"I have a drink because I enjoy having a drink." A qualitative study exploring elderly adults' self-reported motivations for drinking alcohol

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ABSTRACT

The elderly population present a complex biological phenomenon derived from an interaction between genetic and environmental factors. Significant life changes can trigger vulnerability in older adults, leading to increased intensification of unhealthy habits, such as alcohol use. To effectively explore drinking among the elderly, the study includes five adults aged over sixty-five to assess, how much, where, when, with whom and why they drink alcohol. A qualitative method includes semi-structured interviews to obtain participants' in-depth motivations and representations of drinking. Four themes were extracted using thematic analysis; contradictions in drinking motivations, gendered perceptions surrounding alcohol, social locations of drinking and events leading to increased drinking. Two subthemes were identified from the drinking events: regular drinking occasions and exceptional life events. The findings suggest that drinking among the elderly comes from a perspective of enjoyment and sociability. Alcohol was not a focal aspect of participants' lives, but provided positive experiences and acted as a coping mechanism during events such as; divorce, retirement and bereavement. It is acknowledged that the study is small and requires additional qualitative research containing a larger elderly sample, including those who are sociable and active, and those who are not, to study the topic further.

KEY WORDS:	ALCOHOL	ELDERLY ADULTS	THEMATIC ANALYSIS	SOCIAL DRINKING	ALCOHOL CULTURES

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Introduction

Since the 1950's, much research has examined individuals' self-reported motivations for drinking alcohol. Though, some adults do not have a clear understanding of the relationship between psychological and social factors that influence their drinking behaviours (Abbey et al., 1993). Furthermore, much alcohol-related research focuses on adult or adolescent consumption, and a lack of studies analyse elderly adults specifically. Yet, Hadwin (2011) highlighted that adults over sixty-five requiring alcohol misuse treatment is estimated to double between 2001 and 2020. The term 'invisible addicts' has recently been applied to elderly adults due to poor screening, lack of research and absence of treatment options (Searby, Maude and McGrath, 2015). Thus, preventing accurate evaluation of elderly adults drinking motivations.

Therefore, research will be discussed to draw links between elderly adults, psychological theories and literature associated with alcohol. As, with the 'baby boom' cohort reaching retirement age, the older adult population will grow swiftly. Firstly though, it is important to acknowledge 'early' and 'late' onset drinkers among older adults (Dar, 2006). 'Early onset' is applied to individuals with lifelong patterns of alcohol misuse, whom begin drinking excessively in their twenties. 'Late onset' drinkers often develop drinking problems at around fifty-years old, generally in response to traumatic life events. The drinkers are essential to note, as they could be evident throughout research and the current study.

Gender Differences

Firstly, there appears to be acceleration in the growth of research indicating gender differences within alcohol consumption. Moos et al. (2009) presented that amongst adults over seventy-five, 1% of women compared to 49% of men consumed more than two drinks per-day. Trevisan (2014) further highlighted that participants' whom reported drinking prior to participation, 50% of men and 39% of women were almost daily drinkers. To aid the explanation that men often drink more than women, alcohol consumption can be mediated by psychological gender identity. For example, if women acquire masculine gender identities, they are more likely to exhibit antisocial behaviours typical of men and internalise stress-related effects. Whereas, men tend to exhibit alcohol-related problems due to stressful circumstances (Cooper et al., 1992).

Similarly, Jose et al. (2000) suggests chronic stressors relate to heavy drinking among men, such as being a victim of crime, financial positions and adverse life events. Whereas women report death of a close relative and divorce increased drinking. Hudetz et al. (2009) further explained that alcohol misuse occurs more commonly for widowed older men, and the loss of spousal care could elucidate the drinking. However, there are various aspects that affect gender differences within alcohol consumption. Valentine et al. (2007) noted social companions as a contextual variable within drinking; men tend to drink more when in groups and 'ordering rounds', whereas women simply focus on socialising. Richman et al. (1995) also stressed the importance of role identity, as men and women identified parental

responsibilities reduced their drinking, due to less money and time. Thus, in the current study it is crucial to gain male and female understandings of alcohol and aspects that impact their drinking, to thoroughly explore gender differences.

An equally significant gender distinction is beverage choice, as differences in age, class and status are conveyed through beverages. ONS (2012) inferred that older men are most likely to drink beers, lagers, ciders and wine, and older women generally drink wine. A prevalent social differentiator surrounding alcohol is gender-based classification of drinks, and many societies distinguish between 'feminine' and 'masculine' drinks. Therefore, beverage choice among participants will be discussed to evaluate whether drinks are constraint to their culture or change due to circumstances, cost and drinking place (Morris, 1998).

