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Women and alcohol

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WOMEN AND ALCOHOL

A Thesis

Presented to

The Faculty of the Department of Sociology

San Jose State University

In Partial Fulfillment

of the Requirements for the Degree

Master of Arts

By

Aria Razban

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APPROVED FOR THE DEPARTMENT OF SOCIOLOGY

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ABSTRACT

ALCOHOL and WOMEN

by Aria Razban

This study describes the relationship between variables self-esteem, social status, depression, age, race, marital status, education, income, and women's alcohol overuse. This study is based on past research which has indicated that low status, negative self-esteem, and depression tend to lead to alcohol overuse among women.

The sample of 877 women was drawn from the data set of the 1989 General Social Survey. This study used the logistic regression to analyze the data. The study found the variables self-esteem, age, and marital status to be significant predictors of alcohol overuse among women.

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CHAPTER I

INTRODUCTION

Prior to the 1920s, women who consumed alcoholic beverages were regarded as prostitutes and women of easy virtue (Levine, 1980). However, an image of romanticism and sophistication was attached to alcohol drinkers, brought on by the "lost generation" writers of the 1920, including Edna St. Vincent Millay, Dorothy Parker, Jack London, F. Scott Fitzgerald, John Steinbeck, and Ernest Hemingway (Room, 1980). In the 1940s, reported alcohol overuse among women was rare (Fillmore, 1982). After World War I, women became interested in the world of alcohol. A study by Levine (1980) suggests that during 1974 through 1976, alcohol overuse among women hit an all-time high.

What causes women to overuse alcohol? The etiology of alcohol overuse among women is perhaps the most incomplete and contradictory area of alcohol research, due in part to a lack of consensus regarding the definition of alcohol overuse. The terms alcohol use, alcohol abuse, alcoholism, alcohol overuse, problem drinker, or social drinker have no consensual social or medical definitions. The sociological study of alcohol overuse presupposes that drinking be viewed and analyzed as a behavior learned in social situations, surrounded by rules regarding why, where, when, and how to drink. These rules or norms are communicated to the individual from any number of sources, such as family, friends, advertising, media, and so forth.

The goal of this study is to examine the association of variables, including social status, self-esteem, depression, age, race, education, income, and marital status, with alcohol overuse among women. This study is based on past research which has indicated that low social status, negative self-esteem, and depression tend to lead to alcohol overuse among women (Kendall, 1983). Recently, the link between social status and alcohol overuse has been a focus of research (Gusfield, 1986). However, only a limited number of studies have examined women's overuse of alcohol as a way to escape the negative self-esteem and the depression caused by low social status. The majority of the past studies are based on vastly over-generalized categories of men, ignoring issues specific to women.

The present study uses data from 1989 General Social Survey (GSS). The GSS includes demographic indicators, psychosocial characteristics, and measures of alcohol overuse. The purpose of this study is to determine the predictors of alcohol overuse among women and to suggest prevention strategies.

The importance of this thesis topic is exhibited in the fact that alcohol is the most frequency overused substance among women (Alcohol, Drug Abuse and Mental Health Administration, 1981). In fact, women who overuse alcohol represent an estimated population of 1.5 to 2.25 million. The findings of this study are relevant of a problem of national scope.

Previous Literature

Summary of Etiologies

Past literature is filled with contradictory beliefs regarding the cause and cycle of alcohol overuse among women. Explanations cited by researchers regarding women overusing alcohol include lack or loss of social network, broken homes, hopelessness, deficiency in the development of emotions and self-esteem in childhood and youth, peer pressure, self-consciousness, physical or sexual abuse, receiving more negative than positive support, divorce, sex role conflict, and ambivalent gender identification. The thought of considering and examining all the possible predictive or explanatory variables involved with different types of alcohol problems is complex and can be discouraging to research. Therefore, the theory of disaggregation of alcohol problems, which began in the late 1960s, may be the best route to view the present as well as past studies. A disaggregated approach to alcoholism states, first, that there are different alcohol problems, and second, that each problem has its own predictive factors (Cahalan et al., 1969).

Past studies suggest that a cycle begins with women becoming depressed as the result of physiological effects of alcohol which then affect and disturb their daily lives. A study conducted by Kendall (1983) indicated that alcohol dependency leads to loss of self-esteem which, in turn,

leads to depression. The negative changes in one's life as the result of alcohol overuse then tend to lower one's self-esteem and social status in the society (Barling & Bolon, 1981; Konovsky & Wilsnack, 1982).

In addition, recent studies have found associations between alcohol overuse among women and physiological and genetic factors. Jones and Jones (1976) stated that many alcoholic women may drink to reduce high monoamine oxidase (MAO) levels reportedly associated with depression. Alcohol is thought to be a MAO inhibitor. Estrogen is also reported to be a MAO inhibitor, but women alcoholics tend to suffer from gynecological disorders and many have prolonged low estrogen levels (Jones & Jones, 1976). Despite studies of families, twins, and adoptees, it has been difficult to separate the roles of genetic and sociocultural factors in the case of alcohol overuse. Genetic and physiological theories of alcoholism have been inconclusive.

Other studies contribute alcohol overuse among women to sex-role identity conflict. Wilsnack et al. (1986) theorize that alcoholic women consciously value femininity but feel inadequate as women because they feel more masculine on unconscious levels. Sharr (1980), in his study on sex-role conflict as a determinant of female alcohol overuse, is concerned with the problem of women struggling with masculine and feminine identity and behavior roles in a traditionally male-dominated society. While many women have

successfully negotiated recent changes in their social roles, Sharr's research suggests some prefer male role behavior but exhibit more feminine emotional response, a condition he calls "deviant femininity." Women may then experience stress and, hence, drink excessively to release tension.

The women with indication of sex-role confusion or deviancy tend to have a drinking pattern similar to men (Sharr, 1980). This observation may reflect the current social discomfort about possible consequences and costs of women's liberation from traditional sex roles (Fillmore, 1982). Furthermore, increased sex role ambiguity, double standards, confusion, and guilt may undermine women's self-esteem (Sharr, 1980); thus, women may experience distinctive stress related to their unstable and impermanent sexual status (Wilsnack et al., 1986). Problem drinking among women may be triggered by sex-role problems and identity problems and is highly concentrated among women who feel sexually inadequate and frigid. On the other hand, in some cases such as promiscuity, it is very likely that the changing climate of sexual mores has put more women at greater risk of turning to alcohol as a coping resource (Saunders, 1980).

