
Global Status Report on Alcohol 2004



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Part I

Consequences of alcohol use

Social problems associated with
alcohol use

59-64

Social problems associated with alcohol use

Alcohol consumption is linked to many harmful consequences for the individual drinker, the drinker's immediate environment and society as a whole. Such social consequences as traffic accidents, workplace-related problems, family and domestic problems, and interpersonal violence have been receiving more public or research attention in recent years, indicating a growing interest in a broader concept of alcohol-related consequences (Klingemann & Gmel, 2001). On the other hand, however, social consequences affect individuals other than the drinker e.g. passengers involved in traffic casualties, or family members affected by failure to fulfill social role obligations, or incidences of violence in the family. Ultimately, however, these events have an impact on society as a whole insofar as they affect economic productivity or require the attention and resources of the criminal justice or health care system, or of other social institutions (Gmel & Rehm, 2003). Due to space constraints, this section will only highlight some issues and data involving the following selected social problems: alcohol consumption and workplace problems, alcohol consumption and family problems, poverty, and domestic violence.

Alcohol consumption and the workplace

Heavy drinking at the workplace may potentially lower productivity. Sickness absence associated with harmful use of alcohol and alcohol dependence entails a substantial cost to employees and social security systems. There is ample evidence that people with alcohol dependence and problem drinkers have higher rates of sickness absence than other employees (Klingemann & Gmel, 2001).

Klingemann & Gmel (2001) note that a number of studies have demonstrated an association between heavy drinking or alcohol abuse and unemployment. Here, a causal association may go in either direction, heavy drinking may lead to unemployment, as suggested by Mustonen, Paakkanen & Simpura (1994) and Mullahy & Sindelar (1996); but loss of work may also result in increased drinking, which may become heavy drinking, as indicated by Gallant (1993), Dooley & Prause (1998) and Claussen (1999).

Blum, Roman & Martin (1993) and Mangione et al. (1999) found that work performance was related to volume and pattern of drinking. Blum and her colleagues found no significant relationship between work performance and average daily volume when performance was assessed by self-reports of the drinker. However, lower performance, lack of self-direction and problems in personal relations were found to be related to heavy drinking, particularly when collateral reports were used. In the Mangione et al. study, it was found that although moderate-heavy and heavy drinkers reported more work performance problems than very light, or moderate drinkers, the lower-level-drinking employees, since they were more plentiful, accounted for a larger proportion of work performance problems than did the heavier drinking groups. A study conducted by Ames, Grube & Moore (1997) found modest but significant relationships between drinking behaviours and self-reports of workplace problems.

Some examples may highlight the extent to which alcohol affects work performance. It has been estimated that 30% of absenteeism and workplace accidents in Costa Rica were caused by alcohol dependence (Pan American Health Organization, 1990). According to industry association sources from India, 15% to 20% of absenteeism and 40% of accidents at work are due to alcohol consumption (Saxena, Sharma & Maulik, 2003). A study by the Department of

Hygiene and Industrial Safety in three factories in La Paz, Bolivia found that 7.3% of absenteeism in the first two days of the work week and 1.2% of work-related accidents were directly related to the consumption of alcohol (Pan American Health Organization, 1990). It has been estimated that 20–22% of work-related accidents in Chile have a direct or indirect relationship with recent alcohol use. In a study of patients who required hospitalization for severe work-related accidents, it was found that 15% reported recent use of alcohol (Trucco et al., 1998). It has been reported that in Latvia, alcoholism has had adverse impacts on productivity in the workplace and increased absenteeism. No figures have been published on the extent of absenteeism due to excessive alcohol use. It is estimated that drinking and alcoholism have reduced labour productivity by some 10% (Trapenciere, 2000). A recent survey conducted in the United States of America found that farm residents who drank more frequently had significantly higher farm work injury incidence rates (3.35 per 10 000 person-days of observation) than others who consumed less frequently (1.94 injuries per 10 000 person-days) (Stallones & Xiang, 2003).

With regards to trauma, alcohol is the cause of 10% to 20% of work accidents in France (Costes & Martineau, 2002). A survey conducted in Australia of 833 employees at an industrial worksite found that problem drinkers were 2.7 times more likely to have injury-related absences than non-problem drinkers (Webb et al., 1994). In a 1994 survey, 90% of personnel directors from British organizations cited alcohol consumption as a problem within their workplace. Their major concerns included loss of productivity, absenteeism, safety, employee relations, poor behaviour and impacts on company image. About 8–14 million working days are lost annually to alcohol-related problems. With regard to safety, up to 25% of workplace accidents and around 60% of fatal accidents at work may be associated with alcohol (Hughes & Bellis, 2000). It is estimated that the annual alcohol-related costs to workplaces in the United Kingdom is £6.4 billion (Prime Minister's Strategy Unit, 2003).

