



Women and Alcohol

Produced by
Institute of
Alcohol Studies
1 The Quay
St Ives
Cambs PE27 5AR

Tel: 01480 466766
Fax: 01480 497583
Email: info@ias.org.uk
<http://www.ias.org.uk>

The World Health Organization's European Charter on Alcohol states that:

"All people with hazardous or harmful alcohol consumption and members of their families have the right to accessible treatment and care."

The WHO Charter has been signed by Member States of the European Union, including the UK.

The Size of the Problem

In all known societies where alcohol is consumed, the men drink more than the women. Because of this, in the UK and other countries, men have been much more likely than women to experience alcohol problems. However, in recent decades, the gap between men and women has narrowed in relation to both consumption and problems.

In recent years, in Gt. Britain there has been a particularly marked increase in heavy drinking in women, although it may now have leveled off. The increase in female drinking has been particularly evident in teenagers, and on some measures teenage girls are as likely as teenage boys to be 'binge drinkers'. (See IAS factsheet Adolescents and Alcohol).

A survey of police forces carried out by Channel 4 TV found that the number of women arrested for being drunk and disorderly rose by more than 50% in five years, up from 3,847 in 2003/4 to 5,891 in 2007.¹

In Scotland, the Rt Hon Elish Angiolini QC, the Lord Advocate, explained to the Holyrood Equal Opportunities Committee that there had been a major increase in the involvement of women in crimes of violence, an increase which police and others attributed in part to the growth in female binge drinking. Figures obtained by the Sunday Times showed that while the number of women found guilty of murder had remained level at around eight each year in Scotland, common assaults by women rose 61% in five years. Overall, the number of women convicted of violent crimes rose from 1,637 to 2,618. The number of serious assaults and attempted murders by women rose by 36% to more than 100. Convictions for carrying offensive weapons such as knives rose by more than two-thirds over the same period to just under 200.

A 2003 survey for Company magazine² found that 60% of the sample of young women reported drinking most of the recommended sensible drinking limit of 21 units per week in one or two weekend sessions rather than throughout the week.

It also found 66% reporting waking up the next morning with almost no recollection of what had happened the night before, 50% having no idea how they had got home, while 10% reported they had to be escorted home by a stranger. 29% said they had lost keys, money and other valuables during a drunken night out.

Attention has also been drawn to increasing levels of drunken violence in which women are involved as perpetrators and victims. A 2006 ICM survey for a BBC TV programme found that 9 per cent of 18-34 year olds reported being physically assaulted by a drunk woman, and 41 per cent reported witnessing a drunk woman assault someone else. 60 per cent of the sample said they thought the number of women getting drunk and aggression was greater than five years previously.³

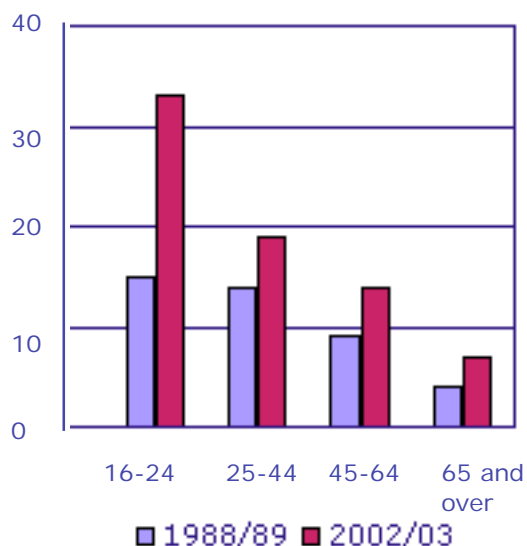
Government figures⁵ show that the proportion of women exceeding the weekly sensible daily limits rose from 10% in 1988/89 to 17% in 2002/03. In young women aged 16-24, the proportion exceeding the sensible weekly limit more than doubled, from 15% in 1988/89 to 33% in 2002/03.

