IJADR International Journal of Alcohol and Drug Research

The Official Journal of the Kettil Bruun Society for Social and Epidemiological Research on Alcohol

doi: 10.7895/ijadr.v1i2.138

IJADR, 2012, 1(2), 13 - 26

ISSN: 1925-7066

# Global Footprints of Travelling Cultural Image – The 38<sup>th</sup> Annual Symposium of KBS, Stavanger, Norway, 4-8 June 2012

Symposium Abstracts: Alphabetical by Author F - K

#### Alcohol: A universal preventive agent?

#### Hans Olav Fekjær

Correcting for many confounders, studies have demonstrated a significant correlation between light or moderate alcohol use and reduced risk for cardial infarction, stroke, accidents, cancer in the upper digestive tract, lung cancer, gastric cancer, diabetes, dementia, depression, hip fracture, rheumatoid arthritis, overweight and metabolic syndrome. Most reports are based on prospective cohort studies. For some diseases, we can point out biologic explanations, strengthening the case for a causal connection. The paper will discuss the pros and cons for a causal connection on the basis of existing research.

### Parents' rules about underage drinking: A qualitative study of why parents let teens drink

Bettina Friese, Joel W. Grube, Roland S. Moore, & Vanessa K. Jennings

Prevention Research Centre, Pacific Institute for Research and Evaluation (PIRE), Berkley, CA, United States

Parents constitute a common source of alcohol for youths. In this paper, we present results from a qualitative study with parents about underage drinking. Semi-structured interviews (N = 44) were conducted with parents of teens who had reported drinking in the past 12 months to collect in-depth information about whether and why parents permit teens to drink. The study highlights that even though parents' initial response to questions about underage drinking indicated that they do not allow it, further questioning revealed that many parents allow drinking under certain circumstances. Parents' rules concerning drinking are complex and frequently inconsistent, thus a straightforward quantitative assessment may miss exceptions and inconsistencies in parents' rules. Parents discussed three primary reasons for allowing their children to drink alcohol: deliberate, spontaneous, and attempts to reduce harm. Deliberate reasons for letting teens drink included passing on knowledge such as how to drink responsibly, how to appreciate alcohol, or how to honor cultural traditions. Second, there were instances when parents spontaneously decided to let their teen drink. These spontaneous situations included feeling pressure from their spouse or other parents to let their teen drink. A third motivator was a desire to reduce potential harm. Parents expressed concerns that saying no to underage drinking would harm their relationship with their teen and potentially lead to drunk driving. These findings suggest that prevention efforts aimed at parents should take into account the different motivations why parents may let their teen drink.

### Alcohol and older people: Results from the EU project VINTAGE-Good Health into Older Age

Lucia Galluzzo<sup>1</sup>, Silvia Ghirini<sup>1</sup>, Claudia Gandin<sup>1</sup>, Sonia Martire<sup>1</sup>, Lucilla Di Pasquale<sup>1</sup>, and Emanuele Scafato<sup>1,2</sup> <sup>1</sup>National Observatory on Alcohol, Population Health and Health Determinants Unit, National Centre for Epidemiology, Surveillance and Health Promotion (CNESPS), Istituto Superiore di Sanità (ISS), Rome, Italy <sup>2</sup>VINTAGE Working Group

The elderly are particularly susceptible to the ill effects of alcohol, because of biological changes, strengthened by interaction with medications. The dearth of data for individuals aged 65 years and older has prevented an evaluation of the real impact of drinking. With the ageing of populations, alcohol use disorders will increase in absolute numbers and a real danger exists that a "silent epidemic" may be evolving. The VINTAGE-Good Health into Older Age is a project funded by the EC under the Second Programme of Community Action in the Field of Health, coordinated by the National Institute of Health (ISS-Rome, Italy) and guided by a network of seven institutions from as many EU countries. The purpose of the VINTAGE project is to encourage evidence- and experience-based decisions to prevent the harmful use of alcohol amongst older people, by means of: systematic reviews of literature on alcohol and older people (369 titles identified, 78 relevant papers selected, results in an online report); collection of examples of best practices to prevent harmful alcohol use among older people (ad hoc questionnaire sent to 309 EU experts, review of information contained in 21 websites, results available online in two databases and a report); and active dissemination of findings to those responsible for aging population or alcohol policy and programme development

(project website, e-mail messages to a list serve of about 700 stakeholders, etc.). VINTAGE results fill a gap in the issue of alcohol and older people and are the initial spark to make stakeholders and policy makers aware that much more information and research is needed throughout all EU member states and further investments should be sustained. VINTAGE enhance the important aspect that it is possible to develop appropriate age oriented alcohol policies and interventions, thereby triggering a process of improvement of the health status of that part of the population that is increasing at an unprecedented rate.

### **Empowerment of alcohol addicts dependents: Participatory learning and action approach**

#### K. K. Ganguly and SANYAM

Various positive and meaningful efforts were made in this country to deal with alcohol and drug problems at government and non- governmental levels, providing clinical treatment, services, and measures at primary and secondary prevention level. However, the treatment approach generally treats alcoholics in isolation rather than taking the individual at familial or societal level. The process of recovery and rehabilitation is rarely taken up holistically. There are, moreover, few programmes which deal with affected families to lessen their burden and assist in their recovery, rehabilitation, and empowerment. This paper focuses on one of such programmes for family members of alcohol dependents in the city of Delhi through a participatory learning and action approach. Participatory Learning and Action (PLA) is an umbrella term for a wide range of qualitative methods of process oriented, participant evaluative research. The evaluations have been organized as action research (Cornwall & Jewkes, 1995; Hart & Bond, 1995), aiming at facilitating the participants' own analysis, planning, and ongoing evaluation of the process. The PLA approaches were developed specifically to initiate dialogue analysis with people who usually do not speak out, people at the bottom of local hierarchies (Chambers, 1994). The spouses and children of alcoholics are the silent sufferers and feel the negative effects of the presence of drugs or alcohol dependent persons in the family. These include inappropriate coping mechanisms, co-dependency, self-neglect, and denial which are manifested in day to day life. The rehabilitation process of drug affected families recorded in this paper were undertaken by a local non-governmental organisation focused upon an underprivileged population of the city to deal with social welfare and health problem including alcoholics in the Delhi slum. PLA provided them with the chance to work together in groups, and to find out the most workable solution for their problem.

### WHO's Global Strategy to Reduce the Harmful Use of Alcohol: An assessment of recent policies and interventions in Finland and Ontario, Canada

Norman Giesbrecht<sup>1</sup> and Esa Österberg<sup>2</sup>

<sup>1</sup>Social & Epidemiological Research Department, Centre for Addiction and Mental Health, Toronto, Canada <sup>2</sup>Department of Alcohol, Drugs and Addiction, National Institute for Health and Welfare (THL), Helsinki, Finland

The purpose of this paper is to assess alcohol policies and interventions in the country of Finland and the Canadian province of Ontario, using the policy options and interventions recommended in WHO's Global Strategy to Reduce the Harmful Use of Alcohol (2010). The information and data are based on archival sources, surveys, legislative and government documents, and the authors' ongoing involvement in policy analyses and roles as advisors on alcohol policy in Finland (Österberg) and Ontario (Giesbrecht). The paper assesses both jurisdictions on 10 areas in the WHO document and their sub-topics: (1) leadership; (2) health services response; (3) community action; (4) drinking and driving policies and countermeasures; (5) availability of alcohol; (6) marketing of alcoholic beverages; (7) pricing policies; (8) reducing the negative consequences of drinking and alcohol intoxication; (9) reducing the public health impact of illicit alcohol and informally produced alcohol; and (10) monitoring and surveillance. In Ontario there were noteworthy developments in line with WHO recommendations in several areas: health services response, controls of drinking and driving, pricing policies, reducing the negative consequences of drinking and intoxication, and monitoring and surveillance. In Finland pricing policies have been emphasized in recent years and there have also been noteworthy developments in controls of drinking and driving, community action, and monitoring and surveillance. Challenges and opportunities for strengthening the policy responses are discussed as well as future topics for research.

