Characteristics of female drinking by age

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Summary – Alcohol dependence in women is a problem in the contemporary society. The change of the traditional woman's role is accompanied by an increasing rate of women who abuse alcohol. It is therefore necessary to create treatment and preventive interventions adjusted to this population. Alcoholism in women differs greatly according to age groups. Adolescents, young females, middle-aged women and older women have different etiological factors underlying their drinking problem. The characteristics and the drinking habits also differ greatly in young and older women. For the period of adolescence, the most important risk factors are behavioral problems, problems at school and family history and environment. For women in young adulthood, the most important risk factors are problems associated with the role and health problems. For the women of older age, the most important are widowhood and retirement issues. This article shows that the likelihood of developing alcoholism increases as the risk factors become more numerous. The above risk factors suggest the connection with the development of alcohol dependence but do not prove causality.

Keywords: alcoholism in women, etiology, risk factors

INTRODUCTION

The etiology of alcoholism is much discussed and debated today and it is not possible to speak of a single cause of alcoholism. Many studies have shown that alco-

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hoilsm is not hereditary, although there are families in which it is more frequent. The causes of alcoholism are found primarily in the person itself, and then in its immediate and wider social environment. Increased intake of alcoholic beverages, as well as alcoholism among women is certainly a consequence of the position that women have in society, as well as of a number of other cultural specificities of the communities in which women live. Etiologic factors for alcoholism can be divided into three groups: biological factors (hereditary, metabolic, neuropsychological, neurobiological and other organic factors), psychological factors (effects of alcohol, for example, in its ability to relieve tension) and socio-cultural factors (characteristics of the health and general culture of the community in which one lives). Although all three groups of factors are important for the development of alcoholism, the third group is considered to be the most important.¹

Many factors in a woman's life, such as those associated with her education or career, occur in different periods of her life and some of them may represent the risk factors for the development of problem drinking, that occurs only in a certain period of life. It is obvious that all women are not equally vulnerable to the development of problem drinking. Certain behaviors and genetic predisposition may increase the risk of developing harmful drinking patterns. Risk factors are certain markers that indicate increased vulnerability and are usually preceded by drinking, but sometimes they are just linked to problem drinking and cannot be called risk factors. Some risk factors are present throughout the life cycle of women, while some are specific only to certain stages of life, such as adolescence, young middle age, middle age and old age. The role of women in society can be a risk factor. Social roles for women and men are primarily defined by age, sex, socio-economic status and ethnicity.² It is important to classify risk factors by stages of life because it is necessary to focus the prevention differently for the periods of adolescence, middle and old age. Hill states that one of the evident risk factors for a higher likelihood of developing alcoholism in women and in men is certainly a family history of alcoholism. Gomberg study of alcoholic women in 1986. showed a significantly higher proportion of fathers of alcoholics in a population of women who are alcoholics.²

The social context in which women drink is also of great importance. During adolescence, girls are more influenced by peers who drink then young men, and exposure group significantly contributes to alcohol abuse in adolescents. Drinking patterns of young, mature and older women are under the influence of the environment.² Copying drinking patterns of significant people from the environment is specific for women, so the results of the research show that more women than men, who are dependent on alcohol have husbands or significant people in their environment who are

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also alcoholics. Depression, together with the woman's reactions to stressful life events and her ability to cope with them may be risk factors for drinking among women. Previous depression is a clear risk factor for the development of problem drinking. Helzer et al. state that depression preceded alcoholism in 66% of women who were interviewed in their epidemiological study. Stress, anxiety and coping techniques are central to the development of problem-drinking in women. Conte et al report that stressful events such as trauma may precede problematic drinking in women, because one of the many techniques of coping with stressful events can be drinking, as well as seeking help.² Certain techniques for coping with stress, such as avoidance, denial and blaming others are more common in women who drink. However, it is important to point out that a significant number of women who originate from dysfunctional families with drinking problems do not become alcoholics. Gomberg states that the difference between drinkers and women their age who had not developed alcoholism lies in the difference between the effect of stress or traumatic life events and the response to this events.² Alcoholics and non-alcoholics may have the same or similar painful life experiences, however, meaning of these experiences and how they react to them is different, meaning that female alcoholics have more negative responses to their traumas. The prevalence of incest and other forms of sexual abuse is significantly represented in women who are involved in the treatment of alcoholism. Miller and Downs reported that, in a study conducted in 1986. among women with drinking problems, twice as many women reported sexual abuse compared to those who did not have a history of sexual abuse in childhood.² Women alcoholics are more likely to indicate that they were unloved and emotionally depressed as children. Schilit and Gomberg showed in their study that female alcoholics had less social support than their peer non-alcoholics in childhood and adolescence. Zucker and Gomberg report that review of longitudinal research showed that inadequate parenting and lack of contact between the child and parent characterizes childhood of women that are more likely to develop alcohol dependence later in life.³