However, on the basis of the Government's definition of 'binge drinking' the proportion of adult women who are binge drinkers peaked in 2003 and declined slightly in 2004 and 2005. (See IAS factsheet Binge Drinking: nature, prevalence and causes).

A 2005 Datamonitor report estimated that young British women (under 25) already drink substantially more than their counterparts in other European countries, and that they will increase their intake by an additional 31% over the next five years, drinking more than three times as much as young women in France and Italy by 2009.⁴

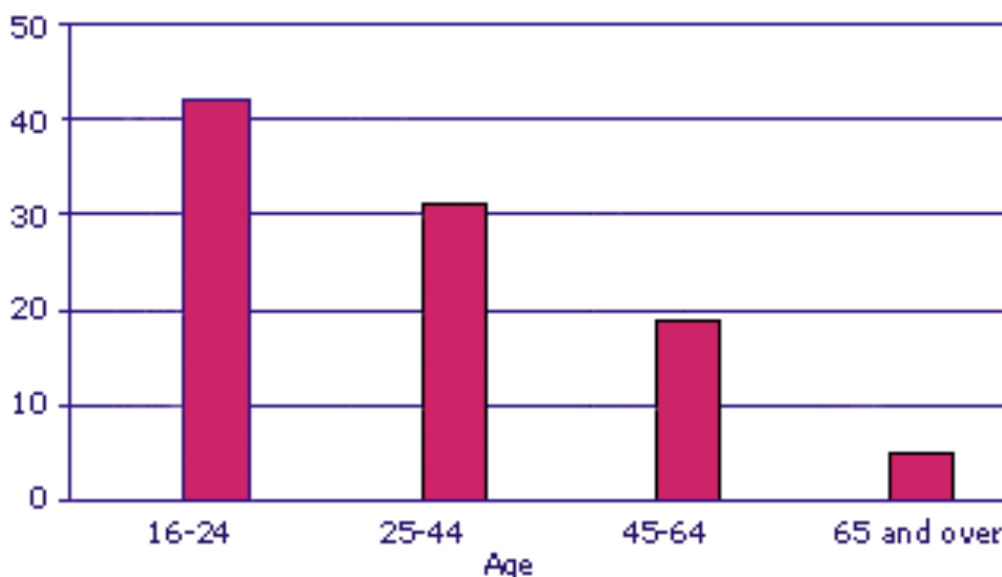
Women exceeding weekly benchmarks of alcohol: by age, 1988/89 and 2002/03, GB⁵

Percentages



Women exceeding recommended daily benchmarks of alcohol at least once during the last week, 2002/03, GB⁵

Percentages



In recent years, the growth in average consumption and in heavy drinking has been more marked in women than men.

Mean weekly alcohol consumption by age: 1992 to 2000⁶

Women aged 16 and over

Great Britain

Age	Unweighted				Weighted	
	1992	1994	1996	1998	1998	2000
Women						
16-24	7.3	7.7	9.5	10.6	11.0	12.6
25-44	6.3	6.2	7.2	7.1	7.1	8.1
45-64	5.3	5.3	5.9	6.4	6.4	6.2
65 and over	2.7	3.2	3.5	3.3	3.2	3.5
Total	5.4	5.4	6.3	6.4	6.5	7.1

The percentage of women exceeding the old 'sensible limits' of 14 drinks per week increased from 10% in 1988 to 17% in 2002/03.

As can be seen from the table, young women are the most likely to be heavy drinkers.

In women aged 16-24, the proportion exceeding 14 drinks per week rose from 25% to 33% between 1998 and 2002/03. In 2000, just under 1 in 10 16-24 year olds drank more than 35 units per week.