Marital status also plays an important role in alcohol consumption. Women who have never married or who are divorced or separated are unlikely to abstain from alcohol

and are likely to be heavy drinkers (Cahalan et al., 1969). According to Wilsnack et al. (1986), unemployed married women are less likely than any other subgroup to drink even when they are in a heavy drinking environment. According to Celentano and McQueen (1984), divorced or separated women, as well as women who have never married, consume alcohol more heavily than married women in order to escape their unsatisfactory living conditions. Younger unmarried women, regardless of labor force participation, seem to be using alcohol to cope with tension, a pattern far more characteristic of men than women. Married women with unhappy marriages tend to drink more in order to escape their situations (Cahalan et al., 1969).

Another factor other than marital status which tends to differentiate women's patterns of alcohol consumption is age. Drinking problems are less frequent in older women, while the highest rate of drinking problems are found among 18-to 29-year-old women (Liban & Smart, 1982). According to Celentano and McQueen (1984), older women drink less than younger women. Due to lack of knowledge, younger women tend to use alcohol as a tool to escape the realities of life (Celentano & McQueen, 1984). Drinking frequency among young women has shown marked increases between 1949 and current time (Blane & Hewitt, 1977), and drinking age has gone down among women (Fillmore, 1982). In a 1962 San Francisco sample, young single women were the second highest group

(after young single men) in weekly tavern patronage: 58% of single men and 30% of single women aged 20 to 29 reported being in a tavern at least once a week.

Other studies have pointed out the important role of race with regard to alcohol consumption. Black women who drink heavily are said to be protected, tolerated, and, unexpectedly, even praised by their communities (Cahalan et al., 1969). Black women have higher proportions of both abstainers as well as heavy drinkers than White women. Cahalan et al. suggest that the stress of being the head of the household, nurturing kids, jobs, social service problems, and the temporary nature of their relationships with men may lead Black women to drink. There are also higher rates of hospitalization and alcohol related arrests among Black women than there are in White women. Black women who drink heavily do so for escapism. Hispanic women have lower rates of drinking than Black women. However, more Hispanic women need to be included in the surveys. Due to their cultural norms, Hispanic women are less likely to report their drinking. Hispanic women who do drink tend to be better educated, younger, and from the middle class. Native American women value the ecstatic natural experience of an altered state of consciousness, which they reach when they consume alcohol. With Asian women, genetic predispositions argue that the discomfort that is associated with alcohol prevents them from drinking heavily.

Education is another variable to be considered. According to Celentano and McQueen (1984), women with lower education tend to drink less than women with higher education. Alcohol is thought to be a "high class" or "status" drug. Women with higher education may not want to be associated with "lower status" substances such as illegal drugs.

Other studies have examined the effect of socioeconomic factors on women's alcohol consumption. Employed women tend to overuse alcohol more than housewives (Cahalan et al., 1969). Of the 7,492 women interviewed in the 1978 Canadian Survey, those in the work place reported drinking seven or more drinks per week compared to women not in the labor force. One rationale for this phenomenon is that working women may have more opportunities to drink, such as business lunches, work gatherings, and drinking with coworkers. The other reason is that women who work may drink to escape or to deal with the stress that is associated with their jobs. Women in high status jobs drink more than lower status or blue collar jobs due to the pressure and stress of their jobs. According to Wilsnack et al. (1986), women who work part-time tend to overuse alcohol more than women who work full-time, and this may be due to the fact that women who work part-time have more leisure time to consume alcohol.

Women with lower incomes tend to drink less than women with higher incomes (Celentano & McQueen, 1984). The

explanation for this may not only be that alcohol is considered by many as a "high status" drug, but higher income individuals can afford the high price of alcohol. Alcohol may also attract women with high income who do not want to get involved with illegal substances which could threaten job security or social status. On the other hand, based on a study done by Wilsnack et al. (1986), women who are not satisfied with their financial situation tend to drink more than women who are satisfied with their financial situation. Studies show that women, due to financial hardship, drink alcohol in order to deal with stress.

Family background represents another possible etiological factor in female alcohol overuse. Beckman (1979) suggests that among alcoholics of lower socioeconomic status, there is more of a history of childhood disruption and parental alcoholism than among nonalcoholic women of lower socioeconomic status. Female alcoholics from a higher socioeconomic status seem to have had happier childhoods and less parental alcoholism than their lower socioeconomic counterparts.

Another issue that needs to be considered is the difference between men's and women's alcohol consumption. The National Council's first Senate hearing on women and alcohol in 1976 specified that alcohol overuse among women is different than among men; thus, separate research is essential for women. According to Cahalan et al. (1969),

men drink more than women. Furthermore, men and women report different expectations of the effects of alcohol on social behavior. Women tend to drink to enhance social interaction, whereas men report a greater degree of aggressive behavior when drinking. Cahalan et al. suggest that drinking or heavy drinking may be an important part of the masculine role for some men. Men may develop alcoholic traits as a matter of male roles and without specific circumstances or events to prompt them. However, women are socialized to be nondrinkers and tend to develop alcohol tendencies due to specific life events or circumstances. Women who seek treatment for alcohol abuse are more likely to cite individual reasons for drinking than their male counterparts (Allgood, 1990). Women tend to consume alcohol in order to settle nerves, to forget pressure, and to go to sleep. It appears that psychological dependency on alcohol may be a greater risk for women than men. Allgood (1990) indicates that more women report factors that perpetuate alcohol overuse such as depressive symptoms, negative responses to recent stressful events, and low self-esteem than men. Based on findings by Wilsnack et al. (1986), women who have experienced some trauma in the past tend to drink more than others in order to escape the painful memories. The largest percentage of the alcoholic women, 58 percent, saw their own drinking as linked to an affect, feelings of loneliness and poor opinions of themselves, and

more than half of the women, 56 percent, cited a particular event or life crisis. Most frequently mentioned reasons to drink were divorce, dislocation which translated to loss of social networks, and the death of a person close to the women (Turnbull & Gomberg, 1990). The young women in their 20s who overuse alcohol appear to be alienated from family, peers, and others.

