things about the culture of intoxication in New Zealand that I had not thought about before. I began to challenge 'normal' drinking practices, and started to view these as socially bound gender performances. I am grateful for the open and critical mind this research has given me, especially in relation to health promotion activities, and intend to use this for future work in improving the health of young New Zealanders.

## **Conclusion**

This research explored the embodied and gendered experiences that take place for young women within social relationships and drinking practices. The women's accounts demonstrated the contradictory nature of heavy drinking practices and showed the difficult space young women occupy in relation to performances of femininity when drinking. The women described intricate and precarious balancing acts which they engage in to manage this contradiction and participate in this hedonistic activity. These findings align with previous research which also found performances of femininity contradictory and found young people's drinking to be a balancing act. This research demonstrates the usefulness of theorising drinking as an embodied experience and the importance of considering physical bodies in understanding drinking practices. The novel findings highlight the importance of considering the social, gendered and embodied nature of this health behaviour in health promotion initiatives.

## References

- ALAC. (2005). It's not the drinking, it's how we're drinking. Retrieved from [www.alcohol.org.nz](http://www.alcohol.org.nz).
- ALAC. (2012). *The Real Story of Kiwis and Alcohol*. Wellington: Alcohol Advisory Council of New Zealand.
- Babor. (2010). Alcohol: No Ordinary Commodity – a summary of the second edition. *Addiction*, 105(5), 769-779.
- Bancroft, A. (2012). Drinking with and without fun: Female students' accounts of pre-drinking and club-drinking. *Sociological Research Online*, 17(4), 12.
- Banister, E. N., & Piacenitini, M. G. (2008). Drunk and (dis) orderly: The role of alcohol in supporting liminality. *Advances in Consumer Research*, 35, 311-318.
- Barbour, R., & Kitzinger, J. (1999). *Developing focus group research: politics, theory and practice*: Sage.
- Borlagdan, J., Freeman, T., Duvnjak, A., Lunnay, B., Bywood, P., & Roche, A. (2010). From Ideal to Reality: Cultural contradictions and young people's drinking. from National Centre for Education and Training on Addiction, Flinders University, Adelaide.
- Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, 3(2), 77-101.
- Braun, V., & Clarke, V. (2013). *Successful qualitative research: A practical guide for beginners*: Sage.
- Brown, R., & Gregg, M. (2012). The pedagogy of regret: Facebook, binge drinking and young women. *Continuum*, 26(3), 357-369.
- Brown, S. D., Cromby, J., Harper, D. J., Johnson, K., & Reavey, P. (2011). Researching "experience": Embodiment, methodology, process. *Theory and Psychology*, 21(4), 493-515.
- Burr, V. (1995). *An Introduction to Social Constructionism*: Routledge, Chapman & Hall, Incorporated.
- Burr, V. (2003). *Social Constructionism*: Routledge, Sussex UK.
- Campbell, H. (2000). The glass phallus: Pub(lic) masculinity and drinking in rural New Zealand. *Rural Sociology*, 65(4), 562-581.
- Carey, K. B. (2001). Understanding binge drinking: Introduction to the special issue. *Psychology of Addictive Behaviors*, 15(4), 283-286.

