

THE PSYCHOSOCIAL FUNCTIONING OF WOMEN AND MEN ADDICTED TO ALCOHOL

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Abstract. *The article presents how women and men addicted to alcohol function in basic areas of social life as well as what their psychical condition generally is. The conclusions are based on the theoretical findings and quality surveys. The research shows the equality does not exist in alcoholism. The men, contrary to the women: become addicted quicker, drink more alcohol, suffer from more somatic complications, more serious social damages arise especially conflicts with the law. What is more, they die more often due to alcohol intoxication. However, socio-cultural conditions show the women are more stigmatized than the men, what results in receiving non-effective support. The features about being an alcoholic are variant in reference to sex, particularly the development of an addiction as well as experiencing the alcoholism and the alcoholism addiction treatment. The revealed differences between sexes should allow improvement in already existing therapeutic solutions, notably to adjust them more individually. It will improve the quality of life in sobriety, people who are addicted to alcohol.*

Keywords: *alcohol, alcoholism, alcohol addiction.*

Introduction

Alcohol is by far one of the most widely used psychoactive substances today. Its use has a culturally accepted place in social situations. It should be stressed that even though most people are aware of the detrimental effects of excessive alcohol consumption as well as the widespread problem of alcohol addiction in modern society, they do not seem willing to change their patterns of thought and behaviour. The contradiction arises, in this case, from the fact that people drink alcohol because they truly believe that they do not have a problem, therefore, they are unable to see or recognise its seriousness. Such a wrong approach to the issue undoubtedly has a substantial influence on escalation of excessive drinking, harmful alcohol consumption and an increasing number of addicts, which poses a serious threat to public health (Fudała, 2009).

Alcoholism is considered one of the most dangerous diseases, which also may be acutely life-threatening. Excessive and improper alcohol consumption can lead to numerous problems, including mental health issues, as well as various health and social problems that may result in qualitative changes in the functioning of individuals with alcohol dependence. Long-term alcohol intoxication seems to degrade the human personality, cause serious health effects,

destroy relationships with close family members, ruin professional careers and impoverish social living situations. Cumulative negative impacts, in turn, impair the ability to perform social roles.

The way of viewing alcoholism in the context of nomenclature as well as perceiving addiction by psychological and medical sciences has evolved considerably. It should be noted that in both sciences there is a growing trend away from using the terms *alcoholism* and *alcoholic* as they are perceived to be negative labels. Until recently, alcoholism was considered the form of social maladjustment because there was a common assumption that alcohol abusers violated social norms. Their behaviour was considered abnormal as a consequence of their propensity to deviate from socially accepted patterns. Medical scientists began to use the term disease to describe alcoholism. Furthermore, the disease concept holds that alcoholism is a primary disease, leading to the development of numerous somatic and psychiatric disorders. It is also medically defined as a fatal disease. This simply means that it can result in death if left untreated (Żurek, 2004). From a psychological point of view, alcohol addiction refers to a psychological and physical dependence. Psychological dependence refers to the regulation of an emotional state, whereas physical dependence means an intense craving or feeling of compulsion to use alcohol and evident impairment of the ability to control use of alcohol (Pospiszyl, 2008).

Alcoholism affects both women and men. It turns out that until the 1970s, there were neither epidemiological, clinical nor experimental studies investigating the effects of alcohol use among women. Even if they took part in the studies, researchers focused almost exclusively on men. The number of women addicted to alcohol has increased considerably. Excessive drinking undoubtedly is related to economic, social and cultural changes, as well as women's changing roles in the family and society (Chuchry, 2012).

Characteristics of addiction taking account of gender – qualitative analysis

Taking into consideration the fact that understanding the research process is necessary to conduct any scientific research, the subject of these studies is psychosocial functioning among women and men addicted to alcohol. The studies aimed to examine the fate of a certain social group with alcohol addiction, that is to say the individuals whose experiences give essential knowledge to understand the functioning of addicts. Therefore, the studies were based on qualitative approaches focusing on *the issues going beyond objective and measurable features, which enables one to address the issues regarding assessments, values and experiences* (Bauman, 1995: 55)

The main question posed in the study was: How do women and men with alcohol addiction function in society? The following questions were formulated:

Question number 1: What were the pathways leading the women and men into addiction?

