

**An exploration of the social and cultural
functions of drinking alcohol within the home for
professional middle-aged women: implications
for public health**

A thesis submitted in accordance with the requirements of
the
University of Chester
for the degree of
Doctor of Public Health

By

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Declaration

The material presented for examination is my own work and has not been submitted for an award of this or another HEI except in minor particulars, which are explicitly noted in the body of the thesis. Where research pertaining to the thesis was undertaken collaboratively, the nature and extent of my individual contributions have been made explicit.

Signed

A handwritten signature in black ink, appearing to read "William", is written over a yellow rectangular background.

Dated: 3rd October 2022

Abstract

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Title of the thesis: An exploration of the social and cultural functions of drinking alcohol within the home for professional middle-aged women: implications for public health

Evidence suggests that middle-aged women in the UK are drinking more alcohol today than in previous generations, particularly those in professional roles. Similarly, the place of drinking is changing, too, with recent data suggesting that women within this age group are drinking more at home. From a public health perspective, liver disease is now the second leading cause of death in working-age people, and 5%-11% of breast cancer diagnoses in women are attributed to alcohol consumption. Research which seeks to understand why women within this demographic are drinking more at home remains limited. Alcohol research has, to date, focused primarily on younger people.

The qualitative study, situated within the interpretivist paradigm, sought to understand whether social and cultural changes have impacted middle-aged professional women's consumption of alcohol in the home. Unstructured interviews were undertaken with ten middle-aged professional women. Interviews were recorded, transcribed, and analysed using thematic narrative analysis. Bourdieu's theory of practice was used as a conceptual framework, and narratives further analysed through a Bourdieusian lens.

Findings indicate that alcohol is used as a means of relaxation, reward, and coping with pressure and stress, particularly for those with caring roles across ascendant and descendant generations. Increased availability, accessibility, and reduced cost have resulted in alcohol being part of the weekly supermarket shop. A positive portrayal of alcohol through both television and social media was found to increase consumption. Scepticism was displayed towards the government's low-risk drinking guidelines. Furthermore, a lack of concern was noted regarding the potential detrimental impacts of alcohol consumption on health.

Viewed through a Bourdieusian lens, findings indicate that habitus became a structure that generated dispositions toward an expectation of drinking at home and a normalisation of that behaviour for the women. Accumulation of capital enabled the women to become "connoisseurs" within the social field of home drinking, differentiating their taste in what they viewed as socially acceptable alcohol consumption, notably wine. Within the field of home drinking, women who consumed alcohol felt at ease as they were conforming to the game's rules—conversely, those who tried to reduce their drinking experienced feelings of unease.

This research provides new insights into middle-age professional women who drink alcohol at home. Findings suggest that social and cultural changes have contributed to increased drinking at home for this population cohort. Recommendations for further research opportunities are made, and implications for public health policy and practice discussed. Highlighted is the need for future partnership approaches to tackle this increasing public health concern.

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CHAPTER 1 – INTRODUCTION AND BACKGROUND

This chapter opens with the rationale for the focus of this study, including my motivations for undertaking this particular area of research. The background, including the impact of COVID-19, is also presented and discussed. The chapter starts by presenting an overview of social and cultural changes in relation to the drinking culture within the UK, with a particular focus on England. Concluding with a reflection on alcohol from a public health perspective, considered from an epidemiological and policy stance, ending with a discussion in relation to public health practice. In this thesis, alcohol use/drinking refers to any consumption of alcohol.

1.1 Motivation for and focus of this study

Research is initiated by someone, a real person, who, in the context of their individual lived experience, sets out to make sense of a certain aspect of life which has a particular interest for them. (McCormack, 2001, p.xvi)

I chose to focus this research on professional middle-aged women who drink alcohol at home due to the findings from the dissertation I completed in partial fulfilment of my Master of Public Health (MPH) (Cowan-Williams, 2012). My qualitative research study focused on older women's experiences of drinking throughout their lifetime. The findings highlighted that many women chose to consume alcohol at home; public health advice was met with derision, and others had problems with alcohol consumption, not they. One of the women made a comment that intrigued me:

Well in the circles I am in, it is part of the social fabric. It's like having a cup of tea, and everywhere you go, would you like a drink? Have a glass of wine.

The statement suggested that drinking alcohol had become embedded within her life. I wanted to delve deeper, to explore the women's stories further. The dissertation word count, however, constrained me. Despite telling my family and friends that I would never do any further studying, the pull of academia was too strong. No sooner had I submitted my dissertation than I was applying to register for the Professional Doctorate programme. I was drawn to the Professional Doctorate as I wanted to use the academic knowledge and skills gained to inform and develop my professional practice as a senior manager in public health. Furthermore, I hoped I might be able to utilise my research findings to influence public health policy and practice at both a local and national level.

My move into public health was unplanned; qualifying as an Occupational Therapist (OT) in 1982, my career change happened gradually. Working as an OT in local government for 20 years, I developed a particular interest in partnership working, principally between local government and the National Health Service (NHS). In 2003, the Health, Social Care and Well-being Strategies (Wales) came into force (National Assembly for Wales, 2003). The legislation was born out of the review of Health and Social Care undertaken by Sir Derek Wanless (Welsh Assembly Government, 2003). Wanless advocated the need for the focus to move from acute care to prevention, arguing that without this, the ever-increasing demands placed upon the health and social care system would become unsustainable (Welsh Assembly Government, 2003). This commitment to prevention was a turning point for me professionally; I felt I could use my partnership skills and knowledge as an OT to collaborate with partners across health, social care, and the Third sector to advocate for upstream prevention. In 2003, I was appointed as a Health, Social Care and Well-being (HSCWB) Strategy Manager for a local authority in North Wales.

I completed my MPH in 2012 and commenced my Doctoral studies at a North Wales University the same year. Although I had worked closely with public

health colleagues and managed a health improvement team in 2015, my MPH enabled me to obtain my current role. I work as a senior manager in a local authority public health team in the North West of England. In the same year, I gained approval to transfer my doctoral studies to the University of Chester for personal and professional reasons. My doctoral journey has not been straightforward, and I have faced many challenges along the way. However, despite my many adversities, my passion and determination to complete my studies remain.

In 2015, Public Health Wales undertook a segmentation study focussing on the alcohol-related behaviours of specific population groups (Emmerson, 2015). The study identified a population segment entitled *Sauvignon Superwomen*, described as:

professional middle-aged women who are in a sustained phase of their career with children growing up and leaving home and, in whose life, alcohol may play a substantial role. Representing a social phenomenon that has emerged for the first time within this generational cohort (Emmerson, 2015, p.25).

This definition, coupled with my desire to build on my previous study, led me to the decision to focus this qualitative research study on professional middle-aged women who drink alcohol at home. Thinking back to the woman's comment that alcohol had become "part of the social fabric", I also wanted to try and understand whether social and cultural functions impact upon women's alcohol consumption within the home.

1.2 Background

1.2.1 Historical focus

Alcohol has played a vital part in "virtually all human cultures since the beginning of Neolithic times (about 4000 BC)" (Social Issues Research Centre (SIRC), 1998, p.6). The earliest records suggest that drinking alcohol was

viewed as a social activity, its consumption the focus of self-imposed social controls at both an individual and societal level (SIRC, 1998). As Hands (2018) describes, “alcohol is and was a legal intoxicant that derives its usage and meaning from the social and cultural context in which it is consumed” (Hands, 2018, p.2). Societies and cultures, however, differ in relation to the cultural positioning of alcohol and its use. In Islamic cultures, for example, the consumption of alcohol is forbidden (Room, 2013).

Drinking cultures and accepted norms can also change. Focusing on the UK, from the eighteenth century onwards, a change was seen in terms of a societal response to drinking. The early eighteenth century saw the advent of the “Gin Craze” – in the early 1720s, there was sufficient gin available for each inhabitant of London to receive a pint of gin a week (Berridge et al., 2007, p.9). The illustrations by William Hogarth of *Gin Lane* and *Beer Street* were published in 1751 in response (see Berridge et al., 2007, and references therein). They depicted the differences between gin, regarded as “mother’s ruin”, where women were seen as failing in their maternal duties, as opposed to beer, viewed as “healthful and strengthening” (Berridge et al., 2007, p.9). The *Gin Lane* illustration has continued to be used to represent the harm to health of alcohol; however, the argument is made that Hogarth’s negative portrayal was focused more on alcohol consumption by the poor, not in the middle or upper classes (Berridge et al., 2007, p.13) – this suggests perhaps, a different social and cultural acceptance of alcohol consumption. Infant mortality was also ascribed to gin consumption, a fact disputed by Clark, who asserts that the “endemic levels of typhoid and smallpox” were more likely to be the causal factors (Clark, 1988, p.72).

During the Victorian and Edwardian periods, people drank alcohol on health grounds, tonic wine was advertised for its positive health benefits, and doctors prescribed alcohol for various physiological and psychological illnesses (Hands, 2018). Whilst prescribing alcohol on health grounds would no longer be condoned, alcohol is still deeply ingrained within Western

society, widely viewed as a fundamental component of socialisation and a significant contributor to the economy (Melia et al., 2021).

1.2.2 Cultural focus

Holding a social and symbolic role in many people's lives (Nicholls & Conroy, 2021, p.3), alcohol is viewed by some as a sign of fellowship or a sacrament (Room, 2013). Room describes the consumption of alcohol as "inescapably a personal behaviour, but the behaviour is influenced at multiple levels by social context, culture and society" (Room, 2013, p.45). This statement by Room highlights the impact of both society and culture on the individual's choice to drink. The positive role of alcohol is juxtaposed with that of it being an addictive and harmful product. As such, "self-control is particularly valorised as a cultural ideal when it comes to food and alcohol consumption" (Lindsay, 2010, p.481).