- Chainey, T. A., & Stephens, C. (2014). 'Let's get wasted': A discourse analysis of teenagers' talk about binge drinking. *Journal of health psychology*, DOI: 10.1177/1359105314532972.
- Coffield, F., & Gofton, L. (1994). *Drugs and young people*: Institute for Public Policy.
- Coleman, L., & Cater, S. (2005). Underage 'binge' drinking: A qualitative study into motivations and outcomes. *Drugs: Education, Prevention, and Policy*, 12(2), 125-136.
- Collie, C. (2011). Think Drink: buying them alcohol doesn't buy them a good time: impact evaluation. *Wellington: Alcohol Advisory Council of New Zealand*.
- Connell, R. W., & Messerschmidt, J. W. (2005). Hegemonic masculinity rethinking the concept. *Gender & society*, 19(6), 829-859.
- Connor, J., Broad, J., Rehm, J., Hoorn, S., & Jackson, R. (2005). The burden of death, disease, and disability due to alcohol in New Zealand.
- Cromby, J. (2004). Between constructionism and neuroscience: The societal co-constitution of embodied subjectivity. *Theory and Psychology*, 14(6), 797-821.
- Cromby, J. (2005). Theorizing embodied subjectivity. *International Journal of Critical Psychology*, 15, 133-150.
- Crotty, M. (1998). *The foundations of social research : meaning and perspective in the research process / Michael Crotty*: St Leonards, NSW : Allen & Unwin, 1998.
- Cullen, F. (2011). The only time I feel girly is when I go out': Drinking stories, Teenage girls, and respectable femininities. *International Journal of Adolescence and Youth*, 16(2), 119-138.
- Day, K. G., B. McFadden, M. (2004). Warning! Alcohol can seriously damage your feminine health. *Feminist Media Studies*, 4(2), 165-183.
- de Visser, R. O., & McDonnell, E. J. (2012). 'That's OK. He's a guy': A mixed-methods study of gender double-standards for alcohol use. *Psychology and Health*, 27(5), 618-639.
- Dempster, S. (2011). I drink, therefore I'm man: Gender discourses, alcohol and the construction of British undergraduate masculinities. *Gender and Education*, 23(5), 635-653.
- Duff, C. (2008). The pleasure in context. *International Journal of Drug Policy*, 19(5), 384-392.
- Fergusson, D., & Boden, J. (2011). *Improving the Transition: Reducing Social and Psychological Morbidity During Adolescence*. Auckland, NZ.
- Fountain, J., & Fish, N. (2010). *It's a happy drink: Australasian Generation Y's experiences and perception of sparkling wine*. Paper presented at the International Academy of Wine Business Research Conference, Auckland, NZ.

- Fry, M.-L. (2011). Seeking the pleasure zone: Understanding young adult's intoxication culture. *Australasian Marketing Journal*, 19(1), 65-70.
- Gergen. (1985). The Social Constructionist Movement in Modern Psychology. *American Psychologist*, 40(3), 266-275.
- Gergen. (1999). *An invitation to social construction*. Thousand Oaks, CA: SAGE Publications Limited.
- Griffin, C., Bengry-Howell, A., Hackley, C., Mistral, W., & Szmigin, I. (2009). 'Every time I do it I absolutely annihilate myself': Loss of (self-)consciousness and loss of memory in young people's drinking narratives. *Sociology*, 43(3), 457-476.
- Griffin, C., Szmigin, I., Bengry-Howell, A., Hackley, C., & Mistral, W. (2013). Inhabiting the contradictions: Hypersexual femininity and the culture of intoxication among young women in the UK. *Feminism & Psychology*, 23(2), 184-206.
- Guise, J. M. F., & Gill, J. S. (2007). 'Binge drinking? It's good, it's harmless fun!': A discourse analysis of accounts of female undergraduate drinking in Scotland. *Health Education Research*, 22(6), 895-906.
- Health Promotion Agency. (2014). Glossary of Terms. Retrieved from [www.alcohol.org.nz](http://www.alcohol.org.nz).
- Heath, D. B. (1995). *International Handbook on Alcohol and Culture*. Westport, Conn: Greenwood Press.
- Huckle, T., Sweetsur, P., Moyes, S., & Casswell, S. (2008). Ready to drinks are associated with heavier drinking patterns among young females. *Drug and Alcohol Review*, 27(4), 398-403.
- Huckle, T., You, R. Q., & Casswell, S. (2010). Socio-economic status predicts drinking patterns but not alcohol-related consequences independently. *Addiction*, 105(7), 1192-1202.
- Hutchins, G. (2009). *Your Shout: A toast to drink and drinking in New Zealand*: Hodder Moe.
- Hutton, F., Wright, S., & Saunders, E. (2013). Cultures of intoxication: Young women, alcohol, and harm reduction. *Contemporary Drug Problems*, 40(4).
- Hyde, A., Howlett, E., Brady, D., & Drennan, J. (2005). The focus group method: Insights from focus group interviews on sexual health with adolescents. *Social Science & Medicine*, 61(12), 2588-2599.
- Jackson, C., & Tinkler, P. (2007). 'Ladettes' and 'Modern Girls': 'troublesome' young femininities. *The sociological review*, 55(2), 251-272.
- Jakobsson, A., Hensing, G., & Spak, F. (2008). The role of gendered conceptions in treatment seeking for alcohol problems. *Scandinavian journal of caring sciences*, 22(2), 196-202.