Self-Esteem

Many women who drink share one characteristic, which is low self-esteem (Turnbull & Gomberg, 1990). Low self-esteem was found to be associated with the overuse of alcohol among 58 percent of women, constituting the largest single factor found in alcoholic women. Alcohol consumption is an attempt, however illusory, used by women to rise above their low self-esteem (Beaur, 1982). Svrakic (1990) suggests that alcoholic women are able, with the help of alcohol, to create a sense of grandiose self-importance and significance in the external world. According to Turnball and Gomberg (1990), when a woman lacks self-esteem, liquor becomes her best friend. In addition, more women than men report depressive symptoms due to negative self-esteem, perhaps indicating that women in general tend to have lower self-esteem than men (Allgood, 1990). One of the major effects of negative self-esteem is depression (Trimpey, 1990). Females tend to self-medicate painful effects of

negative self-esteem by alcohol use (Khantzian, 1990). Alcohol consumption has often been seen as a means of reducing personal tension and depression. The effects of depression, it is argued, permit relaxation and temporary relief of frustrated impulses. Based on a study by Workman and Beer (1989), the correlation between self-esteem, depression, and alcohol dependency scores were significant and positive; alcohol helps women find temporary escape from negative self-esteem and depression. Furthermore, negative self-esteem can discourage individuals from becoming involved in social gatherings. This promotes depression, which in turn can further encourage alcohol overuse. Lack of social support encourages negative self-esteem which can contribute to overuse of alcohol among women.

Social Status

The term "status" has been used in translation of Weber's (1966) work as the English word designating the position an individual holds with respect to the distribution of prestige or honor. Status, social status, role, and social position are often used interchangeably. Social status in social science denotes a position in a social system with respect to the distribution of prestige. Social status is defined as the place of an individual in a given society accompanied by a collection of duties and roles. The social status of a group consists of the

evaluation and respect which it receives from others which is often subjective.

The relationship between alcohol consumption and social status was analyzed by Gusfield (1986), in which he used the Temperance movement in the United States as a model. According to Gusfield, status groups share a common culture in the form of standards of behavior, including patterns of alcohol consumption and food consumption. The group's life style and drinking habits separate it from other groups in the society and are assigned hierarchy and, thus, status.

Alcohol has been used as a symbol of group membership, communicating to others the set of accepted behavior of the drinkers or abstainer to ways of moral conduct of work, play, familiar association, and level of social status (Gusfield, 1986). Furthermore, men tend to use alcohol as a way to show group solidarity or group membership.

Any substance consumed can assume properties as an indication of the social position of its consumers. The consumption of or abstention from alcohol has often delineated group affiliation and status identity in American society (Gusfield, 1986). Individuals tend to consume different amounts and types of alcoholic beverages as ways to display income. Studies of consumption habits have given much attention to the pacesetters who occupy positions of high status and who influence those below them in the social structure. For individuals outside of the group, these

particular forms of behavior and consumption become symbols of the status of members.

According to Wilsnack et al. (1986) women perceive alcohol as a symbol of high status, prestige, and access to power. Drinking and access to public drinking establishments are considered symbols of prestige. According to Gusfield (1986), individuals who desire to improve their social status use alcohol as a tool. Women with low social status tend to use alcohol as a tool to achieve high social status. Women have the illusion that they can use alcohol as a way of becoming more than an "average member" (Beaur, 1982). Women also tend to perceive alcohol to be a symbol of gender equality. Veblen (1934) points out the taboo against female drinking is one way in which men symbolize their higher status. A negative correlation tends to be present between the status of the individuals in a category and their alcohol use (Gusfield, 1986). On the other hand, Kendall's (1983) study indicates that alcohol overuse often leads to social isolation and loss of social status.

Furthermore, Cahalan et al. (1969) point out that lower- and higher-status female alcohol abusers may exhibit different patterns of alcohol abuse. Lower-status women alcohol abusers tend to have drinking patterns and problems quite similar to average male alcohol abusers, while higher-status women tend to drink at home which fit the

stereotype of women alcohol abusers reported in the literature.

Social Status and Self-Esteem

The concepts of social status and self-esteem have been used separately as independent variables with regard to the alcohol overuse of women. According to Park (1968), self-esteem is rooted in the status one occupies. Furthermore, Park indicates that the perceptions which individuals have of themselves depend upon their vocations, and in general upon the roles that they seek to play in their communities and social groups, as well as upon the recognition they receive from the community. The individual's self-perceptions are based on his/her status in the social group or groups of which he/she is a member. Individuals apply status information to form beliefs and evaluations of themselves and those with whom they interact (Cohen & Zhou, 1991). According to Veblen (1934), self-esteem is a reflection of the esteem accorded by one's fellows. Therefore, one's self-esteem is belied by the failure of others to grant her/him the approval and deference she/he feels is deserved.

Strong relationships between social status, self-esteem, and alcohol consumption have been reported (Gusfield, 1986). Low social status or impermanent status of women tends to cause negative self-esteem and depression,

which can lead to overuse of alcohol (Wilsnack et al., 1986). Furthermore, women in high risk groups tend to indicate that they see themselves as having unstable statuses. The strongest link to women's alcoholism, low self-esteem, tends to occur when the men in a woman's subgroup do not grant her the status she believes that she deserves. In any subgroup, when its members lose their self-esteem, they are more likely to overuse alcohol (Beaur, 1982).

The issue of gender equality for women has caused the feminist movement to utilize the use of alcohol (Gusfield, 1986). Women's alcohol consumption represents a symbol of the power necessary to gain access to institutions traditionally controlled by men. Celentano and McQueen (1984) suggest that women who overuse alcohol tend to have egalitarian attitudes. Wilsnack et al. (1986) point out that adolescent girls who reject traditional femininity are more likely to overuse alcohol than other more traditional girls.

