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ALCOHOL PROBLEMS AND SOCIO-ECONOMIC STATUS:
A REGIONAL STUDY

A thesis presented in partial
fulfilment of the requirements for the degree
of Master of Arts
in Sociology at
Massey University

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1981

ABSTRACT

The problem was to explore the apparent relations between occupational status and drinking behaviour and to resolve, if possible, the confusions about which status positions were most likely to consume alcohol and experience problems.

The thesis investigates the hypothesis that people occupying high status positions are more vulnerable to high levels of alcohol consumption and alcohol related problems. It was presumed that ranking occupations in terms of the Elley-Irving SES scale, and educational attainment would permit the test of this assumed relationship.

The study focused on a sample of 869 males selected from a larger survey of health related issues in the five counties which comprise the Wanganui Hospital Board's area. All males over 15 years of age, employed in a full time occupation who were, or ever had been regular drinkers were interviewed about their levels of consumption, and any alcohol related problems they may have experienced.

The general trend of the findings suggested an association between alcohol misuse and low SES. A higher percentage of low status drinkers worried about their drinking; regarded themselves as heavy drinkers; were regarded by others as heavy drinkers; and indicated heavy patterns of consumption (400 + grams of alcohol per week).

No relationship between SES and regular drinking was found, although a positive association between regular drinking and educational attainment was suggested.

The lack of statistical significance restricts the extent to which we can draw any clear inferences as to the nature of the relationships involved.

In conclusion it could be stated that although the findings are not significant they suggest occupational vulnerability is more characteristic of low status occupations. Certain methodological inadequacies make it impossible to draw any firm conclusions concerning alternate hypotheses, for example that low SES positions are more vulnerable. Overreporting by the low SES group, and underreporting by those of high status may have biased the findings. An alternative theory is proposed to the effect that both ends of the status occupational hierarchy are characterised by high vulnerability.

ACKNOWLEDGEMENTS

Although many people have assisted my efforts in the planning and completion of this work, I would particularly like to thank Paul Green, for his continuous guidance and support since my undergraduate years. His influence has been instrumental in the decisions made to pursue this avenue of research.

To Bruce Asher, my fellow research officer with the Wanganui Health Planning Project, go my thanks for his enthusiasm and help in the initial planning of the study.

Thanks must also be extended to Cathy Smith of the Computer Unit at Massey University, without whose able assistance the seemingly indecipherable complexities of computer analysis would still remain a mystery.

To Dr Kang, my gratitude for his help with the statistical procedures involved.

Finally, I am especially indebted to Professor Graeme Fraser, Head of the Department of Sociology at Massey University, for his constant encouragement and able supervision which enabled this study to finally reach completion.

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INTRODUCTION

In 1978 the Wanganui Hospital Board in conjunction with the Department of Sociology, Massey University, undertook a general population survey comprising 5% of the people in the Board's area.

The survey, known as the 'Wanganui Health Planning Project' focused on aspects of behaviour and attitudes towards health and health care. The Project was completed in December 1979.

Consistent with the Wanganui Hospital Board's intention to establish an Alcohol Treatment Unit in that city, information was collected on aspects of alcohol use with specific attention being focused on consumption patterns and rates of alcohol related problems.

The data used in the present study were derived from the Wanganui Health Planning Project survey.

The subject matter with which the present study is concerned relates to the relationships between alcohol use and socio-economic status (SES). It is assumed that groups differentiated on the basis of occupational status differ in terms of the patterns of alcohol consumption which characterise them. Because consumption patterns differ, it is assumed that rates of alcohol problems will differ also.

Increased consumption may be facilitated by many factors some of which it is suggested are occupation related. In some occupations the individual appears to be more vulnerable, that is, more at risk of becoming a heavy drinker.

If high status positions are those most likely to induce immoderate consumption among position holders, it follows that the high status group will have the highest rate of drinking problems.

The focal concern of this study then, is the rate of alcohol related problems among groups of different socio-economic status and in particular the high status group.

The theoretical argument is developed in Chapter One. The propositional statements and hypothesis are outlined and discussed in detail.

Chapter Two reviews the extensive literature, indicating that patterns of alcohol use are related to SES, and that some occupational groups have especially high rates of heavy drinkers and alcohol related problems.