Social Influences

Where, why, how and when we consume alcohol is heavily affected by what we learn from others. Research has reported a number of drinking motives; escape problems, enhance sociability and increase power. However, research often focuses on two broad categories of motivation; 'personal effect motives' is drinking for negative reinforcement and escape unpleasant emotions, whereas 'social-effect motives' is drinking for positive reinforcement and sociability. Adams et al. (1990) supports social motives, reinforcing that alcohol brings individuals together in social units as a fundamental anthropological and sociological theme. Alcohol is social cement that binds individuals together and enhances group solidarity. Psychological theories of personality (Eysenk, 1967) sustain that drinking for positive and negative affect are significant motives for consumption, and two motivational systems underlie drinking behaviour. The behavioural activation system controls the experience of positive emotions, and the behavioural inhibition system controls negative emotions. Thus, adults drinking for sociability use their behavioural activation system, and vice versa (Abbey et al., 1993).

Furthermore, Hanson (1992) stressed that heavy drinkers among older men were more likely to live alone, had fewer contact with friends and less participation in social events. Similarly, Irvine et al. (2010) classified individuals as belonging to specific drinking cultures. The results identified twelve-cluster solutions such as 'moderate/high solitary home drinkers', with a mean age of 65.5 years who drink alone at home. The research also examined the role of social identity within drinking patterns, as drinking is commonly a social activity and social membership can influence alcohol use. The research emphasised that most drinking cultures fall into controlled forms, where drinking comes from a perspective of enjoyment and moderation. With this in mind, the current study will explore understandings of in-group drinking behaviour in everyday environments. As, it is essential to consider how social identity is a continuous motivation in participants' drinking.

Drinking for sociability can also be explained by the 'theory of planned behaviour' (Ajzen, 1991). The theory considers the relationship between attitudes towards a topic (alcohol) and the likelihood to engage in such behaviour (drinking). Groups that individuals socialise with' sought to capture the social dynamics of drinking. Similarly, to understand current social influences, it can be suggested that elderly adults drink more than previous generations due to increasing affordability, availability and social acceptability of alcohol.

Moreover, research suggests home-based drinking is increasingly more popular than commercial venues, as Valentine et al. (2007) indicated that 75% of participants regularly drink at home. Yet, there are dedicated environments to drink alcohol, and each culture develops its own drinking-places. The drinking-place represents a separate sphere of existence and discrete social world, to facilitate social interaction and social bonding (Morris, 1998). Thus, participants will discuss whom they tend to socialise with, where and how often, to further evaluate social influences. However, it is imperative to note that although there are positive aspects of drinking within social groups, heavy drinkers who consume alcohol for social reasons are often more prone to problem drinking (Brennan et al., 2009).

Drinking Cultures

Cross-cultural comparisons further illustrate how culturally defined norms surrounding alcohol represent powerful means of drinking behaviours. For example, drinks often define events and the social relationships between drinkers (Thornton, 1987), as in Western societies champagne is synonymous with celebration. Moreover, Gusfield (1987) suggested alcohol 'cues' the transition from work to leisure, signifying recreation and dissolution of hierarchy. Visiting a pub after work, institutionalised as the 'happy hour', or drinking on Friday evenings symbolises time between working and time-out. Drinking enables individuals to provide liminal time, the passing from one form of social organisation to a less regulated form of another. Although the current participants are retired, this may be apparent in situations such as unique occasions or social events.

Drinking cultures are embedded throughout historical, cultural and socio-economic contexts. The dichotomy of 'wet' and 'dry' cultures represents evolution of an incumbent sociocultural tradition. 'Wet' is applied to countries with high per-capita alcohol consumption, often predominantly wine-drinking Mediterranean countries, where drinking is habitually integrated into daily life. 'Dry' indicates countries with low per-capita consumption, and alcohol is not incorporated in day-to-day activities (Lowe et al., 2013). Therefore, cultures that participants' belong to can heavily influence their alcohol consumption, which will be explored through drinking locations, beverage choice and social norms.