For many women, alcoholism represents the ransom they have to pay for their emancipation (Wilsnack et al., 1986). Women drink because alcohol makes them into what they want to be-- equal to men (Beaur, 1982). The norms to the society concerning alcohol overuse among its members is shown in a study by Trimpey (1990), which indicates that the customary degree and frequency of drunkenness varies directly with the anxiety level of the society.

The concept of status and improving one's status can also be applied to race. Women in a "lower status race" (based on Bogardus' social-distance scale index) tend to be heavier drinkers. Among drinkers, heavy drinking women were most prevalent among Blacks (14%), Hispanics (13%), Native Americans (11%), and least prevalent among Whites (8%) (Wilsnack et al., 1986).

There are conflicting explanations regarding alcohol overuse among women, and many are based on theories which are not substantiated by research specific to women and to the dynamics of women's social status. The majority of past studies regarding alcohol overuse do not include women since it was believed that "respectable" women do not overuse alcohol (Levine, 1980). However, there is an increase in the number of women with alcohol-related problems in the United States, with estimates reaching as high as 8.5 million. Studies have shown that women become more physically and emotionally impaired than men at comparable levels of drinking due to male-female physiological differences (Jones & Jones, 1976). The mortality rate is greater among female alcoholics than male alcoholics (Hill, 1984). In addition, there is a higher degree of attempted suicide for alcoholic women than there is for alcoholic men (Curlee, 1970).

Overview of Difficulties in Alcohol Overuse Research

The study of female alcohol overuse is confronted by numerous difficulties including insufficient sample size (Fillmore, 1982). It is less complicated to locate and study male subjects, in that more men than women are hospitalized for alcoholism. Furthermore, the concept of the "hidden alcoholic," the woman watching television at home while drinking heavily, suggests that these women may be underreporting or not reporting their alcohol consumption. Previously, female alcoholics were believed to be prostitutes or other females of ill repute. Only recently, a more accurate picture has emerged of the female alcoholic, a housewife who drinks in her private house rather than a prostitute. According to Fillmore, the term drinking brings with it an association between women's drinking and sinful, immoral behavior.

Another more difficult aspect of conducting a study concerning women and alcohol is distinguishing between alcoholism, alcohol overuse, and use. The notions of alcoholism, alcohol overuse, and use have no consensual social or diagnostic definitions (Spinatsch, 1989). From a medical perspective, alcoholism is often used to identify excessive drinking patterns which may, if they are maintained for a longer period of time, cause somatic dysfunction, particularly of the liver. In the 1940s, alcoholism was described as a progressive disease involving

psychological and physical dependency, characterized by loss of control over drinking once drinking has started. This medial model of alcoholism was challenged, and confusion developed over whether alcoholism could be defined as a disease, with specific and progressive symptomology.

A difficulty with disease concepts that have affected the etiological study of alcohol overuse has been the growing number of people who have drinking problems that clearly warrant intervention, but who do not merit the label "diseased" (Spinatsch, 1989). These individuals may not experience many of the "typical" symptoms of the disease "alcoholism." For example, their drinking is not uncontrolled and they are not psychologically addicted, but they may, when they drink even occasionally, experience less severe alcohol effects. Occasional disruptive personality changes or physical illness has spanned the broader category of "problem drinkers" to include these people as well as those who fit narrower definitions of alcoholism. To further complicate the matter, some definitions of alcoholism as a disease or illness have become so vague that they accommodate the less severe alcohol problems.

During the 1960s, definitions regarding alcohol problems began to change (Spinatsch, 1989). While the past definitions of alcoholism narrowly included only a small percentage of those with alcohol problems, a more appropriate definition would possibly differentiate between

women's and men's alcoholism, alcohol overuse and use. The following examples indicate the broad and confusing definitions of the dependent variable, alcohol overuse. A survey performed by Mulford (1977) defines heavy drinking as drinking more than once a week and consuming on an average occasion four or more bottles of beer, three or more drinks of hard liquor, or four or more glasses of wine. According to Room (1980), women in the heavy drinking category includes women who drink two or three times a month with a modal quantity of five or more drinks, or those who consume three to five times a week with any modal quantity and a range of five or more drinks, or females who drink every day with any modal quantity of three or more drinks. The national survey conducted by Martin et al. (1985) defines heavy drinking as 120 drinks or more per month.

There are at least two problems with such vague and broad definitions. First, researchers seeking the cause of the disease "alcoholism" may be examining a variety of phenomena associated with alcohol overuse instead. Second, it is impossible to standardize studies and to examine the etiology of not yet defined concepts of alcoholism, alcohol abuse, alcohol overuse, and alcohol use. Furthermore, society tends to define deviant behavior differently over time (Gusfield, 1986).

In 1971, Jones performed a longitudinal study of different types of adult female drinkers, including

overusers. Her simple definition of individuals who overuse alcohol is "those who create problems for themselves, their families, or their employers." Jones' definition of female alcohol overuse provided the base line for this study. This study's validity relies on the assumption that the General Social Survey was done anonymously; therefore, the women subjects are believed to have reported their alcohol consumption accurately and were not intimidated into falsifying their overuse of alcohol.

HYPOTHESES

This study examines the effects of social status, self-esteem, depression and demographic variables on women's alcohol overuse. The hypotheses to be tested are as follows:

H1: Women with negative self-esteem have a higher probability to overuse alcohol than women with positive self-esteem.

H2: Women with low social status have a higher probability to overuse alcohol than women with high social status.

H3: Women who are unhappy with their lives have a higher probability to overuse alcohol than women who are happy with their lives.

H4: Divorced, separated women and never married women have a higher probability to overuse alcohol than married women.

H5: Young women (younger than 30) have a higher probability to overuse alcohol than older women.

H6: Hispanic, Native American, and Black women have a higher probability to overuse alcohol than White women.

H7: Women with high income have a higher probability to overuse alcohol than lower income women.

H8: Women with higher education have a higher probability to overuse alcohol than lower educated women.