Weekly alcohol consumption level: 1988 to 2000⁶

Women aged 16 and over

Great Britain

Weekly alcohol consumption level	Unweighted					Weighted	
	1988	1992	1994	1996	1998	1998	2000
	%	%	%	%	%	%	%
Women							
Non-drinker	12	12	14	13	14	14	14
Under 1 unit	24	22	21	20	19	19	17
1-7 units	40	39	37	37	37	37	36
8-14 units	14	15	15	16	16	16	16
15-25 units	7)	8)	9)	9)	10)	10)	11)
26-35 units	2)10	2)11	2)13	2)14	3)15	2)15	3)17
36+ units	2)	2)	2)	2)	2)	2)	3)

Weekly alcohol consumption: percentages of women exceeding specified amounts by age 1988-2000⁶

Age	Percentage who drank more than 14 units					Great Britain	
	1988	1992	1994	1996	1998	1998	2000
16-24	15	17	19	22	25	25	33
25-44	14	14	15	16	16	16	19
45-64	9	11	12	13	16	15	14
65 and over	4	5	7	7	6	6	7
Total	10	11	13	14	15	15	17
	Percentage who drank more that 35 units						
16-24	3	4	4	5	6	7	9
25-44	2	2	2	2	2	2	3
45-64	1	1	2	2	2	2	2
65 and over	0	0	1	14	1	1	1
Total	2	2	2	2	2	2	3

Women in the 16-44 age range who are widowed, separated or divorced are more likely to drink over recommended limits than their married or cohabiting counterparts. However, this differential decreases with age.

American research suggests⁷ that heavier drinking women are likely to have an advanced level degree, to have never married, to be separated or divorced, to have no children and to be employed in a male dominated occupation. The picture appears to be broadly similar in the UK, where surveys normally find that the proportion of heavy (over the limit) drinkers is highest in women from social classes 1 and 2. Given these findings in relation to class and age it is not surprising that problem drinking is increasingly seen to be most common in young, professional women.

Binge Drinking

A UK study found that women with higher educational qualifications were more likely than less educated women to be binge drinkers in their twenties but that by their early forties the pattern was reversed, with the less educated being more likely to binge drink. In contrast, less educated men were more likely to binge drink at both ages. The explanation of the different pattern in women was not obvious but it could relate to differences in domestic circumstances and employment. Less qualified women tend to have children, who may be an inhibiting factor, at an earlier age than more

qualified women. Less qualified women may also work in employment settings with a heavier drinking culture.⁸

Problem Drinking

The Alcohol Needs Assessment Research Project (ANRP) for England⁹ found that overall 26% of adults aged 16-64 had an alcohol use disorder of some kind, 38% of men and 16% of women.

A recent survey of psychological problems in the British population found that overall just over 2 per cent of women aged 16-64 reported symptoms of alcohol dependence. This compared with 7.5 per cent of men of the same age range.¹⁰

The ANRP also found 2% of women in England reporting symptoms of alcohol dependence

Another recent government¹¹ survey suggests that overall, 5 per cent of women who are more than occasional drinkers are 'problem drinkers' i.e. they experience problems of psychological and/or physical dependence.

This is equivalent to around 747,000 female problem drinkers.

The equivalent figure for men is 9 per cent or 1,443,000 male problem drinkers.

For both women and men, there are higher proportions of problem drinkers in the younger age groups.

A study of British civil servants found that while overall more men than women reported problems of alcohol dependence, in the top grade a higher proportion of women reported these symptoms. 10% - 12% of the men were classified as alcohol dependent at all employment grades, whereas in women, 4% of the lowest grade were dependent, rising to 14% of the highest grade.¹²

In the UK, the evidence suggests that among women there are also higher than average rates of alcohol dependence in:-

- young women aged 16-24 compared with older age groups
- lone parents with children
- adult women living with one parent
- the single, separated and divorced
- students
- women (and men) who live in urban rather than rural areas

Why Are Women Drinking More?

Recent decades have seen fundamental changes in the role of women in society and these have brought about marked changes in attitudes and behaviour towards alcohol. Women now have many more opportunities to drink than they did previously, and women's drinking has become far more socially acceptable.