Question number 2: What does the professional status of addicted women and men look like?

Question number 3: What are the family relations of addicted women and men?

Question number 4: How does the affiliation to an Abstinence Association affect the functioning of addicted women and addicted men?

The purpose was to find differences between female and male alcoholics in order to present the characteristics of addiction taking account of gender.

Taking the nature of the studies into consideration, an instrumental case study was conducted (Denzin & Lincoln, 2017) to provide better insight into the phenomenon of alcohol dependence and to capture the characteristics taking account of gender. Two types of survey interviews were conducted – the targeted survey and the survey with the standardised list of questions (Konecki, 2000).

The studies were conducted among a purposefully selected sample of 10 members (5 women and 5 men) of Association of Teetotallers Club “Ostoja” and Teetotallers Club “Wytrwałość” formed in Częstochowa. Every respondent uses an assumed name in order to remain anonymous (Table 1). They all suffer from the same disease as well as they have been through similar kinds of experiences.

Table 1 The characteristic of every respondent

| Name | Age | Education | Years of alcohol abuse | Years of abstinence |
|-------------|------------|------------------|-------------------------------|----------------------------|
| Jolanta | 67 | higher | 10 | 2 |
| Barbara | 66 | secondary | 20 | 3 |
| Maria | 62 | secondary | 20 | 20 |
| Małgorzata | 55 | primary | 30 | 2 |
| Ewa | 48 | higher | 10 | 2 |
| Kazimierz | 70 | secondary | 30 | 22 |
| Adam | 62 | vocational | 20 | 18 |
| Robert | 46 | secondary | 30 | 5 |
| Marek | 48 | secondary | 25 | 5 |
| Krzysztof | 52 | secondary | 10 | 5 |

What were the pathways leading the women and men into addiction? Although alcohol initiation among the respondents began in late adolescence, the development of addiction occurred among the women aged 30 and over, except for one woman over the age of 20 whose intensity of addiction was contingent on environmental factors. The men, on the other hand, developed alcohol problems before the age of 25 and their addiction was to a large extent genetically

determined. The women had a tendency to turn to alcohol because of their inability to handle strong emotions triggered by the death of a loved one, mental and physical abuse, cheating in a close relationship, a lack of positive interpersonal relationships and poor communication in a marriage. In the early stage of addiction, the women had an occasional drink with friends at weekends, then they began to drink at home alone to gain a feeling of comfort and safety in the mistaken belief that they could successfully hide their drinking problem from other. One of the female respondents described the road to alcohol dependence among women. Barbara:

At the age of 20, I began to drink sporadically in the senior year of secondary school, then I misused alcohol occasionally during name day and birthday celebrations and social gatherings. I started to abuse alcohol after age 40 after giving birth to my third child. I was miserable in my marriage. My husband not only abused me emotionally and physically, but also cheated on me. That is when I began to consume alcohol every day. I could not abstain from drinking for 10 days – 3 weeks in succession. Then I took a 2-3 month break from drinking until another drinking episode occurred. I used to consume wine, neat vodka in different quantities. The repeated episodes of excessive drinking tended to occur for 20 years. I always drank alone at home.

Drinking patterns among women often remain secretive and hidden because they are expected to perform their role as mother or a housewife in the domestic sphere. Some stereotypes of female alcoholics have emerged and tend to prevail, for example, the long-standing belief that women drinking alcohol are perceived morally depraved (Gašior, 2005). It is commonly believed that the influence of social pressure still has a large impact on individuals' drinking habits. They drink alone in order to avoid confronting their own problems. Both such behaviour and, in particular, the image of women and wives deserve to be criticised. Furthermore, in many instances, this imposes a great psychological burden on them, often leading to a sense of guilt and further degradation. However, it must not be forgotten that there is a group of women whose behaviour refers to male behaviour patterns, e.g. drinking in public places or consuming the same kind of alcoholic beverages. In general, their drinking is related to the drinking patterns of people around them (i.e. their husbands, close friends, siblings).