CHAPTER II

METHODS

In order to conduct this study, eight variables were chosen from the data set of the General Social Survey of 1989, published by the National Opinion Research Center. In order to concentrate on the issue of women and alcohol overuse, only women are included in this study's sample. The number of women in the present study's sample is 464, which constitutes Blacks, Whites, and other races from New England, Middle Atlantic, East North Central, West North Central, South Atlantic, East South Central, West South Central, and the Pacific. The survey used in this study was independently drawn from a sample of English-speaking persons 18 years of age or over living in non-institutional arrangements within the United States. The sample is made up of married, widowed, divorced, separated, and never married respondents. The following demographic variables are selected: "the respondent's marital status," "age of the respondent," "education of the respondent," "income of the respondent," and "race of the respondent." The following independent variables are selected: the respondent's self-esteem, the respondent's social status, and the respondent's level of depression. The question, "do you ever drink too much?," is the basis for the dependent variable. The chosen variables enables this study to examine the diverse and involved issue of women and alcohol overuse.

The General Social Survey was selected for this study due to the facts that it was conducted professionally, included a large diverse group of women, and interviewed sufficient number of women. Since the General Social Survey was conducted confidentially, concern over the study's reliability was reduced, for the subjects would not feel hesitant due to social stigma.

Due to the complexity of the independent variables, the effect of depression, social status, and self-esteem on the dependent variable is analyzed separately.

The General Social Survey

The following is a description of the General Social Survey and the data collection procedures employed by the National Opinion Research Center. The General Social Survey included men and women over the age of 18 with diverse racial, marital, and employment backgrounds with a mean age of 45. The median length of the interview was approximately one-half hours. The data from the interviews were processed according to standard NORC procedures. Cleaning procedures--utilizing a combination of the coding specifications and the interviewers--were used to check for inconsistent or illegitimate codes.

The National Opinion Research Center employed quotas to select respondents for the General Social Survey. Quotas for four groups (employed and unemployed women, and men over

and under 35) were determined by the proportion of each group in their location according to 1980 census tract data. These quotas were imposed to control the bias introduced by the fact that men, particularly younger men, and employed women tend to spend less time at home than other people. In order to reduce bias due to people not being at home, the National Opinion Research Center interviewers were required to interview after 3:00 PM or on weekends or holidays, since housewives tend to be overrepresented in daytime interviews. Interviewers were required to follow a specified travel pattern at the block level and proceed from one household to another until quotas are filled. No substitutions within households were allowed, and no callbacks were required.

Operational Definitions

The following statements declare this study's variables, which were selected from the 1989 General Social Survey. The dependent variable was based on the response of "yes" or "no" to the question: "do you ever drink too much?"

The questions assigned to the variables are as follows: the respondent's self-esteem (based on variables "how important is it to be well liked or popular?" and "how important is it to think for oneself?"), the respondent's social status (based on the respondent's occupational prestige code), the respondent's level of depression (based on "the respondent's general happiness"), "education of the

respondent," "income of the respondent," "race of the respondent," "the respondent's marital status," and "age of the respondent." Appendix A includes the original variables, and Appendix B lists the variables after recording.

The scale designed by this study to measure the respondent's self-esteem was based on questions: "how important is it to be well liked or popular?" and "how important is it to think for oneself?" The positive self-esteem category was assigned to the respondents who choose answers "3rd important," "4th important" or "least important" and "most important" or "2nd important" to the questions, "how important is it to be well liked or popular?" and "how important is it to think for oneself?" On the other hand, the respondents who selected "most important," "2nd important" or "don't know" to the question "how important is it to be well liked or popular?" and "3rd important," "4th important," "least important" or "don't know" to the variable "how important is it to think for oneself," were categorized as individuals with negative self-esteem.

The scale for the respondent's social status was based on the General Social Survey's question which estimated the individual's occupational prestige. The General Social Survey's occupational prestige score ranged from 10 to 89, 10 being low prestige and 89 as high prestige score. This

study divided the occupational prestige scores into two equal categories: labeling high prestige scores as "high social status" and low prestige scores as "low social status."

The prestige scores assigned to occupations in the General Social Survey were based on a rating system developed at National Opinion Research Center in 1963-1965 in a project on occupation prestige directed by Robert W. Hodge, Paul S. Siegel, and Peter H. Rossi. The prestige scores in the Hodge-Siegel-Rossi study were generated by asking respondents to estimate the social standing of occupations via a nine-step ladder, printed on cardboard and presented to the respondent. The boxes on the ladder were numbered 1 to 9 from bottom to top. In addition, the first, fifth, and ninth boxes were labeled "bottom," "middle," and "top," respectively. The occupational titles were printed on small cards, and the occupational prestige ratings were collected by requesting respondents to sort the cards into boxes formed by the rungs of the ladder.

Statistical Procedures

The present study uses logistic regression as a method to analyze the data, for the dependent variable, "do you ever drink too much?," has a dichotomous value of yes or no. In order to standardize the values of the variables, the independent and demographic variables were recoded as 0s and

1s which matched the coding of the dependent variable. Furthermore, other statistical analyses were used along with logistic regression, including frequency, correlation, and correlation matrix. In order to fully understand the relationship between the variables and to assure the accuracy of the results, correlation and frequency analyses were performed on the original and recoded variables. Frequencies were generated to make sure that each category in the study included adequate number of respondents. The size of each category was then compared to the number of the cases in the output of the logistic regression analyses. Correlation was computed before and after performing logistic regression to double check the accuracy of the logistic regression's results. A correlation matrix was applied to the data to determine whether there is any strong relationship between the variables that would falsify the logistic regression's results.

Recoding

To insure accurate results, the responses were converted into standardized codes. In order to conduct logistic regression analyses, the responses were changed into dummy variables and simply coded as 1s and 0s.

The recoding of the variable age was based on past studies which have indicated a strong relationship between women under 30 years old and alcohol overuse. The variable

age was divided into two groups: women under 30 and over 30 years old. Past studies have also shown a distinctive difference in alcohol consumption among people of different races, especially among Blacks and Whites. The General Social Survey only designated three categories for the respondent's race: "White," "Black," and "other." The "other" category was not clearly defined by the General Social Survey; therefore, the variable race was recoded as Black and White. Furthermore, dropping the "other" category was appropriate, since only 34 out of 877 respondents (the total sample size before missing values) identified themselves as "other."