Health Aspects

Undoubtedly, the majority of research surrounding elderly adults' drinking, analyses psychological aspects or prevailing health risks. As, alcohol use among elderly adults is associated with poor mental health (Blow et al., 2000) and increased odds of suicide (Sorocco and Ferrell, 2006). Alcohol has also been suggested as a cause for falls, which significantly relates to ill health and mortality among older adults. Conversely though, Baum-Baicker (1985) identified psychosocial benefits from alcohol consumption; stress reduction, mood enhancement, improved cognitive performance and functioning among the elderly. Therefore, it is important not to assume applicability of negative aspects of alcohol, as Veenstra (2006) also highlighted positive expectancies concerning stress-reducing effects of alcohol.

Yet, it remains essential to recognise that ageing includes experiencing losses and lifestyle changes where alcohol consumption may increase. Jose et al. (2002) noted negative life events as a key aspect associated with increased consumption, and Dawson (2005) revealed experiencing over six stressful events accompanied higher daily alcohol use. The lifestyle disruption caused by retirement or bereavement for example, often leads to decreased social activity, which is assumed a contributory factor among elderly adults' drinking. The idea is sustained by social learning models of alcohol use (Abrams and Niaura, 1987), proposing that drinking to cope is a maladaptive outcome when other, more adaptive coping responses are unavailable. Despite this, Perreira and Sloan (2001) inferred that life events decreased alcohol consumption among adult's aged fifty-sixty years. Therefore, it is crucial to explore whether elderly participants have experienced losses or significant events that distort their drinking patterns.

A further point to consider is from a person-environment fit perspective. Alcohol consumption can be anticipated by considering drinking motivations and the extent to which current situations correspond to those motivations. As, if adults drink primarily to ease stress, they are more likely to drink during stressful periods. The notion that adults drink in response to stress was formally proposed by Conger (1956), with the tension reduction hypothesis of alcohol consumption. The theory proposes that alcohol reduces tension, and individuals drink to experience tension relief. Therefore, there is a pressing need to explore participants' drinking motivations, and the extent to which their circumstances fit those motivations (Abbey et al., 1993).

Present Study

The study aims to combine psychological literature and research surrounding alcohol and elderly adults, and notes the constructionist argument that drinking is a consequence of the environment, shaped by cultural and social norms within participants' lives. As research surrounding elderly adults drinking is either absent or quantitative, the purpose is to give elderly adults a voice to discuss their drinking, including aspects such as gender differences, social influences, culture and health risks explored. Thus, the research

questions intend to narrow the purpose of the study and are central to evaluate participants' experiences of drinking:

1. What are elderly adults' motivations and representations of their own drinking?
2. How do participants' perceive the significance of life events in their drinking?

The first question aims to consider where, why, when, how and with whom participants' drink alcohol, to explore where alcohol fits into day-to-day lives. The second explores aspects that alter drinking patterns such as, significant life events or specific occasions. In short, question one evaluates regular drinking patterns, and question two investigates why those patterns may change.

Methods

Philosophy of Methodology

Studying psychology, it is essential to be interested in the way people think, feel and express their views. Therefore, a qualitative method of semi-structured interviews were selected to ensure participants could freely express their in-depth drinking motivations including why, when, where and with whom they drink alcohol. As, interviews allow participants to describe the phenomena in their own way (Humphrey and Lee, 2004). Qualitative research is effective for investigating under-researched fields, or demographics, as sufficient and personal data can be obtained that is often obscured by quantitative methods. This does not mean quantitative studies are inaccurate or wrong, but rather they act as foundations for the topic to be further explored.

The questions were open-ended to guide participants with a topic, and ensure they answer the 'what' questions, linked to positivism and 'why' or 'how' questions associated with constructionism. In regards to the epistemology, the social constructionist view was accepted that reality is constrained by socio-cultural space such as social, gender and cultural aspects explored previously. This includes knowledge of social learning models, social identity theory, person-environment fit and tension reduction hypothesis to aid the researchers' ontological view of alcohol use. As Blaikie (2009) explained, researchers subjective in their ontological assumption that the topic (alcohol use) can be altered through experiences and interactions tend to gather qualitative data. As, interviews include developing rapport with participants, to discuss similarities and contradictions throughout their responses and previous research.