### Sexual overtures and aggression in bars and clubs: It's not about the girl!

Kathryn Graham<sup>1,2,3</sup>, Sharon Bernards<sup>1</sup>, D. Wayne Osgood<sup>4</sup>, Antonia Abbey<sup>5</sup>, Michael Parks<sup>4</sup>, and Samantha Wells<sup>1,2</sup>

<sup>1</sup>Centre for Addition and Mental Health, Toronto, Canada <sup>2</sup>Western University and University of Toronto, London and Toronto, Canada

<sup>3</sup>National Drug Research Institute, Curtain University, Perth, Australia

<sup>4</sup>Pennsylvania State University, Pennsylvania, PA, United States

<sup>5</sup>Wayne State University, Detroit, MI, United States

Aggression related to sexual overtures is one of the most common forms of aggression documented in observational research in bars (Graham et al., 2006). In our previous research (Graham, Wells, Bernards, & Dennison, 2010), we provided a qualitative analysis of sexual aggression using data from the Safer Bars evaluation (Graham et al., 2004). In the present analyses, we explore quantitatively the nature of aggression involving sexual overtures using data coded from narrative descriptions of 264 aggressive incidents related to sexual overtures. Our preliminary analyses found that 90% of unwanted sexual acts were done by men toward women; therefore, because gender roles are central to these overtures, our analyses exclude female-to-male and same sex overtures. We found that most initiators knew at some point in the overture process that their acts were unwanted but persisted anyway. The most common harms experienced by targets were being made to feel

uncomfortable, annoved or upset; although some targets appeared shocked, traumatized, fearful, or violated. Themost common response by targets of unwanted sexual overtures was evasion (e.g., stepping away from the person) but over one quarter of targets left the area entirely to get away from the initiator. Few targets behaved aggressively; however, those targets who were aggressive tended to be more intoxicated. About one-third of incidents involved third parties, who were mostly nonaggressive. Initiators tended to be motivated by fun/excitement (i.e., the thrill of the act) and gaining compliance (i.e., trying to get the target to accept the overture), while almost all targets were motivated by compliance (i.e., trying to get the initiator to stop). The findings suggest that most barroom aggression related to sexual overtures is due to young men thrill seeking in a highly sexualized, permissive and ambiguous environment rather than to misunderstandings or miscues in the process of "hooking-up." The implications for prevention are discussed.

### How acceptability of drinking and drunkenness (situational or injunctive norms) by societies and individuals affect the typical quantities that men and women consume

Thomas K. Greenfield<sup>1</sup>, Jason Bond<sup>1</sup>, Rachael Korcha<sup>1</sup>, Madhabika Nayak<sup>1</sup>, Sharon Matthews<sup>2</sup>, and Robin Room<sup>2</sup> <sup>1</sup>Alcohol Research Group, Public Health Institute, Emeryville, CA, United States <sup>2</sup>Turning Point Alcohol and Drug Centre, Melbourne,

*Turning Point Alcohol and Drug Centre, Melbourne,* Australia

Background and Aims: Injunctive norms of acceptability of drinking in various situations affect individual men and women drinkers' quantity of alcohol consumed. We hypothesize that for each gender separately, in hierarchical models predicting usual quantity per drinking occasion, the gender-specific societal-level acceptance of drinking and drunkenness will be influential, when also taking account of acceptance of drinking/drunkenness at the individual level. We expect such injunctive norms to moderate the individual-level norm-quantity relationship. Methods<sup>.</sup> Data come from the GENACIS (Gender Alcohol and Culture: an International Study) project and here include surveys from 15 distinct countries with the large US dataset divided into dry, medium and wet state regions, providing in all 17 level-2 countries/regions for analysis. Developed, middle and low income societies are included. Some countries/regions with very low levels of women's drinking were excluded for women's analyses as well as several countries with inconsistent measurements. The situational norm measure's items ask how much (no drinking. 1-2 drinks, enough to feel effects, being drunk is sometimes alright) a person should feel free to drink in various situations, e.g., "for a man/woman out at a bar with friends", or "at a party at someone else's home." In HLM models, demographic influences on heavy drinking and both individual perceptions of how acceptable is heavier drinking (relative to the country norm) and the countrylevel mean acceptability level are included. In addition to injunctive norms we also consider the gender-specific drinking (vs. abstinence) rates in the societies. Results:

For both genders, the individual-level relationship between injunctive drinking norm (acceptability of drinking/ drunkenness) is positive with respect to usual quantity, while the raw societal-level relationship between mean injunctive norm and mean quantity consumed is negative (rs = -0.46, men; -0.35 women). The multilevel analysis disaggregated by gender and controlling for age and marital status found for males a positive individual-and a negative societal-level effect of injunctive norms on quantity, and that the societal-level norm significantly (albeit slightly) affected the slope of the individual relationship between drinking norm and quantity (moderation). The analysis with women showed no significant societal-level effects. Conclusions: In societies with more restrictive injunctive drinking norms, drinkers paradoxically tend to drink more when they drink, other factors being equal. For men but not women, societal-level drinking norms have a direct negative effect on quantities consumed and also moderate the often-observed positive individual-level association between injunctive drinking norms and quantity usually consumed.

### Phenomena that influence people to remain in drug milieus

#### *Trond Grønnestad and Hildegunn Sagvaag University of Stavanger, Stavanger, Norway*

This study aims to give a deeper understanding of the forces that bind people to illicit drug milieus through a theoretical analysis. Illicit drug environments in this context are communities who use and sell "illegal drugs", psychoactive substances, including cannabis, amphetamines, ecstasy, heroin, and other newer, synthetic drugs. Alcohol and nicotine are not included in this study even if these are illegal for people below a certain age, but these substances are not in themselves illegal to possess or sell. We search to answer two questions: (1) What do other studies emphasizes as understandings to forces, except from the drug itself, that bind people to the drug milieu?; (2) Is it possible to understand these understandings from a salutogenetic health perspective, and can this add a nuance to the established knowledge? Through a short overview over what we know about the forces that bind people to illicit drug milieus, we identified five aspects as relevant: cultural economic dependence/street capital, search for respect, coping, culture/acculturation, and pleasure. The paper discusses how these five aspects can be understood as important, in belonging to illicit drug milieus through a salutogenetic health perspective.

### Using spatial optimization to examine alcohol beverage control and to estimate future distributions of alcohol outlets

Tony H. Grubesic<sup>1</sup>, Alan T. Murray<sup>2</sup>, William Alex Pridemore<sup>3</sup>, Loni Philip Tabb<sup>4</sup>, Yin Liu<sup>2</sup>, and Ran Wei<sup>2</sup> <sup>1</sup>Geographic Information Systems and Spatial Analysis Laboratory, College of Information Science and Technology, Drexel University, Philadelphia, PE, United States <sup>2</sup>GeoDa Center for Geospatial Analysis and Computation, School of Geographical Sciences and Urban Planning, Arizona State University, Tempe, AZ, United States

<sup>3</sup>Department of Criminal Justice, Indiana University, Bloomington, IN, United States

<sup>4</sup>Department of Epidemiology and Biostatistics, School of Public Health, Drexel University, Philadelphia, PE, United States

Aims: With the state of Pennsylvania currently considering a move away from an Alcohol Beverage Control state to a privatized alcohol distribution system, this study explores the utility of a spatial optimization approach for strategically managing outlets with the intent of ensuring equity and access without compromising community standards related to outlet densities. Design: A suite of geospatial data were acquired for the city of Philadelphia, including 1,964 alcohol outlet locations and 569,928 land parcels along with school, church, hospital, park, and playground locations. These data were used as inputs for basic exploratory spatial data analysis (ESDA) and a linearinteger spatial optimization model that is structured to maximize the number of potential outlets that could be located in Philadelphia. Constraints for the model included proximity restrictions of at least 200 feet between alcohol outlets and at least 300 feet between outlets and schools, churches, hospitals, parks, and playgrounds. Findings: ESDA results suggest that current state policies on alcohol outlet distributions in Philadelphia are loosely enforced, with many areas exhibiting extremely high spatial densities of outlets that violate existing proximity restrictions to sensitive facilities. The spatial optimization model suggests that an additional 1.115 outlets could be located in Philadelphia, if privatization was to occur and proximity restrictions were enforced. Conclusions: The results of this study suggest that spatial optimization modeling can function as an excellent tool for contingency-based, "whatif" analysis, providing an objective snapshot of potential policy outcomes prior to implementation.

