

Bogus recycling bins help identify drinking patterns among low-income seniors

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Substance abuse is the fastest growing health concern for older adults, a segment of the population that is likewise rapidly increasing. Heavy drinking among older persons is associated with an increased risk of health problems like diabetes, cognitive impairment, sleep issues, and depression. A new study has examined drinking patterns among low-income older adults using both self-report and outside-of-the-box methods, finding that drinking levels are high enough to be of concern and tend to spike around the times older adults receive their social security checks.

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

"Relative to young adults, there is less research on older drinkers," explained John D. Clapp, Ph.D., associate dean for research, and professor of social work at The Ohio State University. "There has been a perception that older people didn't drink, and that there were no heavy older drinkers out there—the assumption was heavy drinkers died before getting to older ages. Given this is an exponentially growing population, more work in the areas of epidemiology, prevention, and intervention is warranted." Clapp is also the corresponding author for the study.

"When it comes to studying drinking, researchers often focus on the populations that present community-observable problems," added James E. Lange, director of health promotion and adjunct professor of

psychology at San Diego State University. "Young people drinking in bar-dense areas or around colleges come to mind; their drunkenness is a nuisance at best and a hazard at worst and so naturally draw our attention. However, when it comes to understanding the drinking of our older community members, there is a thinner body of research to point to. Mostly, data come from large household surveys that capture a cross-section of the population, and therefore includes those over 65 along with those younger. However, such self-report surveys often fail to give us much depth of understanding. They may tell us how much a person may drink during a given week or day, but not much else."

"Substance misuse presents both independent and indirect challenges to the health of [older adults](#)," said Clapp. "At the acute level, problems related to substance use might be exacerbated by issues related to the aging process—impaired driving, for instance, might occur at lower blood alcohol levels, coordination and balance issues might lead to falls when coupled with psycho-active substances, etc. Older adults also tend to have more [health problems](#) than their younger counterparts; alcohol and other drug use potentially can worsen health outcomes and interact with medications."

Clapp and his colleagues administered two self-administered cross sectional surveys to 174 participants (97 men, 77 women), aged 60 years or older, living in a low-income residential senior center in the United States. A bogus recycling program was implemented to assess amount of alcohol consumed by residents. Subsequently, alcohol containers collected from recycling were converted to standard drink estimates in order to calculate the capital consumption of residents.

"We implemented the bogus recycling method when the social work staff at the facility didn't believe the survey data we collected truly reflected the amount of drinking going on at the facility," explained Clapp. "The social worker took me to the basement of the building and

showed me the empty alcohol bottles and cans and the idea basically emerged then. It seemed like a good way to get a more objective measure of drinking for a low cost. I have always liked using novel methods to get at research questions." The unorthodox approach paid off.

"Our recycling results showed that drinking tended to spike around the times older adults got their social security checks," said Clapp. "This information could have prevention implications for social workers working with this population. Our survey data also showed that drinking among older adults was similar to previous studies. The rates are generally less than younger drinkers but, when considering the potential complications associated with drinking and aging, high enough to be of concern."

"Given that this was a low-income population, their finding that drinking may be tied to the receipt of social security checks is both understandable and also important," said Lange. "But there are encouraging results here too. Those with medical conditions that require prescription medicines or with a diagnosis of diabetes were less likely to report drinking. It's heartening to see that medical advice to avoid alcohol may be getting heard and followed. Furthermore, while the study may not provide a comprehensive picture of seniors' drinking, it is pointing us in a direction for how and why to study drinking in settings like this. It's a study far more about challenge than answers for the field. In other words, it helps us see what we don't know. I'm guessing many other researchers will start asking even more questions and looking for creative ways to find answers; that's what's exciting about this study."

Both Clapp and Lange noted the importance of paying dedicated attention to drinking habits of older adults.

"It's important to realize that older adults do drink and that drinking may

result in complications with social and psychical well-being," said Clapp. "Further, lower-income older adults might be spending a disproportional amount of their funds on alcohol."

"This study is a reminder that as our body ages, the impact of alcohol changes," added Lange. "So while we may feel that our older family members' drinking, with decades of drinking experience under their belt, should be none of our business, it actually may be a problem. Maybe we're not talking about alcoholism or dependence, maybe instead we're talking about periodic drinking that can lead to falls, crashes or medicine interactions. Encouraging family members to ask questions of their doctors about [drinking](#) may be a great place to start."

Provided by Alcoholism: Clinical & Experimental Research

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