Participants

Participants (Figure 1) included five adults with a mean age of seventy-nine, whom were retired from work and fit for consent. It was crucial to explore

elderly adults' specifically, as Public Health England (2015) highlighted that 44% of alcohol related admissions in 2014 were aged between fifty-five and seventy-five. However, it must be noted that older populations being referred to as 'elderly' can be misleading. As, the age range spans around forty years including adults in their sixties in excellent health, and considerably older adults whom are cognitively and physically less active. Each individual 'ages' at different rates, but physiologic ageing including the 10-15% reduction of body water, underlies age-related impacts of alcohol (Alcohol and Older People, 2000). Since such aspects are difficult to measure, the requirement age to participate was over sixty-five, which is the current retirement age in the UK and confirming the sample is classified 'elderly'.

Baker and Edwards (2012) suggest between six-twelve participants provides adequate data through lengthy conversations, rather than large numbers of participants. However, as the current research is a small-scale undergraduate project, the aim was four-six participants. Crouch and Mckenzie (2006:496) stress although qualitative research provides small samples, it is the 'way in which analytic, inductive, exploratory studies are best done'. Accordingly, five interviews provided sufficient in-depth and intriguing responses for analysis.

Participants were identified and recruited by opportunity sample located at a dancing group for retired adults. The researcher attended the group to introduce the project and explain the study requires males and females whom currently consume alcohol, or have previously during their lives. Those who displayed interest were given an invitation to participate (Appendix 2) and participant information sheet (Appendix 3) to present the aims and what was required of them. Before interviewing, participants were given a consent form to sign (Appendix 4) and to protect participants and ensure anonymity throughout, they were asked to choose a pseudonym of choice for transcription. Each participant was also provided a debrief sheet (Appendix 5) after participation.

Figure 1: Participant Information

Pseudonym	Age	Gender	Marital Status	Housing
David	72	Male	Married	Bungalow
Dorothy	82	Female	Widowed	Retirement home
Lillian	85	Female	Widowed	House
Marlene	78	Female	Divorced	House
Reg	78	Male	Divorced	Bungalow

The details have been noted due to previous research, which highlights aspects such as marital status, gender and retirement can impact alcohol consumption.

Data collection

A semi-structured interview (Appendix 6) was administered to participants, including approximately thirty pre-prepared questions. Certain questions were

not asked if topics were covered throughout conversation, and additional questions were asked if participants could expand with a prompt. Each question was developed following a thorough literature review surrounding elderly adults' alcohol use. With the knowledge of gender differences, health risks, social and cultural aspects surrounding drinking, the interview schedule was refined. Two pilot interviews were administered to elderly adults known to the researcher, to examine if questions were understandable, invasive and gained relevant responses regarding attitudes towards drinking, to ensure authenticity of the project.

One-to-one interviews took place to avoid intimidation, in a quiet room at the dancing location. The Dictaphone was placed on the table, and participants were asked if the interview could be recorded. The interview preamble (Appendix 6) was read and participants were reminded they could withdraw from the interview at any time. All participants were asked the questions in the same order and prompted when necessary, such as, 'why is that?' and 'can you give me an example?'

The interview began with general questions surrounding participants' lives, such as 'how are you today?' and 'tell me about your living situation', then filtered into alcohol related topics and their opinions on research findings. The questions were split into five categories; general drinking, social influences, gender differences, drinking cultures and health aspects. A question relating to gender differences is 'in your opinion, do men and women drink differently?' as this relates to research that men often drink more than women in social and stressful situations (Trevisan, 2014). A question analysing social influences is 'can you describe whom you usually drink with?' as, the theory of planned behaviour (Ajzen, 1991) infers that groups individuals socialise with capture social dynamics about their drinking and the likelihood to engage in increased drinking. Once all topics were covered, participants were asked if anything extra they perceived important, to discuss with the researcher. They were asked if they had any questions, and given the debrief sheet.

Data analysis

The process of thematic analysis was conducted to analyse the data, as it offers a manageable, flexible and theoretical approach to evaluating interviews. Rubin and Rubin (2011) illuminated that it enables researchers to discover concepts and themes embedded throughout interviews. The analysis began by transcribing interviews and re-reading responses to constitute immersion in the data. See Figure 2 for step-by-step analysis process. Participants' responses were typed including pauses, slang and colloquialism, using a basic Jefferson transcription (1983). This was beneficial as it allowed thematic analysis to remain consistent throughout.

Figure 2: Thematic analysis process (Braun and Clarke, 2006).

1. Re-reading the transcripts.
2. Initial codes produced to highlight areas of interest with regards to research questions.

3. Themes considered at a broad level.
4. Themes are refined and categorised using a thematic map.
5. Naming of themes and subthemes.
6. Writing of discussion to explain themes from participants' responses and previous research.