### Trends in the socioeconomic patterning of drinking in Finland, 1968–2008

#### Janne T. Härkönen and Pia Mäkelä

The National Institute for Health and Welfare, Helsinki, Finland

Aims: To analyse changes in light drinking, heavy and very heavy episodic drinking and wine drinking among different occupational classes over the past four decades in Finland. Methods: All analyses were based on six Drinking Habits Surveys between 1968 and 2008 of representative samples of the Finnish population aged between 15 and 69 (N =16,400). The number of drinking occasions per year involving 1-2 drinks (light), 4+ or 6+ drinks (heavy episodic drinking) and 8+ or 13+ drinks (very heavy episodic drinking) was used as a dependent variable. Trends were assessed using negative binomial modeling and linear regression modeling. Results: In most of the measurements analysed a clear SES-gradient was found across the study period. Changes in the SES gradient were concentrated on the study period of 2000-2008. For men and women, higher socioeconomic status was associated with the higher frequency of light drinking and wine drinking throughout the study period. For men, heavier drinking was associated with lower SES. For women, higher SES predicted heavier drinking before survey year 2000, after which the gradient shifted so that female manual workers reached the historical high among women.

### The use of knowledge on collectivist and individualist value traits when studying adolescents of different drinking cultures

Matilda Hellman<sup>1</sup>, Sara Rolando<sup>2</sup>, and Sara Rossetti<sup>3</sup> <sup>1</sup>University of Helsinki, Helsinki, Finland <sup>2</sup>Ectectica, Torino, Italy <sup>3</sup>ASL, Milan, Italy

The aim of this paper is to discuss to what extent both theoretically and empirically acknowledged partition between collectivist and individualist cultural values can be a beneficial theoretical framework in research on different alcohol cultures. Material from focus group discussions by Italian and Finnish adolescents is compared to the typical dissimilarities featured in comparisons between individualistic and collectivistic cultures. We argue that although the differences presented in the individualistcollectivist dichotomy may not be unambiguous enough to be applied without some reservations, they can indeed be beneficial for the unfolding of how the values attached to alcohol drinking are logically bound together and reflected in drinking action in the two cultures. This concerns youngsters' perceptions of agency and autonomy. A lot of the critique and doubt concerning the usefulness of the partition as a theoretical framework in 2010 is wellmotivated and valid. Still, it might not be wise to leave out the idea as a whole from the European cross-cultural alcohol research. The dichotomous conception of individualist and collectivist cultures can be used as a fixed yardstick construct for deepening our understandings of divergences in views on alcohol drinking.

### Being young and 'dry' in the UK: A qualitative study of young people who drink little or no alcohol in a drinking culture

Rachel Herring, Mariana Bayley, and Rachel Hurcombe Drug and Alcohol Research Centre, Middlesex University, London, United Kingdom

Research has focused on young people's drinking and less consideration has been given to those who choose to drink little or no alcohol. This paper will present the findings of a qualitative study of 52 young people (ages 16-25) living in the UK who drink little or no alcohol. The research examined reasons for not drinking, perceptions and experiences, how people negotiate and manage not drinking, and the impact on their lives and social relationships. Reasons for drinking little or nothing were diverse, including not liking the taste, negative alcohol-related experiences, and sporting ambitions. Five drinking types which encapsulated their current and previous alcohol use were identified, including those who have never drank alcohol, previous heavy drinkers, and those who have always drunk lightly. From the respondents accounts of the influences and experiences over time, three different drinking narratives were identified: 'turning point'; 'transitional'; and 'consistent' which highlighted that being a non-drinker or a light drinker is not a fixed category, rather, it is negotiated over time and may be subject to change. Furthermore, although for some respondents 'not drinking' was central to their identity, for many it was simply a choice they had made. Respondents described how they managed not drinking, including dealing with social pressures to drink and negative reactions and gave 'tips' for others who would like to drink less. Respondents lived busy, varied lives and were keen to challenge other people's perception that non/light drinkers were 'boring'. This study provides insights into the choices and lives of young people who drink little or no alcohol and offers pointers for policy makers and health educators.

### Societal level factors contributing to alcohol consumption in Sri Lanka

S. T. Hettige

Department of Sociology, University of Colombo, Colombo, Sri Lanka

National level aggregate demand for alcoholic beverages has been increasing steadily over the last several decades. The introduction of a more restrictive national alcohol policy in 2005 has not changed the above trend. This paper is an attempt to explain the above trend in terms of several societal level factors that have contributed to the spread of the drinking habit across Sri Lanka. These include increasing rural-urban migration, mass international circulation of Sri Lankan labor, growing international circulation of Sri Lankan labor, increasing per capita income, tourism, spread of modern consumerism, and economic liberalization leading to increasing availability of alcoholic beverages. This paper examines the above societal level factors that have facilitated the expansion of the alcohol economy leading to a steady increase in alcohol consumption in the country. It is argued that the measures taken by the state to reduce alcohol consumption such as higher taxes and a ban on alcohol advertising have been neutralized by the societal level factors mentioned above. The paper draws data from published and unpublished sources.

### **Risky single occasion drinking: Individual risk** and alcohol-attributable fractions

#### Daniel Hill-McManus, Colin Angus, Yang Meng, Alan Brennan, and Petra Meier University of Sheffield, Sheffield, United Kingdom

**Background:** The Alcohol-Attributable Fraction (AAF) is defined as the proportion of observed cases of a disease or injury that would not have occurred had alcohol not been consumed. It is widely used as a means of estimating the burden of alcohol-related harms. It is often not possible to directly observe the AAF in a representative sample of the population and alternative methods must be used to provide an estimate. There are, however, significant limitations to the alternative methods which have typically been used to provide these estimates. **Methods:** In order to obtain a

measure of consumption which closely matches those found in the literature of risk functions relating alcohol consumption to acute harm, we have conducted a detailed analysis of alcohol consumption recorded in diary data. The blood alcohol content for individual survey respondents is simulated throughout their diary in order to define drinking occasions, and these are used to characterise a person's drinking behaviour. Statistical methods are used to convert these observations into average weekly patterns so that an annual relative risk of acute harm, resulting from an individual's average drinking behaviour, can be estimated. A formula is used to estimate AAFs which accounts for the distribution of alcohol consumption and of relative risk estimates. Results: [Awaiting further information regarding risk functions, final results may vary.] The predicted average drinking patterns show a strong dependence of age, gender, and income group. The heaviest drinkers in terms of amount drunk in a single occasion are young men of low income, while those who have the highest number of individual occasions are older men of higher income. Both the annual relative risk of injury and the AAF also vary across age, gender, and income group. AAFs range from up to 0.58 amongst young men to as low as 0.02 amongst older women for motor vehicle accidents, and from 0.09 amongst young men to 0.02 amongst older women for other injuries. **Conclusion:** This method provides the best approach available in order to estimate UK specific AAFs for acute harms via the 'indirect method'. It also provides a means of performing an equivalent analysis in order to derive the AAFs in countries other than the UK by using standard national survey data, which includes information relating to individual average alcohol intake. There is substantial inequality in the proportion of acute harm attributable to alcohol across age, gender, and income groups, not fully captured in previous studies.

### How Finns perceive the barriers to recovery from various addictions

#### Tanja Hirschovits-Gerz

School of Social Sciences and Humanities, University of Tampere, Tampere, Finland

The prevention of and intervention in various addiction problems require a view on the factors that complicate recovery from these problem behaviors. This article examines how Finns perceive obstacles to overcoming various substance and behavioral addictions. Five types of potential barriers were here considered: the properties of the substance or behaviour; the personal properties of the individual; the significance of the environment; the effect of difficult living conditions; and the prejudices and negative expectations of the others. To study these issues a random population survey was conducted with 17-74 yearold Finns in the fall of 2007. The data (N = 740) were analyzed by descriptive statistical methods. The individual and the substances or behaviors as such were considered as bigger obstacles to recovery than contextual factors such as the environment, living conditions, or attitudes and prejudices. The substances were considered as bigger obstacles to recovery than behaviors not involving psychoactive substances. The personal properties of the

individual were considered as a moderately big obstacle in all forms of addictions, while prejudices on the other hand were believed to restrict the recovery possibilities the least. The results reflect the general image of addictions in Finland as mainly based on individual psychopathology. The obstacles to recovery are located in the individual and substances and not so much in socio-cultural factors. However, the views on drinking problems somewhat deviated from this image. The reduction of dependence problems could succeed better if, in addition to the individual factors, attention were directed at the environmental factors that feed and maintain these problems.