For the male respondents, alcohol consumption was seen as an easy alternative to social life. Some respondents described their use of alcohol as a way of handling life changes, the others needed social integration. In contrast, drinking alone appeared as a result of deepening addiction, as well as a deteriorating financial situation at home. Male drinking patterns are characterised by collective drinking. It appears that goal achievement, portraying a masculine image in the presence of other individuals in order to excel them are essential for men. They claim that there is social encouragement of alcohol consumption as well as

ubiquitous presence of alcohol. Importantly, both social and cultural roles in the two groups may result in differences in cognitive assessment and behavioural reactions to alcohol (Poprawa, 2011).

Men have been found to drink not only twice as much alcohol as women, but also more frequently. In addition, men took shorter breaks from alcohol and mixed different types of alcohol (for instance, vodka, wine and beer) and other liquor containing ethanol. On the other hand, women mostly preferred vodka. When it comes to effects of alcohol addiction, women who drink may be at greater risk of somatic symptom disorders than men, because it is possible for them to suffer from such disorders without being addicted. It must be stressed that women are more likely than men to feel the effects and destructive nature of alcohol abuse because the female body is inherently weaker than the male body (Ziółkowski, Augustyńska, & Budzyński, 2006). Somatic symptom disorders and mental disorders in women were, to a great extent, associated with affective disorders (depressive disorders, medications). The men suffered from disorders, such as psychoses (alcoholic hallucinosis, Othello syndrome, bipolar disorder experiencing manic episodes without psychotic features). Physical complications included cardiovascular system problems (the heart, hypertension), digestive system problems (duodenal ulceration, liver problems), cutaneous lesions. Taking account of behaviour under the influence of alcohol, an increase in aggressive behaviours appeared in most respondents. The women manifested only verbal aggression as a defensive reaction, whereas the men also showed aggression towards other people caused by frustration.

It turns out that the awareness moment appeared to be the result of others' influence (family, psychologist, AA fellowship members), the situation (loss of job, lack of money, body emaciation) and the feeling of blame. This is what one of the respondents said (Adam):

It was all very shocking for me when my wife told me that when I am sacked and I don't earn any money, she will throw me out of our home by herself. At the beginning I somehow accepted that with ease, but when she gradually stopped taking care of me, I began to think more and eventually it was slowly getting through to me that I really had a problem with alcohol. My wife told me to go to the Club, where there was an open meeting, but I didn't like it at all. So then a friend of mine, who was a leader of a support group, asked me to see him in private, he told me about himself, I observed the relationship with his wife, and I thought it was cool, so I hoped I might be successful too. Thanks to him I went to a center, where I went through a 10 week therapy, after which I turned up at the Club again.

In all cases the decision was taken independently, but it was a result of the outer motivation.

What does the professional status of addicted women and men look like? Women, contrary to men, experienced more problems in their professional career

because they lost their job either as a result of a disciplinary dismissal or a disability to perform professional obligations. The respondents were occupying responsible positions related to some office work in the state administrative offices (Social Insurance Institution, post office), in a private company (accountancy) or they were self-employed (a tailor's shop). If they were professionally active, it was very unstable and accompanied by a frequent change of activity. Maria remembers how alcoholism devastated her professional career:

Unfortunately, due to alcohol I lost my job many times, I was disciplinary dismissed twice. I was a good worker, I was deeply involved in my work, but when you drink there comes a moment when you start self-deluding that it is all right while it is very bad.

She notices that the relations with colleagues were good unless her disease negatively influenced her obligations. Presently three of them retired, one of them has been unemployed throughout her entire life, and the last one is actively looking for a job.

In case of men their professional career seems to be much better, just because despite their addiction they were professionally active and most of them returned to the same place of work. The men occupied technical positions, and additionally they took up some extra tasks. The respondents were aware that if it weren't for the disease, they would have earned more. Robert says that he lost a lot due to alcohol abuse because:

He had a decent job in the field of trade abroad, so if he hadn't wasted everything on drink, then he would have had a set life now.

Alcoholism in both groups led to a decrease in professional competences. It turned out that relations with persons that the men were in, just collapsed. The respondents somehow accepted that fact and when it comes to relations with new coworkers, they do not hide their disease, they establish proper relationships. The three of them have been professionally active since they gave up drinking, two of them do not work because of retirement and disability pension.