It is widely acknowledged that research occurs within a particular temporal context (Miles & Huberman, 1994). Outside of that specific period, social, cultural, and political changes naturally ensue, which, in turn, can lead to changes in perceptions and attitudes. At the advent of my research journey, the media discourse depicted a UK drinking culture that regularly featured images of people drinking to excess at home or abroad, resulting in globally recognised images of so-called "Binge Britain" (Plant & Plant, 2006; World Health Organization (WHO), 2014). As a 2008 headline in the Express Newspaper reports, "Binge Britain has gone down the tubes" (Willey, 2008, headline). Binge drinking is defined as "drinking heavily over a short period of time" (NHS, 2022_a). Consuming more than 8 units of alcohol in a single session for males, or more than 6 units in a single session for females, is the technical definition (ONS, 2018). Researchers also examined these assertions and reported that the alcohol consumption represented by this negative and stigmatising discourse typically focused on young people (Emslie et al., 2012; Holley-Moore & Beach, 2016; Plant et al., 2009). This

assertion again was borne out by the media, “Young binge drinkers plaguing the streets are plunging Britain into a dangerously escalating public health crisis” (Willey, 2008, first sentence). An assertion further evidenced by the continued policy focus on this population cohort (Emslie et al., 2012; Holley-Moore & Beach, 2016; Plant et al., 2009). Alcohol consumption was thus depicted by the media and research as one of public drinking on licensed premises, especially by young people (Callinan & MacLean, 2020).

Conversely, little emphasis was placed on alcohol consumption in older age (Gell et al., 2015). During the same period, research on women and alcohol focused predominately on adolescent girls and young women (Lyons et al., 2014). Similarly, a paucity of alcohol research within high socio-economic groups was also highlighted (Ling et al., 2012). Foster and Ferguson (2012) described the increasing trend in home drinking in adults, emphasising the importance of understanding why people were choosing to drink at home.

This discourse, however, is changing; recent evidence suggests that young people in England are drinking less (Ng Fat et al., 2018; Oldham et al., 2019; Rao & Roche, 2017). Over the past decade, a consistent pattern of decreasing participation in drinking, reducing consumption levels and more negative attitudes towards alcohol has been reported in young people (Bhattacharya, 2016; Fuller et al., 2015; Livingston et al., 2016). A notable change is also seen in the media discourse, now describing young people as “the new puritans” and “generation sensible” (BBC News, 2018; Grubb & Bradley, 2014; Richardson, 2018). Contrary to this decrease in young people’s drinking has been the rise in drinking in older adults, and the increased number of women drinking in later life is also noted (Rao & Roche, 2017). Historically, it is argued that alcohol consumption and related harms have been more prevalent in men than women (Slade et al., 2016). Over recent decades, the convergence of consumption levels between men and women suggests that societal and cultural influences may be more important in understanding why women may be drinking more (Fitzgerald

et al., 2016). This narrowing gender gap in relation to alcohol use may, in part, be explained by the changing roles and status of women within the workplace, home and society and the increasing affordability and accessibility of alcohol (Atkinson et al., 2019); this is considered in more detail within Section 1.3.

In societies such as the UK, where alcohol is consumed, there are recommendations and views on what constitutes safe consumption levels. Reducing alcohol consumption remains a critical public health priority (Clay & Parker, 2020), both in terms of prevention and reducing the harm caused to the individual, their family and broader society. Whilst in recent decades, falls in consumption within licensed premises in the UK have been seen, this is in contrast with sharply increasing levels in home drinking (Foster & Canfield, 2017). My initial literature search at the outset of this study found limited research explicitly focusing on home drinking. “The relative silence about home drinking in public debate is reproduced in academia where comparatively little is written about it” (Jayne et al., 2011, p.44). Calls to undertake research into drinking in the home continue to be made: “while there is a wealth of drinking outside of the home, we know very little about the social practice of drinking in the home” (Callinan & MacLean, 2020, p.613).

This thesis has been written in part as the fulfilment of a Professional Doctorate over four years, the latter two falling within the COVID-19 pandemic. Whilst participant interviews took place in 2018 ahead of the pandemic in 2020, any impact this may have had on those involved has not been captured in this study. However, the pandemic has resulted in a heightened interest within the research community in what Nicholls and Conroy (2021) describe as the “hitherto neglected phenomenon of home drinking” (p.1). Similarly, Callinan and MacLean (2020) call for an increase in research concerning home drinking, maintaining that the “urgency for doing

this has never been greater” (p.614). This study, with its sole focus on home drinking, is, I would assert, most timeous as a response to these calls.

1.3 Changes within the culture of drinking – an overview

Whilst little literature exists concerning middle-aged professional women who drink alcohol at home, the importance of providing an overview of the social and cultural changes in alcohol consumption, notably wine, is recognised. This is herein presented, encompassing the period from the 1950s to the present day. The 1950s were chosen to recognise the changes that ensued from that period as the UK moved out of austerity after the end of the Second World War in 1945.

Consumption of alcohol in the UK has been regarded as an integral part of modern culture (British Medical Association (BMA), 2008; Yeomans, 2014), with reports suggesting excess consumption of alcohol has become “ingrained” in many people’s lives (Alcohol Change UK, 2010; Public Health Wales (PHW), 2014). Social and cultural changes in drinking culture were seen in Britain in the twentieth century following the move out of austerity in the 1950s. Improved living standards functioned as the economic catalyst for the ensuing transformation in spending and leisure habits (Burnett, 1999). The subsequent advent of package holidays to destinations outside the UK saw an increase in Mediterranean cooking in domestic environments and eating out in restaurants where wine was considered a natural accompaniment (Burnett, 1999). However, in 1970, the majority of alcohol consumed was beer, drunk in the pub, as wine was expensive and not generally available (Alcohol Change UK, 2022).

Wine commercialisation is considered one of the “most significant changes in British drinking culture in the twentieth century” (Welch & Tominc, 2021, p.652). What was once considered an “elite product” (Ritchie, 2007, p.534) and a drink of the wealthy, wine became more widely available to the

general population through supermarkets and off-licences (Nicholls, 2011; Ritchie, 2011; Ritchie, 2007; Welch & Tominc, 2021). During the economic recession from 1973 to 1975, many British multinationals sought out new markets by expanding into multiple retail chains where alcohol became available at lower prices. By the mid-1970s, half of Britain's supermarkets had licences to sell alcohol (Burnett, 1999). The nature of alcohol availability had thus altered, with a notable shift from on-trade (consumption of alcohol in licenced premises such as bars, restaurants, and hotels) to off-trade (such as the sale of alcohol within supermarkets).

By making alcohol available in supermarkets, an environment viewed more for women than for men; it was thought that women's access to alcohol would increase (Ettorre, 1997). Women were then increasingly targeted by both the alcohol industry and retailers, with products specifically designed and marketed for women (Ettorre, 1997). Changes in social attitudes towards wine were seen in its increasing popularity amongst women and the move towards drinking wine without food (Howland, 2013; Ritchie, 2011). Lifestyle advice was proffered by the media, for example, the Sunday Times offering their readers information on wine choices and food pairings (Welch & Tominc, 2021). Television too depicted women drinking, the British sitcom *Absolutely Fabulous* (Ab Fab) being a notable example (Pallardy, 2022). The programme, first aired in 1992, featured two high-powered career women who drank heavily, often within the home – their behaviour reinforcing the negative stereotype of women drinking.

The beginning of the twenty-first century saw several crucial legislative changes, such as the Licencing Act (2003) and Smoke-Free Regulations (2006). These brought social and cultural changes to drinking environments in the form of a broader choice of drinking locations; notably, if the venue were indoors, it would be smoke-free. The advent of social media brought additional opportunities for both increased, often targeted, alcohol marketing and the ability to share positive images of having a "good time"

with alcohol (Atkinson et al., 2019). The cultural phenomenon known as *wine o'clock* came to the fore, its popularity resulting in its inclusion in 2015 within the Oxford English Dictionary. Defined as “an appropriate time of day for starting to drink wine” (Oxford English Dictionary, 2022), the ensuing media response to its inclusion can be considered as furthering its social acceptability.

1.4 Why is alcohol important to public health policy and practice?

The Faculty of Public Health (FPH) defines public health as “the science and art of promoting and protecting health and wellbeing, preventing ill health and prolonging life through the organised efforts of society” (FPH, 2019, p.3).

The very existence of alcohol policy, Room (1999) contends, is indicative that alcohol consumption is being “problematized” in some way (p.10), and this “problem requires fixing” (Bacchi, 2015, p.132). Thus, alcohol policies and control measures may be considered as being put in place to “try and change problematic drinking behaviour” (d’Abbs, 2015, p.118). However, such policies and control measures have received criticism, viewed by some as paternalistic violations of individual freedom in lifestyle and consumption choices (Sulkunen & Warpenius, 2000).

The discipline of epidemiology is considered by many as the foundation of public health and is defined as the study of the “distribution and determinants” of diseases or risk factors (Last, 2001, p.61). Epidemiology has, over recent decades, played a significant role in influencing public health policy (Wemrell et al., 2016). The following section provides an epidemiological overview of the impact of alcohol consumption on population health, with a specific focus on women.

From a global public health perspective, the harmful misuse of alcohol is reportedly estimated to have resulted in 3 million deaths worldwide in 2018, representing 5.3% of all deaths (WHO, 2022). It is widely accepted that excess alcohol consumption is a major preventable cause of premature mortality, particularly in those of working age (Ventura-Cots et al., 2019; WHO, 2022). In 2016, excess alcohol consumption accounted for an estimated 7% of male and 2% of female deaths worldwide within this age group (Griswold et al., 2018). In health terms, alcohol is a causal factor in more than 200 disease and injury conditions, particularly alcohol dependence, liver cirrhosis, cancers, and injuries (WHO, 2014). Alcohol consumption is a leading risk for disease burden, with the risk for all-cause mortality increasing with increased levels of consumption (Griswold et al., 2018).

In the UK, standardised mortality rates for liver disease have increased by 400% since the 1970s; in people under 65, these rates have risen almost five times (Public Health England (PHE), 2016_a). Between 2001 and 2019, liver mortality rates in England increased by 43%, and liver disease is now the second leading cause of premature death in working-age people (PHE, 2021, p.5). In 2020, the rate of liver disease and liver cancer deaths in people under 75 reached a rate of 20.6 per 100,000, accounting for 2.5% of deaths (Office for Health Improvement and Disparities (OHID), 2022_a), and almost half were in people aged 15-64 (Office for National Statistics (ONS), 2022). Findings suggest that the COVID-19 pandemic may have contributed further to these increasing rates (PHE, 2021).

From a women's health perspective, estimates suggest that alcohol use is accountable for 5%-11% of breast cancer diagnoses across all age groups (Sinclair et al., 2019). Consuming alcohol daily without a meal is associated with more than doubling cirrhosis incidence in middle-aged women (Simpson et al., 2019, p.41).