### The impact of spatial and temporal availability of alcohol: A policy-focused critical analysis of theory and operationalisation

John Holmes, Y. Guo, P. Meier, R. Maheswaran, and A. Brennan

School of Health and Related Research, University of Sheffield, Sheffield, United Kingdom

The spatial and temporal availability of alcohol has been identified, along with price and promotional activity, as a key intervention point for reducing alcohol consumption and rates of alcohol-related harm. However, theoretical work in this area has been described as underdeveloped and, despite some exceptions, empirical studies have tended to conduct highly aggregated analyses meaning reviews of the evidence have been able to offer only generalised conclusions. This presents a challenge for policy makers as they are told that availability is important, but are not provided with a sufficient body of detailed and compelling evidence or theory describing which aspects of availability should be controlled. Nor is the literature clear on the potential benefits of controlling availability; in particular, which harms, drinkers, or city areas would see an effect from policy interventions. This paper argues for a more policy-focused approach to availability research. Using an analysis of key theoretical work and empirical analyses included in a recent systematic review of the effects of spatial and temporal availability, this paper firstly reviews theoretical perspectives used to frame availability analyses and, secondly, describes approaches to operationalising availability within empirical studies. This is followed by a critique of these approaches, highlighting a series of problems, gaps and emerging issues for which potential solutions are discussed. The paper concludes by arguing new data and improved theoretical frameworks are required to facilitate a step change in availability research which would enhance policy makers' ability to formulate and implement controls on the spatial and temporal availability of alcohol.

### Mothers who misuse substances: Health and social harms and uses of services among biological mothers in three Finnish child cohorts

Marja Holmila and Kirsimarja Raitasalo

National Institute for Health and Welfare (THL), Helsinki, Finland

This paper is a sub-publication of a wider study (VANLA) aiming to examine how a mother's and father's substance use problems are linked with her child's health and development, and what factors strengthen the children's resilience. We examine what is the prevalence of serious substance misuse problems among parents of small children, and how has this changed in 1991-2009. The study is based on population level register-data of three Finnish birth-cohorts (1991, 1997, 2002). The data collection started from the Medical Birth Register, which data was then linked to different health and welfare registers for the mother and the child separately examining the sequence of events in their lives. The data on fathers will be collected later. In the current paper, the data on mothers of small children are examined in more detail in order to describe the health related harms encountered by the addicted mothers, the role of child protection interventions, and the differences between the cohorts. Register-based indicators of harms, uses of services, and use of prescribed medication among the mothers according to the main substance used (alcohol only vs. alcohol and other drugs) are looked at and compared with the similar data of the mothers in the general population. During the study period, the portion of mothers belonging to the group with serious substance misuse has grown. Alcohol misuse is still predominant, but the use of many substances has grown. The women have a high rate of mortality. In comparison to the women in the non-substance misuse group, they are also frequent users of hospital services particularly due to psychiatric problems, intoxication, and poisonings and trauma. Their children are in custody dramatically more often than the children of the comparison group. Also, mothers with substance use problems have frequently needed long standing income support, indicating poverty, and their use of prescribed psychopharmacological medication is common.

### Prevalence of alcohol problems in the general population, using RAPS

#### Ann Hope

Department of Public Health and Primary Care, Trinity College, Dublin, Ireland

Alcohol problems in Ireland continue to have significant health and social consequences as seen in mortality and morbidity rates, crime statistics and in personal and interpersonal problems. The Rapid Alcohol Problem Screening (RAPS) tool (Cherpitel, 2002) was included in the National Drinking Surveys (2006, 2010). A similar methodology was used in the two surveys, with a total sample of 2,011 people. The RAPS4 items-remorse, amnesia, performance and starter-have similarities with CAGE and AUDIT. The items were examined individually and then combined to give a total score with RAPS1+ and RAPS3+ as indicators of alcohol problems and alcohol abuse/dependency respectively. The prevalence of alcohol problems (RAPS1+) in the general population was almost one in three, with the highest level among young men (59%) and also high rates among young women (43%). The prevalence of alcohol abuse/dependency (RAPS3+) was 7.4% (18% young men, 11% young women). All three measures of drinking-volume per occasion, regular

hazardous drinking, and total alcohol consumption—were related to alcohol problems and alcohol abuse. Lower social class was influential for reported alcohol abuse. The findings strongly indicate that harmful use of alcohol among young men and women are already showing signs of serious alcohol problems.

### Impact of policies liberalising the marketing and availability of alcohol among young people

#### Taisia Huckle and Sally Casswell

SHORE and Whariki Research Centre, School of Public Health; Massey University, Auckland, New Zealand

Aim: To assess the impact of policies liberalising the marketing and availability of alcohol among young people. Background: In New Zealand, 1990-1999, alcohol policy changes were introduced. These included the proliferation of alcohol outlets and extended trading hours; increases in the promotion of alcohol via deregulation of alcohol advertising; and the introduction of ready to drinks (alcopops) and liberalisation of the sale of wine. Methods: Results from four previously published studies were summarised. When possible the wider population was assessed as well as younger people. Results: In the context of the proliferation of alcohol outlets with longer trading hours, the introduction of brand advertising of alcohol in the broadcast media, and the introduction of ready to drinks, young people, and in particular teenagers, were observed to experience the greatest increases in typical occasion quantities, alcohol-related problems, and harms relative to other groups in the population. Specific policy contexts including the introduction of ready to drinks and alcohol outlet density were associated with increased quantities consumed among teenagers. **Conclusion:** Greater increases in trends in consumption and harms were found among young people relative to other population groups. This was likely due to the influence of policy change particularly relevant to, and therefore having greater impacts on, young people.

### Intimate partner violence in Nigeria: Preliminary results of a qualitative study

#### Akanidomo Ibanga

Data from the GENACIS study highlight the association of typical patterns of drinking with an increased risk of involvement in intimate partner violence, and that when both parties are drinking that the violence experience is usually rated as more severe (Graham et al., 2010). This data however does not answer questions of the nature of this violence and whether it varies with one gender being the perpetrator or victim. The focus of this study was to further probe these more subtle questions to paint a clearly picture of intimate partner violence and the role of alcohol as viewed by the participants. This paper examines the views of a cross section of Nigerians about intimate partner violence and the role of alcohol. Three separate focus groups were conducted each consisting of 6-10 members. The first was a group of males from the rural area, the second from an urban area, and the third was a mixed group of males and females; they were all encouraged to imagine a scene in a home that between couples that turned violent. Results obtained showed differences in the perception of the nature and severity of violence depending on which of the gender of the perpetrator. As well as differences in the violence and responses if the perpetrator and or victim was drinking at the time of the incidence. Typical responses of the neighbours and community were highlighted, potential for the use of community responses in preventing the occurrence or reduction of the effects of intimate partner violence was further discussed.

### Approaches towards health promotion and prevention of substance use: A community perspective

Erik Iversen

The Bergen Clinics Foundation, Bergen, Norway

Different studies point towards an increase in adolescents' use of both alcohol and other intoxicating substances in several western countries during the 1990's. Survey studies in 1991 and 1999 showed such an increase among 8th and 10th grade students of eleven schools in the city of Bergen. Comparable surveys were performed in the same schools in 2002, 2004, 2006, 2008, and 2010, measuring the students' alcohol consumption and use of other drugs, as well as, in the latest surveys, their perceptions of parents' attitudes and rules concerning adolescent drinking. Each survey comprised in excess of 1,500 students, with response rates of between 98 and 100% of the students present the days the surveys were performed, and over 90% of the total student population of the schools. Results show a marked increase from 1999 to 2010 in the proportions of students who had not been drinking, had not been clearly inebriated, had not been smoking cigarettes, and had not been using cannabis. The results will be discussed in light of several community developments and initiatives that have been taking place during the last 10 to 15 years.