An explanation of the methodological measures, including the procedures adopted in the field, the data collection and analysis methods are outlined in Chapter Three.

Chapter Four contains the basic characteristics of the sample and the research findings.

Chapter Five reviews the empirical and theoretical implications of the results of the study, in the light of the theoretical argument which has been developed. The limitations of the study are discussed and possible areas of future research are suggested.

CHAPTER ONE

THEORETICAL FRAMEWORK

Theoretical Statements and Hypothesis

The fact that high rates of alcohol abuse are characteristic of certain occupations suggests that some occupational groups are more susceptible to, or experience a higher risk of encountering, alcohol related problems.

If a person's occupation is an important precipitating factor in that it influences how and to what degree an individual uses alcohol, we can assume that individuals in some occupations will be more susceptible to alcohol. The resultant rates of alcohol problems for such groups are likely to be higher than for those where vulnerability is not so great.

This reasoning is reflected in the hypothesis set out below:

The higher the individual's socio-economic status, the more likely he is to experience alcohol related problems.¹

¹ The definition of an alcohol related problem employed here includes any difficulty arising from the drinking itself, which has seriously influenced or affected the individual negatively in one or more of a wide and varying number of areas, including his health, financial position, occupation, marriage, home life or family, his ability to look after himself and provide for his own needs, his friendships and social life. What constitutes a 'serious' problem, it must be noted, was subjectively defined by the respondent.

An alcohol related problem was not regarded as being strictly associated with alcoholism. While such a problem may be of some magnitude, affecting the individual severely in a number of areas including his relationships with spouse, friends and family, it does not necessarily indicate incipient or existing alcohol addiction.

Many of the social problems associated with alcohol are problems of 'drunkenness' rather than problems of alcohol dependence. In this definition an alcohol related problem includes the consequences of dependence as well as the social aspects of excessive drinking.

The general hypothesis was tested in two specific ways. It was decided that if a positive association was found between the measures of,

Occupational vulnerability and immoderate patterns of consumption, and...

Immoderate patterns of consumption and the incidence of alcohol related problems,²

...then the general hypothesis would be accepted as confirmed.

Occupational Vulnerability and Immoderate Consumption

The first theoretical statement purports the existence of a relationship between occupational vulnerability and immoderate patterns of consumption. Vulnerability is primarily being defined here as a high status phenomenon. Although not limited exclusively to high SES occupations, it is asserted that the higher an individual's SES, the more likely his occupation will be a high risk one, that is, be characterised by one or more factors which contribute to the vulnerability of individuals in such occupations.

There is much support in the literature for the idea that individuals in some occupations may be more likely to become heavy drinkers (Trice, 1966), or to develop drinking problems (Australian Senate Standing Committee on Social Welfare Report, 1977). Some occupations seem to provide acceptance or encouragement of drinking patterns and problems which may not be encouraged elsewhere (Hitz, 1973), while some have far greater rates of alcoholism than others (Plant, 1979). Finally, cirrhosis mortality figures tell us that some occupations have far higher rates than do others (Hitz, 1973; Plant, 1979).

² According to Clark (1966) there is no quantity of alcohol that can be labelled as the dividing line between excessive intake and normal drinking. What constitutes 'immoderate' drinking is as likely to be determined by group norms as by societal ones.

The kind of culturally instilled attitudes towards drinking held by different groups in society, influences such things as social expectations governing drinking behaviour and appropriate levels of consumption. Drinking then, becomes immoderate or excessive, not when it surpasses some hypothetical quantity, but when it no longer conforms to group norms concerning what is socially expected and acceptable.

High risk occupations are characterised by one or more factors which contribute to the vulnerability of individuals in these particular occupations. Roman and Trice (1970) believe that high status occupations are more likely to be characterised by factors which lead to vulnerability, and therefore individuals in those positions incur a greater risk of developing heavier patterns of drinking than do members of other groups.

An occupation may entail a high risk because of a number of factors, including its location, the nature of the work role, the demands associated with that role, and the type of product manufactured. The principal risk factors contributing to occupational vulnerability are outlined below.

The first risk factor concerns proximity and accessibility to alcohol. Both these aspects are particularly important in those occupations involved in the production, distribution or sale of liquor.