ADOLESCENCE AND YOUNG ADULTHOOD RISK FACTORS SPECIFIC TO ADOLESCENCE AND YOUNG ADULTHOOD

Coombs et al. suggest that it is important, when we talk about risk factors during adolescence, to differentiate the early from the late adolescence. Early adolescence is a psychologically and sociologically different from late adolescence. For example, in early adolescence, parental influence and parental role models can be, and usually Ana Kovač et al.

are, more important than in later adolescence. As an adolescent gets older, more significant role in his life is taken by peers. With an increased number of risk factors in adolescence, it is more likely that a person will develop problems with drinking.² Zucker and Fitzgerald argued that one of the risk factors that seem most relevant to adolescents are the behavioral problems which, including mostly antisocial and aggressive behavior. These behaviors include theft, vandalism, difficult temperament, behavioral problems during childhood and various variations and other anti-social, »acting-out« problems. Braucht et al. and Windle state that the contempt of authority, impulsiveness and aggression are also part of the spectrum of behaviors that have been identified as risk factors for developing alcohol abuse and alcohol dependence.²

Frequent absences from school and low educational aspirations are often cited as risk factors for the development of problem drinking in adolescent girls. Poor academic achievement, absence from school and leaving the education system are some of the major risk factors considering education. Research carried out among women in their twenties who had undergone a treatment of alcohol dependence showed that 26% of them had left the education system, compared to 15% of women in the control group.²

Zucker and Fitzgerald suggest that family history involving alcohol abuse or alcohol dependence, and dysfunctional family environment are risk factors involved in the development of problem drinking in adolescents. Dysfunctional family environment is characterized by frequent marital conflicts between parents, poor integration of family members, inadequate parenting, etc. Problem drinking in young women is often associated with an unhappy childhood, a lack of parental care and attention, and lack of connection with their mothers.²

Newcomb et al. state that there is a correlation between early alcohol intoxication and problem drinking among young women. Early consumption of marijuana has proven to be a strong predictor of early onset of problem drinking in a sample of women undergoing treatment.²

Twenties and thirties in a woman's life are the years when a lot is expected from a woman. These are the years in which the role of women multiplies, because she is expected to finish college education, to develop career, start a family and have children. Disorientation in new roles, or failure in achieving some of them, may be a risk factor for the development of alcoholism in this phase of life.

Johnson states that one of the roles that affect the pattern of drinking in woman is surely her level of education, and her business success. Women drink more during their studies than after they graduate and get married or find a job.² There are conflict-ing research results on how employment status affects women considering the form

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of her drinking. Studies conducted in the seventies report that employment outside home can have a negative effect on woman's pattern of drinking. On the other hand, the research conducted at the beginning of the eighties refutes earlier reports, and suggest that employment does not affect the incidence of drinking among women. Studies conducted at the end of the eighties support the hypothesis of how the multiplicity of roles, including paid employment outside home, can reduce the risk of developing alcoholism in women. These studies explain that possible reasons for reducing the number of risk factors for alcoholism in women who are employed are the increased self-esteem and better social support.³ In recent years, there is an agreement that the women who have jobs that are associated with non-traditional occupations, low class jobs and part-time job have a higher risk to develop harmful drinking. Wilsnack and Wilsnack said that women who had recently lost their jobs, as well as those who had been unemployed have a higher risk for drinking.² Marital status also plays a significant role in the development of problem drinking in adult women. Women of the younger adult age who are single, divorced or separated from their husbands, are more likely to drink more than married women. This also applies to women who are in extramarital relationships, according to the results of an epidemiological study that dealt with women alcoholics.² Possible stress and tension associated with loneliness and extramarital relationship can stimulate hard drinking.³ Clinical and epidemiological studies consistently cite strong link between drinking in women and drinking of their partners. Husbands that are problem drinkers increase the likelihood for the development of heavy drinking of their wives.² Studies have confirmed that women conform to male patterns of drinking and are being influenced by discrepancy between their levels of alcohol consumption and habits of their partner or spouse.³