### Alcohol and poverty: A decade of household survey in Thailand

Jintana Jankhotkaew<sup>1</sup>, Surasak Chaiyasong <sup>1,2</sup>, Vuthiphan Wongmongkol<sup>3</sup>, Supon Limwattananon<sup>3,4</sup>, and Thaksaphon Thamarangsi<sup>1</sup>

<sup>1</sup>Center for Alcohol Studies, Muang, Nonthaburi, Thailand <sup>2</sup>Faculty of Pharmacy, Mahasarakham University, Maha Sarakham, Thailand <sup>3</sup>International Health Policy Program, Nonthaburi,

Thailand <sup>4</sup>Faculty of Pharmaceutical Sciences, Khon Kaen

University, Khon Kaen, Thailand

This study examines the link between alcohol and poverty by analyzing the secondary data from Socio-Economic Surveys (SES), which is a national household representative survey conducted from 2000 to 2010. Firstly, this study captures changes in alcohol expenditure both in absolute and inflation-adjusted amount from 2000 to 2010. Secondly, the link between alcohol and poverty is examined through the relationship between alcohol expenditure and income and wealth gradient. Next, the study aims to investigate relationship between alcohol expenditure and other disbursements. Finally, the study looks at the association between alcohol expenditure and consumer debt and ability to financially cope with debt. The findings are as follows: first, alcohol expenditure both in absolute and inflation-adjusted amount had been slightly rising over the past decade, showing a similar pattern to alcohol tax revenue. Second, in proportion the lower wealth status and lower income spent on alcohol higher than higher income and higher wealth status. Next, in proportion Thai household spent on alcohol higher than other basic living expenditures, which in average two times higher than personal use, three times higher than education and recreation, four times higher than health care, and eight times higher than personal services. Lastly, consumer debt and ability to financially cope with debt and alcohol expenditure indicates weak correlation. However, when looking at the correlation for each quintile, the correlation between consumer debt and alcohol expenditure was strong among the lowest wealth status (r = 0.598). From this study, to tackle alcohol problems, lower socio-economic status should be one of the target populations. Further study should investigate whether reducing alcohol expenditure resulting better standard of living by increasing spending on necessity expenditures for life.

### Young risk-takers: Alcohol, illicit drugs and sexual practices among young music festival attendees

#### Rebecca Jenkinson

Background: High-risk alcohol and other drug use and sexual risk behaviours are increasing among young Australians and this population experience a disproportionally high and increasing prevalence of preventable health outcomes such as sexually transmitted infections (STI). Methods: A cross-sectional study of young people's health behaviours conducted at a music festival in Melbourne, Australia, in 2011. Results: 1,365 young people aged 16-30 completed the survey. Close to twothirds were male (62%), with a mean age of 20 years (SD 3.6 years). Consumption of alcohol and illicit drugs was common: almost all (94%) reported drinking alcohol during the 12 months prior to survey, with pre-mixed spirits (55%), bottled spirits/liqueurs (55%) and regular strength beer (44%) the beverage types most commonly consumed. Among drinkers (N = 1,287), one-third (32%) reporting 'binge' drinking (6+ drinks) on a weekly or more frequent basis during the previous 12 months, and one in five (21%) reporting drinking 20+ drinks on at least one occasion during that time. Lifetime consumption of illicit drugs was reported by half (51%), with one in four (25%) reported consuming illicit drugs during the previous month. The majority were also sexually active (84%), and although only 34% had ever been tested for STIs, one-quarter (27%) were identified as being 'at risk' through unprotected sex with new or casual partners. Multivariable analyses found engagement in STI risk behaviour was significantly and independently associated with regular binge drinking (OR 2.07, 95% CI 1.56-2.74, p < 0.001) and recent illicit drug use (OR 1.82, 95% CI 1.37-2.41, p < 0.001). Conclusion: Heavy patterns of alcohol and other drug use were the strongest correlates of young peoples' engagement in risky sexual behaviour. Harm reduction campaigns should consider targeting this population with specific health promotion messages in regard to safer alcohol/drug use and sex practices, and encourage appropriate STI testing

### A transnational travel: The Norwegian contextualization of the Portuguese drug strategy model

### Helene Jensvoll

University of Stavanger, Stavanger, Norway

In June 2010, the Stoltenberg committee's report on drugs was handed over to the Norwegian government. It argued for comprehensive changes in how to meet drug addiction problems, and proposed actions directly based on the Portuguese drug strategy model. This paper examines the further political handling of two proposals for decriminalisation in The Stoltenberg report, focusing on the process of adaptation and implementation of the model into the Norwegian context. The analysis uses translation theory and the concepts of decontextualization and contextualization to understand and explore how this can be understood as a translational process between different welfare state traditions. In the field of European illicit drug policy making, it is of big interest to explore the impact and role of travelling ideas and knowledge on drug policy trends and practices, to better understand innovation and restructuring of governance in the area of drug addiction. What is "happening" with the idea in a translation process, and who, and where are the prominent actors? The analysis should contribute to our knowledge about the travel of ideas and treatment concepts at transnational level.

### "I expected a rowdy and met a sparrow": Young substance abusers, housing policy and life chances

#### Anne Juberg

Faculty of Medicine, Norwegian University of Science and Technology, Trondheim, Norway

Abuse of alcohol and other substances of the kind that may affect school or work life attendance, family relations and housing situations tend to nourish anxiety, disrespect and incorrect conceptions not only in the person's original social environment but as well in neighborhoods and in systems for human assistance. In spite of general agreement that having something one may call a home is a basic need for anyone, public campaigns against housing projects for substance abusers in normative residential areas (e.g., the "not in my backyard" movement) are a wellknown international phenomenon. As such, housing practices may serve as a barometer of the general normative climate around alcohol and other substances in a given society. Also teens and young adults who from the outset have been fairly well integrated in normative society seem to run the risk of reduced housing quality and social exclusion if their abuse patterns more or less temporarily are of a far-reaching kind. This may severely affect their general life chances as well as their chance of recovering from the abuse. On the basis of a qualitative small scale action research study within the municipality of Trondheim, Norway, this paper discusses how public and

professional discourse in Norwegian housing policy may both facilitate and hinder rehabilitation from abuse patterns and social inclusion. The participants of the study were mainly professionals on different administrative levels. Yet, some young substance abusers (aged 16-23), who tended to have better and safer housing as their major project, and representatives for the youths' next of kin and the civil society were also involved. The major conclusion drawn on the basis of this study is that innovative practices are needed, not only in order to alter certain aspects of housing policies in the area, but also in order to develop more nuanced perspectives on young peoples' patterns of abuse: two aspects that are mutually related.

### The impact of substance abuse on the health status of patients attending HIV clinics in Cape Town, South Africa

*Rehana Kader*<sup>1</sup>, *S. Seedat*<sup>2</sup>, *R. Govender*<sup>3</sup>, *J. R. Koch*<sup>4</sup>, and *C. D. Parry*<sup>1</sup>

<sup>1</sup>Alcohol & Drug Abuse Research Unit, Medical Research Council, Cape Town, South Africa

<sup>2</sup>Department of Psychiatry, Stellenbosch University, Cape Town, South Africa

<sup>3</sup>Centre for Social Science Research and Department of Sociology, University of Cape Town, Cape Town, South Africa

<sup>4</sup>Institute for Drug and Alcohol Studies, Virginia Commonwealth University, Richmond, VA, United States

This study aimed to determine the extent and severity of substance abuse and possible dependence as measured by scores on the AUDIT and DUDIT among patients attending HIV clinics. The study also investigated the relationship between substance abuse, HIV disease progression, TB status, and antiretroviral (ARV) treatment. Using a crosssectional design, we collected data from 1503 patients attending eight HIV clinics, representative of all HIV clinics in the Cape Metropole. The study found that 37% (n = 550) of participants scored at or above the clinically significant cut-off score on the AUDIT, indicating the likelihood of harmful and hazardous drinking and 13% (n =192) scored above the respective cut-off points on the DUDIT. There was a statistically significant relationship between substance abuse and TB-positive status (p =0.038). With linear regression analysis the results indicate that the overall model is statistically significant (F =18.227, p = 0.000) with gender, marital status, and level of education being statistically significant predictors of alcohol consumption. Participants abusing substances had a lower CD4 count (p = 0.000) and were significantly less likely to be on ARVs when compared to their nonsubstance abusing counterparts (p = 0.002). With linear regression analysis the overall model is statistically significant (F = 5.772, p = 0.000) with gender, age, opportunistic infections, and duration of HIV being predictors of CD4 count regardless of level of education and alcohol consumption.