The full significance of the importance of proximity may be realised when one considers the high level of autonomy and freedom from supervision which characterise many high status positions associated with the liquor industry, and the ease of access which incumbents of those positions have regarding alcohol.

High status individuals are more likely to have access to alcohol due to the peculiar nature of the work roles of many high SES occupations. Individuals are less likely to be supervised, and less likely to have to account for work hours in terms of productivity output.

Accessibility is also accentuated in occupations where entertaining is common, for instance senior executives in business and commerce, sales representatives, and commercial travellers.

The second risk factor, that of occupational autonomy, can be defined as 'a loosely structured work situation where job performance measures are absent or few'. It involves the extent to

which an occupation permits freedom of work options, of work schedules, of commitment levels by the individual,³ as well as freedom from supervisory measures.

Occupational autonomy is particularly characteristic of high status occupations because there is less supervision; work roles are less interdependent with those of others; and individuals are not required to 'clock in' but in fact may be able to personally determine much of their worktime to suit themselves. Such occupations give individuals extensive freedom to drink, and increased opportunities to cover up the consequences of their drinking.

The third risk factor relates to those occupational roles characterised by low structural visibility. Characteristic of high status positions in particular, low visibility is often associated with a minimum of accountability to supervisors or colleagues.

Occupational obsolescence, resulting from the removal of an individual's work role through the delegation of duties to his subordinates may be one form of low structural visibility.

Where there is overspecialisation within an organisation necessitating the creation of job roles novel to that organisation, the lack of readily available guidelines for the evaluation of their performance may result in low visibility also.

Finally, low visibility may be associated with social distance, being reinforced by status indicators built into the respective roles, between a position holder and subordinates. This might be the case despite there being relatively close physical proximity of work places, thus the senior position holder may be isolated and to some extent protected from his subordinates.

³ This includes overcommitment by the individual, or work addiction, a factor which Roman and Trice (1970) believe is characteristic of high status individuals in particular, and which may result in the excessive use of alcohol by the work addict to combat the tension and emotional exhaustion which sustained levels of compulsive activity have created.

A fourth risk factor, which includes stress, anxiety or pressures relating to one's occupational role may generate greater risks of exposure to alcohol problems. This is particularly likely to be the case where individuals are under pressure to perform their roles in accordance with high professional standards. Also, where the role demands are constrained by limitations such as deadlines, individuals may be subject to frequent stress related situations, for instance, advertising and newspaper personnel and editors. Many high status occupations in particular have associated pressures and stress that could well lead to individuals seeking consolation or relaxation through heavy drinking.

Another risk factor concerns selection and/or recruitment procedures. Willis (1973) believes that preselection of high risk individuals, that is, the attraction of an occupation in which heavy drinking is accepted or encouraged, by those individuals with a predisposition towards heavy drinking, is a crucial factor.

Recruitment of individuals with pronounced drinking patterns, into positions which afford high levels of autonomy and accessibility to alcohol (such is often the case with high status occupations), may serve to accentuate the development of heavier patterns of consumption.

Another occupational risk factor concerns the social pressure which may be applied to individuals to use alcohol as part of the formal or informal role structure accompanying the occupation. Organisations often informally stimulate the belief that drinking is an important part of performing a job. According to one writer, some organisations tacitly approve and expect employees to use alcohol to assist them to achieve work related goals more effectively (Trice, 1966).

Finally, Roman and Trice (1970) have pointed out that jobs involving mobility from a highly controlled job status in which heavy drinking is practised to release tension, into a job which is also stressful but in which social controls are absent, may result in heavier drinking. The example they discuss concerns the graduate student whose need to spend long hours at work and to support perhaps both himself and his family on a very limited income curtails to a

large extent his use of alcohol. The attainment by the graduate of faculty status or his movement out of the university environment into a position in the commercial or business environment may be accompanied by restraint removal in terms of drinking behaviour.

According to Knupfer and Room (1964), certain factors conspire to form a 'style of life', multiplying the number of occasions for drinking among high status individuals. It has become an accepted part of the business scene that transactions be conducted in an hotel bar or restaurant. Entertaining, including the use of alcohol, is often employed to promote good relations between business executives, and to smooth negotiations in business transactions with current or prospective clients.