- Since the 1960's, there has been a steady increase in the number of women participating in the workforce and the male to female earnings ratio has narrowed. The workplace can be an important influence on drinking habits, and generally the employed drink more on average than the non-employed. Higher disposable income and greater financial independence underlie the increase in women's drinking.
- Over the last 20 years in particular there has been a rise of a class of professional women in their 20s and 30s who typically have high disposable income and few family responsibilities. It is this group which

tends to drink the most.

- Alcohol has become far more accessible to women through a range of outlets, such as supermarkets, restaurants, and wine bars. Pubs have generally ceased to be all-male drinking environments and become more women-friendly.
- A whole new range of alcopops and designer drinks have come on to the market which appeal particularly to women. Low calorie premium bottled beers have also crossed the gender barrier.
- Alcohol advertising is now targeted specifically at women, which normally portrays alcohol as fashionable, glamorous and used by women who are independent, fun-loving and desirable.
- Cultural attitudes favouring drinking and heavy drinking are transmitted by the mass media and receive frequent celebrity endorsement.

The Effects of Alcohol on Women

Many adverse effects of alcohol are common to men and women. In some cases, women may be at greater risk and there are some problems specific to women.

Studies have shown that the probability of medical and psychosocial harm rises with the level of drinking. The consequences of drinking may include effects on relationships, family, friendships, health, work and finances. Women appear not to be more likely than men to report social problems at a given level of drinking, whereas in the area of physical health, the evidence suggests that they suffer harm at lower levels of consumption than men.¹³

The Royal Medical Colleges recently reported that studies conducted into alcohol related harm in women were consistent in suggesting that the consumption level at which relative risk of mortality starts to rise is around 16 grammes of alcohol per day. This is approximately two units.

Even allowing for differences in body weight, a woman will attain a higher blood alcohol concentration than a man from the same amount of alcohol. This may be because women have lower levels of Alcohol Dehydrogenase (ADH), an enzyme involved in the metabolism of alcohol.

Alcohol and the Heart - Low to moderate alcohol consumption has an apparent protective effect against coronary heart disease (CHD) in middle aged and elderly men. Evidence suggests that there may also be a protective effect in women, but the absolute benefit is lower because of the lower occurrence of CHD in women.

The Nurses' Health Study¹⁴ has been collating information since 1976 with the cooperation of 85,000 female nurses. The study found that the women who benefited were over fifty, had high blood pressure and had a family history of heart disease. The study found that the risk of dying from heart disease was halved only in women who drank between one and three drinks a week. For women in the 34-39 age group drinking made no difference to deaths from CHD but tended to increase the likelihood of dying through accident. One of the most important findings was that women drinking more than 3 glasses of wine per day had a three fold increase in the risk of breast cancer.

Fat to Water Ratio - Women have a proportionally higher ratio of fat to water than men and are therefore less able to dilute alcohol within the body. Because of this, women will have a higher concentration of alcohol in their blood than men after drinking the same amounts of alcohol.

The Liver - Women appear to be more prone to liver damage from alcohol as they develop alcohol related liver disease such as cirrhosis and hepatitis after a comparatively shorter period of heavy drinking at a lower level of daily drinking than men.

Breast Cancer - Many studies have found that alcohol is associated with a raised risk of breast cancer. While it has not yet been proved conclusively that alcohol directly causes breast cancer, until the association can be explained in other ways, alcohol should be regarded as a predisposing factor.¹⁵

The Menstrual Cycle - Some women find that they are more affected by alcohol while ovulating or when they are premenstrual - this is because it takes alcohol longer to be metabolised and the blood alcohol concentration is therefore higher and more prolonged and a higher BAC will therefore be attained.

Oral Contraception - Women using oral contraceptives may not become intoxicated as quickly as they would otherwise. This is because the effect of the contraceptive is to delay the absorption of alcohol into the bloodstream.