Evidence suggests that in the UK, women born between 1945-1965, are drinking more alcohol today than they have in any other generation, particularly those in professional and managerial roles (ONS, 2018). In 2019, it was estimated that in England, 53% of men and 62% of women aged 16 years and over consumed up to 14 units of alcohol in one week (Stewart, 2020). In 2015, the Organisation for Economic Co-operation and Development (OECD) put educated British women at the top of the global league table of hazardous drinking (Sassi, 2015, p.67). Hazardous drinking is defined by the National Institute for Health and Care Excellence as a “pattern of consumption that increases someone’s risk of harm” (NICE, 2010, p.49). This increase, it is argued, is partly due to the increased availability and acceptability of alcohol within today’s society (ONS, 2017; Rao & Roche, 2017; Wu & Blazer, 2014). Results from the 2017 *Adult Drinking Habits in Great Britain Survey* highlight that people working in both professional and managerial roles were, alongside those high-income earners, more likely to report that they drank alcohol in the past week (ONS, 2018). Within the survey, when looking at drinking habits by socio-economic status, 69.5% of respondents who recorded they worked in managerial and professional occupations drank alcohol in the week before the interview (ONS, 2018, p.11). This group represented a variety of roles, such as doctors, architects, nurses, and teachers. In contrast, 51.2% of people working in routine and manual occupations said they drank the week before the interview; this group includes jobs such as bar staff, receptionists, and care workers (ONS, 2018, p.11). Given that households are known to under-report alcohol consumption, with surveys typically accounting for only 40-60% of alcohol sales (Boniface & Shelton, 2013), these figures could be viewed as being underreported.

Reflecting on this epidemiological perspective, mapping the distribution of risk or behaviour can contribute to the understanding of women’s consumption of alcohol. Whilst I acknowledge that this forms only a part of

the thesis, I believe the evidence presented further strengthens my rationale for this study.

1.5 Alcohol consumption – a public health response

Demographic changes and the decline in communicable diseases in Western and non-Western societies have increased the focus on non-communicable diseases (Cohn, 2014). Defined as “lifestyle conditions”, these are related to risk behaviours such as drinking, smoking, and sedentary lifestyles (Blue et al., 2016; Cohn, 2014). The conception of what constitutes problematic alcohol consumption is, Melia et al. (2021) argues, socially constructed and changes over time, with different public health models gaining popularity at differing times, including temperance, the disease model and harm reduction approaches.

Concerns regarding alcohol-related harm are not new. As previously discussed, the “gin craze” of the mid-eighteenth century created what Nicholls (2003) describes as “the first modern moral panic” (p.128). A response made to what was viewed to be the “excessive alcohol consumption within the poorer classes, whilst similar drinking patterns within the more affluent groups, went unquestioned” (Berridge et al., 2007, p.13). The nineteenth century saw the rise of the temperance movement in the UK. The movement promoted the view that abstinence was an “essential prerequisite of the moral, responsible, and hardworking citizen” (Yeomans, 2009, p.2). The theory of moral regulation, Yeomans (2011) suggests, originates with the French sociologist Emile Durkheim (1858-1917), who viewed such behaviour as “inevitable for the functioning of society” (Ruonavaara, 1997, p.278). Yeomans (2014) argues that behavioural governance and public discourse continue to be characterised by attempts to morally regulate the use of alcohol, asserting that “choices are not free, but normatively weighted, as people are compelled towards socially approved outcomes” (p.248).

During the 1950s, alcoholism was viewed as one of individual responsibility, together with the circumstances within which they lived; policy interventions focused on lifting poverty (Kneale & French, 2008). In the 1970s, alcoholism was medicalised, considered a “disease model”, associated with individuals who were viewed to have an illness that required treatment (Bacchi, 2015). From the 1970s onwards, the medical model was replaced by a new epistemology, predominantly focused on lifestyle choices (Kneale & French, 2008). Public health policy became increasingly more concerned with individual behaviour, thought to be responsible for many public health problems and that the way to address these was through health education (Mold, 2010, p.64). Furthering this epistemological change Armstrong (1995) contends that there was a move away from alcohol regulation to a focus instead on lifestyle factors such as food and exercise. Hence there was no longer a “healthy moderate drinker, only a potential liver disease patient” (Yeomans, 2014, p.226). Likewise, as those in the temperance movement were concerned with all alcohol consumption, believing that even moderate drinking was the “beginning of the ‘highway to drunkenness and sin’, drinking was now associated with the risk of developing cancer, requiring emergency treatment, or becoming a victim of crime” (Yeomans, 2014, p.226).

The twenty-first century saw a change in UK alcohol policy; drinking became an issue for the whole population with the advent of public health policies and campaigns such as unit guidelines and weekly drinking limits (Jayne et al., 2012_a, p.43). Previte et al. (2015) highlight the “negative tenor” typically adopted by such approaches, arguing that campaigns focused on the reduction of drinking habits are intended to work by “inducing negative emotions on the part of the drinker, such as fear or shame” (Previte et al., 2015, p.13). Health promotion campaigns based on behaviour change and educational approaches (Naidoo & Wills, 2009); for example, the UK Government’s 2012 *Change4Life* campaign aimed to make drinkers aware of

the health risks associated with limited, but regular, consumption of alcohol (Department of Health and Social Care, 2012). The desired outcome was that drinkers, recognising their increased consumption could cause bodily harm, would, in turn, reduce their drinking habits by exercising self-control (Previte et al., 2015). The 2016 *One You* campaign promoted individual behaviour change, encouraging adults, particularly middle-aged, to “take control of their health” (PHE, 2016_b).

Kelly and Barker (2016) argue that the continued focus on individual behaviour change is “abstracted from the contexts in which behaviour occurs” (p.110). This view is furthered by Baum and Fisher (2014), who contend that “behavioural health promotion strategies assume that people are blank sheets ready to be receptive to health promotion messages” (p.215). Thus, by using such approaches, individuals can make “better” choices based on information received; their well-being partly an outcome of the decisions they make (Blue et al., 2016). The focus of public health practice on population health approaches may then be considered neglected in favour of individual lifestyle approaches (Room et al., 2005). Considering this focus on individual responsibility, it can be argued that the most affluent gain the most benefits from this approach due to their enhanced ability to access and accept such behaviour change interventions (Boyd et al., 2021). Savic et al. (2016) argue that much of the research focus continues to be based on individual rather than population health. Similarly, epidemiological research too has focused on individual-level risk factors to predict population health (Boyd et al., 2021; Vandenbroucke et al., 2016).

Considering the government and public health response to alcohol consumption, the focus of both has and, I would argue, continues to be one of individual responsibility. Personal responsibility to monitor one’s drinking through the number of units consumed and to change behaviour to consume less. The potential impact of social and cultural changes on drinking culture and how these may influence an individual’s alcohol

consumption do not appear evident. As discussed earlier, despite the criticism levied on individual lifestyle approaches, their use still appears to be the one of choice over any broader population health approaches.

1.6 Alcohol consumption – a policy response

Throughout recent British history, alcohol policy has been portrayed by attempts to effect cultural change through legislation (Nicholls, 2012, p.250). In recognition of the diversion in alcohol policy and strategy development in the UK arising from devolution within Wales, Scotland and Northern Ireland, this section focuses on policy and strategy as it relates to England.

Since the end of the Second World War in 1945, there has been a continued rise in the UK's deregulation and liberalisation of alcohol policies (BMA, 2008; Nicholls, 2009). In 1990, alcohol policy was mainly considered one of business deregulation, tourism, and economic development (Butler et al., 2017). The election of New Labour in 1997 brought significant policy changes, including alcohol and an increasing focus on the concept of the “Third Way” (Thom et al., 2016, p.8). Seen as a means of unifying state control and free market activity, this partnership collaboration of government, industry, health, and social services, was viewed as a way of addressing social problems such as alcohol consumption (Thom et al., 2016).

In 2005, the advent of the Licensing Act 2003 in England and Wales saw the removal of the 100-year licensing legislation limiting statutory drinking hours (Measham, 2006). The new legislation enabled premises to apply for licenses that allowed them to sell alcohol up to 24 hours a day (Measham, 2006). The Act aimed to create a more continental style drinking culture; however, it was met with some criticism, particularly regarding the potential negative impact on crime and disorder (Yeomans, 2009). The new *Public Health Responsibility Deal*, launched by the Conservative-led coalition

government in 2011 (Department of Health, 2011), was designed to improve public health through securing cooperation between stakeholders, including health and the alcohol industry (Thom et al., 2016). However, the deal was met with scepticism, with the UK Faculty of Public Health rejecting the alcohol pledges, and partners, including Alcohol Change UK, withdrawing almost at its inception (O'Dowd, 2011).

In 2012, the coalition government sought to lessen the impact of binge drinking through the introduction of minimum unit pricing (MUP) for alcohol in England through its inclusion within *The Government's Alcohol Strategy* (HM Government, 2012). MUP is a "fiscal intervention intended to tackle the social and health harms from alcohol to individual drinkers and wider society" (Wood et al., 2013, p.578). Concomitantly, public health professionals drew attention to the lack of policy focus on alcohol-related harm, advocating for the adoption of a population health approach by means of response (Butler et al., 2017). Initially discussed as a policy option in both Scotland and England, only Scotland adopted MUP. The policy, whilst garnering political and public support in Scotland, did not gain the same level of support in England. An opposition campaign led by the Wine and Spirits Trade Association posited that MUP constrained the choices of moderate drinkers, this coupled with a lack of support from politicians and the public, resulted in the policy being abandoned the following year (McCambridge et al., 2014). Consecutive British governments have been "strongly criticised for affording industry interests too much weight in alcohol policymaking" (McCambridge et al., 2014, p.199). As an alternative to MUP, a "below cost" pricing policy was adopted, a decision Baggott (2012, p.398) argues made little difference to the high levels of discounting on alcohol products by supermarkets.

The Chief Medical Officers' (CMOs) Low-Risk Drinking Guidelines were published in 2016 (Department of Health, 2016). Low-risk guidelines can be viewed as seeking to provide a measurable level of acceptability in respect

of the subjective social norm and belief of morality that changes over time (Yeomans, 2013). The guidelines were cut significantly from the previously recommended 28 units a week for men and 21 for women to 14 for both men and women. A change of discourse was seen from previous guidelines advocating safe and sensible drinking limits to one that highlighted the causal risk of cancer and that no amount of alcohol was safe. The response from the alcohol industry was one of intense criticism; the causal association between alcohol and cancer was rejected (Hawkins & McCambridge, 2021).