In some occupations, notably the entertainment, public relations and advertising industries, 'business' often involves gatherings and functions where alcohol is available.

Knupfer and Room also see the privileges associated with high status occupations as removing many of the constraints to heavy drinking. They point out that an executive can more easily 'appear' to function or just 'take off' from work if he has a hangover, than can a production line worker.

Because individuals in high status positions encounter fewer restrictions on their patterns of movement, and less supervision concerning hours of work, they have greater autonomy, and with it, increased accessibility to alcohol. It can be obtained when and if required. In fact, its use may be regarded as part of the occupational role for which provision is made in the form of an expense account.

For those individuals of high status, drinking may be viewed as a minor personal pleasure, or it may be regarded as a form of conspicuous consumption which attests to prosperity. In many cases alcohol use forms an integral part of the high status lifestyle, with such rituals as the pre-dinner drink, the cocktail party, the consumption of wines with meals, and the entertaining of friends and guests with alcohol, being common.

For those of high status, alcohol presents little or no financial strain on the budget, even in its more expensive and potent forms. Murray (1976) points out that one influential factor in explaining the high alcoholism rate among doctors in Scotland is their relatively high income. They can afford to buy alcohol.

Finally, Knupfer and Room mention 'sophistication' as a factor which may accentuate greater use of alcohol by some groups. The sophisticate has a liberated outlook and a disbelief in the simple definition of sin as equivalent to drinking, smoking and sex. The writers argue that because high status individuals tend to be more sophisticated, thus having a higher level of emancipation, they are less likely to make the conventional association between drinking and sin.

With regard to this high status lifestyle, the comparative lack of contact of many low status individuals with situations which are commonly lubricated with alcohol may, as Knupfer and Room suggest, cramp their drinking styles and afford fewer opportunities for members of this group to drink excessively.

Although the argument presented here has supported a positive association between high status and high rates of drinking problems, it must be acknowledged that there is considerable support in the literature concerning the existence of a positive association between low SES and alcohol related problems.

Because patterns of alcohol consumption are class related, it is likely that the kinds of problems encountered by drinkers may be class related as well. For instance, the pattern of consumption characteristic of high status groups involves frequent but light drinking (Edwards, Chandler and Hensman, 1972). Presuming that class determined abnormal drinking patterns will be generated as an extrapolation from class determined normal drinking patterns (Edwards, Chandler and Hensman, 1972: 90), any progression of such a pattern of drinking for this group leading to abuse may conceivably involve frequent, heavier drinking likely in turn to lead to problems associated with dependence.

The pattern of drinking which characterises lower status groups on the other hand, involves infrequent but very heavy consumption. A progression of this kind of drinking leading to abuse may involve relatively infrequent, but very heavy consumption, resulting in problems associated with drunkenness.

It has been noted that when an increase in consumption is due to increased quantity per drinking occasion, it is more likely to result in greater social problems (Fitzgerald and Mulford, 1978).

Problems associated with drunkenness are likely to be more visible than those of dependence, and not so easily rationalised by the drinker.

The fact that certain situations or kinds of behaviour are defined as problematic or nonproblematic may depend to a large degree on who is doing the defining. In other words, class definitions of particular situations or problems may differ. This may be directly attributable to the amount of 'resources' which an individual or family have available.

For instance the financial strain of dependency is less likely to become apparent for high status drinkers. Heavy drinking is less strain on the budget and the effects therefore are much less likely to become evident.

The social fabric of high status life is usually soundly established and does not readily disintegrate. This security of employment, well established family life and financial position, has been described by one writer, as part of the social status 'prop' which retards social deterioration (Sargent, 1967: 7).

The occupational autonomy of many high status positions not only facilitates greater accessibility to alcohol, it also enables the drinker to conceal the consequences of his drinking to a much greater degree. It reduces the probability that the individual's drinking will become problematic for him. There may be a greater tolerance towards high status deviance, particularly if the skills which the individual has are crucial to the organisation and are not easily replaced.

The kinds of social contacts which are common among many high status individuals, for instance, with medical practitioners and lawyers, may provide a source of confidential aid and advice with regard to potentially problematic situations arising from one's drinking.

