

Recessionary woes lead to adverse alcohol outcomes for men and middle-aged Americans

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Although the U.S. recession officially ended in June 2009, many Americans still struggle to make ends meet. A recent study has examined the relationship between different types of economic loss experienced during the recession – job loss, reduced work hours/pay, difficulty paying for housing, housing loss, and loss of retirement savings – and alcohol consumption and problems, finding that men and middle-aged Americans are at higher risk for multiple, adverse alcohol outcomes.

Results will be published in the April 2014 online-only issue of *Alcoholism: Clinical & Experimental Research* and are currently available at Early View.

"Research suggests that economic downturns can have severe impacts on stress and mental health," said Nina Mulia, a scientist with the Alcohol Research Group of the Public Health Institute and lead author of the study. "A 2009 study of 26 European Union countries found that a mass rise in unemployment such as three percent led to significantly higher suicide rates among people under age 65. Additionally, a 2011 longitudinal study using U.S. data showed that increased unemployment was linked to declining psychological health. Furthermore, a recent review of many individual-level studies concluded that [job loss](#) is associated with a greater risk for depression and anxiety symptoms."

"This study brings us a long way towards confirming how much

economic shocks impact peoples' health," added Laura A. Schmidt, a professor of health policy at UCSF School of Medicine. "It emphasizes the role of economic stress – what it's like to lose a job, a house, a retirement 'nest egg'—and how much that impacts a person's state of mind and leads to problems with drinking. The authors note that the price of alcohol has gone down a lot in recent years. Maybe this made it easier for people stressed out by the recession – and the personal toll it took on their own families and themselves – to overcome the inhibition to buy alcohol. It's understandable when a person is in such a terrible place, fearing for his economic future, and feeling responsible for his family."

"Our study is an individual-level study focusing on economic loss experienced during a severe recession and how this relates to drinking patterns and problems," explained Mulia. "Unlike many prior studies focused on unemployment and [alcohol consumption](#), we assessed different types of economic loss that were common during this last recession, and a variety of distinct alcohol outcomes."

Mulia and her colleagues drew on data from the 2009-10 U.S. National Alcohol Survey for 5,382 individuals (3,445 females, 1,937 males). They estimated associations between economic loss measures and total alcohol consumed in the previous year, frequency of drunkenness (a key predictor of alcohol-related problems), negative drinking consequences, and alcohol dependence in the overall sample as well as within gender and age groups (18-29, 30-49, 50+), while controlling for demographic characteristics and alcohol history.

"In the overall sample, people who experienced severe economic loss, such as job or housing loss, were at greater risk for monthly drunkenness and alcohol-related problems, even after taking into account an individual's history of alcohol problems prior to the recession," said Mulia. "Those who experienced only moderate economic loss appeared

to have drinking outcomes similar to those who were unaffected by the recession. Our subgroup analyses suggest that the effects of severe economic loss on drunkenness and alcohol problems were mostly concentrated among men and the middle-aged. They also showed that relatively moderate though common losses, such as a reduction in work hours/pay and the loss of [retirement savings](#), were actually associated with increased drinking in some subgroups – specifically, women and older adults – though not drunkenness."

"For a long time, alcohol researchers took it as a truism that people with lower incomes are less likely to buy alcohol, and therefore less likely to have alcohol problems," added Schmidt. "This study kind of turns that assumption on its head. In a period of national economic distress, where more than half the population reports being personally affected by an economic downturn, people suffering the most severe forms of economic loss are likely to turn to alcohol for a stress-reliever. Unfortunately, some of the most severe manifestations of stress involve alcohol-related harms that could involve others—like drinking and driving and family violence. This is where we all need to, as a society, think about how we can do a better job at buffering vulnerable people from the harms that come with major economic downturns. This is important particularly because kids are affected by these harms."

Mulia and Schmidt noted that men and middle-aged Americans might be more affected by the experience of severe economic loss due to several reasons: gender norms around drinking, childrearing and family responsibilities that may constrain heavy drinking among women, and the fact that men are still, in many families, the primary breadwinners; furthermore, the middle-aged are likely responsible for the economic wellbeing of others, both young children and possibly aging parents.

"Clinicians are already doing a lot to promote screening and brief intervention on alcohol problems," said Schmidt. "This study points

clinicians towards specific target populations to worry about during future economic downturns – [men and] the middle-aged. These 'vulnerable populations' are those who, when faced with particular challenges, are the most likely to resort to health behaviors that harm themselves and others."

Mulia agreed, pointing out "when people lose jobs or housing, or have their hours/salaries cut, visiting the doctor might not be a priority, especially if they have lost their health insurance. So we need ways to reach the people who have been most impacted by economic loss and link them with alcohol screening and brief interventions, as well as other health education and prevention efforts," she said. "This might mean that health programs should partner with unemployment offices, housing and social services, etc."

Mulia also pointed to the health benefits of a strong public safety net. "In addition to [alcohol](#) intervention, it is important to consider more broadly what might protect health and social welfare during macroeconomic crises," she said. "Research suggests that the adverse impacts of a recession on population health depend, in part, on social safety-net programs available in a given country. Initiatives and programs to foster job retention and housing retention, to help people to become re-employed, food programs – all of these might be important in reducing the adverse health impacts of a recession."

Provided by Alcoholism: Clinical & Experimental Research

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