What are the family relations of addicted women and men? The most painful social result of alcoholism is worsening of a family situation. Family is a social community that is based on fulfilling each other's needs. Therefore, alcoholism of one of the group members has a negative impact on the other members. An addicted person disturbs an existing dependence, thus causing many problems in every sphere of a family life and leading to a breakdown of family bonds. The respondents either rebuilt their family relations or they are on the right way to do it, or there's still much to be done when it comes to their relations. The truth is that the relations of women and men under research belong to the most diversified sphere, however both the period of abstinence and the status of relations before the development of addiction as well as the effort made throughout the period of sobriety, should all be taken into consideration. Among women only two of them

maintain good emotional relations with their husbands, however one of them established a relation with an addicted person during the period of sobriety, what shows that similar experiences had an impact on mutual involvement in building healthy relations. In the second case the woman was being supported by her husband all the time, that is why their good relations were only strengthened after the period of alcohol withdrawal. On the other hand Ewa declares that her problems with alcohol deepened the already destroyed relations with husband:

This was often the cause of rows, he was against my abuse, just because it made our already bad relations more complicated. It turns out that relations between them are far from ideal, my husband does not fully trust me, and I think that he does not completely understand what it means to be addicted. Frankly speaking, I do not know how much I can rely on him.

The other respondents are singles, one because of her husband's death, and the second one because she had suffered violence from her partner, however in both cases these are just life experiences that brought them to addiction.

In case of men their relations in marriage are much more positive ones. That is what Krzysztof says about his wife:

Most of all, I have a wonderful wife, naturally we have arguments, but they last just for five minutes and then we laugh at that. Now we are having a fantastic relation. I have rebuilt that broken confidence, and my wife makes me feel it by the way she cares or looks after me. Our communication has improved for sure. When there is a problem, we try to solve it talking to each other, we both have learned how to discuss what we feel, not only what we think. My wife makes fun of my showing feelings for her, because I am such a nutcase that being in a crowd of people in the middle of a street, I am able to say that I love her, kiss or hug her. All our life decisions are taken together just because we have decided so.

Wives played big roles in relations rebuilding, because thanks to their consequent attitudes to men, who involved themselves emotionally, they changed their behaviours. Now they nurture reciprocity, the sense of community, open communication and autonomy to the same extent. Only one respondent experienced a break-up of a marriage tie, however he was able to build friendly relations with his wife in order to actively participate in their children's lives.

When it comes to relations with children, women suffer more when they do not fulfill their parental function, thus they blame themselves much. Women, despite a strong sense of shame and guilt, are more critical towards their disease. In their opinion admitting to alcoholism is equal to a failure in playing the role of a mother or a wife. The difference is basically related to an assigned social role – men are responsible for satisfying material needs of their children while women are responsible for taking care and upbringing, so it is more difficult for them to accept a failure of fulfilling own obligations. Małgorzata's lack of educational involvement caused many conflict situations, full of regret and anger:

It is obvious that when a mother drinks, then children are being brought up by themselves. It was not a good situation when they came home from school and their mother was drunk, uninterested in anything and it was not possible to talk about it in any way. It was my husband's job to act as a father and a mother. Conflicts were quite frequent. At that time I did not realize that the girls needed the mother.

Even though the relations with daughters improved, regaining their confidence took some time:

It was not easy in the first year. At present it is really fine, just because the relations are being rebuilt. I make a lot of effort to make them know that they can count on me.

Małgorzata is aware how much she lost as a mother, but she is able to see herself critically as a parent:

I cannot turn back the time or all the years I lost, I was not the best mother, I did not participate in my daughters' life, because I was drinking. It has all really changed since I am sober and my daughters see that, and they enjoy it together with me. Do I have an impact on my children's life? At the time when I had it or should have it, I did not do anything, and now I do not want to, because they are grown ups, they have their own families, and the only thing I can do is to give them a piece of advice.

Despite their awareness of mistakes they have made, men are able to put aside negative emotions and concentrate on what is happening. When it comes to perceiving oneself as a parent, they try to form a good opinion about themselves due to an insight in their role as a parent since the moment of alcohol withdrawal, but it does not change the fact that they still remember former misconducts. Majority of respondents has good relations with children, some of them still take care of children the best they can, trying to participate in their children's lives via frequent talks, showing that they care and cooperation in problematic situations. The others maintain correct relations with grown-up children and grandchildren, sharing their interest and support.