Discovering intriguing aspects within the data developed initials codes, to bring light to research questions. Boyatzis (1998) refers to codes as raw data that can be assessed in a meaningful way regarding the phenomenon'. The codes were analysed using a theoretical approach, which includes seeking categories of interest using existing theories (Braun and Clarke, 2006). Empirical research and theories were essential in creating the interview schedule, but this did not affect the researchers' ontological view of alcohol use, as an inductive approach was also considered. Previous research informed topics for interviewing, but participants' responses were approached without a theoretical coding frame.

The codes were refined into potential themes and named using a 'thematic map' (Appendix 11), to visualise themes and consider how they relate to each other. Each theme was refined at a semantic level, to identify explicit meanings of participants' self-reported drinking motivations. The analytic process involved understanding participants' perceptions, and the researchers' interpretation to highlight patterns and broader meanings. As, it is crucial to take participants' views at face value rather than interpreting basic findings at a quantitative level. In the discussion, each theme includes detailed analyses from interviews and previous research, to categorise a 'story' each theme tells and the broader overall 'story' of elderly adults attitudes towards drinking.

Ethical considerations

Each participant was provided with an information sheet to highlight the research aims and predicted findings, to ensure they wholly understood their role as a participant. A consent form was also provided to guarantee honestly throughout participation, and gaining full informed consent. Participants were aware interviews could be stopped at any point and they could remove their transcripts up to two-weeks after participation, enforcing a fully opportunity to withdraw.

A vital consideration was that the supervisor's number was included on the invitation letter and information sheet, as elderly participants may not have access to emails. Moreover, participants were under no physical harm throughout participation, but as alcohol consumption was discussed, there was a risk of causing distress. This was considered with prompts including 'are you happy to continue?' as, it is crucial to consider that whilst discussing personal experiences, participants must be protected from stress by all appropriate measures. Including the assurance that questions they do not wish to answer, need not be given.

A debrief was given immediately after participation, explaining how to create a unique code if participants' decide to remove their data. Most importantly, links to reliable sources were provided; 'Alcohol use in older people', and services including Drinkaware, NHS alcohol support and Alcoholics Anonymous. Thus, enabling on-going protection for participants if they became distressed during or after participation. Interviews were recorded on a Dictaphone, and deleted once transcribed. The transcripts remain on a password locked computer and will be deleted once submitted, and interviews remained anonymous as each participant has a pseudonym. Finally, the project was carried out in accordance with BPS ethical guidelines and those set by Manchester Metropolitan Psychology department, to ensure research integrity throughout (Appendix 1).

Discussion

The following themes demonstrate that drinking amongst participants' falls into ordinary and controlled forms, contrasting current presentations of UK drinking cultures which either glamorise drinking or highlight alcohol misuse. The four themes identified were; contradictions in drinking motivations, gendered perceptions surrounding alcohol, social locations of drinking and events leading to increased drinking. The themes take a critical realist approach, as the orientation of drinking motivations are explored, whilst recognising that participants are subjective in their knowledge production.

Contradictions in Drinking Motivations

Participants' discussions surrounding motivations to drink and events that occur whilst drinking mostly came from a perspective of moderation and enjoyment. As, four participants revealed their satisfaction of drinking, predominantly during the start of the interview.

> Dorothy: **"**…it's helped me to a certain extent because it gets you talking to people… It gives you a bit of confidence really" (90-91)

> Marlene: **"**I have a drink because I enjoy having a drink." (135-136)

This echoes previous literature, as Babor et al. (2010) highlights that whilst alcohol is often portrayed negatively in terms of health, aspects associated with alcohol are mostly positive. With that said though, participants would quickly contradict their point and clarify they did not drink excessively. This potentially could be due to social desirability, as participants may have thought the researcher would deem their behaviour unacceptable or problem drinking, perhaps. However, it was clear that interviews specifically explored drinking motivations, and participants' would not be judged.

> Reg: **"**I'm not a big drinker but I do like a drink. I only drink really when I watch the football." (32-33)

Contrasting experiences or opinions can co-exist within a theme, as it demonstrates how individuals perceive common experiences differently (Rubin and Rubin, 2011). Thus, it is interesting that contrasting statements appeared within the same interviews. Four participants reported drinking every weekend, yet they would reiterate, "I only drink if I go out…" (Lillian, 18) or "I'm not a serious drinker" (Dorothy, 29). Reg stated drinking one bottle of wine weekly, contradicting his initial comment of only drinking during football matches. Therefore, although participants drinking motivations are mostly positive, representations of their own drinking are slightly unclear. This could infer that participants drink more than they initially contemplate, or more than they are willing to disclose.