- Jayne, M., Valentine, G., & Holloway, S. L. (2010). Emotional, embodied and affective geographies of alcohol, drinking and drunkenness. *Transactions of the Institute of British Geographers*, 35(4), 540-554.
- Johnston, K. L., & White, K. M. (2004). Beliefs underlying binge-drinking in young female undergraduate students: A theory of planned behaviour perspective. *Youth Studies Australia*, 23(2), 22-30.
- Jørgensen, M. W., & Phillips, L. J. (2002). *Discourse analysis as theory and method*: SAGE Publications Limited.
- Kitzinger, J. (1995). Qualitative research. Introducing focus groups. *BMJ: British medical journal*, 311(7000), 299.
- Kiverstein, J. (2012). The Meaning of Embodiment. *Topics in Cognitive Science*, 4(4), 740-758.
- Kypri, K., Cronin, M., & Wright, C. S. (2005). Do university students drink more hazardously than their non-student peers? [1]. *Addiction*, 100(5), 713-714.
- Kypri, K., Langley, J. D., McGee, R., Saunders, J. B., & Williams, S. (2002). High prevalence, persistent hazardous drinking among New Zealand tertiary students. *Alcohol and Alcoholism*, 37(5), 457-464.
- Kypri, K., Paschall, M. J., Langley, J., Baxter, J., Cashell-Smith, M., & Bourdeau, B. (2009). Drinking and alcohol-related harm among New Zealand university students: Findings from a national web-based survey. *Alcoholism: Clinical and Experimental Research*, 33(2), 307-314.
- Kypri, K., Paschall, M. J., Maclennan, B., & Langley, J. D. (2007). Intoxication by drinking location: A web-based diary study in a New Zealand university community. *Addictive Behaviors*, 32(11), 2586-2596.
- Litosseliti, L. (2003). *Using focus groups in research / Lia Litosseliti*: London ; New York : Continuum, c2003.
- Longhurst, R. (2003). Semi-structured interviews and focus groups. *Key methods in geography*, 117-132.
- Lyons, A. (2009). Masculinities, Femininities, Behaviour and Health. *Social and Personality Psychology Compass*, 3(4), 394-412.
- Lyons, A., & Willott, S. (2008). Alcohol consumption, gender identities and women's changing social positions. *Sex Roles*, 59(9-10), 694-712.
- Lyons, A. C., & Chamberlain, K. (2006). *Health psychology : A critical introduction* Cambridge : Cambridge University Press, 2006.
- Lyons, A. C., & Cromby, J. (2010). Social psychology and the empirical body: Rethinking the relationship. *Social and Personality Psychology Compass*, 4(1), 1-13.