Since 2012, no other alcohol strategies have been produced, nor have policy changes been made regarding pricing, marketing, or availability (Butler et al., 2017). In 2018, the government announced plans for a new alcohol strategy. However, these plans were not taken forward (Winchester, 2021). A report by the Commission on Alcohol Harm (2020) recommended that the government produce a comprehensive alcohol strategy. Feedback from the government (Winchester, 2021), was that a new strategy was not required, citing the work undertaken through other strategies, such as the Prevention green paper (HM Government, 2019) and the *NHS Long Term Plan* (NHS, 2019_a). The green paper focuses on individuals making the right choices – “this green paper is not about nannying, but empowering people to make the decisions that are right for them” (HM Government, 2019, p.24). Similarly, the *Long-Term Plan* (NHS, 2019_a) highlights the provision of individual alcohol risk assessments through the NHS Health Check programme (NHS, 2019_b) and ensuring individuals are aware of the health risks through the One You campaign (HM Government, 2019, p.43). The focus on individual responsibility appears to continue to pervade government policy.

Reflecting further on current policy, Khadjesari et al. (2019) contend that the guidance regarding alcohol consumption is too general and irrelevant. The appropriateness of measuring alcohol consumption by units, or indeed their use per se, has also been questioned: “UK alcohol policy and guidance seeks

to create a binary framing which is based on objective measures of quality consumed, or scores on assessments” (Melia et al., 2021, p.2).

Studies report the dismissal of unit guidelines (Melia et al., 2021) and a consistently limited knowledge of alcoholic units (de Visser & Birch, 2012). Indeed, Jayne et al. (2012) assert that the use of units is a “flawed method of medical diagnosis for alcohol-related ‘health problems’” (Jayne et al., 2012, p.829). Despite this, Thom et al. (2016) contend that Government alcohol policy has focused on individual lifestyle change rather than population level, with continued “pressure to lead a healthy lifestyle” (Moore et al., 2017, p.156). Lindsay argues that the guidelines invite us to “manage our bodies in an idealised, individualised world, where lifestyle change is a straightforward matter of putting knowledge into practice” (Lindsay, 2010, p.475). However, it is recognised that we inhabit complex social worlds in which the consumption of food and alcohol are closely intertwined and are, in turn, closely linked to both our social practices and social identities (Lindsay, 2010). Petersen and Lupton describe how ensuring good health can be seen as a moral responsibility, the “healthy citizen” maintaining good health and demonstrating self-control (Petersen & Lupton, 1997, p.67). Thus, when considering the consumption of alcohol, these measures of self-monitoring and rational action must be followed for the individual to fulfil their civic duty (Petersen & Lupton, 1997). The spotlight then continues to be upon the individual to take personal responsibility for their health.

It has been argued, by researchers such as Baum and Fisher (2014), that lifestyle interventions continue to be the focus of government policy, rather than policies that focused on the social determinants of health. This focus driven within an ideological context of both individualism and neoliberalism. I was interested in exploring this assertion in greater detail and how this might, in turn, further develop my thinking concerning current alcohol policy.

When considering neoliberalism in more detail, it is regarded by many as a frequently used term with multifarious interpretations (Bell & Green, 2016; Mudge, 2008). Within a UK context, Garnham (2017) describes neoliberalism as a political orientation to which the country has long held a “strong commitment to” (p.668). Over the past 40 years, Horton (2018) contends that neoliberalism has become entrenched within our economic, political, and social institutions. During the late Prime Minister Margaret Thatcher’s premiership (1979-1990), there was a move away from government funding of health and social care, housing, and transport, focusing instead on privatisation, deregulation, and self-help (Jessop, 2015). Harvey (2005) argues that neoliberalism encourages the belief that individuals should be responsible for their health and well-being. A position borne out, I would suggest, within *The Government’s Alcohol Strategy*, which emphasises both individual responsibility and the need to make the “right choices” concerning alcohol consumption (HM Government, 2012). Gough et al. (2020) compare alcohol consumption to other lifestyle behaviours, such as smoking and unhealthy eating. They consider such behaviours “risky within a neoliberalist ‘healthist’ climate which emphasises personal ‘choice’ and individualism of responsibility” (Gough et al., 2020, p.2). Room (2011) furthers the discussion, proposing that individual responsibility is the answer given to the public who are confronted with the unregulated marketing of alcoholic commodities within consumerist cultures, in contrast with the capitalist prerequisite of sober, functional individuals on the other. In other words, individuals are positioned as accountable for their health-related decisions, subject to a culture of “responsibilisation” and “life stylisation” where agency and self-monitoring are prescribed” (Gough et al., 2020, p.2). Thus, the “governing obligation of modern neo-liberal citizens is to embrace and pursue health and all it entails” (Moore et al., 2017, p.156). Alcohol policy, therefore, assumes that the individual is a “rational decision maker”, able to take responsibility for their health (Haydock, 2014, p.260), whilst simultaneously monitoring and regulating their exposure to a range of risk

factors outlined by scientific and health experts (d'Abbs, 2015). Though questioning the usefulness of neoliberalism, Bell and Green (2016) suggest it has been "fruitful" in helping to consider some of the "general considerations of contemporary social change" (p.241). They end their Editorial on the reflection that "neoliberalism seems to be a deeply compromised idea we cannot yet do without" (Bell & Green, p.242).

1.7 Conclusion

Within this chapter, I have presented my motivation for and the focus of this study, along with the contextual background that underpins my rationale for undertaking this research and my motivation for pursuing it.

The social and cultural changes within the UK drinking culture have been outlined, and the importance of alcohol consumption to public health has been discussed. An epidemiological perspective, mainly focussing on women, has been given. Finally, the government and public health policy response has been presented and critiqued.

Assertions have been made that little research, either qualitative or quantitative, has, to date, been undertaken into drinking alcohol at home (Callinan & MacLean, 2020; Foster & Canfield, 2017; Nicholls & Conroy, 2021). These assertions require further exploration to either support or refute the claims made, specifically in relation to professional middle-aged women. To achieve this, a literature review was undertaken, this is presented in Chapter 2.

CHAPTER 2 – LITERATURE REVIEW

2.1 Introduction

This chapter details the literature review process conducted to inform this study. As discussed in Chapter 1, this review seeks to ascertain and critically appraise the available literature in relation to women and home drinking, focusing specifically on middle-aged professional women. For the purpose of this thesis, *middle-age* is defined as being between 40-60 years of age (Encyclopaedia Britannica, 2021). Emergent themes are presented, and an explanation is given as to how these have informed and guided the focus of this research. The chapter's conclusion presents the study aims and associated research questions.

2.2 Literature Review Process

The literature review enables the author to both summarise and critique existing literature and, in so doing, present a new perspective (Hart, 2005). Viewed as a process of knowledge creation based on the integrity with which previous research is explained (Efron & Rafid, 2018), a well-conducted literature review provides the cornerstone for both theory and method, in turn, enhancing both the quality and value of future research (Ravitch & Riggan, 2017). “Confidence in the literature review is vital” (Cooke et al. 2012, p.1436), hence the researcher needs to convince the reader that they have “thoroughly mined the existing literature and purposefully decided what to review” (Boote & Beile, 2005, p.7).

While the literature review can be considered a standalone product, Ravitch and Riggan (2017) contend that it is “first and foremost a process through which conceptual frameworks are developed” (p.10). Comprising three main components, the personal interests of the researcher, pertinent research, and theoretical frameworks, the conceptual framework is used as a “guide

and ballast in research whilst at the same time evolving as the research develops” (Ravitch & Riggan, 2017, p.9). Whilst the conceptual framework is therefore used as a mainstay of the research, it is also malleable and can develop over time (Miles & Huberman, 1994). This literature review will therefore be used to guide the focus of this study, building upon and learning from prior research.

An iterative approach was taken to this literature review to account for the timeframe of the study period. Literature was initially evaluated prior to commencement of fieldwork in March 2018, continued after that until the review was conducted in October 2021, and revisited for currency and relevance at the time of submission.

A systematic approach was adopted for this literature review with the aim of ensuring that “all the available literature was incorporated” (Aveyard et al., 2019, p.9). Baker and Weeks (2014) three “essential criteria” for a systematic review were followed, notably that the review is “explicit, rigorous and reproducible”, (p.455). Thus, minimising the risk of bias (Baker & Weeks, 2014). The following sections detail the steps undertaken to develop and conduct this review.

2.3 Literature Review Question

Formulating a straightforward, well-defined research question is integral to the research process. Without such a question, the ability to identify and retrieve literature pertinent to the study area will be challenging. Whilst it is acknowledged that no one tool is best for all literature reviews (Aveyard et al., 2016), the argument is put forward that the use of “standardized, systematic search strategies facilitate rigour in research” (Cooke et al., 2012, p.1435).

Literature searching can be undertaken by selective or purposeful sampling, where the researcher seeks out a selection of literature to review based on

its relevance to the research question (Maxwell, 2006), or by adopting a comprehensive search strategy (Aveyard et al., 2016; Ravitch & Riggan, 2017). Booth (2008) questions whether there is a need for comprehensive, exhaustive searches within qualitative evidence synthesis or whether this should be replaced with an appropriate sampling strategy where studies are identified until saturation is reached. Conversely, Aveyard et al. (2016), Boote and Beile (2005), and Methley et al. (2014) assert that a comprehensive strategy should be undertaken to prevent bias and avoid “cherry-picking evidence” (Aveyard et al., 2016, p.62) and enable an accurate representation of available research (Methley et al., 2014). Considering both premises, I support the view put forward by Aveyard et al. (2016), Boote and Beile (2005) and Methley et al. (2014) that a comprehensive search strategy should be undertaken.

