Alcohol Use and Roles in an International and National Perspective (AURIN)

1 Summary

The aim of the present proposal is to examine the relevance of social and structural factors to alcohol consumption in Switzerland. An international comparison using data from the GENACIS project will be used to situate Switzerland in relation to other European countries. More fine-grained analyses will be used to describe social roles and stratification, and their influence on alcohol use in Switzerland.

There is an increasing number of studies that explore the impact of social, structural and material factors on health variations, including those relative to alcohol consumption. Often, however, studies have focused on one gender only, and have not taken into account potential gender differences. Traditionally, health variations in men have been studied using a social stratification framework, i.e. using occupational position, formal education, or income as independent variables. For women, a social role framework has been common. With regard to social roles, two contrasting theories predominate the literature on whether holding multiple roles, e.g. being a parent, being employed, and being married, have beneficial or detrimental effects on health: the "multiple role attachment" hypothesis (role accumulation, role enhancement), and the "multiple burden" hypothesis (role strain, role overload). All factors, however, could be influenced by a country's social and cultural values/expectations. For example, a country's particular level of "gender equity" can lead to the perception that a specific combination of female social roles is regarded as stressful or contradictory in one country, but fully acceptable and admired in another. The aim of this research project is to integrate micro- and macro-level associations into a joint analytical framework.

International comparison: Using data from at least 10 countries of the GENACIS project, we propose to investigate the impacts of family roles and social stratification on three indicators of alcohol consumption (abstinence, heavy drinking, and risky single occasion drinking (RSOD)). Gender will be taken into account and the age range is restricted to 25 to 54 years. The statistical analyses will be conducted in two stages: a hierarchical logistic regression calculated for both genders and all countries separately; then the introduction of societal-level variables (such as social welfare and gender equity) in a multi-level framework to explain country differences in associations between social roles/social stratification and alcohol use.

National data: The current proposal will use data from the 3rd Swiss Health Survey (SHS) to allow a more fine-grained analysis for Switzerland. This will be done because the comparability of international data is limited and therefore do not provide more sophisticated associations that involve, for example, the age of children at home, part-time work, household labour, childcare, job satisfaction, and occupational class.

From this project, the research team aims to produce three publications for international peer-reviewed journals.