Alcohol consumption and the family

It is well established that drinking can severely impair the individual's functioning in various social roles. Alcohol misuse is associated with many negative consequences both for the drinker's partner as well as the children. Maternal alcohol consumption during pregnancy can result in fetal alcohol syndrome in children, and parental drinking is correlated with child abuse and impacts a child's environment in many social, psychological and economic ways (Gmel & Rehm, 2003). Drinking can impair performance as a parent, as a spouse or partner, and as a contributor to household functioning. There are also other aspects of drinking which may impair functioning as a family member. In many societies, drinking may be carried out primarily outside the family and the home. In this circumstance, time spent while drinking often competes with the time needed to carry on family life. Drinking also costs money and can impact upon resources particularly of a poor family, leaving other family members destitute. Also, it is worth noting that specific intoxicated events can also have lasting consequences, through home accidents and family violence (Room, 1998; Room et al., 2002). A recent paper by Bonu et al. (2004) suggests that adverse child health effects of alcohol use are primarily through two distal determinants (indirect effects) - forgone household disposable income and caretakers' time for childcare. Diversion of scant economic resources for alcohol use that could have otherwise been used for seeking health care, may lead to self-care or delay in seeking health care. The other potential ways by which alcohol use can reduce the household income are through morbidity associated with the drinking habit among the consuming individuals, resulting in increase in medical expenditures and loss of income due

to lost wages, and, sometimes, resulting in the premature death of sole wage earners in a household (Bonu et al., 2004).

Implicit in the habitual drinker's potential impact on family life is the fact that the drinking and its consequences can result in substantial mental health problems of family members. Such effects, though potentially common, are not often documented. Some insight into this issue can be gained from interviews with members of Al-Anon, a companion organization to Alcoholic Anonymous for spouses and family members of people with alcohol dependence. In interviews with 45 Al-Anon members in Mexico (82% of them the wife of a husband who was alcohol-dependent), 73% reported feelings of anxiety, fear, and depression; 62% reported physical or verbal aggression by the spouse toward the family; and 31% reported family disintegration with serious problems involving money and the children (Rosovsky et al., 1992, cited in Room et al., 2002).

The effects of men's drinking on other members of the family is often particularly on women in their roles as mothers or wives of drinkers. The risks include violence, HIV infection, and an increased burden in their role of economic providers. In a paper that looked at alcohol and alcohol-related problems facing women in Lesotho, it was noted that as in many other developing countries, the cultural position of women in Lesotho facilitates a vicious circle in which women are at one time brewers of alcohol, then sellers, then become excessive consumers due to the problems created by their drinking husbands (Mphi, 1994).

Case example 1: Botswana

The economic consequences of chronic alcohol use are devastating and can seriously hinder any sense of development. In a study of alcohol use among the Basarwa of the Kgalegadi and Ghanzi districts in Botswana, informants stated that since a significant proportion of household income was spent on liquor, less cash was available for food, clothing and other essential items. As one informant succinctly stated 'alcohol makes poor people poorer'. A person who is regularly under the influence of alcohol will have little motivation or interest in working, unless it is to obtain money to buy more alcohol. One particular problem is that a regular drinker can easily become economically tied and indebted to alcohol vendors who are only too pleased to provide alcohol 'on credit'.

Child neglect is an increasing problem when parents are intoxicated so early in the day that they are not able to prepare food for their children, even if there is food available. A concern is that some parents will sell food to buy alcohol while others will give alcohol to their children as a food substitute and to stave off hunger. Generally, the neglect of young children due to alcohol abuse means that these children are under-socialized as well as malnourished, leading to a refusal to attend school, begging and stealing for food, and other delinquent activities.

Source: Molamu & MacDonald (1996)

Case example 2: Nepal

In a large-scale study covering about 2400 households in 16 of Nepal's 70 districts, the adult respondents perceived the impact of family members use of alcohol and drugs on children as violence and physical abuse (33.4%), neglect and mental abuse (28.5%), deprivation from education (20.2%) and push factor for children to use intoxicants (11.1%), malnutrition and running away from home. 35.9% of children interviewed felt that there was an impact of parental drinking on the family. The impact included domestic violence (40%), loss of wealth and indebtedness (27.8%), loss of social prestige and bad relationship with neighbours.

Source: Dhital et al. (2001)

Alcohol and poverty

The economic consequences of expenditures on alcohol are significant especially in high poverty areas. Besides money spent on alcohol, a heavy drinker also suffers other adverse economic effects. These include lowered wages (because of missed work and decreased efficiency on the job), lost employment opportunities, increased medical expenses for illness and accidents, legal cost of drink-related offences, and decreased eligibility of loans. A recent study conducted in 11 districts in Sri Lanka examining the link between alcohol and poverty found that 7% of men said that their alcohol expenditure was greater than their income. Though a relatively small percentage, this is still a worrying statistic for the families concerned and for those interested in helping the worst-off families (Baklien & Samarasinghe, 2001).

Case example 3: Cameroon

What is problematic in Cameroon is the high cost of purchasing even one beer a week given the income of an average rural family. When comparing the price of two major beers sold in a rural village in 1983 as a percentage of male and female wages, it was found that the cost of one beer represented 60–84% of women's and 36–50% of men's daily wages. Drinking even in these small amounts means that one day's wages is quickly consumed. The danger is when individuals start forsaking paying children's school fees because their money is spent on beer. Such individuals are considered disruptive of community life because their negligence impedes others from doing their work or meeting obligations towards friends, association members and kin.