2.4 Search Strategy

The PICO (Population, Intervention, Comparison, and Outcome) tool (Higgins & Green, 2011) is widely used in systematic reviews and evidence-based practice (Cooke et al., 2012). However, I recognise that the appropriateness of the PICO tool must be considered in terms of its congruence with the qualitative paradigm. For example, the terms “Population” and “Intervention” are likely to retrieve more quantitative than qualitative studies (Aveyard et al., 2016). Therefore, whether this tool can provide an objective, systematic search strategy within qualitative research is questioned (Cooke et al., 2012; Korstjens & Moser, 2017; Methley et al., 2014). Several search strategy tools for qualitative research have been developed in response to this. These include a modification of PICO by Fineout-Overholt and Johnston (2005), who replaced the quantitative terms “intervention” and “control” with qualitative terms “issue” and “context”. The SPIDER (Sample, Phenomenon of Interest, Design, Evaluation, Research type) tool was designed specifically by Cooke et al. (2012) to identify relevant

qualitative and mixed-method studies. Cooke et al. (2012) and Methley et al. (2014) have subsequently conducted reviews concerning the effectiveness and sensitivity of the PICO and SPIDER tools in identifying literature for use in qualitative evidence synthesis. Both studies concluded that the PICO tool provided the most comprehensive results. The PICO (qualitative version) Fineout-Overholt and Johnston (2005) was therefore selected as an appropriate tool to construct a literature review question and guide the search strategy, as highlighted in Table 1.

Table 1 – PICO Search Strategy

PICO Term	Population	Issue	Context	Outcome
	Middle-aged women professional women	Drinking	Home	Experience
	Older women Women aged 40-60	Alcohol		Social cultural

Thereafter the following questions were developed:

1. Are any published empirical research/ systematic reviews available on middle-aged professional women that focus on drinking alcohol at home? If yes, does the research reference/utilise a conceptual framework?
2. What does the review of the body of literature, over the past two decades, from a sociocultural perspective, tell us about middle-aged women and their drinking at home?

2.5 Search Methods

Electronic literature searches were initially conducted in 2016; further searches took place from 2020 up until October 2021. Bibliographic

databases relevant to public health notably, Age & Ageing, Sociology, Alcohol, Psychology, and Nursing and Allied Health were searched. Therefore, a systematic literature search of ten databases was undertaken, notably ProQuest, CINAHL, PsycINFO, PubMed, SocINDEX, Emerald Insight, Wiley Online, MEDLINE, ScienceDirect and BioMED Central. The databases were searched for all records between January 2000 and October 2021. The decision for the start date is based on the knowledge gained from my Masters study (Cowan-Williams, 2012) of the limited research in this area prior to 2000.

2.5.1 Inclusion and Exclusion Criteria

Deciding what to include or exclude in the literature review is “probably the most distinct [aspect] of literature reviewing” (Boote & Beile, 2005, p.7). This thesis used inclusion and exclusion criteria to enable a focused literature search.

Inclusion criteria:

- Studies published in a peer-reviewed English language journal
- Full text available, articles published from January 2000 to October 2021
- Middle-aged/ older women included in the study (age range between 40 to 60 years of age)
- Home drinking included or referenced within the study

Exclusion criteria

- Studies focused on alcohol treatment
- Studies that did not include women

2.5.2 Search Terms

Search terms that encompassed the literature review question were identified and subsequently developed into a search string. The string

enables keyword searches of the databases, as identified in Section 2.3 above, to be undertaken. Two Boolean operators (Booth, 2008), notably “or” and “and”, were used as conjunctions within the string to enable a more focused search. The search string is described in Table 2 below.

Table 2 – Database Search Terms

Database Search Terms
i. alcohol or drinking alcohol or alcohol consumption AND
ii. professional wom?n OR older wom?n OR middle-aged wom?n AND
iii. home drinking

Note: home drinking was only used in Science Direct, BioMed Central and Wiley Online to reduce a large number of returns. The search string was required to be present within the abstracts searches of PubMed, ProQuest and Wiley Online, again to manage the number of titles returned.

2.6 Search Outcome

As referenced in Section 2.3, the databases were searched using the search terms described in Table 2. The titles of articles were read, and if felt to be of potential relevance to the literature review question, the abstract was retrieved and read. If the abstract's search criteria were met, the entire paper was retrieved and read in full. The Preferred Reporting Items for Systematic reviews and Meta-Analyses (PRISMA) flow chart (Page et al., 2021) has been used to both report and present the review, thus providing transparency to the reader (Aveyard et al., 2016, p.79) and is detailed in Figure 1.

Figure 1 – PRISMA Diagram

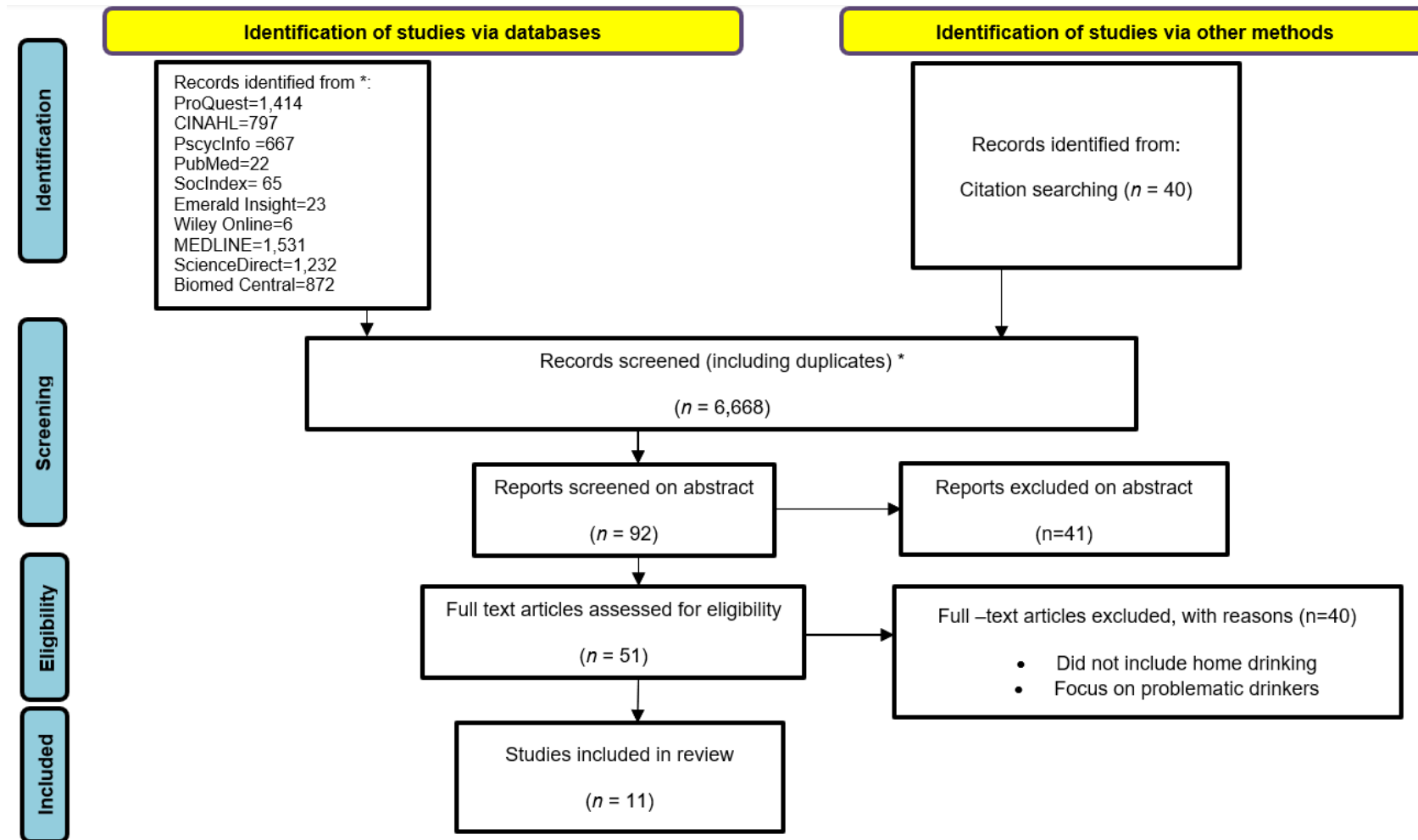


Fig1. Amended *PRISMA 2020 flow diagram. * The duplicates were not removed before screening. Adapted from: Page MJ, McKenzie JE, Bossuyt PM, Boutron I, Hoffmann TC, Mulrow CD, et al. The PRISMA 2020 statement: an updated guideline for reporting systematic reviews. BMJ 2021;372: n71. Doi: 10.1136/BMJ.n71. For more information, visit: <http://www.prisma-statement.org/>

2.7 Results

An initial search of the ten databases included in this review yielded 6,658 studies. Following a detailed review, 52 studies remained. A further review of the identified articles resulted in 11 papers being included in this review. The process is detailed in the PRISMA diagram Figure 1 (page 38).

Whilst 11 studies have been included; I recognise that despite the rigorous search process, there may still have been papers that were not identified. One such reason for this reflection is the challenge of locating qualitative studies due to a lack of consistency (Cooke et al., 2012; Saini & Shlonksy, 2012). The authors argue that effective retrieval relies on clarity within the title and the abstract; thus, if the index terms are not ascribed correctly, this can negatively impact retrieval. To mitigate against this, “pearl growing” (Papaioannou et al., 2009), notably through reference follows up and citation searching, was used to supplement and support the retrieval process.

In conducting the literature search, the challenges of searching qualitative literature, including the lack of relevant search terms in the titles, variable quality of abstracts and different methods of indexing across databases (Cooke et al., 2012; Evans, 2002), became apparent. One such challenge was the wide range of definitions of “middle-aged” and “older”, with no definitive definition. However, none of the identified studies highlighted this as an issue. Similarly, only one study focused exclusively on women and in terms of locating studies that focused specifically on professional women, socio-economic status was often not reported. Whilst the studies retrieved included home drinking, this was not necessarily the primary focus of the study, for example, drinking habits (Gough et al., 2020); the effect of alcohol use on personal and professional lives (Ling et al., 2012, p.1).

2.7.1 Critical Appraisal: Assessment of Methodological Quality

The purpose of this appraisal is to assess the methodological quality of a study, determining the extent to which the possibility of bias in design, conduct and analysis has been addressed (JBI, 2020). Critical appraisal tools provide a systematic assessment of the calibre of the study and precisely how potential bias has been minimised (Katrak et al., 2004). Such tools are designed to assess individual studies' methodological strengths and limitations (Munthe-Kaas et al., 2019). As the tools have predominately been founded within quantitative research (Efron & Ravid, 2018), there is still debate over which quality criteria should be used to assess qualitative studies (Aveyard et al., 2016; Efron & Ravid, 2018; Lockwood et al., 2015; Long et al., 2020).