- Lyons, A. C., Emslie, C., & Hunt, K. (2014). Staying 'in the zone' but not passing the 'point of no return': Embodiment, gender and drinking in mid-life. *Sociology of Health and Illness*, 36(2), 1-14.
- MacLachlan, M. (2004). *Embodiment : clinical, critical and cultural perspectives on health and illness* Maidenhead : Open University Press, 2004.
- Matthews, E. (2002). *The Philosophy of Merleau-Ponty*: Chesham, Bucks: Acumen.
- McCreanor, T., Lyons, A., Griffin, C., Goodwin, I., Moewaka Barnes, H., & Hutton, F. (2013). Youth drinking cultures, social networking and alcohol marketing: Implications for public health. *Critical Public Health*, 23(1), 110-120.
- McEwan, Campbell, M., Lyons, A., & Swain, D. (2013). *Pleasure, profit and pain: Alcohol in New Zealand and the contemporary culture of intoxication*.
- McEwan, Campbell, M., & Swain, D. (2010). New Zealand culture of intoxication: Local and global influences. *New Zealand Sociology*, 25(2), 15-37.
- McPherson, M., Casswell, S., & Pledger, M. (2004). Gender convergence in alcohol consumption and related problems: Issues and outcomes from comparisons of New Zealand survey data. *Addiction*, 99(6), 738-748.
- Measham. (2002). 'Doing gender'--'doing drugs': conceptualizing the gendering of drugs cultures. *Contemporary Drug Problems*, 29(2), 335.
- Measham, & Brain. (2005). 'Binge' drinking, British alcohol policy and the new culture of intoxication. *Crime, Media, Culture*, 1(3), 262-283.
- Meiklejohn, J., Connor, J., & Kypri, K. (2012). One in three New Zealand drinkers reports being harmed by their own drinking in the past year. *New Zealand Medical Journal*, 125(1360), 28-36.
- Merleau-Ponty, M. (1996). *Phenomenology of perception*: Motilal Banarsidass Publishers.
- Ministry of Health. (2013). *A New National Drug Policy for New Zealand: Discussion document*. Wellington: Ministry of Health.
- Misra, G. (1993). Psychology from a constructionist perspective: An interview with Kenneth J. Gergen. *New Ideas in Psychology*, 11(3), 399-414.
- MOH. (2013). *Hazardous drinking in 2011/12: Findings from the New Zealand Health Survey*. Wellington: Ministry of Health.
- Monaghan, L. F. (2001). Looking good, feeling good: The embodied pleasures of vibrant physicality. *Sociology of Health and Illness*, 23(3), 330-356.
- Montemurro, B., & McClure, B. (2005). Changing Gender Norms for Alcohol Consumption: Social Drinking and Lowered Inhibitions at Bachelorette Parties. *Sex Roles*, 52(5-6), 279-288.

- MSD. (2010). *The Social Report/Te Purongo Oranga Tangata 2010*. Wellington: Ministry of Social Development.
- Murugiah, S. (2012). A discrepancy of definitions: Binge drinking and female students at an Australian university. *Youth Studies Australia, 31*(2).
- Niland, P., Lyons, A. C., Goodwin, I., & Hutton, F. (2013). "Everyone can loosen up and get a bit of a buzz on": Young adults, alcohol and friendship practices. *International Journal of Drug Policy, 24*(6), 530-537.
- Niland, P., Lyons, A. C., Goodwin, I., & Hutton, F. (2014). 'See it doesn't look pretty does it?' Young adults' airbrushed drinking practices on Facebook. *Psychology and Health*, DOI: 10.1080/08870446.08872014.08893345.
- NZ Law Commission. (2010). Alcohol in our lives: Curbing the harm, A report on the review of the regulatory framework for the sale and supply of liquor. *Wellington: NZ Law Commission*.
- O'Malley, P., & Valverde, M. (2004). Pleasure, Freedom and Drugs The Uses of 'Pleasure' in Liberal Governance of Drug and Alcohol Consumption. *Sociology, 38*(1), 25-42.
- Parker, I. (1998). *Social constructionism, discourse, and realism / edited by Ian Parker*: London; Thousand Oaks, CA: SAGE Publications, 1998.
- Peralta, R. L. (2007). College alcohol use and the embodiment of hegemonic masculinity among European American men. *Sex Roles, 56*(11-12), 741-756.
- Rankine, J., Gregory, A., Tonks, A., & Thompson-Evans, T. (2013). *Women and Alcohol in Aotearoa/New Zealand Te waipiro me ngā wāhine i Aotearoa*. Wellington, NZ: Alcohol Healthwatch and Women's Health Action.
- Research NZ. (2011). ALAC Alcohol Monitor - Adults and youth: 2009-10 drinking behaviours report. *Wellington: ALAC*.
- Rolfe, A., Orford, J., & Dalton, S. (2009). Women, alcohol and femininity: A discourse analysis of women heavy drinkers' accounts. *Journal of Health Psychology, 14*(2), 326-335.
- Rúðólfssdóttir, A. G., & Morgan, P. (2009). 'Alcohol is my friend': Young middle class women discuss their relationship with alcohol. *Journal of Community and Applied Social Psychology, 19*(6), 492-505.
- Sampson, E. E. (1996). Establishing Embodiment in Psychology. *Theory and Psychology, 6*(4), 601-624.
- Schäfer, G. (2011). Family functioning in families with alcohol and other drug addiction. *Social Policy Journal of New Zealand, 37*, 1-17.
- Schroder, R., Sellman, D., Frampton, C., & Deering, D. (2008). Profile of young people attending alcohol and other drug treatment services in Aotearoa, New Zealand:

- Clinical file search. *Australian and New Zealand Journal of Psychiatry*, 42(11), 963-968.
- Seaman, P., & Ikegwuonu, T. (2011). 'I don't think old people should go to clubs': how universal is the alcohol transition amongst young adults in the United Kingdom? *Journal of Youth Studies*, 14(7), 745-759.
- Sheehan, M., & Ridge, D. (2001). You become really close... you talk about the silly things you did, and we laugh": the role of binge drinking in female secondary students' lives *Substance Use & Misuse*, 36(3), 347.
- Shields Dobson, A. (2014). Laddishness online: The possible significations and significance of 'performative shamelessness' for young women in the post-feminist context. *Cultural Studies*, 28(1), 142-164.
- SHORE, & Whariki Research Centre. (2011). New Zealand Arrestee Drug Use Monitoring. Retrieved from [www.police.govt.nz](http://www.police.govt.nz).
- Solomon, R. C. (2006). Emotions in phenomenology and existentialism. *A companion to phenomenology and existentialism*, DOI: 10.1002/9780470996508.
- Statistics NZ. (2011). Births and Deaths: Year ended March 2011. *Wellington: Statistics New Zealand*.
- Stephens, C. (2008). *Health promotion: A psychosocial approach*: Maidenhead : Open University Press : Mc Graw-Hill, c2008.
- Stewart, L. (1997). Approaches to preventing alcohol-related problems: The experience of New Zealand and Australia. *Drug and Alcohol Review*, 16(4), 391-399.
- Szmigin, I., Griffin, C., Mistral, W., Bengry-Howell, A., Weale, L., & Hackley, C. (2008). Re-framing 'binge drinking' as calculated hedonism: Empirical evidence from the UK. *International Journal of Drug Policy*, 19(5), 359-366.
- Waitt, G., Jessop, L., & Gorman-Murray, A. (2011). 'The guys in there just expect to be laid': embodied and gendered socio-spatial practices of a 'night out' in Wollongong, Australia. *Gender, Place and Culture*, 18(02), 255-275.
- Watson, J. (2000). *Male bodies: Health, culture and identity*. Buckingham: Open University Press.
- Wilde, M. H. (1999). Why embodiment now? *Advances in Nursing Science*, 22(2), 25-38.
- Willott, S., & Lyons, A. C. (2012). Consuming Male Identities: Masculinities, Gender Relations and Alcohol Consumption in Aotearoa New Zealand. *Journal of Community and Applied Social Psychology*, 22(4), 330-345.
- Wright, S. (2013). Binge, Risky, Hazardous. What's the Difference? Retrieved from [www.alcohol.org.nz](http://www.alcohol.org.nz).