Source: Diduk (1993)

Case example 4: India

In a 1997 study comparing two groups of families within the same community in Delhi, India (Group A having at least one adult consuming alcoholic drinks at least three times per week in the last month and Group B having no adult consuming more than one drink in the last month), it was found that Group A, on an average, spent almost 14 times more on alcohol per month compared with Group B. A larger proportion of families in Group A had significant debt compared with Group B. The implications of this are towards fewer financial resources for food and education of children and fewer resources for purchasing daily living consumables. The more heavily drinking Group A was more likely to report major illnesses or injuries during the past one year and was more likely to require medical treatment.

Source: Saxena, Sharma & Maulik (2003)

Case example 5: Malaysia

Alcohol is a major factor in exacerbating poverty. In a month a rural labourer can spend about RM 300 (US\$ 80) on alcohol which is about how much he earns. The alcohol menace ruins families and contributes to the breakdown of the basic social fabric of society. Often it is the women who bear the brunt of this problem – wife battery, discord in the home, abused and deprived children, non-working or chronically ill husbands who become a burden to both the family and society. Besides loss in family income, the burden on the family is worsened when the drinker falls ill, cannot work and requires medical attention.

Source: Assunta (2001–2002)

Alcohol and domestic violence

Research has found that alcohol is present in a substantial number of domestic violence accidents. The most common pattern is drinking by both offender and victim. Alcohol has been shown to be a significant risk factor for husband-to-wife violence. Studies have shown that the relationship between alcohol and domestic violence is complex.

Drinking frequently has been associated with intrafamily violence. Reviews have found that excessive alcohol use is a strong and consistent correlate of marital violence, but that violence rates vary based on research designs, methodologies, and samples. Therefore, the role of alcohol remains unclear. Studies based on interviews with abused wives tend to report higher proportions of alcohol involvement than do general population studies or police samples. In a study examining episodes of domestic violence reported to the police in Zurich, Switzerland, evidence of alcohol involvement was found in 40% of the investigated situations. Police officers thus believed there was a clear link between alcohol and violence in at least 26% of the cases studied (Maffli & Zumbrunn, 2003).

Regarding partner violence, research evidence indicates that it is more strongly associated with heavy drinking, whether usual or occasional, than is non-partner violence, and conflicts as to whether drinking by the victim makes violent acts by a partner more likely. That alcohol consumption has a stronger association with partner violence than with nonpartner violence may be a matter of access, with partners having more contact and thus more opportunities for violent encounters (Gmel & Rehm, 2003). Studies also report an association between drinking patterns and intimate partner violence; excessive drinkers and alcohol-dependent individuals are more likely to act violently toward their intimate partners (White & Chen, 2002).

To give some examples from the literature, a study conducted in Nigeria showed a strong association between domestic violence and alcohol use. Alcohol use was involved in 51% of the cases in which a husband stabbed a wife (Obot, 2000). In a 1998 cross-sectional study of violence against women undertaken in three provinces in South Africa, it was found that domestic violence was significantly positively associated with the women drinking alcohol and conflict over the partner's drinking (Jewkes, Levin & Penn-Kekana 2002).

In a 2000–2001 survey of 5109 women of reproductive age in the Rakai District of Uganda, it was found that the strength of the association between alcohol consumption and domestic violence was particularly noteworthy. Women whose partner frequently or always consumed alcohol before having sex faced risks of domestic violence almost five times higher than those whose partners never drank before having sex. Of women who recently experienced domestic violence, 52% reported that their partner had consumed alcohol and 27% reported that their

partners had frequently consumed alcohol. This finding supports the conclusion that alcohol may play a direct precipitating role for domestic violence (Koenig et al., 2003).

In a study of 180 women seeking prenatal care in rural South India, it was found that 20% of the women reported domestic violence and 94.5% of these women identified their husbands as the aggressors. Husband's alcohol use was a significant risk factor for domestic violence (Halasyamani, Davis & Battacharjee, 1997). The role of alcohol in domestic violence is also cited in another Indian study which found that 33% of spouse-abusing husbands were using alcohol. Of these 15% were occasional, 45% frequent and about 40% were daily users of alcohol. More than half of the spousal abuse took place during the period of intoxication (AIIMS, 1997). A cross-sectional study of a random sample of 275 women in Barranquilla, Colombia found that habitual alcohol consumption in the women and in the spouses were factors associated with marital violence (Tuesca & Borda, 2003).

It has been suggested that because alcohol-dependent individuals are intoxicated more frequently than non-dependent individuals, the observed association between spousal abuse and intoxication may occur simply by chance. In addition, most instances of spouse abuse occur in the absence of alcohol intoxication, suggesting the need to understand better the processes through which some episodes escalate into violence (Martin, 1992). Although many studies have found that alcohol use is associated with intimate partner violence, the nature of the association needs to be clarified.

In conclusion, however, there is little doubt that alcohol consumption is associated with many social consequences. The available data on consequences to the direct social and personal environment from short-term as well as long-term use of alcohol are sparse. Much more research into this issue would be required to obtain standard measures or data that would allow quantification of these consequences in a meaningful and comparable manner.