How does the affiliation to an Abstinence Association affect the functioning of addicted women and addicted men? It turns out that the impact of a teetotal fellowship on the respondents' life is equally positive. Undoubtedly the need for integration with people experiencing the same disease favours that. It allows to shape faith and power necessary to learn to live in sobriety. The respondents feel well as members of a fellowship, it becomes a part of their life and established relations are as valuable as family relations. As Barbara says:

Meetings help me accept myself, they give me confidence, I do not look back at the past that was once the reason of my drinking, I am calmer, under control, I try to see some problems from a perspective, I learn patience and tolerance in everyday life.

As women claim, their life has changed much since they took part in meetings, for example, they begun to respect themselves, they started to work on their emotions, they learned how to live in the now, they became more open – both in talking about themselves and when it comes to discussing others' behaviours.

For men self-support groups became their part of life, therefore they try to participate in every meeting systematically and with big involvement, because as Marek says:

I would not like to exaggerate, but sometimes I feel better here than at home, and you can derive something good for yourself, just because each of us is different, and everybody brings something here, so it is enough that I take 10 % out of it and it is encouraging enough for me. They give me a possibility to talk, and besides I always get some feedback that gives me a pause to reflect.

They also try to shape patience and learn to be tolerant and more active in their everyday functioning. Unfortunately only men can rely on support from their closest ones in their sober life. Wives take advantage of therapies for those co-addicted. However, women under research do not have emotional support of their partners and children who did not use any form of support and are not active in any anti-alcoholic movement.

Summary

Analysing collected information, we should be careful while evaluating the psychosocial functioning of women and men addicted to alcohol. It is not enough to have a look at the fact whether respondents can manage in certain spheres of life, but we have to bear in mind some conditioning, both internal, resulting from personal predispositions, and external ones that include gathered experience, acquired skills, gained knowledge and conditions rooted in social contacts.

On the grounds of analysis it can be stated that both women and men addicted to alcohol function in social life on a level suited to their possibilities, being able to enjoy some achievements and trying not to forget about continuous work on themselves. It is worth emphasizing that respondents try to live in conformity with themselves, taking into consideration some external factors. It turned out that life situations with regard to gender are differentiated in the professional and family sphere as well as in the elements of a psychological image of oneself. Women more often struggle with family problems than men and that is reflected not only in the development of addiction but in motivation to undergo a therapy. Respondents have a realistic self-image, they have already rebuilt or are trying to improve family relations, striving to self-realization as a partner and a parent. They are professionally active or they do not work because of retirement, they try to establish accurate interpersonal relations at the place of work and they avoid environments which they were once related to due to alcohol.

Apart from a cognitive value, the scientific research should be practical, that is why some activities that might positively influence the psychosocial functioning of women and men addicted to alcohol in the process of alcohol withdrawal have been distinguished:

- Including in the treatment therapeutic work on problems specific for the given gender, having its reflection in the course of alcohol withdrawal
- Organising self-support groups for women that would enable them to get involved in work on personal development, at the same time would make it possible to shape their self-value, and focusing on facilitating social roles served by them
- Including a family in the process of therapy, making it possible to rebuild relations on the grounds of work based on values of psychologically healthy family
- Creating conditions which would effectively motivate partners of addicted persons to participate in the therapy for co-addicted ones. It is important to precisely present values gained due to approval of such a form as well as a reliable justification of necessity of its application.
- Organisation of free psychological workshops targeted at work on difficult emotions, negative thoughts and fears. Shaping the ability of releasing the tension in a constructive way using relaxation techniques, favouring the right reacting in stressful situations

Alcohol addiction is a disease that is diversified with regard to gender, that is why it is worth taking up research on individual cases to specify theoretically existing differences, because the knowledge of such differences is necessary to introduce changes in the treatment of addiction. Moreover, the generally accepted purpose is not only to maintain the state of abstinence by addicted people or minimize damages, but first of all a personal development is what counts. It gives a possibility to take advantage of an individual's potential to constructively and actively fight off everyday difficulties while improving life in sobriety.

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