Gendered Perceptions Surrounding Alcohol

Gender was a crucial factor for participants to understand drinking patterns. Although gender differences were explored previously in terms of beverage and amount of consumption, it was participants' understandings of the opposite gender's drinking that emerged naturally.

> Marlene: "…I think men drink more than women. I think they've got the capacity to drink more volumes, they are physically bigger aren't they… they can drink pints and pints and still drink all night." (83-85)

Interestingly, research supports that men are able to 'handle' excessive alcohol consumption because they have higher concentration of dehydrogenase, an enzyme that breaks alcohol down (Health Status, 2015). Nonetheless, all participants agreed the gap between male and female consumption is narrowing.

> Dorothy: **"**…women are drinking as much as men nowadays. I came on the metro from Altrincham and you'll get groups of women on there and they've got wine in a bottle. Drinking out the bottle… and they're absolutely sozzled. You wouldn't see us elderly people drinking like that." (105-109)

Dorothy displays her epistemological knowledge, as she has gained the perception that women drink as much as men from her day-to-day experiences. Similarly, Marlene and Lillian exhibited their view that men are more inclined to drink when stressed, possibly from their understandings of their own drinking compared with their experience of men's drinking.

> Lillian: "Men don't take stress very well… A man straight away would turn to alcohol but women wouldn't." (74-81)

This can be supported by psychological gender identity, which infers that men may be more likely to drink alcohol because of stressful circumstances (Cooper et al., 1992). Although the extract is simply a female perception, it has derived from lived experiences of how men act in response to stress.

Furthermore, the most intriguing gendered perception involves participants' distinctions between gender-based classifications of drinks, which can be seen as a crucial social differentiator of alcohol.

> Marlene: "…Men drink more beers and lagers. Women
> drink more spirits." (78-79)

ONS (2012) supports this, highlighting that older men most likely drink beers, lagers, and ciders. The distinction between beverages is interesting because participants distinguish between 'masculine' (beer, larger) and 'feminine' (wine, spirits) beverages. However, when directly asked their most common beverage, participants' earlier opinions (and empirical research) were contrasted. Male participants reported drinking wine, sprits and beer, and females chose gin, beer and lager.

> Dorothy: **"**I had a lager, but I had a strong one. If I'm
> having a lager or a drink… I prefer to have a strong one,
> but there's not much difference really. I just prefer the
> taste." (40-42)

Thus, in light of participants' representations of their own drinking, their gendered-views surfaced in terms of amount of consumption and beverages. Interestingly, participants' beverage choice strongly contrast gender-based classification of drinks, and display quite the opposite.

Social Locations of Drinking

The social location refers to where and with whom participants consume alcohol. Participants mainly discussed drinking in the comfort of their own home.

> Reg: "…I just drink on my own" (54)

> David: "…We don't go out much anymore so we just drink
> together at home" (56-57)

Home-based drinking is increasingly more popular than use of commercial venues, as Valentine et al. (2007) reported that 75% of participants regularly drank at home. However, in terms of when participants had strong motivations to drink, was in the company of others. This supports the person-environment fit perspective, as alcohol consumption is best predicted when considering motives to drink and the extent to which their situation corresponds to drinking motivations (Sadava, 1987). As, if participants frequently drink in social situations, they are most likely to drink during sociable occasions.

> Dorothy: **"**I only drink when I go out socially really…
> because everyone else is drinking. I enjoy it… I wouldn't
> have wine on my own at home (.) it just isn't the same is
> it? You want somebody to have a drink with you" (32-36)

Participants highlight drinking for positive reinforcement and 'social-effect motives', which is drinking to be sociable and convivial (Mulford and Miller, 1960). Moreover, where there is alcohol, there is usually a specific environment to drink it. Many cultures have designated environments for public drinking, to facilitate social interaction and social bonding. The common social location discussed among participants was pubs, including social norms and the change in social dynamics.