It is believed that women who have problems with reproductive health, and therefore cannot become mothers are at higher risk for developing problematic and frequent drinking. There was a significant association between abortion and hysterectomy on one hand and alcoholism of women on the other hand.²

Problem drinking in adult women is also linked to their lifestyle, especially if they have a problem with drug abuse. Women alcoholics undergoing treatment smoke more often than their non-alcoholic peers. Also, the prescribed drugs and illicit drugs abuse was significantly higher in women with drinking problems.

Gomberg analyzed a research dealing with problem-drinking women in their twenties, thirties and forties. The results showed that women in their thirties are usually under emotional stress, and get into confrontations. If women in their thirties have not reached some of their own and the expected social goals, such as marriage, career, etc. feel unsuccessful and have the impression that some things are lost for them. However, this does not mean that such dissatisfaction and inner turmoil must lead to drinking in women.²

CHARACTERISTICS OF DRINKING IN ADOLESCENT GIRLS AND WOMEN IN YOUNG ADULTHOOD

The fact that the young man is anatomically and physiologically mature does not necessarily guarantee that they are mature mentally and socially, and particularly, it does not guarantee that he is also economically independent. In modern society, education of young people lasts longer, and therefore adolescence lasts longer.

This period of human life is the period when knowledge, labor, hygiene and cultural habits are acquired most intensively. Young gradually become emotionally stable. However, this period of life is pervaded by a sense of uncertainty, in the fields of existence, status, looks, etc. During adolescence, sexuality develops, as well as the moral point of view and understanding. Individuality and identity of young people develops. In order to create identity, young people get included in society and social life and they seek their place within it. The influence of peers in this period of life is very important, and therefore puts the young peer group above the demands of parenting. However, the formation of identity does not always take place in a pro-social environment. Sometimes it is easier to form a social status and identity in deviant or delinquent peer groups, which is especially the case if their families, schools and other social institutions are not sufficiently attractive and do not succeed in meeting their needs.⁴

Delinquent peer groups are characterized by, among other things, risk behaviors, which undoubtedly include the drug consumption. When we talk about addictive substances, tobacco is the first addictive substance consumed by children and young people, while alcohol is the most widely used psychoactive substance among young people, despite the fact that its consumption is prohibited by law in this period of life.⁵ Drinking of young people, including drinking of young girls, high-school and college students has its own specificities, in terms of motivation, means and consequences of drinking. There are different motives for drinking among adolescents and women of younger age. Some of the motives are coping motives, conformist motives, motives for improvement and social motives. Coping motives include drinking to prevent adverse conditions such as depression and anxiety. This group of motives is particularly important for adolescent girls and women of younger age. Stewart et al. state that motives of coping explain the increased alcohol consumption among girls who are de-

pressed or anxious.⁶ Drinking alcohol as a coping strategy is more common among those young girls whose coping strategies and social skills are at a lower level.

Farber et al argued that the desire for social approval or conformist drinking is one of the main reasons for drinking among young people. Conformist motives encourage drinking to avoid social isolation. Stewart et al. state that young women who are anxious, who have difficulties with relaxing and fitting into society and who want to avoid social embarrassment drink because of the conformist motives. In these situations, alcohol gives the girls a sense of confidence and relaxation, so they easily start a conversation with strangers, and have a feeling that they fit well in their present society.⁶

Motives for improvement encourage drinking among young women in order to increase the positive perception. They include the motives of seeking excitement and enjoyment motives.

As for the girls, seeking for thrills, as well as boredom, is one of the most important predictors of alcohol consumption. The study of Parent and Newman states that drunken girls would behave riskier intoxicated and would often seek the thrills. Results of this study showed that drunken women, who often seek excitement, have weaker assessment of the situations that are dangerous for them. Also, it was exemplified that people who are more open to new situations and seek for excitement every day, consume alcohol more often, because it fits into their lifestyle.⁷

Young women who drink primarily to enjoy, drink more than those induced by other motives, have more problems associated with alcohol drinking and drink irresponsibly. Drinking for the purpose of getting drunk and enjoying at the same time is a significant predictor of drinking problem.