### Guidelines for sensible drinking in the Nordic countries

Nina Karlsson<sup>1</sup>, Anja Koski-Jännes<sup>2</sup>, and Pia Rosenqvist<sup>3</sup>

<sup>1</sup>Nordic Centre for Welfare and Social Issues, Helsinki, Finland

<sup>2</sup>School of Social Sciences and Humanities, University of Tampere, Tampere, Finland
<sup>3</sup>Nordic Centre for Welfare and Social Issues, Helsinki,

Finland

Low-risk drinking has become an alternative to abstinence as a public health approach to reducing alcohol problems. Low-risk drinking guidelines have been promoted as a starting point that enables early intervention and prevention of severe alcohol abuse by inviting heavy drinkers to pay attention to their drinking habits. Low-risk drinking guidelines have also been promoted on account of their potential to reach a broader spectrum of people consuming alcohol at a risky level. On the other hand, low-risk drinking guidelines have also been criticized for the possibility that they might be treated as an 'all clear' sign for drinking up to a certain amount, whilst failing to take into consideration the individual variation in low-risk limits. However, such criticism has been met with the overall benefits of a low-risk approach for the majority of the population who are likely to benefit from the approach. The Nordic restrictive alcohol policy has been based on three fundamental elements: the State monopoly, the control of availability, and the taxation of alcoholic beverages. The membership in the European Union and (in the case of Norway) the European Economic Area have, however, reduced the possibilities to employ these measures. Yet restrictive policy in a milder form continues to prevail in most Nordic countries. Denmark, however, has had a recent past of more liberal attitudes to alcohol but is now taking steps towards a more restrictive approach. Parallel to these changes and partly as a cumulative effect of them, the style of governing in the Nordic countries has been moving away from a strong centralized state government to a localized style of governing in which the state takes the role of an informant, supporter, and guide, rather than a controlling unit. This paper presents a workin-progress study of the changes in policy and administration in the Nordic countries today (in this study Sweden, Finland, Norway and Denmark). We have studied the use of and attitudes to national guidelines for sensible drinking with which individual consumers could estimate the health risks of their weekly or daily drinking. Through expert interviews in the Nordic countries we have tried to illuminate the extent of implementing various self-control measures on the general population. The interviews reveal a division between attitudes and practice. Only Danish national health officials have included self-estimation in their alcohol harm prevention efforts. Public health oriented alcohol policy built on structural preventive efforts is not the norm in Denmark, nor is it likely to be accepted by the general public. In Finland, Sweden and Norway, all employing a restrictive alcohol policy, the state has refrained from publishing official guidelines altogether. Alcohol harms are mainly controlled through structural preventive and restrictive methods such as restrictions in availability, monopolies, and taxation. Low risk guidelines directed to the general public are viewed as a secondary method that is currently unnecessary and also dubiously efficient. The government and the municipalities have however developed self estimation tools for estimating

harmful use of alcohol; AUDIT for instance is widely used in Norway, Finland, and Sweden. In addition the treatment system employs guidelines for estimating high alcohol consumption and the need of intervention.

#### Nordic alcohol policy in a European context

### Thomas Karlsson

Department of Alcohol, Drugs and Addiction, National Institute for Welfare and Health (THL), Helsinki, Finland

Alcohol consumption levels in Europe are currently undergoing a harmonization process, with descending consumption in parts of Central and Southern Europe, stable consumption in most of Central Europe, and growing figures in most of the Northern European countries (Tigerstedt et al., 2006). The same trend can also be identified regards to alcohol policies, as alcohol policy measures in the Southern and Central European countries have become stricter, whereas the Nordic countries have been forced to liberalise their alcohol policy systems during the past couple of decades. On one hand measures targeted at alcohol availability and taxes have decreased, whereas measures targeted at alcohol-related problems and demand of alcohol have become more prevalent. As a result of this, both alcohol consumption and alcohol policies have become more similar in the European countries during the second half of the twentieth century, although considerable differences still exists from country to another (Karlsson & Österberg, 2001, 2007). The aim of this paper is to compare the alcohol policies in Finland, Norway and Sweden with each other as well as with the alcohol policies in rest of Europe. As a part of the analysis the term "Nordic alcohol policy" will be scrutinised. In addition to the more qualitative comparison, a quantitative scale is used in order to measure the strictness and comprehensiveness of the three countries alcohol policies in 1994 and 2010. In addition, the scale will also be used to compare the three Nordic countries alcohol policies with the rest of Europe in 2010. The results of this scale exercise will, if not else, be used to reveal if the stereotypical view on strict Nordic alcohol policies is still true.

#### Rules of binge drinking among Finnish and Italian adolescents: A comparative qualitative study

Anu Katainen

Department of Social Research, University of Helsinki, Helsinki, Finland

Comparative alcohol studies seem to indicate a convergent trend in European drinking cultures especially among young people. However, debates on the topic have usually failed to acknowledge young peoples' own perspective, as well as the meaning of drinking for young people in different countries. This study compares adolescents' views on drinking in Finland and Italy, which have conventionally been considered to represent sharply contrasting alcohol cultures. In this paper, the focus is on the rules, i.e., evaluations of appropriate drinking behaviour that Finnish and Italian adolescents associate with alcohol use. Altogether 28 focus group interviews were conducted at schools among 15 year old pupils (N = 145) in Helsinki,

Finland and Turin, Italy. Participants were shown six film clips presenting young people in different kind of drinking situations and they were asked to discuss freely about the clips with the help of support questions. The analysis showed that both Italian and Finnish adolescents considered binge drinking risky and involving social pressure but they associated it also with sociability and having fun. However, Italian adolescents distanced themselves from binge drinking and considered it something that "other" young people do. Finnish adolescents, on the other hand, had a double standard in terms of drinking rules. They emphasized risks and negative aspects of drinking but at the same time personal binge drinking experiences were brought out to highlight one's competence and social identity. Although young people's drinking behaviour in Europe have become more similar in terms of beverage preferences and levels of consumption, it seems that there may still are significant differences in the meanings and functions of drinking.

### Longitudinal prediction of divorce in Russia: The role of couple drinking patterns

Katherine Keenan<sup>1</sup>, Emily Grundy<sup>2</sup>, Michael G. Kenward<sup>1</sup>, and David A. Leon<sup>1</sup> <sup>1</sup>Department of Epidemiology and Population Health, London School of Hygiene & Tropical Medicine, London, United Kingdom <sup>2</sup>Department of Geography, Cambridge University, Cambridge, United Kingdom

Introduction: In Russia male drinking patterns have serious negative health effects; however the impact of alcohol on divorce is relatively unexplored. Longitudinal data, rather than cross-sectional, is preferable to establish the direction of any causal link. Methods: The association between married couple drinking patterns and subsequent divorce was investigated in a nationally representative, population-based panel study in Russia. Follow-up data on 4,266 married couples was extracted from 14 consecutive annual rounds (1994-2009) of the Russian Longitudinal Monitoring Survey. At the interview couples provided information about family relationships, drinking habits and socio-demographic variables. Discrete time hazard models were fitted using pooled logistic regression to estimate the probability of divorce among married couples by drinking patterns reported in the previous survey round. Results: Increased odds of divorce were associated with greater frequency of husband drinking (test for trend p < 0.002), greater frequency of wife drinking (test for trend p < p0.006), and wife's binge drinking OR 1.45 (95% CI 1.06-1.92) and all remained significant after adjustment for age, socio-economic factors, and spouse drinking. There was a significant positive relationship between husband's usual daily intake of vodka and divorce, after adjustment for frequency. Conclusions: This study adds to the very sparse literature investigating the association of drinking with divorce using longitudinal data. The results suggest that in Russia heavy drinking of both husbands and wives put couples at greater risk of future divorce. The thresholds where frequency and volume adversely affect marital stability vary between husband and wife.