The fact that high status individuals have greater resources with which to cope with or 'manage' a drinking problem (particularly a dependency problem) means they may more easily rationalise their dependency as being other than problematic. The kinds of problems which accrue from lower status drinking are more visible and less easily rationalised as a consequence of fewer resources. The kinds of problems each status group encounter then, may be very different. For the high status group, problems associated with dependence affecting the individual's health may be more characteristic, while for those of low status, problems associated with drunkenness, manifest through aggressive behaviour and violence appear more common. Because the latter is more likely to come to the attention of law enforcement agencies, such as the police, and considering that legal penalties for excessive drinking are often applied differentially according to status, those studies which focused on problems associated with drunkenness to the exclusion of other aspects will inevitably have highlighted a higher rate of problems among the low SES group.

Immoderate Consumption and Alcohol Related Problems

The second association to be investigated concerned the relationship between immoderate consumption and alcohol related problems. Individuals who drink excessively are more likely to encounter problems related to that drinking.

To briefly reiterate, alcohol related problems include any difficulty which affects the individual negatively with regard to any one of a number of areas. These areas can be divided under two headings, those associated with drunkenness, and those with dependence.

For instance, problems associated with drunkenness are more likely to include accidents,⁴ encounters with law enforcement agencies and perhaps problems associated with one's family, relations and friends.

Problems of dependence are likely to include financial strain, marital breakdown and family conflict, as well as problems concerning one's health, occupational performance and employment possibilities.

Although problems are more likely to be associated with one category or the other, some may be characteristic of both.⁵

While it does not necessarily follow that all drinkers who are experiencing problems must be consuming immoderate amounts, or that those individuals who are drinking immoderately will inevitably encounter problems (Clark, 1966), it is however more likely that a heavy drinker will experience problems either of dependence or drunkenness as a result of his consumption patterns.

Occupational Vulnerability and a Psychological Predisposition to Heavy Drinking

It has been suggested that some individuals have a psychological predisposition towards heavy drinking (Sargent, 1973). This is particularly likely where an individual has been influenced by early socialisation experiences such as childhood trauma and conflict in the home concerning alcohol, or provided with a role model by alcoholic relatives or friends.

The event of a personal crisis or tragedy may precipitate a change in drinking patterns from what Sargent terms 'convivial',

⁴ A study of a heavy drinking group, namely Scottish seamen by Rix, Hunter and Olley (1977) found the accidental death rate much higher for this group than for the general population.

⁵ A case in point is Brenner's study of San Francisco Bay area alcoholics (dependent drinkers), which indicated that the accident rate for this group was much higher than that of other area residents.

involving a loosening up of emotions promoting social ease and goodwill, to utilitarian drinking. This form of drinking activity is psychologically rewarding to the individual. The purpose is personal and self interested rather than social and expressive, with the needs satisfied being essentially self oriented. In a society where some members have acute needs for adjustment, if drinking as a means of adjustment is available, then a high rate of tension relieving drinking will occur. This is one manifestation of utilitarian drinking. Alcohol then, becomes a ready made, socially acceptable solution for the constant need to relieve the anxiety or trauma associated with inadequate interpersonal relationships and personal crises.

Where Sargent's argument diverges from the present one is with the implication that there may be a biologically inherited element, that is, some quality uniquely inherited by the individual, which results in a predisposition to alcoholism.

What is merely being suggested here, is that as a result of prior socialisation or role learning experience, this psychological predisposition may be expressed through the use of alcohol as a way to adjust to anxiety and difficulty.

Of course an individual may not seek to use alcohol primarily for utilitarian purposes, yet still exhibit some psychological predisposition towards heavy drinking. For instance, where an individual is psychologically or emotionally vulnerable, his needs for interaction may be most satisfied through the drinking group. Repeated exposure to such drinking groups tends to satisfy emotional needs and bring about certain emotional rewards for the individual. Trice (1966) has suggested that exposure to rewards experienced in drinking groups channel drinkers into alcoholism.

Where an individual has a psychological predisposition towards heavy drinking, the existence of an occupational situation where heavy drinking is either condoned, facilitated, or develops as a consequence of pressures and stress created within that occupational position, is likely to be conducive to increased patterns of consumption and related problems.