- Young, A. M., Morales, M., McCabe, S. E., Boyd, C. J., & D'Arcy, H. (2005). Drinking like a guy: Frequent binge drinking among undergraduate women. *Substance Use and Misuse, 40*(2), 241-267.
- Young, I. M. (1990). *Throwing like a girl and other essays in feminist philosophy and social theory*: Indiana: University Press Bloomington.

## Appendix A: Information Sheet



### **Drinking Practices, Gender and Embodiment in Young Women**

#### INFORMATION SHEET

#### **Who is conducting this research?**

My name is Alison Ramsay and I am currently completing my final year of a Master of Science (Health Psychology) at Massey University in Wellington. My supervisor for this research is Dr. Antonia Lyons, Associate Professor in the School of Psychology.

#### **What is this research about?**

This research project aims to understand drinking as a social practice and how this is linked with the social environment and the physical body. It will explore the embodied and gendered experiences that take place for young women within social relationships and drinking practices to help further understand the social aspects involved in New Zealand's drinking 'culture'. You are invited to take part in this research as a participant in a friendship group discussion, which will be recorded and analysed.

#### **Who can take part?**

This is an invitation to participate in this study, you can decline this invitation if you wish. You are welcome to take part in this study if you are a woman aged between 18 and 25, and consider yourself a regular drinker. You must be able to speak English fluently. Five friendship group discussions will take place, and each will have four to five group members. To say thank you for your time, you will each be given a \$25 voucher for New World. Discussions will be confidential, and all group members will sign a confidentiality agreement. Whilst every endeavour will be taken to ensure confidentiality, as the discussions may take place in a home, confidentiality cannot be guaranteed. Should you feel uncomfortable or distressed during the discussion you are welcome to leave at any time without explanation or consequence.

#### **What's involved?**

If you agree to participate we will arrange a time and place that is mutually convenient for the group to have a discussion. This could be in an office at Massey University or in one of the group member's homes, and will take around an hour. During the

discussion I will ask questions about what it feels like to be drunk, the social aspects of drinking and how you decide to stop or continue drinking during a night out. This will be video recorded so that I can type up a written copy of the discussions. You will each be able to choose a different name for yourself which I will use in the written copies so that you will not be identifiable. If any challenging topics arise or you do not feel comfortable for any reason, you are welcome to withdraw your input from all or part of the discussion without question, at the time or immediately afterwards.

### **What happens to the information?**

I will analyse the discussions and write the findings into a thesis. Recordings and transcripts will be kept in a safe place and only my supervisor and I will have access to them. If you wish to read a summary of the research findings, I can email these to you. My email address is at the bottom of this information sheet, and you are welcome to email me and request a summary of the findings. The information collected from the discussions will be securely stored for five years and then it will be destroyed.

### **What are your rights as a participant?**

You are under no obligation to accept this invitation. If you decide to participate, you have the right to:

- decline to answer any particular question;
- ask for the recorder to be turned off at any time during the discussion;
- withdraw from the study at any time during the group discussion;
- ask any questions about the study at any time during participation;
- provide information on the understanding that your name will not be used unless you give permission to the researcher;
- be given access to a summary of the project findings when it is concluded.

### **Project Contacts**

If you have any questions at all, please feel free to contact me or my supervisor.

Student Researcher:

Alison Ramsay

[aramsay9@gmail.com](mailto:aramsay9@gmail.com)

0273282148

Supervisor:

Dr. Antonia Lyons

[a.lyons@massey.ac.nz](mailto:a.lyons@massey.ac.nz)

04-801 5799 extn: 62164

*“This project has been reviewed and approved by the Massey University Human Ethics Committee: Southern B, Application 13/76. If you have any concerns about the conduct of the research, please contact Dr Nathan Matthews, Chair, Massey*

*University Human Ethics Committee: Southern B, telephone 06 350 5799 x 80877,  
email [humanethicsouthb@massey.ac.nz](mailto:humanethicsouthb@massey.ac.nz).”*

**Appendix B: Participant Consent Form**



# **Drinking Practices, Gender and Embodiment in Young Women**

## **FOCUS GROUP PARTICIPANT CONSENT FORM**

I have read the Information Sheet and have had the details of the study explained to me. My questions have been answered to my satisfaction, and I understand that I may ask further questions at any time.