### Drug misuse among transvestites in Fortaleza, Brazil

Florence Kerr-Corrêa<sup>1</sup>, Marcelle Y. Yaegaschi<sup>1</sup>, Daniel L. C. Costa<sup>2</sup>, Telma A. Martins<sup>3</sup>, Raimunda H. M. Macena<sup>3</sup>, Carl Kendall<sup>4</sup>, Rosa Maria Salani Mota<sup>5</sup>, Kalina L.L. Carneiro<sup>5</sup>, and Ligia Regina Franco Sansigolo Kerr<sup>5</sup>

<sup>1</sup>Department of Neurology, Psychology & Psychiatry, Universidade Estadual Paulista (UNESP), Botucatu School of Medicine, Botucatu, Brazil

<sup>2</sup>Department and Institute of Psychiatry, Universidade de São Paulo (USP), School of Medicine, São Paulo, Brazil

<sup>3</sup> Ceara State Health Department, Fortaleza, Brazil

<sup>4</sup>Department of Global Community Health and Behavioral Sciences, Tulane University, School of Public Health and Tropical Medicine, New Orleans, LA, United States

<sup>5</sup> Department of Community Health, Federal University of Ceará (UFC), School of Medicine, Fortelza, Portugal

Background: Information about the use of alcohol and other psychoactive substances by transgendered populations is scarce in the literature. We aimed to estimate the prevalence of the use of illicit drugs and medications without a prescription in the last six months among a transgendered population called "travestis" in Brazil and to identify associated risk factors and outcomes. Methods: This is a cross-sectional study conducted in 2008 with 304 transvestites analyzing the use of illicit drugs and associations with socio-demographic variables, risk behavior and knowledge of HIV and STD transmission. Results: In this sample, 38.6% reported the use of at least one illicit drug or psychotropic medication (the only drug mentioned was amphetamine) without prescription in the last six months, with marijuana and cocaine the most frequently used. The following were associated with the outcome: higher income, early sexual initiation, multiple concurrent partners, never having been tested for HIV, and hazardous drinking. Conclusions: Drug use among the transgendered is associated with problematic alcohol use and high-risk sexual behavior. Transgendered populations are marginalized and discriminated against in Brazilian society, reflected in drug use and other high risk behaviors. Public policies are needed to assure that this marginalization is not mirrored in the health system.

### Relationships between alcohol marketing communication and alcohol expectancies with alcohol use of Thai students

Jantima Kheokao<sup>1</sup>, Tassanee Krirkgulthorn<sup>2</sup>, and Siritorn Yingrengreung<sup>2</sup>

<sup>1</sup>University of the Thai Chamber of Commerce, Bangkok, Thailand

<sup>2</sup>Boromrajjonnani Nursing College Saraburi, Saraburi, Thailand

**Background:** Problem about adolescent drinking has accelerated even though the alcohol advertisements are restricted by Thai law. **Aims:** To explore and describe the relationship between alcohol marketing communication and alcohol expectancies with alcohol use of Thai students. **Methods:** The cross-sectional survey was conducted on 5,184 students from grades 4–12 and vocational schools in

seven regions of Thailand. The questionnaires comprised (1) perception of alcohol marketing communication, (2) alcohol expectancies, and (3) alcohol use (AUDIT). Data were analyzed using Pearson's correlation coefficient. **Results:** Majority of students were categorized as low risk drinking (87%), and the overall mean AUDIT score was 2.5 (SD = 5.8). Male, low achievement and low socioeconomic were found to engage in risky (8.2%), harmful (1.9%), and high risk (3%) alcohol use. Correlational analysis revealed significant relationships between age, media exposure, information reception, desirability, identification, alcohol expectancies, and alcohol use. Conclusion: The results required further evaluation for influence of alcohol marketing communication on students' alcohol expectancy and alcohol use for proper policy recommendation and management.

### Factors influencing drinking behavior and consequences in Thai undergraduate students

#### Wichuda Kijtorntham

The recent reports show the increase in drinking behavior and consequences in Thai undergraduate students. This research aimed to investigate and compare the drinking behavior and the consequences between Thai undergraduate students with different backgrounds. The 6,000 samples of Thai undergraduate students were selected by stratified random sampling. The reliability of self-administered questionnaire was 0.92. The research results were as follows: The average age of first drinking was 15.95; the first social drinking was 17.56; and habitual drinking was 18.06. In the last one year, 45.57% of undergraduate students reported they had consumed alcohol. The internal factor that mostly affected their first drinking was to try drinking alcohol (41.20%) while the external factor was peers' persuasion (35.46%). The comparative study of drinking behavior and consequences showed that background factors which had 0.05 statistically significant effect on drinking behavior and consequences were age, sex, race, study achievement, area of study, and university. The eight background factors had 0.05 statistically significant interaction effects on drinking behavior and consequences (r = 0.87).

### Alcohol culture among young adults in Estonia: Attitudes and practices

#### Maarja Kobin

Recent studies on alcohol consumption among the traditionally "wet" and "dry" countries have shown the trend of these drinking cultures developing into more diversified cultures (e.g., in Finland). Estonia has been described as a country with "hard-drinking traditions"; based on the current alcohol consumption per capita and the continuum of "wet" vs. "dry" Estonia could be described as a country with a "wet" drinking culture. Alcohol consumption has grown constantly in Estonia during the last 15 years among men and especially among women; the rise has been in the consumption of both soft and heavy alcoholic beverages and in the quantity of how much is being drunk. In order to grasp the essence of

alcohol consumption as a whole, one needs to understand what are the motives, beliefs, values, and norms that constitute the alcohol culture which is used in everyday drinking situations and which legitimize drinking habits. Everyday drinking is seen as taken-for-granted-that is drinking which is considered as socially normal and acceptable. What is considered as normal or abnormal is dependent on cultural traditions and different cultural contexts where drinking is practiced. The paper explores the distinctive characteristics of present-day socially accepted alcohol consumption practices and attitudes in Estonia among young adults. More specifically, the purpose is to analyse the ritualistic function of drinking and in this context point out what kind of drinking practices are considered as socially acceptable, and whether there are any gender differences in the latter ones. What is the relationship with being drunk and what is the meaning of drunkenness? The choices about how to drink reflect young people's lifestyles and also their identity construction. Results show that drinking culture among young Estonians is showing signs of a mixed culturewhich combines Nordic drinking practices, which have been considered characteristic to Estonia, with those which are traditionally connected to southern European drinking culture. The research lies on open-ended and focus group interviews with young adults living in urban and rural areas in Estonia. The interpretation of the drinking habits has been supported by participant observation which, in practical terms, involved visits to different events and situations where alcohol is consumed.

### The association between socioeconomic status, drinking patterns, and alcohol-related verbal aggression

Ludwig Kraus<sup>1,2</sup> and Kalle Tryggvesson<sup>1,3</sup> <sup>1</sup>Centre for Social Research on Alcohol and Drugs, SoRAD, Stockholm University, Stockholm, Sweden <sup>2</sup>IFT Institute for Therapy Research, Munich, Germany <sup>3</sup>Department of Criminology, Stockholm University, Stockholm, Sweden

Aims: The objectives of the present analyses are (1) to investigate the association between socioeconomic status (SES), dimensions of drinking (alcohol volume and episodic heavy drinking) and alcohol-related verbal aggression by taking age and gender into account and (2) to estimate the proportion of alcohol-related verbal aggression related to specific drinking patterns across SES groups that could be prevented if transferred to a low-risk drinking group. Methods: Data came from the Swedish Monitoring Study. Each month a representative sample of 1,500 individuals aged 16-80 years was random selected and interviewed using computer assisted telephone interviews. The present analysis used data from the years 2003 to 2011. The response rates varied between 51 and 38%. The analytical sample consisted of 102,343 current drinkers. Alcohol-related verbal aggression was defined as having been involved in a quarrel while drinking. SES was defined as the highest level of education. For the association between predictor variables and verbal aggression logistic regressions were conducted separately for males

and females. Population attributable fractions (PAF) were calculated by using nine categories of average daily intake and a dichotomous measure of episodic heavy drinking Individuals were grouped into 14 drinking (EHD). categories by three SES groups resulting in 42 exclusive Results: Episodic heavy drinking was not groups. significantly related to verbal aggression when controlling for alcohol volume. However, there was a significant interaction between alcohol volume and episodic heavy drinking (males only). For both males and females the odds for verbal aggression were lower in the high SES group compared to the low SES group even though the overall main effect was only significant for males. The results indicate that the highest share of verbal aggression in both males and females is accounted for by the middle educated group. Discussion: Women's risk of experiencing verbal aggression increased with volume of alcohol intake and seems unlike men's risk not moderated by episodic heavy drinking. Moreover, high SES seems to be protective in experiencing verbal aggression. The largest contributions of verbal aggression come from middle educated men and women. Consequently, an overall reduction of episodic heavy drinking in the population may help reducing alcohol-related verbal aggression.