Past research has also indicated a distinct difference between alcohol consumption of married and unmarried women. Since the pattern of alcohol consumption among widowed, divorced, separated, and never married tends to be similar, the marital status variable was recoded as 0 for married and 1 for not married women.

The responses to the variable "general happiness" included "very happy," "pretty happy," and "not too happy." The responses "very happy" and "pretty happy" were recoded as not depressed (due to similarity of the definition of the two categories), and the category of "not too happy" was recoded as depressed. The recoding of the dependent variable, "do you ever drink too much?," included recoding the response "not applicable" to no. The "not applicable"

category consisted of respondents who were either under the legal drinking age or did not consume alcohol.

The scale designed to measure self-esteem was based on questions: "how important is it to be well liked or popular?" and "how important is it to think for oneself?" The responses of "3rd important," "4th important," "least important," and "do not know" were labeled as negative self-esteem and recoded as 1. The above responses were considered as negative self-esteem, due to the fact that individuals with negative self-esteem tend not to have the self-confidence to make decisions for themselves. Answers of "most important" and "2nd important" to the above question were recoded as 0 and considered as a part of the positive self-esteem category, for these individuals trust their own judgments and decisions. The second part of the self-esteem scale consisted of answers to the variable "how important is it to be well liked or popular?" The individuals who selected "most important" or "2nd important" were recoded as 1 and assigned to the negative self-esteem category. The individuals with negative self-esteem are more likely to be concerned regarding other's opinions than individuals with positive self-esteem. Responses of "3rd important," "4th important," or "least important" were recoded as 0 and placed in positive self-esteem category. Individuals with positive self-esteem tend to respect oneself regardless of their popularity among peers. Only by

selecting 0 to both of the self-esteem questions would an individual be entitled as having positive self-esteem.

CHAPTER III

FINDINGS

The results of the frequencies are shown in Table 1. The results of the correlation matrix are shown in Table 2, which suggests that there is no evidence of multicollinearity among the variables. The results of the logistic regression analyses are shown in Table 3. Using a significance level of .05 (number = 877), the results from the logistic regression analyses indicate that self-esteem, age and marital status are the only significant predictors of alcohol overuse among women in this model. The regression coefficient for age is .9304, and its standard error is .2799. The Exp(B) for age is 2.5355, which indicates that the odds of alcohol overuse occurring increases by a factor of about 2.5 for women under age of 30. The Wald statistic for age is 11.0487, and its significance level is .0009. This outcome confirms this study's hypothesis, which suggests that younger women (under 30 years old) tend to overuse alcohol more than older women (over 30 years old).

Marital status has a regression coefficient of .6771 and its standard error is .2768. The Exp(B) for marital status is 1.9681, indicating that the odds of alcohol overuse occurring increases by a factor of about 2 for non-married women. The Wald statistic is 5.9830, and its significance level is .0144 (significant at .05), indicating that marital status significantly predicts overuse of

Table 1

Sample Demographics

	n	%
Age		
<30	211	75.9
>30	666	24.1
Education		
<12	688	78.4
>12	186	21.2
Race		
Black	111	12.7
White	732	83.5
Marital status		
Married	439	50.1
Not married	438	49.9
Income		
<7,000	508	61.8
>7,000	369	38.2
Social status		
High social status	231	26.3
Low social status	646	73.7
Self-esteem		
Positive self-esteem	718	81.9
Low self-esteem	159	18.1
Depression		
Depressed	88	10.0
Not depressed	782	89.2

Table 2

Correlation Matrix Using Alcohol Overuse, Self-Esteem, Social Status, Race, Age, Marital, Depression, Education, and Income

	ALCOHOL OVERUSE	SELF- ESTEEM	SOCIAL STATUS	RACE	AGE
ALCOHOL OVERUSE	1.0000				
SELF- ESTEEM	.1428*	1.0000			
SOCIAL STATUS	.0559	.1526**	1.0000		
RACE	.0019	.1302*	.0317	1.0000	
AGE	.1753**	.1087*	.1213*	.0040	1.0000
MARITAL	.1370*	.0564	-.0306	.1715**	.1240*
DEPRESSION	.0398	.1034	.0243	.0885	.0191
EDUCATION	-.0110	-.1778**	-.4558**	-.0253	-.0260
INCOME	.0204	-.1002	-.2739**	.0439	-.2298**

1-tailed significance: * $p \leq .01$ ** $p \leq .001$

Table 2 (continued)

Correlation Matrix Using Alcohol Overuse, Self-Esteem, Social Status,
Race, Age, Marital, Depression, Education, and Income

	MARITAL	DEPRESSION	EDUCATION	INCOME
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ALCOHOL OVERUSE				
SELF- ESTEEM				
SOCIAL STATUS				
RACE				
AGE				
MARITAL	1.0000			
DEPRESSION	.0299	1.0000		
EDUCATION	.0695	-.0381	1.0000	
INCOME	.0655	-.1564**	.2959**	1.0000

1-tailed significance: * $p \leq .01$ ** $p \leq .001$

Table 3

Logistic Regression Using Alcohol Overuse with Self-Esteem, Social Status, Race, Age, Marital, Depression, Education, and Income

Variable	B	S.E.	Wald	df	Sig	R	Exp(B)
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SOCIAL STATUS	.2802	.3287	.7267	1	.3940	0	1.3235
SELF- ESTEEM	.8414	.3338	6.3546	1	.0117	.1034	2.3196
RACE	-.3612	.3996	.8169	1	.3661	0	.6968
AGE	.9304	.2799	11.0487	1	.0009	.1491	2.5355
DEPRESSION	.3881	.4765	.6636	1	.4153	0	1.4742
MARITAL	.6771	.2768	5.9830	1	.0144	.0989	1.9681
INCOME	.0745	.0443	2.8270	1	.0927	.0451	1.0773
EDUCATION	.0020	.0606	.0011	1	.9739	0	1.0020

alcohol among women. The results confirm this study's hypothesis, which suggests that unmarried women tend to overuse alcohol more than married women.