Social motives for drinking include drinking in order to achieve social recognition. Stewart and Devine suggest that young women who drink for social reasons are primarily girls who use alcohol to show off in situations they find themselves in. People who drink because of these motives drink more often, but it does not mean they drink large amounts of alcohol.⁶

Specific kind of drinking among adolescents and young women is excessive or rapid drinking, called »Binge drinking », as well as drinking games. Herring et al. argued that »binge drinking« is a term which, especially in English-speaking countries, means a certain way of drinking, predominantly present among the young people. Binge drinking involves an arbitrary number of standard drinks in one situation. This number varies from country to country, for example, Wechsler et al. state that »binge drinking« in the United States is defined as five or more standard drinks for men and four or more standard drinks for women on one occasion, while in the UK the same

term means eight or more drinks for men and six or more drinks for women in a single occasion. Fryer et al. referred that in New Zealand »binge drinking« means seven or more drinks in a single occasion, regardless of gender, while in Australia »binge drinking« generally refers to a risky or high-risk drinking.⁸

Newman et al. define drinking games as a special social interaction inherent to young people, which is competitive and the rules of which are set up with the aim of consuming large amounts of alcohol in a relatively short period of time. Engs and Hanson, Johnson et al., Wood et al. report that young people who participate in drinking games, get drunk more often, consume large amounts of alcohol and have more disorders caused by alcohol consumption.⁶ Drinking games facilitate excessive drinking, and may compel individuals to drink because the refusal to drink, especially in these games, is accompanied by strong disapproval of peers.⁹ Drinking games are especially risky for young girls, engaged in play, who often become the target of their male peers in order to consent to sexual intercourse more easily.

The main problem associated with youth drinking is not alcohol dependence, but the consequences of alcohol abuse, which is reflected in their behavior. The consequences of alcohol abuse in this population are certainly absenteeism from school, poorer school performance, the occurrence of delinquency and antisocial behavior patterns, etc. Drinking of adolescent girls does not necessarily lead to addiction. Alcohol addiction usually occurs after ten years of frequent drinking for young men, or three to five years of frequent drinking for girls. It is worrying that the age of experimentation with alcohol lowers, so the boys start drinking by age of thirteen, while girls begin with drinking a year later, at the age of fourteen. Most frequently, the young people have their first contact with alcohol within their own families. Particularly risky period for the first use of alcohol is graduating from primary school. The risk for drinking alcohol is ever increasing towards the end of primary education if the adolescent does not have a structured free time, such as sports or some other area of his interest. Besides that, the risky period to start drinking may also be the initial period of secondary education. Stress due to a new environment, fear of not fitting and unrealistic expectations of adolescents can boost their alcohol consumption.¹⁰

Student period provides a social context in which the consumption of alcohol and its abuse is permissible and even desirable. It is believed that students are particularly at risk because of the environment, lifestyle and developmental factors. Many young people leave the parental home, either to study in another city, or because of their desire for independence. Several important life events and approvals are mixed in such a short period of life. Young people of this age have more rights and freedom and less parental supervision. Given the enthusiasm of young people to their new role, and given the lack of experience in terms of the obligations that this role entails, it is not unusual that alcohol often plays an integral role in socialization, in rituals of transition from one to another age and initiation. As such, it is highly tolerated, moreover, it is desirable. Young people do not think about the possible risks of drinking, which is understandable given the high tolerance of society towards drinking alcohol. Binge drinking, as a common form of drinking in both sexes, is not only accepted by their peers, but also by the elderly.¹¹

Sher and Rutledge report that binge drinking during the college years is more common among those students who had drunk a lot during high school or had drunk before college. Crawford and Novak cite that students who believe that alcohol consumption and binge drinking are an integral part of student life, have a greater likelihood of involvement in high risk patterns of drinking.⁶ Hingson et al. state that a lot more negative consequences associated with alcohol consumption are experienced by students that excessively drink, compared to those who do not have this pattern of drinking. Wechsler and Nelson state that there is a correlation between the amount of alcoholic beverages and the number of problems associated with drinking alcohol. Reviewing the relevant research, Perkins cites three categories of consequences of binge drinking in students: harm they do to themselves, harm they do to others and institutional costs. The same author further states that male students who drink frequently cause harm to others, while female students who drink mostly harm themselves. Perkins states that harm they do to themselves implies poor academic achievement, which means that the girls who drink in such manner often perform worse in exams, are more absent from lectures, and generally lag behind in executing student obligations. In addition to poor academic achievement, harming themselves includes also blackouts, injuries, risky driving, legal ramifications, and risky and unwanted sexual activity.⁹ Vickers et al reported the results of the study that confirms that female students who frequently participate in binge drinking have higher risk of taking other addictive substances, such as cigarettes, marijuana and cocaine.¹²