> Reg: **"**I don't go to pubs now because they're not like they used to be" (54-55)

> Marlene: "…When I was younger, women didn't go out drinking at pubs. It was men that went to the pubs, women would only go to the pubs with men… I think women can go anywhere they want now... It just wasn't heard of that women went to the pubs on their own." (99-107)

Reg explained that pubs are "full of young ones" (55). Therefore, participants suggest pub dynamics are a product of current context and culture, and have altered as participants' age. However, there is brief support of Marlene's account, as drunkenness among women is still viewed more negatively than men (Valentine et al., 2007). However, social situations are partial to time and individuals' perceptions and social norms surrounding drinking will continuously evolve.

Events Leading to Increased Drinking

A reoccurring theme throughout interviewing was the distinction between regular drinking occasions and significant life events, which are split into two subthemes.

Regular Drinking Occasions

Three participants explained their consumption increases at the weekend, and although they are retired, weekend often cues the transition from work to leisure (Gusfield, 1987). As, participants symbolised the weekend as time to relax, similar to how they may have during their working years.

> David: "…I drink more at the weekends than I used too… It started off on a Friday night then on a Saturday night and then on a Sunday night." (107-108)

> Marlene: "…At the weekend I just feel like one with a meal" (21-22)

Drinking enables participants to provide liminal time, a way of passing from one social organisation to a less regulated form of another. This is supported by larger scale surveys, as Irvine et al. (2010) highlighted 70% of participants drank most during the weekend. Furthermore, another drinking occasion was Christmas.

Dorothy: **"**… it was just a one off really because it's Christmas" (46)

It is crucial to note that interviews took place in December, and may have influenced responses. As, if interviews occurred during summer then participants may have reported increased drinking due to hot weather, perhaps. Furthermore, participants considered increased drinking in terms of affordability and availability.

Marlene: **"**I didn't have money when I was younger so I didn't drink really… I drink more now" (146-149)

Dorothy: "…I'm encouraged to drink more now because of things like all inclusive and cheap drinks… I can just drink more. I can over indulge." (154-156)

This could be due to the generation that had their formative years during increasing social acceptability of alcohol. As, it is evident that regular drinking occasions within current contexts and culture can increase drinking among the elderly, and potentially provide justification for increased consumption.

Exceptional Life Events

Research suggests negative life changes are associated with increased alcohol use (Tamers et al., 2014). However, as Perreira and Sloan (2001) highlighted life events decreased consumption among older adults, it was necessary to explore how participants perceive the significance of life events in drinking.

Reg: **"**I was really drinking big style. I was going to the pub at 5:30 after I finished work, and staggering out at closing time. I was just going through a bad time you know? I wanted to try and forget about my problems so I didn't have to deal with them. I just used to drown my sorrows basically." (46-50)

Romelsjo et al. (1991) also noted increased consumption among divorced adults. Therefore, personal effect motives can be acknowledged from Reg's extract, as he reports drinking to escape unpleasant emotions. This can also relate to participants' thoughts towards retirement.

Marlene: "I think we all wonder how we are going to cope with it… Are we going to be bored? … Are we going to be ill? …It makes us severely stressed (.) So of course we are going to have a drink!" (119-122)

David: "…When I was working and came home at the weekend I would want to relax and have a drink, so we would get a bottle of wine… but now I'm retired I still do it." (90-93)

Wadd et al. (2011) illuminated that significant events associated with alcohol use are bereavement and loss of occupation. The sudden disruption in lifestyle leads to decreased social activities, which evidently contributes to participants' drinking.

> Dorothy: **"**… when my husband passed it made me depressed really… and when I was drinking wine I didn't really think about how upset I was" (84-85)

As explored previously, 'late onset drinkers' are those who develop drinking problems in response to traumatic life events, such as bereavement, loneliness and retirement (Dar, 2006). This could potentially be acknowledged through Dorothy's account and Reg's understandings of loneliness:

> Reg: "…Years ago you had neighbours. You could open your door and talk to everyone around you. Now everyone seems to be on their own, so we have a little drink and then it gets worse and worse. The loneliness leads to drinking, definitely." (128-132)

Reg reflects on his own experiences, he is aware that for himself and many others, loneliness can increase alcohol consumption. Immonen, Valvanne and Pitakala (2011) support this, as participants' reported drinking due to 'meaningless life' and 'relieving loneliness'. Drinking as a result of loneliness or stress relates to participants' behavioural inhibition system, which is drinking to cope with negative experiences.