The independent variable of self-esteem has a regression coefficient of .8414, and its standard error is .3338. The Exp(B) for self-esteem is 2.3196, indicating that the odds of alcohol overuse occurring increases by a factor of over 2 for women who have negative self-esteem. The Wald statistic is 6.3546, and its significance level is .0117 (significant at .05), indicating that the variable self-esteem significantly predicts overuse of alcohol among women. The results confirm this study's hypothesis, which states that women with negative self-esteem tend to overuse alcohol more than women with positive self-esteem.

The independent variable of social status has a regression coefficient of .2802 and a standard error of .3287. The Wald statistic is .7267, and its significance level is .3940. Based on the results, this study's hypothesis that social status is a significant predictor of alcohol overuse among women is not supported.

The independent variable of depression has a regression coefficient of .3881 and a standard error of .4765. The Wald statistic is .6636, and its significance level is .4153. Again, these findings do not support this study's hypothesis that depression is a significant predictor of alcohol overuse among women.

The variable of race has a regression coefficient of $-.3612$ and a standard error of $.3996$. The Wald statistic is $.8169$, and its significance level is $.3661$. In this model, race is not a significant predictor; thus, this study's hypothesis that Black women tend to overuse alcohol more than White women is not supported.

The variable of education has a regression coefficient of $.0020$ and a standard error of $.0606$. The Wald statistic is $.0011$, and its significance level is $.9739$. In this model, education is not a significant predictor; thus, this study's hypothesis that women with higher education tend to overuse alcohol more than women with lower education is not supported.

The variable of income has a regression coefficient of $.0745$ and a standard error of $.0443$. The Wald statistic is 2.8270 , and its significance level is $.0927$. In this model, income is not a significant predictor of alcohol overuse among women. The results from the logistic regression analyses do not support this study's hypothesis, which states that women with high income tend to overuse alcohol more than women with low income.

Discussion

The results from the logistic regression analyses demonstrate the importance of exploring the interrelated relationship between depression, self-esteem, social status,

and other related factors with alcohol overuse. The results are summarized below.

The findings show that self-esteem is a significant predictor of alcohol overuse among women. This is in agreement with this study's hypothesis and past studies. Women with negative self-esteem may find alcohol a way to deal with stress, while women with positive self-esteem may find other routes to deal with hardships of life. Furthermore, women with negative self-esteem may even rely on alcohol in order to be sociable in gatherings.

Age and marital status were shown to be significant predictors of alcohol overuse among women. Women may "grow out of" overusing alcohol as their age increases. With age, women may become more self-assured and have a more positive self-esteem. Women may find other options to deal with stress than alcohol as they mature. As women get older, they also need to be concerned about their jobs and health which may discourage them from overusing alcohol. Furthermore, women may not overuse alcohol as they get married and have to consider the health of their children. Married women may not have the same number of opportunities as single women to consume or overuse alcohol.

The findings indicate that depression alone is not a significant predictor of alcohol overuse among women, which is in agreement to a study done by Martin et al. (1985), in which alcohol overuse was not predicted by an index history

of depression. Aneshensel and Huba (1983) found that, in the long term, depression tends to decrease alcohol consumption among women. Hartka et al. (1991) found that, over the short term, depression tends to decrease alcohol consumption among women. Therefore, these results demonstrate the importance of considering the period over which the relationship between each occurrence of alcohol overuse and depressive behavior is measured. This study's measure of depression is based on a question that inquires about the respondent's present depression; however, the dependent variable asks the respondent if she has ever overused alcohol. An individual may not feel depressed at the time of the interview but has overused alcohol in the past due to depression.

Since alcohol can temporarily drown the feelings of depression by providing an illusion of happiness and comfort, one may not be aware of the state of her depression. Furthermore, alcohol itself is known to be a depressant, and women who want to relieve depression may choose other drugs.

On the other hand, women may consume alcohol for reasons other than depression. Alcohol is the only drug in which consumption and overuse is widely accepted by the society as a way to celebrate the good times. Ratliff and Burkhart (1984) found in their study that women tend to drink to enhance social and sexual pleasures. Women who

engage in social activities are more likely not suffering from feelings of depression.

Moreover, this study's measurement of depression was based on a single question which did not take into account factors that may work to offset the effects of depressed mood, such as steady and gainful employment or marriage (Hartka et al., 1991). In addition, this study did not consider psychosocial variables which have been shown by past studies to correlate with depression, such as perceived life control, perceived social support, perceived accomplishment, and alienation (Aneshensen & Huba, 1983; Celentano & McQueen, 1984).

The findings also indicates that social status is not a significant predictor of alcohol overuse. Since alcohol, unlike other drugs, is considered to be a "high status" drug (Celentano & McQueen, 1984) and is legal, it is more likely to be chosen by women of high status. Women in low social status may choose other drugs which are considered more appropriate to use within their social group. Women in low social status may encounter more stress in their daily lives than women in high social status; therefore, they may need more potent drugs than alcohol to deal with difficult situations. Furthermore, women with low social status or income may not be able to afford the cost of alcohol.

Furthermore, other factors such as stress may be a better predictor of women's alcohol overuse than social

status. Past studies have shown that women tend to overuse alcohol in order to deal with stress and their dissatisfaction, associated with their financial status, employment, marital or other aspects of their lives (Liban & Smart, 1982). However, women tend to feel stress and dissatisfaction despite their level of social status and may perceive alcohol as an effective and harmless substance to relieve tension. The importance of stress is in agreement with past studies which stated that women with high status jobs tend to overuse alcohol in order to deal with the stress of their occupations (Cahalan et al., 1969).

Income was not a significant predictor of alcohol overuse among women. However, past studies do not seem to agree on whether or not income is a significant predictor of alcohol overuse among women. A study by Celentano and McQueen (1984) suggests that lower income women tend to drink less than higher income women, while a study by Liban and Smart (1982) states that financial hardships of being poor tend to contribute to women's alcohol overuse. These contradictions point out the fact that other variables such as family background, along with income, may be affecting women's alcohol overuse. Beckman (1979) found a history of childhood disruption among women in lower income status who overused alcohol. However, a separate logistic regression analysis was conducted which included income without the occupational prestige score, and the results showed income as a significant predictor of alcohol overuse among women.