Arguments against using critical appraisal tools in qualitative research have focused on the view that “research paradigms in qualitative research are philosophically based on relativism, which is fundamentally at odds with the purpose of criteria to help establish ‘truth’” (Barusch et al., 2011, p.12). Thus, the question of whether such appraisal should occur is made, given the differing ontological and epistemological perspectives within qualitative studies (Long et al., 2020). Whilst critical appraisal tools are not an essential component of the process of critical appraisal, and there is no one “gold standard” (Aveyard et al., 2016, p.109; Buccheri & Sharifi, 2017, p.3; Katrak et al., 2004, p.1), I support the view of Aveyard et al. (2016) that, despite the abovementioned challenges, assessing methodological quality and thereafter transparently demonstrating this, provides the reader with a clear and documented record of the process undertaken.

Considering the above, two appraisal tools were considered for use in this study: the Joanna Briggs Institute *Critical Appraisal Tools* (JBI, 2020) and the *Critical Appraisal Skills Programme* (CASP, 2022_a; CASP, 2022_b). The use of CASP tools is endorsed by the National Institute of Clinical Excellence (NICE), Cochrane and World Health Organization (WHO) for use in qualitative

evidence synthesis (Noyes et al., 2017; NICE, 2012) and are the most frequently used tools for quality appraisal of health-related qualitative synthesis (Long et al., 2020). As a Public Health professional, I use NICE guidance to inform my evidence-based practice and consider CASP appropriate for this critical appraisal. The CASP checklists for Systematic Reviews (CASP, 2022_a) and Qualitative Research (CASP, 2022_b) were used to critique and assess the papers identified in the literature search. Whilst Canfield et al. (2021) used quantitative research methods; the paper has been considered within the précised table on page 42 to assist the reader.

The full CASP appraisal can be found in Appendix 1 on page 259. A precis of the findings is presented in Table 3 (page 42).

Table 3 – Precis of CASP Tool Applied to the 11 Identified Papers

Author/Date/Journal	Title of Study	Study Type	Main Findings	Strengths	Limitations	Implications for Public Health Policy and Practice
Bareham, B.K., Kaner, E., Spencer, L.P. & Hanratty, B. (2019) <i>Age and Ageing</i>	Drinking in later life: a systematic review and thematic synthesis of qualitative studies exploring older people's perceptions and experiences	Systematic review of qualitative data on older people's views and experiences of drinking in later life Study quality assessed using Saini and Schlonsky's Qualitative Research Quality Checklist Saini & Schlonsky, 2012) Thematic synthesis 25 papers met inclusion criteria "Older" defined as 50+	Older people felt they were responsible and controlled drinkers Drinking routines can be firmly established across the life course Positive role of alcohol in older people's lives Alcohol risks and harms considered to be within heavier drinkers Concept of "Othering" identified	Peer reviewed Robust methodology design including dual screening and translation undertaken Focus on non-treatment population enables findings more relevant to wider population	Full summary of appraisal and full reference list only available online to subscribers of <i>Age and Ageing</i>	A focus on those with those who consider themselves as responsible and controlled drinkers, rather than high risk individuals, should be considered
Brierley-Jones, R., Ling, J., Mc Cabe, K.E., Wilson, G.B., Crosland, A., Kaner, E.F.S. & Haighton, C. A. (2014) <i>Sociology of Health & Illness</i>	Habitus of home and traditional drinking: a qualitative analysis of reported middle-class alcohol use	Qualitative empirical study Five focus groups of male and female employees aged 21-55 (N= 49: 32 male, 17 female)	Utilised Bourdieu's concepts of "habitus", "capital" and "fields". Those in middle-class occupational groups associated alcohol with two habitus-one of "home drinking" and the other "traditional drinking"	Peer reviewed Aim of study clearly articulated and addressed	Focus groups conducted within a work context, in some instances with both senior management and HR present. Their presence may therefore have impacted on the participants' ability to speak freely.	Public health initiatives require changes to accommodate different drinking cultures

Table 3 – Precis of CASP Tool Applied to the 11 Identified Papers (continued)

Author/Date/Journal	Title of Study	Study Type	Main Findings	Strengths	Limitations	Implications for Public Health Policy and Practice
Canfield, M. Chandler, V. & Foster, J.H. (2021) <i>Journal of Substance Misuse</i>	Home drinking in women over 30 years of age Findings from an internet survey in England	UK quantitative Empirical Study Web-based survey Data from two cross-sectional studies examining trends in home drinking analysed women over 30 N= 411 Logistical regression analysis	Nearly two thirds (65.7%) reported hazardous drinking Factors identified with hazardous drinking include: Drinking daily at home Purchasing alcohol as part of the weekly shop Preference to drink at home	Peer reviewed Focus solely on home drinking Authors assert that this is the first study that aims to collect comparative quantitative data on home drinking in the age group	Two different recruitment techniques and timeframes First recruitment in 2012 solely from the university, further participants recruited in 2016 from a wider population sample	Highlight the possible use of Nudge techniques (Thaler & Sunstein, 2008) to discourage hazardous drinking at home
Dare, J., Wilkinson, C., Traumer, L., Kusk, K.H., McDermott, M-L., Uridge, L. & Grønkjær, M. (2020) <i>Sociology of Health & Illness</i>	“Women of my age tend to drink”: the social construction of alcohol use by Australian and Danish women aged 50-70 years	Qualitative empirical study Purposive recruitment Snowball sampling Social Construction Theory Semi-structured individual interviews N=49 Constant comparative analysis, classified into open codes, then developed into broad themes	Three overarching themes identified: -Control and acceptable drinking -Constructing alcohol use across generations -Negotiating alcohol as a health risk Women consuming alcohol at high risk levels tend to perceive their drinking as normal & acceptable providing they appear respectable & in control	Peer reviewed	Setting Australia and Denmark may not be transferable in the UK How social construction theory was used as an analytical framework is unclear No definition of middle-age or young-old	Interventions that seek to minimise alcohol –related health risks amongst this cohort need to acknowledge that women may prioritise “being in control” while drinking, over biomedical model of the health impacts of alcohol

Table 3 – Precis of CASP Tool Applied to the 11 Identified Papers (*continued*)

Author/Date/Journal	Title of Study	Study Type	Main Findings	Strengths	Limitations	Implications for Public Health Policy and Practice
Emslie, C., Hunt, K., & Lyons, A. (2012) <i>Sociology of Health & Illness</i>	Older and wiser? Men's and women's accounts of drinking in early midlife	Qualitative empirical study. Eight focus groups N=36 (15 men and 21 women) "Midlife" defined as 35 to 50 years	Findings highlight the pressure to drink – "participants socially expected to do so". Explores the issue of "othering"; "which shows how health and healthy behaviours are used as identity strategies to contrast the healthy constrained 'self', with the unhealthy out of control 'other.'" Control identified as key to acceptability of drinking, losing self-control considered unacceptable in female drinkers of any age	Peer reviewed	Setting West of Scotland Small study findings may not be transferable to other settings	Highlights the importance of understanding how women in early midlife perceive drinking and excess alcohol consumption, when developing alcohol harm reduction strategies
Emslie, C., Hunt, K., and Lyons, A. (2015) <i>International Journal of Drug Policy</i>	Transformation and time-out: The role of alcohol in identity construction among Scottish women in early midlife	Qualitative empirical study 11 focus groups (five all female, six mixed sex) Age range 30-50 years Social constructionist epistemology Thematic analysis	Alcohol associated with relaxation & "time out" from responsibilities Whilst alcohol used to construct a number of identities, prominence of traditional concepts of femininity remained	Peer reviewed	Focus of research was solely on women, however men were included in the study Setting West of Scotland Small study findings may not be transferable to other settings	Highlights the need for public health policy to be cognisant of the gender constructions in midlife

Table 3 – Precis of CASP Tool Applied to the 11 Identified Papers (continued)

Author/Date/Journal	Title of Study	Study Type	Main Findings	Strengths	Limitations	Implications for Public Health Policy and Practice
Foster, J.H., Read, D., Karunanithi, S., & Woodhouse, V. (2010) <i>Journal of Public Health</i>	Why do people drink at home?	UK qualitative empirical study N=38 Four focus groups Male and female participants aged between 13-75 Thematic analysis	Principal theme of convenience identified, other sub themes include cost, reward, and relief of stress	Peer reviewed Sole focus of study is to explore drinking within the home	Sample not randomly selected, thus can be open to selection bias No socio-economic information provided Study conducted in Northwest town of Blackpool findings may therefore not be transferrable to other settings	Public health information and advice should reflect the increase in home drinking and seek to better understand the reasons for this change
Gough, B., Madden, M., Morris, S., Atkin, K. & McCambridge, J. (2020) <i>Appetite</i>	How do older people normalise their drinking? An analysis of interviewee accounts	Qualitative empirical study conducted in North of England Semi structured interviews N=25; aged 41-89 9 women; 16 men Analysis informed by discursive psychology (Edwards & Potter, 1991), focus on how drinking is constructed by interviewees	Determined efforts made by participants to present themselves as good citizens; focus on self-regulation; excess drinking in others was criticised	Peer reviewed Aim of the research was evidenced and answered in the paper Home drinking	Wide definition of “older” – 49-89 years Long term medication use prerequisite for inclusion Demographics did not contain any socio-economic data Employment status given, but no information as to whether this was professional status Study conducted within one geographical region within England, therefore may not be transferrable	Challenge current health promotion messages, assert that these may serve to reinforce drinking levels rather than reduce them

Table 3 – Precis of CASP Tool Applied to the 11 Identified Papers (continued)

Author/Date/Journal	Title of Study	Study Type	Main Findings	Strengths	Limitations	Implications for Public Health Policy and Practice
Holloway, J., Jayne, M. and Valentine, G. (2008) <i>Transactions of the Institute of British Geographers</i>	'Sainsbury's is my local': English alcohol policy, domestic drinking practices and the meaning of home	Multi-method study conducted in both Eden in Cumbria & Stoke on Trent in the Midlands Including: • telephone interviews N=1, 139 • in-depth interviews N=63 • participant observation	The "ideological power" of the home masks issues concerning home drinking Drinking wine at home has become a regular occurrence for middle class respondents Wine has become more socially acceptable Potential health consequences of alcohol consumption not acknowledged	Peer reviewed	Study conducted within one geographical region within England, therefore may not be transferrable Findings analysed by what is described by researchers as "conventional social science techniques", however no further details are provide	The continued policy focus on drinking within public places is challenged