While all of these consequences are serious and significant, the most serious is certainly an increased likelihood of unwanted and high-risk sexual activity. Kelly Werder et al. cite numerous studies whose results have demonstrated the existence of a clear connection between excessive drinking and risky sexual activity among students. Abby states that the review of the literature about the connection between alcohol and sexual assaults in which victims were students, says that alcohol consumption by attackers and / or victims increases the likelihood of sexual abuse. Binge drinking as a way of drinking among college students usually ends after graduation. However, girls who continue with this kind of drinking after this period of life are very likely to develop alcohol dependence and disorders caused by drinking alcohol, which cause physical, emotional and social problems.⁹

PERIOD OF MIDDLE AGES AND OLDER AGE RISK FACTORS FOR MIDDLE AGED WOMEN AND OLDER WOMEN

Scarf states that, for women, the middle ages between 40–59 is a period when they lose some roles in their way of life. Although this point of view is culturally determined, the fact is that women consider these years as a period in which they lose the youthful appeal and the time when their children leave the parental home. If their marriage falls apart at this time, the impact of these years on a woman can be really painful. Wilsnack and Cheloha reported a correlation between the loss of parental or spousal roles and drinking problem in this phase of life.

The results of many epidemiological and clinical studies show that the elderly, over 55 years, abstainers, those who do not drink, have fewer disturbances related to drinking than young people. It is assumed that, for the women of older age, it is more likely to get addicted to drugs than to develop the alcohol dependence, but it is obvious that both dependencies exist among women of this age group. Holzer et al state that people who drink in old age can be classified into those who began drinking early (before the age of 40), and those who began to drink later (after the age of 40).²

4% of elderly men and 38% of older women addicted to alcohol say that their drinking started during the previous 10 years.² Brennan et al. reported the results of other studies that also show that women started with drinking recently, or at least later than men, and consume more drugs than men. Compared to men, they are also more depressed and less likely to seek help and report for treatment.²

Many clinical reports state that the old couples, usually retired, drink a lot, often together. However, there are old people who begin to drink because of sadness and despair after the loss of a spouse. Even if they do not have a history of drinking with their husbands, widows can start drinking at least during the first year after the loss of her husbands.²

Fox states that women form social bonds, relationships and friendships in the workplace, and their retirement can be a significant stress, especially if they have weak family ties and lack of interests.² Besides that, for women who are housewives, their husbands' retirement can be a source of stress. Of course, this can vary depending on the family finances and retirement plan, but the retirement of any of the spouses implies significant changes in family organization.

Graham et al. report that the research results show that older women have the highest rate of consumption of prescription drugs among all of the age groups surveyed. Such a high consumption of drugs is associated with deaths of husbands, lower education, poorer health, lower income and poor social network support. Older women can consume drugs as the primary means of addiction, or may be addicted to alcohol and tranquilizers and sedatives.

CHARACTERISTICS OF DRINKING IN WOMEN IN MIDDLE AND OLDER AGE

Woman takes over more and more burdens and responsibilities in order to function adequately in many different roles, such as wife, mother, homemaker and often a public figure,. All of this has an influence on their lifestyle changes and can result in mental disorders and tension that may be responsible for the »escape into alcoholism«.¹³ The emancipation of women is a social process that has significantly changed the role of women in family and society. Women fought for their rights, as well as for the equality in society, however, they have been given a number of tasks to perform in a relatively short period of time. Excessive drinking among women proportionally grows with the degree of freedom, emancipation and equal participation in society.¹⁴

There are significant differences in the ways of drinking among adolescents and young women, and between adult women and the elderly. While adolescent girls and young women drink in public places, bars, nightclubs and other places where young people meet, adult women and the elderly usually drink in the solitude of their home. While drinking during adolescence is almost desirable because it helps in adjusting to the new environment, peer group, serves to establish the new contacts, etc., drinking among the adult and elderly is considered to be unacceptable and even shameful. Drinking of young girls is considered to be transient, youthful phase, while drinking of adult and elderly women is considered a sign of failure in the performance of their life roles. Alcoholism of adult women is accompanied by a strong social stigma that makes women drink in the privacy of their homes and hide the addiction problem.