### Learning from the chaos: Heterogeneous age limits of bans on tobacco sales to youths in Switzerland

### Hervé Kuendig & Mariana Astudillo Addiction Info Switzerland, Lausanne, Switzerland

Background: Underage sales bans aiming to reduce youth's access to alcohol and tobacco have been implemented at national level in most western countries, yet not -or not homogenously-in Switzerland. Consequently, federal states have developed regional laws to overcome implementation delays of national tobacco control measures. So far the effects of different legal age limits on commercial access of underage youths to tobacco have not been investigated. This is addressed using data collected within a naturalistic field study assessing retailers' compliance with bans forbidding the sales of tobacco to youths under the age of 18, respectively of 16, in two Swiss cantons (i.e., Vaud/VD, since 2006; and Fribourg/FR, since 2009). Method: Applying stratified random sampling procedures, a total of 1,823 testpurchases with underage "mystery clients"-aged 14/15 (FR) or 14-17 years old (VD)-were conducted in 2007 (VD only), 2009, and 2011. Results: Data gathered in 2009 revealed in both cantons violation rates over 80% and that, in Vaud canton, compliance has not improved significantly since 2007. Between 2009 and 2011 overall improvements in compliance were recorded in both cantons. Age specific analyses revealed differences in direct retail accessibility of youths under the age of 16, both given the time since ban implementation and age specific limits. Conclusions: Analyses highlighted that implementing more restrictive age limits resulted in lower overall compliance and slower decrease in violation rates. but possibly affects the younger's direct accessibility to tobacco in a more direct way at longer term. Also, despite

rather poor overall results (concurring with findings of a parallel study on alcohol access in Vaud canton) longitudinal analyses highlighted potentials for real improvements. These findings should be considered in future debate on possibly more "pragmatic" measures at regional or national levels in Switzerland, both for tobacco and alcohol.

### Cross-country and within-country assessment of educational status and its link with alcohol use

Sandra Kuntsche<sup>1</sup>, Matthias Wicki<sup>1</sup>, Mariana Astudillo<sup>1</sup>, Ulrike Grittner<sup>2</sup>, Kim Bloomfield<sup>3</sup>, and Gerhard Gmel<sup>1,4</sup> <sup>1</sup>Addiction Switzerland, Research Institute, Lausanne, Switzerland

<sup>2</sup>Charité, University Medicine Berlin Campus CSB, Center for Stroke Research Berlin/Department for Biostatistics and Clinical Epidemiology, Berlin, Germany

<sup>3</sup>Aarhus University Business and Social Sciences, Centre for Alcohol and Drug Research, Aarhus, Denmark

<sup>4</sup>Alcohol Treatment Centre, Lausanne University Hospital, Lausanne, Switzerland

Background: Inequalities in health among groups of various socioeconomic statuses (SES) constitute one of the main challenges for public health in general. Education, rather than income or occupation, is a central indicator in describing SES as it varies less across time in relation to individuals than e.g., occupation. In developed countries the association between alcohol use and SES seems to follow "universal" pattern: (1) higher SES groups tend to be more often drinkers and drink more frequently smaller amounts; (2) among lower SES groups, abstention rates are higher, but those who drink tend to drink more heavily. Studies in developing countries suggest different patterns. In addition, gender differences could be observed: (1) well educated women in developed countries have higher risks for heavy volume drinking or alcohol problems than their less educated counterparts; (2) among men heavy drinking episodes were more common among those with a lower SES. Data and Analysis: The present study analyses the relevance of educational level on heavy volume drinking across countries using a gender specific approach. Based on respondents aged 24 to 59 of 33 countries participating in the GENACIS project the following research question will be addressed: Does the country's educational level has an impact on the individual's alcohol use or does the individual's educational position within the country is of higher relevance? Results and conclusion: Men and women differ cross-culturally in the link between educational level and heavy volume drinking: (1) higher educated men were less often heavy volume drinkers, (2) higher educated women were more often heavy volume drinkers. This relation was affected by the countries' educational mean among men only: countries with a higher educational mean in men reported lower risks in heavy volume drinking also among low educated men.

## What makes the client satisfied? Outpatient satisfaction with substance abuse treatment at follow-up

Katja Kuusisto

### Institute for Advanced Social Research, University of Tampere, Tampere, Finland

Aims: The structural change which has taken place in the 2000's in the municipal organization in Finland has raised profitability as a principal objective in decision-making and the evaluation of the effectiveness. However, economy must be seen as only one dimension to measure the quality of the services. Paying attention to the client's point of view makes the examination of effectiveness ethically sustainable. This study produces information from the client's point of view about the factors relevant to the outcome measured at follow-up in terms of satisfaction with the treatment received. Data and Methods: The research was implemented as a multisite study including outpatient clinics (N = 7) in southern and western Finland. Data for treatment was from January to June 2008. Followup lasted six months. The research was conducted as part of the clinic's normal activity. The clients attended combinations of variables organized by their content, e.g., client demographics, past substance use, therapist's characteristics, and client's expectations. In some parts, the analyses are based on conventional statistical testing (t - t)test,  $\chi^2$  test, ANOVA). **Results:** Among 36 independent variables only a few were statistically significant in the Results indicate that high treatment final model. expectations are a strong predictor of satisfaction at followup. Also, past substance use predicted treatment satisfaction; poly-substance users were less satisfied than those using only one substance. **Discussion:** It seems that treatment expectations are fulfilled to those participating at follow-up. Still, there are many of those who are lost during treatment and at follow-up. Those most in need of attention are more often lost during the treatment. The results of the project have practical applicability in the treatment of addictive behaviors and training of therapists.

### Public, official, and industry submissions on a bill to increase the minimum alcohol purchase age

#### Kypros Kypri

Injury Prevention Research Unit, Department of Preventive and Social Medicine, University of Otago, North Dunedin, New Zealand

Objectives: In 2005 a bill was introduced to the New Zealand parliament to increase the minimum alcohol purchase age from 18 to 20 years, and submissions were invited from interested parties. We sought to characterise and critique the arguments tendered for and against the proposal. Methods: Independent raters examined all 178 submissions, and coded them according to the source, whether for or opposed, and the arguments employed. Results: The most common sources of submissions were members of the public (28%), the liquor industry (20%), and non-government organisations (NGOs; 20%). Overall, 40% opposed increasing the purchase age, 40% were in favour, 4% favoured a split purchase age (age 18 for onpremise, age 20 for off-premise), 7% were equivocal, and 8% offered no comment. The most common sources of arguments in favour were NGOs (36%) and members of the public (30%) and arguments concerned the expected positive effects on public health and safety (36%), and

public disorder/property damage (16%), while 24% argued that other strategies should be used as well. The most common sources of arguments opposed were the liquor industry (50%) and the public (20%). It was commonly claimed that the proposed law change would be ineffective in reducing harm (22%), that other strategies should be used instead (16%), that it infringed adult rights (15%), and that licensed premises are safe environments for young people (14%). There were noteworthy examples of NGOs and government agencies opposing the law change. Discussion: The liquor industry maximised its impact via multiple submissions appealing to individual rights while failing to report or accurately characterise the scientific evidence. Several health and welfare agencies presented confused logic and/or were selective in their use of scientific evidence in opposing the law change.