Table 3 – Precis of CASP Tool Applied to the 11 Identified Papers (continued)

Author/Date/Journal	Title of Study	Study Type	Main Findings	Strengths	Limitations	Implications for Public Health Policy and Practice
Ling, J., Smith, K.E., Wilson, G.B., Brierley-Jones, L., Crosland, A., Kaner, E.F.S. & Haighton, C.A. (2012) <i>BMC Public Health</i>	The 'other' in patterns of drinking: A qualitative study of attitudes towards alcohol use among professional, managerial and clerical workers	Qualitative study Focus groups conducted in five workplaces Opportunistic sample N=49 (17 male, 32 female) Age range 21-55 All participants worked full time in a professional role Data analysed using constant comparative analysis	Three emergent themes: Views of harmful, unacceptable or problematic alcohol use as "the other" Normalisation of alcohol use when perceived to be controlled and harm free Ability to function seen as affirmation of acceptable alcohol use	Peer reviewed	No mention of ethics is made Focus groups held in the workplace, participants, being amongst colleagues may have implications in terms of their ability to speak freely	To ensure effective public health alcohol interventions, further knowledge of this population is required
Muhlack, E., Carter, D., Braunack-Mayer, A. Morfidis, N. & Elliott, J. (2018) <i>BMC Public Health</i>	Constructions of alcohol consumption by non-problematised middle-aged drinkers: a qualitative systematic review	Systematic review Thirteen papers included within the thematic analysis UK (9), Norway (2), Australia (1) and Japan (1) Middle age defined as being between 30-65 years old	Normative drinking (people express their understanding of acceptable and unacceptable drinking practises) expressed through four main interlinking themes namely: gender, play, identity and learning to drink	Peer reviewed Clear, coherent, and detailed methodology section. Details of all references cited within the paper available	Wide definition of middle-age 30-65 years old	Public health campaigns that focus on reducing alcohol consumption may be more effective if the emphasis is on unacceptable drinking behaviours instead of personal health outcomes

2.7.2 Critical Appraisal: Outcome and Study Characteristics

Following the review process described in Section 2.6, 11 studies were identified for inclusion in this appraisal. Whilst an overview of the appraisal is shown in Table 3, and the full CASP appraisal is within Appendix 1, a more in-depth discussion is presented within this section.

All the studies were published in peer-reviewed journals; the peer review process is designed to “ensure that the quality of the research and validity of the findings is high” (NIH, 2019, p.1). While this is not an infallible process, and some articles will still contain inaccuracies, the process is viewed as one that assures quality within published papers (Wiley, 2021). It is interesting to note the wide range of academic journals that the studies were sourced from in their discipline, notably public health, food and drink, sociology, substance misuse and geography. Demonstrating the subject of drinking and middle-age is of interest to a wide range of research disciplines, not just public health.

Eight of the studies included in this appraisal took place in the UK – Brierley-Jones et al., 2014; Canfield et al., 2021; Emslie et al., 2012; Emslie et al., 2015; Foster et al., 2010; Gough et al., 2019; Holloway et al., 2008; Ling et al., 2012. Detailed primary research was used to inform the studies by Brierley-Jones et al. (2014) and Ling et al. (2012), and the authorship of the two papers is identical. Similarly, the same primary research was used to inform the studies by Emslie et al. (2012) and Emslie et al. (2015); again, both papers were written by the same authors. The study by Dare et al. (2020) was conducted in Australia and Denmark, and the two systematic conducted by Bareham et al. (2019) and Muhlack et al. (2018) appraised studies from the UK, Central, Eastern and Southern Europe, Scandinavia, North America, Australasia, and East Asia. This research seeks to explore the social and cultural changes that have occurred during the lifetimes of the women who took part in the study, all of whom are residents of the United Kingdom. I

recognise that the inclusion of studies outside the UK could be perceived as a limitation, given the potential differences in social and cultural settings, for example, the position of women in society, availability and accessibility of alcohol, and alcohol health policy. Dare et al. (2020) contend that the inclusion of middle-aged and young-old women from Australia and Denmark in their study provided new insights into the cultural and normative practices regarding their drinking. They assert that the “social processes underpinning patterns in women’s alcohol use transcended national boundaries” (Dare et al., 2020, p.44). Whilst the inclusion of non-UK studies may be viewed as a limitation, I would argue that given the small number of empirical studies identified, the inclusion of this recent study is valid. The outcomes of this research study will be considered against those identified within the Dare et al. (2020) study within the discussion section in Chapter 4.

As discussed in Section 2.4, this literature review seeks to identify and appraise studies focusing on professional, middle-aged women and home drinking; this critique considers these studies in greater detail. The socio-economic characteristics of participants were presented in a variable amount of depth: Dare et al. (2020) provide employment status and educational achievement, but no details are given regarding the participants' occupations. Emslie et al. (2015) include a table with occupational groupings such as “local authority”, “university lecturers” and Ling et al. (2012) and Brierley-Jones et al. (2014) describe their participants as “professional, managerial and clerical workers.” Identification of professional women within the studies was, therefore, not achievable.

Only three out of the 11 studies focused solely on women: Canfield et al. (2021), Dare et al. (2020), and Emslie et al. (2015). Although it could be argued that Emslie et al. (2015) study, whilst it purports to focus on women, is, I would contend, inaccurate, as the primary research included mixed focus groups. Although the paper only reports female responses, no statement is

made by the authors as to the potential impact the presence of men may have had regarding the responses shared by the women.

As stated in Section 2.1, middle age is defined in this study as being between 40-60 years of age. The appraisal highlights the challenge of defining age and recognises that no one agreed definition exists. For example, Muhlack et al. (2018) define middle-aged as 30-65. The studies by Emslie et al. (2015) and Emslie et al. (2012) explore “mid-life”, defined as 35-50 years, and Dare et al. (2020) explore “middle-aged and young-old”, defined as 50-70 years. Four of the studies had a specific focus on home drinking: Canfield et al. (2021), Brierley-Jones et al. (2014), Foster et al. (2010) and Holloway et al. (2008), but they were all mixed-sex studies. Only one of the identified studies, notably, Brierley-Jones et al. (2014), used a conceptual framework; adopting Pierre Bourdieu’s theory of practice (Bourdieu, 1977) and his concepts of habitus, capital, and field as a lens through which to consider their findings.

The CASP qualitative appraisal tools (CASP, 2022_a; CASP, 2022_b) require the appraiser to consider the role of the researcher within the study under review. The researcher plays a substantial role in qualitative research (Lockwood et al., 2015); understanding their cultural and theoretical position is therefore vital in the appraisal process (Lockwood et al., 2015; Saini & Shlonksy, 2012). Only two studies, Emslie et al. (2012) and Gough et al. (2020) made any direct reference to the role of the researcher, the latter suggesting future research should be conducted “free from researcher influence” (Gough et al., 2020, p.14), suggesting online discussion, or conversations with friends, however, no explanation is given as to how data would be captured if such methods were used.

Assessing rigour in data analysis is also considered within the CASP appraisals (CASP, 2022_a; CASP, 2022_b). Reporting of data analysis within the studies was variable and, in some instances, vague – “The questionnaire survey and in-depth interviews were analysed using conventional social

science techniques” (Holloway et al., 2008, p.537), identifying them as “themes according to the principles outlined by Miles and Huberman” (Foster et al., 2010, p.514). As Dixon-Woods et al. (2005) and Hannes and Macaitis (2012) highlight, thematic analysis appears to have many shapes and forms, and the lack of explicitness regarding procedures and aims has been identified. This “lack of explicitness” is borne out within the above and leads one to question the rigour of these studies, “a rigorous qualitative manuscript should explicitly discuss how its data collection strategy was designed” (Ranney et al., 2015, p.1104). Furthermore, replicating studies with such limited information would be challenging, if not impossible. The position of the researcher in qualitative research is well recognised (Riessman, 2008); however, only Emslie et al. (2012) and Gough et al. (2020) discussed the role of the researcher in their studies.

2.7.3 Reflections on the use of CASP

As discussed in Section 2.7.1, I acknowledge that using the CASP tool within this study can be challenged and viewed as incongruent within qualitative research. I would, however, argue that the tool enabled me to critically appraise the studies within a recognised structured format. This point notwithstanding, I found the tool's rigidity at times challenging, highlighting its origins in quantitative research where truth is sought. The challenging fact was that answers could only be given within the parameters of “yes”, “no”, or “can’t tell”. Five of the studies reviewed, notably: Bareham et al., 2019; Brierley-Jones et al., 2014; Foster et al., 2010; Gough et al., 2020 and Ling et al., 2012, were challenging to review against the tool. There was evidence for many of the questions that they were answered partly, but some of the required information was not found. They could not then be answered as a “yes”; neither were they a “no” or a “can’t tell”. To address this, I added “in part” to the question response criteria. The detailed CASP appraisal can be found in Appendix 1, page 259. This reflection highlights the challenges of using the CASP tools (CASP, 2022_a; CASP, 2022_b); whilst the

tools provide a structured and methodical approach, their rigidity, I would argue, does not reflect the broad nature of qualitative research.

2.8 Emerging Themes

Following the literature's critical appraisal, emergent themes were developed from the studies described above. Since nine of the 11 papers were mixed-sex studies and this research is focused solely on women, the decision was made that any supportive illustrations of the identified themes would only be from women. One dominant theme from the literature was identified notably *normalised socially acceptable drinking*. Three subordinate themes were found, *relaxation and reward*; *cost, convenience, and availability*; and *alcohol and health*.

Table 4 illustrates the dominant and subordinate themes emerging from the literature.

Table 4 – Dominant and Subordinate Themes

Themes			
Dominant	Normalised, socially accepted drinking		
Subordinate	Relaxation and reward	Cost, convenience, and availability	Alcohol and health

The dominant and subordinate themes are discussed in detail below.

2.8.1 Normalised Socially Acceptable Drinking

The dominant theme emanating from the reviewed literature is that drinking alcohol is normalised and considered socially acceptable. Within this, self-control is normalised, drinking is seen as unproblematic, and others are perceived as drinking more. As the research by Dare et al. (2020) highlights, drinking amongst 50–70-year-old women was regarded as being both ordinary and socially acceptable amongst the participants: “[drinking

alcohol] has become part of the norm [...] it is something we do with our acquaintances, friends, and families” (Dare et al., 2020, p.40).