Alcoholics in adult age usually do not fit the stereotypical description of people addicted to alcohol. Torre states that the pattern of drinking alone at home is typical for the excessive female drinking.¹⁵ Lester describes women alcoholics as women who drink alone, usually in their home, and secretly sneaking, called solo drinkers. The same author states that these are mostly women who are lonely, mostly middle-aged housewives.² Female drinking in the adult age is often a result of boredom, fear of

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failure, problems in the marriage and the challenges of raising their children. Kruzicki states that women of this age drink in order to curb feelings of failure, being unloved and inadequacies of performing in their social roles.² Some women begin to drink excessively at the time of menopause. In that period, alcoholism is usually caused by hormonal changes and accompanied with psychological problems related to women's' age.

In older age, women may face several losses, such as retirement, children leaving the family home, death of one or both parents, which can cause loneliness and depressed mood and in some women can increase the risk for the development of alcohol problems.² Older women also drink in the solitude of their home. However, unmarried women of older age represent a subgroup within this age group and they drink less.¹⁵

More women drink excessively in urban than in rural areas. The reason is probably the fact that in rural areas, customary norms and stereotypes of behavior are steadier than in urban areas. Middle-aged and elderly people drink wine and spirits. Women of higher socioeconomic status drink more than women of lower socioeconomic status, which is an obvious consequence of their emancipation. Employed women drink more than unemployed women.¹⁵

CONCLUSION

From all that is mentioned above, we are able to conclude that the same or similar risk factors are to be found in different stages of woman's life. However, there are some factors which are quite typical for a particular age group or for a certain life period. For example, poor impulse control is a risk factor that is specific to the period of adolescence. Also, anxiety is in this period of life represents a riskier factor for girls rather than boys. Reaction of the society towards young people drinking is not that disapproving, if it is compared with the reaction towards adults drinking, and especially compared with the reaction of society towards adult women drinking. Drinking in adolescence is viewed benevolently, with faith, that these behaviors will disappear once the young individual graduates, gets a job or sets up his own family. Ultimately, that happens in majority of cases, so we can conclude that drinking at this stage in life is predominantly retained at the level of alcohol abuse with no existing pathology. For a long time, the middle age has been characterized by risk factors such as the woman's feelings of failure, depression syndrome »empty nest« and menopause. While most women in their forties and fifties cope well with these challenges, life events in the

middle age are overwhelming and stressful and can lead towards problems with drinking. However, it should be borne in mind that with the increasing number of risk factors, the likelihood of developing alcoholism in women laos increases. It is also important to know how that the risk factors mentioned above are connected with the development of alcohol dependence, but there is no causality in that connection. Importance of further research in this area is unquestionable, id wew wish to create the adjusted prevention programs, based on knowledge about the targeted groups of women.

KARAKTERISTIKE PIJENJA MEĐU ŽENAMA OVISNO O DOBI

Sažetak – Ovisnost o alkoholu u žena je problem u današnjem društvu. Promjene tradicionalne uloge žene praćene su rastućim brojem žena koje prekomjerno konzumiraju alkohol. Zato je neophodno stvoriti liječenje i preventivne intervencije prilagođene toj populaciji. Alkoholizam u žena bitno se razlikuje prema dobi. Adolescentice, mlade žene, sredovječne i starije žene imaju različite etiološke čimbenike u osnovi njihovih problema s pićem. Karakteristike i navike povezane s pijenjem također se značajno razlikuju kod mlađih i starijih žena. Tijekom adolescencije, najvažniji čimbenici rizika su problemi u školi i obiteljska anamneza i okolina. Za žene mlađe odrasle dobi, najvažniji čimbenici rizika su povezani s ulogom i zdravstvenim problemima, dok su kod žena starije dobi to udovištvo i problemi s odlaskom u mirovinu. Ovaj članak pokazuje da, što je više čimbenika rizika, veća je vjerojatnost da će se razviti alkoholizam. Gore navedeni čimbenici rizika pokazuju vezu s razvojem alkoholizma, ali ne nužno kauzalnom povezanošćui.

Ključne riječi: Alkoholizam u žena, etiologija, čimbenici rizika

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