Fertility - Heavy drinking is known to be a cause of infertility, but a recent Danish study found that even small amounts of alcohol can affect fertility.¹⁶

Pregnancy - Alcohol consumption during pregnancy can result in damage to the unborn child. This can include low attention span, distractibility and slow reaction times. There appears to be no firm agreement about the level of drinking at which damage may occur.

Fetal Alcohol Syndrome (FAS) - This may occur in the offspring of heavy and dependent drinkers. After birth, symptoms may include an abnormally small head, defective development of mid facial tissues, minor outer ear abnormalities, abnormally small eyes and heart and genital defects.

Research conducted by the Canadian Centre on Substance Abuse has found that while it is clear that children who meet the criteria for FAS are only born to those mothers who consume alcohol during pregnancy, it is evident that these mothers are also subject to other adverse conditions which are major factors in many cases, including poverty, poor nutrition, illicit drug use, smoking, violence and a history of obstetric problems.

Victimisation

Women may be particularly likely to be the victims of another person's drinking. Alcohol is thought to be a risk factor in the victimisation of women and it is known that women are the victims in a large proportion of violent crime. The British Crime Survey found that in 44 per cent of violent crimes, the victim reported the assailant as being 'drunk'.

The 1996 British Crime Survey found that in 32 per cent of cases of domestic violence (the victims being women) the offenders were reported to be under the influence of alcohol at the time.

Alcohol has also been linked to the incidence of sexual assault and rape with some studies estimating that 52 per cent of men convicted of these offences had been using alcohol prior to the attack. Equally, high proportions of victims of violence, including sexual assaults, are themselves under the influence of alcohol at the time of the offence.

Reasons For Heavy Drinking In Women

It is estimated that 3 per cent of women drinkers are drinking at the definitely harmful level of over 35 units per week. Whilst broad economic and market forces affect all women, they do not in themselves explain why one woman develops problems and another does not.

Factors which may predispose some women to develop problems in relation to alcohol have been suggested as:

- having a family background of heavy drinking
- a history of sexual abuse
- low self esteem
- traumatic life events
- association with eating disorders

Heavy drinking in women has been linked to the 'role strain' hypothesis whereby women who have multiple roles such as being a wife, mother and work outside of the home were thought to be under more pressure and more likely to drink heavily and develop problems.

However, a recent study into alcohol related problems in women found no support for the role strain hypothesis and supported the social explanation for alcohol problems rather than one of unconscious conflicts over femininity, sexuality or female social roles.

Another study found the same, concluding that 'drinking related problems among women are related more to role deprivation than to role overload or to conflicts resulting from multiple roles'. It found that women who were young, professional and single (i.e. those who do not have multiple roles) were more likely to develop problems with drinking.²

Getting Help

Until recently, the majority of alcohol services and treatment programmes have been aimed at and for men. More and more women are coming forward for help with their drinking problems and agencies and treatment centres are having to readdress their facilities and approaches to make them more accessible for women.

Is There a Need For Special Services For Women?

There is some debate over the counselling and treatment of women with alcohol problems. Some specialists maintain that it is unnecessary to provide gender specific services as this may reinforce the attitude that women with drinking problems are somehow more problematic and difficult to treat compared with men.

Others argue that problem drinking women face different conditions which facilitate or discourage them from getting help from a service and may respond differently to traditional therapy and therefore need a specialised service. Women may be intimidated by the dynamics of a mixed therapy group and not feel able to participate as they might in an all female group. Women whose drinking problem is associated with male abuse or domestic violence may be intimidated by the presence of men. Domestic arrangements such as child care may limit the suitability of some facilities designed with men as the perceived main client group.

This considered, with the expansion of counselling services within the community and home detoxification programmes through Community Alcohol Teams and Alcohol Advisory Services, it would appear that women have a wider choice of therapy and

treatment available to them which does not necessarily involve a strictly medical intervention and which is more flexible to their needs. It is unlikely that women who seek counselling from either a statutory or non-statutory agency will be denied the choice of a female counsellor as there are considerably more women than men in counselling roles.

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