> David: "…Before I retired I was the one making money… stressed about work and providing for my family… so of course I am going to drink more… When the wife is nagging all the time, I need a drink." (74-77)

Participants' lacking effective coping responses is sustained by the social learning models of alcohol, which infer alcohol serves as a coping mechanism (Abrams and Niaura, 1987). Similarly, Conger's (1956) tension reduction hypothesis of alcohol emphasises that individuals drink to relieve tension. The theme highlights that in many cultures, ritualisation of transitions is not restricted to life-cycle changes of birth, marriage and death, but less portentous life events. Participants perceive the significance of adverse events and the need to invest 'lifestyle' transitions with wider social meaning by drinking, which seems a universal feature of human cultures (Morris, 1998). As, alcohol was consumed as a coping mechanism for participants.

Overall, the first three themes focus on the first research question, emphasising that drinking comes from a perspective of enjoyment and sociability. Alcohol did not seem a focal aspect of participants' lives, but drinking with friends and spouses played an undeniable role in providing positive experiences and representations of drinking. This can be supported by Baum-Baicker (1985) who stressed psychosocial benefits from alcohol

consumption among the elderly. The fourth theme applies to the second research question. Although participants' support empirical research regarding increased drinking due to adverse events, their perception of alcohol remained optimistic. As, whilst discussing drinking to 'cope', participants still emphasised the significance of alcohol, accentuating how it helped them through negative experiences. In terms of this leading to problem drinking, participants clarified that increased drinking was for a period of time; "…I realised after so many years that it was no good so I stopped" (Reg, 51).

Limitations

Although interviews provided participants' understandings of drinking to develop quantitative studies further, they discussed their own ontology and experiences. Therefore, responses are undeniably authentic but cannot be generalised to all elderly adults. Yet, interviews with Western elderly participants' remain insightful and can be noted as foundation for future research, as each theme represents common perceptions throughout all responses.

It is also imperative to note that participants' actively exercise and socialise. Hanson (1992) highlighted that elderly heavy drinkers have less contact with friends and participation in social events. Thus, current participants may be more inclined to socialise instead of drinking alone. This could clarify the positive response to alcohol, which may differ with a more-representative sample. Nonetheless, the dancing group was a necessary means of gaining elderly participants whom were retired and fit for consent.

Conclusion

The study provides an in-depth insight into elderly adults' motivations and representations of drinking. The themes also support traditional UK 'dry' drinking cultures in regards to time (weekends, special occasions) and negative influences of consumption (drinking to cope). An interesting finding though, the themes hint at shifts in the wet and dry dichotomy (drinking during mealtimes), suggesting homogenisation of international drinking cultures by incorporating alcohol into everyday themes (Gordon, Heim, and MacAskill, 2012).

Overall, participants' understandings and experiences of alcohol are predominantly optimistic, unless drinking to 'cope' with significant life changes. The role of alcohol within participants' lives is to provide enjoyment and enhance social bonding, however as discussed, this may be due to the sociable sample. Similarly, participants do not seem to represent 'invisible addicts', as research suggests. Though, the themes are situated within the current context, and social norms, drinking cultures and elderly perceptions will continue to adapt and evolve. Therefore, international samples and larger qualitative studies would allow greater investigation of the variation of drinking patterns among the elderly, including both 'sociable' and 'unsociable' participants.

Reflexivity

I took part in an internship as a research assistant throughout the summer, surrounding elderly adults whom had treatment for alcohol misuse. This sparked a keen interest to explore the topic further. As, research suggests elderly adults underreport alcohol consumption, making the subject somewhat unclear (Naik and Jones, 1998). Therefore, it was crucial to provide elderly adults a voice through qualitative methods.

As I have close relationships with my grandparents, I felt comfortable and confident building rapport with participants. However, as an independent researcher my personal relationships may have affected responses. My grandmother attends the dancing group, which may have caused participants' reluctance in discussing certain experiences. However, this was also advantageous because I established connections with participants prior to interviewing, allowing them to discuss their true thoughts surrounding alcohol. It was crucial to allow participants to feel comfortable, so I could focus on how their meaningful views were presented to me. As, not all individuals can accurately reflect on their experiences.

One methodological issue to arise though; two interviews took place at participants own homes, as the dancing location closed for Christmas. Although this was unplanned and could be deemed unprofessional, I believe it helped participants feel relaxed. Overall, the study was a positive experience for me, and I now volunteer at the group every week. I also hope the research sheds light on the idea that not all elderly adults should be characterised as a 'silent' epidemic'.

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