The analyses did not find education as a significant predictor of alcohol overuse among women. Again, past studies do not seem to agree on the issue of education. A study by Wilsnack et al. (1986) indicates that low education tend to overuse alcohol, while a study by Celentano and McQueen (1984) suggests that women with lower education tend to drink less. In addition, there is a significant correlation among the variables in this model (income, social status, age, self-esteem, education), and that factor may have affected the results of this study. In future studies, the close relationship between variables such as social status, self-esteem, income, and education with alcohol overuse among women should be considered.

Race was not a significant predictor of alcohol overuse among women. The fact that 111 Blacks compared to 732 Whites were included in the sample may have offset the results. On the other hand, this study's findings may in fact correspond with previous explanations, which state that the high status women with high income are more likely to overuse alcohol. Assuming (the stereotype) that Blacks tend to have low income and social status compared to Whites, this study's findings may point us in the right direction.

While the effects of interrelated variables, such as status and income, are important issues in their own right, the challenge of defining and measuring overuse should not be overlooked. There is not a standardized measurement for

alcohol overuse. This study found using quantity of alcohol consumption as a measurement of overuse not applicable, for women tend to react differently to alcohol based on their tolerance level and biological factors. Furthermore, the definition of alcohol overuse may vary among respondents based on their culture, age and social status. Perception of alcohol overuse varies from one individual to another.

Another concern is the validity of the measurement of alcohol overuse. Evidence of denial of alcohol overuse was found among women who tend to overuse alcohol (Shore, 1985). Women may deny their alcohol overuse to themselves or others due to their culture. At the same time, many women may not even realize that they overuse or "drink too much," making this study's measurement of alcohol overuse complicated.

Summary

In summary, the logistic regression analyses found self-esteem, age, and marital status to be significant predictors of alcohol overuse among women, while the variables social status, depression, race, income, and education were not significant predictors of alcohol overuse among women. These findings and past studies point out the complexity of this issue and the need to consider the interaction between the variables and the contradictions of past studies. For instance, a past study has indicated that employed, high income, or educated women tend to overuse

alcohol more than unemployed, moderately educated or low income women (Celentano & McQueen, 1984). High income, educated, or employed women are more likely to have higher self-esteem, be less depressed, and have a higher social status than low income, moderately educated or unemployed women. However, a study after study have indicated that women with low self-esteem who are depressed and are in low social status category tend to overuse alcohol. These contradictions may be the result of the interactions that occur among variables which are overlooked by past studies.

In addition, there are conflicting explanations and many are based on past studies which were not substantiated by research specific to women and to the dynamics of women's social status and alcohol overuse. The prediction patterns for alcohol overuse depend upon the interplay of age, marital status, and other related variables.

Future research needs to consider other relevant factors. First, psychosocial factors, such as reason for drinking, might be used to understand the rationale for women's alcohol overuse. Second, a more detailed index of alcohol overuse, depression, and self-esteem is needed. Third, more cohort studies are needed to investigate the relationship between the time frame of the questionnaire and a woman's alcohol overuse.

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APPENDIX A

The following is the list of variables selected from the General Social Survey that were used in this study.

VARIABLE	EXPLANATION of VARIABLE
<hr/>	
Dependent Variable: DRUNK	Ever drink too much.
0. NAP	
1. Yes	
2. No	
8. DK	
9. NA	
Independent Variable: HAPPY	General happiness
1. Very happy	
2. Pretty happy	
3. Not too happy	
8. NK	
9. NA	
Indepent Variable: POPULAR	To be liked or popular
1. Most important	
2. 2nd important	

- 3. 3rd important
- 4. 4th important
- 5. Least important
- 8. DK
- 9. NA

Indepent Variable: THNKSELF

To think for oneself

- 1. Most important
- 2. 2nd important
- 3. 3rd important
- 4. 4th important
- 5. Least important
- 8. DK
- 9. NA

Indepent Variable: PRESTIGE

Occupational prestige

- 10-19
- 20-29
- 30-39
- 40-49
- 50-59
- 60-69
- 70-79
- 80-89
- not applicable
- no answer

Variable: RACE

Race of respondent

1. White
2. Black
3. Other

Variable: MARITAL

Marital Status

1. Married
2. Widowed
3. Divorced
4. Separated
5. Never married
6. NA

Variable: AGE

Age of respondent

(please print)

Variable: EDUCATION

Highest year completed

97. NAP
98. DK
99. NA

Variable: INCOME

Respondents income

1. Lt \$1000
2. \$1000 to 2999
3. \$3000
4. \$4000
5. \$5000

LINEAR

- 6. \$6000
- 7. \$7000
- 8. \$8000
- 9. \$10,000
- 10. \$15,000
- 11. \$20,000
- 12. \$25,000 or more
- 13. Refused
- 98. DK
- 99. NA

APPENDIX B

The following is the list of recoded variables employed in this study.

VARIABLE	EXPLANATION of the VARIABLE and RESPONSES
<hr/>	
Dependent Variable: DRUNK	Ever drink too much. 0= No 1= Yes 9= Missing value
Independent Variable: HAPPY	General happiness 0= Happy 1= Unhappy 9= Missing value
Independent Variable: POPULAR	To be liked popular 0= Not Important 1= Important 9= Missing value

Independent Variable: THNKSELF	To think for oneself 0= Important 1= Not important 9= Missing value
Independent Variable: PRESTIGE	Occupation prestige 0= High social status 1= Low social status 9= Missing values
Variable: RACE	Race of respondent 0= White 1= Black 9= Missing value
Variable: MARITAL	Marital Status 0= Married 1= Not married 9= Missing value
Variable: AGE	Age of respondent 0= Over 30 years old 1= Under 30 years old 9= Missing value
Variable: EDUCATION	Highest year completed

98. DK

99. NA

Variable: INCOME

Respondents income

LINEAR

1. Lt \$1000

2. \$1000 to 2999

3. \$3000

4. \$4000

5. \$5000

6. \$6000

7. \$7000

8. \$8000

9. \$10,000

10. \$15,000

11. \$20,000

12. \$25,000 or more

13. Refused