I agree to the discussion being video recorded.

I agree not to disclose anything discussed in the Focus Group

I agree to participate in this study under the conditions set out in the Information Sheet.

**Signature:** .....

**Date:** .....

**Full Name - printed** .....

## **Appendix C: Discussion Group Schedule**

### **Discussion Group Schedule**

Group discussions will begin with the researcher introducing herself and reminding participants about confidentiality within the group. She will also inform the groups that the video recorder can be turned off if requested, and participants can leave at any time with no explanation or consequences.

Following this, each participant will be asked to give their name, age, occupation and ethnicity. To create a fun atmosphere the participants will be asked to choose a pseudonym for themselves and share this with the group. The researcher will guide the topic of discussion towards the research questions by using the following prompts:

#### **Friendship Groups**

How do you all know each other?  
Do you go out drinking together?  
Where do you go?  
Do you drink at someone's house first? If yes, why?  
How often do you drink together?  
Is it usually just girls drinking together before you go out?  
Is drinking an important part of your friendship?  
Do you look out for each other if someone gets too drunk?  
How do you know when your friends are getting drunk?

#### **Drinking Practices**

How often do you drink?  
When did you start drinking, at what age?  
How has your drinking changed since you first started drinking?  
What time of day do you usually drink?  
Do you get drunk every time you drink?  
Do you ever get drunk two nights in a row?  
Do you drink on weeknights?  
How much do you spend on drinking?  
What type of drinks do you have?  
Does cost influence what you drink?  
Do you enjoy getting drunk?  
Do you enjoy alcohol or is it just a means to get drunk?  
Why do you drink?  
Do you aim to drink the same amount as your friends?  
What happens when you go out, do you drink until you go home?  
Do you go to parties or to town, or both?  
Which do you prefer?  
Do you lose track of time when you are drinking?  
Would you feel pressured to drink, even if you didn't want to?  
Do you go dancing every time you get drunk?  
Do you do silly things when you are drunk?

## **Femininity**

Do you drink with the girls, or girls and guys?  
What's the difference between drinking with the girls compared to when guys are around?  
Do guys drink more than you?  
Is it feminine to get drunk?  
Are there certain drinks for girls, and certain drinks for guys?  
Is getting ready and dressed up an important part of going out?  
Do you drink while you get ready?  
Do you see differences in men and women's drinking?  
Do you feel more attractive when you are drinking?  
Are other people more attractive when you have been drinking?  
Is it acceptable for girls to get as drunk as guys?  
Are there different standards?  
Do you think this has changed since your parents were your age?  
Is there a binge drinking culture amongst girls?

## **Embodiment**

What does alcohol do to your body?  
How do you know when you are drunk?  
What are the physical feelings and sensations?  
Are there certain signals that you notice when you are becoming drunk?  
Do you eat while you are drinking?  
Do you feel bloated from drinking?  
Can some people hold their alcohol better than others?  
How do you feel about your appearance when you are drinking or drunk?  
Do you feel more confident when you drink?  
Do you notice your own behaviour changing as you drink?  
What information do you use when deciding to stop drinking?  
How do you go about making these decisions?  
Do you lose your memory when you are drunk?  
What is it like to forget the previous night?  
Do you ever feel sick when you drink?  
How often do you vomit when you are drunk?  
How do you feel the next day?  
Do you get hangovers?

## **Drinking Culture**

What are the best and worst things about drinking?  
What do you think of New Zealand's drinking culture?  
Is drinking an important part of socialising?  
Is there pressure to drink, for those who choose not to?  
Is being drunk frowned upon?