Based on the small number of studies reviewed, alcohol use appears normalised when perceived by those who drink themselves and viewed as being controlled and harm-free (Ling et al., 2012). Control is identified as key to the acceptability of drinking, whilst culturally, “losing self-control is considered unacceptable in female drinkers of any age” (Emslie et al., 2012, p.492). Gough et al. (2020) highlight what they describe as “responsible restraint”, in which older people restrained their drinking through both the amount they drank and through self-control: thus, “to be a good citizen is to be in control, i.e., enjoying alcohol in moderation and not causing problems for self, others or society in general” (Gough et al., 2020, p.4). This is borne out by Bareham et al. (2019), where older adults deemed themselves “controlled, responsible, and considered in their drinking” (Bareham et al., 2019, p.141). Alcohol risks and harms were viewed as being associated instead with other “heavier, more problematic drinkers” (Bareham et al., p.143).

Similarly, findings from the study by Dare et al. (2020) suggest that women may perceive higher alcohol consumption as acceptable if they stay in “control” and “behave in an appropriate manner” (Dare et al., 2020, p.41). The importance of staying in control was seen as a crucial qualifier for social acceptability: “When you get to our age, you should be able to do pretty much what you want if it doesn’t hurt people and it’s not detrimental to you” (Dare et al., 2020, p.40). Staying in control was given as a justification for women drinking above government guidelines (Gough et al., 2020). The assertion made that “control is key to the acceptability of drinking, whether at home or elsewhere” (Emslie et al. 2012, p.492).

The normalisation theme is furthered by “unproblematic drinking” (Bareham et al., 2019; Emslie et al., 2012; Gough et al., 2020; Ling et al., 2012). Just as younger women regulate their alcohol use to conform to

normative ideas about acceptable drinking, Dare et al. (2020, p.40) argue that this also applies to middle-aged and young-old women. As Muhlack et al. (2018) suggest, how people drink contributes to and is shaped by the identity they have constructed for themselves; thus, identity was necessary for the construction of acceptable and unacceptable drinking. Within the study by Ling et al. (2012), the ability to function was seen as an endorsement of acceptable alcohol use; therefore, if participants were able to keep their employment within skilled roles, they “were by definition drinking in a way that cannot be harmful or hazardous” (Ling et al., 2012, p.5). Gough et al. (2020) describe how older people portray their drinking as unproblematic and link it with everyday activities such as watching television and having dinner as “relaxing mundane practices” (p.6); thus, they perceive themselves as a responsible adult.

The literature highlights the sociological concept of “othering” (Joffe, 2011), where the positive, “healthy” self-identity is protected through contrast with those worse off (Bareham et al., 2019; Dare et al., 2020; Emslie et al., 2012; Ling et al., 2012; Gough et al., 2020). Thus, healthy behaviours contrast “the healthy constrained self” with the unhealthy out-of-control other (Emslie et al., 2012, p.492). Women who are drinking at harmful levels do not perceive themselves to be at risk of harm; instead, their self-image is that of an “appropriate adult” drinker, viewing alcohol risk and harm as belonging to other heavier, more problematic drinkers (Bareham et al., 2019; Gough et al., 2020). Alcohol risk and harm were attributed to “others” who, through their behaviour, were considered “problematic drinkers” (Bareham et al., 2019; Gough et al., 2020). Research by Ling et al. (2012) describes how participants’ views of alcohol consumption were based on how people look and behave rather than on the frequency and amount of alcohol consumed. *Others* were considered alcohol dependent or outside their peer group, such as young people (Emslie, 2012). A socially constructed notion of appropriate alcohol use was agreed upon by participants who viewed harmful drinking in socially deviant others (Emslie, 2012). Similarly, Gough et al. (2020) relate

participants making comparisons with other more problematic drinkers when describing their drinking; it was “other people who over-indulged”, notably younger drinkers (Gough et al., 2020, p.10).

2.8.2 Relaxation and Reward

The literature portrays the view that for many, drinking was seen as a means of supporting relaxation, a way of “chilling out” (Bareham et al., 2019; Brierley-Jones et al., 2014; Emslie et al., 2015; Gough et al., 2020; Ling et al., 2012). Drinking was considered a socially acceptable form of relaxation and a mark of transition from work or parental responsibilities to “me” time (Ling et al., 2012, p.4). Gough et al. (2020) study exploring older people’s normalisation of their drinking describes women’s enjoyment of drinking: “The relaxation, it’s like actually... I always say it’s like a full stop at the end of a sentence. It’s like my day’s done. Now I can just flop down and relax” (Gough et al., 2020, p.11).

The literature suggests that alcohol was similarly regarded as a reward, a way to destress and unwind (Brierley-Jones et al., 2014; Foster et al., 2010; Gough et al., 2020; Ling et al., 2012). Bareham et al. (2019) highlighting the use of alcohol as a sleeping aid (p.144). Home drinkers viewed the regular drinking of wine as unproblematic. Wine was used as a means of relaxation and to relieve stress “relax, have a glass of wine, yeah had a bad day” (Brierley-Jones et al., 2014, p.1059). The “wine o’clock” ritual was seen as a reward at the end of a busy day, acting as a temporal escape from work (Emslie et al., 2015). Alcohol consumption indicated the end of work or responsibilities; thus, reward and relaxation after work were viewed as “normative drinking” (Muhlack et al., 2018, p.5).

2.8.3 Cost, Convenience, and Availability

The literature highlights the construction of acceptable alcohol use concerning cost and convenience. Dare et al. (2020) contend that the

availability and affordability of alcohol may contribute to the social construction of drinking amongst women as a normalised and acceptable behaviour. The literature describes the changes in the cost and availability of wine, a commodity that was considered in the past as being too expensive, was no longer just for a special occasion, nor did it require specialist knowledge to access it (Holloway et al., 2008). Canfield et al. (2021) highlight that nearly two-thirds (65.7%) of respondents who drank at home reported drinking at hazardous levels. The authors suggest that one of the key influencing factors behind this figure was that the purchase of alcohol as part of the weekly shop to drink at home has become normalised. As Ling et al. (2012) describe, alcohol has thus become a “standard item” in the supermarket shop, where quality wine is now available (Brierley-Jones et al., 2014). Canfield et al. (2021) challenge the assertion that affordability drives the decision to drink at home; results suggest that for women, the preference to drink at home is no longer driven by cost; instead, it is now one of choice.

The literature highlights that home drinking was preferred for convenience: “You can relax at home. You don’t have to wait at the bar to be served: you can just go and get yourself a drink. You sit down, and you are pretty much there for the night” (Foster et al., 2010, p.514). Similarly, it was viewed as affordable, particularly for those with family responsibilities (Foster et al., 2010; Ling et al., 2012; Brierley-Jones et al., 2014). Holloway et al. (2008) describe participants’ view of the “ideological power” (p.532) of the home and how this masks any issues concerning home drinking. Drinking wine at home has become a regular occurrence for middle-class respondents; thus, they argue that wine has become more socially acceptable (Holloway et al., 2008).

As previously noted (page 42), Brierley-Jones et al. (2014) used the work of the French sociologist Pierre Bourdieu (1930-2002) to inform their study, most notably his theoretical concept of *habitus*. Bourdieu defined *habitus* as

a “system of durable, transposable dispositions that mediates an individual’s actions and the external conditions of production” (Bourdieu, 1990_a, p.53).

The study identified two patterns of alcohol consumption, notably a “home drinking habitus” and a “traditional habitus”. The “home drinking habitus” is defined as home drinkers who mainly drink wine in moderate amounts. Study respondents considered home drinking as “respectable and sophisticated” (Brierley-Jones et al., 2014, p.1059). The behaviours of those who drank to excess, notably young people, were viewed as “undesirable”, reaffirming to those who drank at home that their drinking was “unproblematic” (Brierley-Jones et al., 2014, p.1061).

2.8.4 Alcohol and Health

The literature highlights the lack of acknowledgement given by those within the studies in relation to the potential adverse effects of drinking alcohol on their health (Bareham et al., 2019; Dare et al., 2020; Holloway et al., 2008; Ling et al., 2012). The literature suggests that any such effects appear to be of limited concern for many (Dare et al., 2020). Ling et al. (2012) describe how any suggestion that alcohol could have a detrimental impact on health was refuted. Furthermore, whilst knowledge of alcohol units and government drinking guidelines existed, they were viewed by some participants as a form of “nanny stateism” (Ling et al. 2012, p.5). Others justified their heavier drinking habits through the lack of noticeable effects on their health: “I do have concerns about my drinking, but I still think my drinking is within manageable limits, and I never feel ill after I have drunk” (Holloway et al., 2008, p.542).

The literature suggests that some women continue to drink despite acknowledging the health risks this could pose, asserting that any potential health risks could be mitigated by adopting positive health behaviours – “well, I think it (women’s drinking) is socially acceptable. It’s probably not the best health choice I have made in my life, but (laughs) I always say I gave

up smoking, and (laughs) if I can't have a few drinks there's something wrong. I exercise a lot and eat a healthy diet, so I sort of justify that" (Dare et al., 2020, p.44).

Whilst the harmful risks of alcohol to health are rejected in much of the literature, a limited acknowledgement is made in respect of the potential adverse effects of alcohol attributed to the ageing process, particularly during menopause – "it makes me back off the wine, because I know drinking makes all forms of fat burning stop" (Dare et al., 2020, p.44).

The literature presents two differing perceptions of medical professionals; Dare et al. (2020) describe women as receiving support and encouragement from their doctors to reduce their drinking. Conversely, Gough et al. (2020) suggest that if no discussion takes place, this can be viewed as "medical endorsement", and drinking thus becomes normalised (Gough et al., 2020, p.12).

2.9 Conclusion and Relevance to Proposed Research

This literature review has identified and critically appraised 11 research studies regarding middle-aged professional women and home drinking. Only three studies specifically focused on women: Canfield et al., 2021; Dare et al., 2020; and Emslie et al., 2015. None related solely to middle-aged professional women, and Canfield et al. (2021) was the only study that exclusively focused on home drinking. Following the critical appraisal, normalised socially acceptable drinking has been established as the dominant theme, with relaxation and reward; cost, convenience, and availability; and alcohol and health found as subthemes.

As discussed in Section 2.7, I acknowledge the challenges of locating qualitative research and recognise that all relevant studies may not have been retrieved despite the rigorous process adopted, as described in Figure 1, on page 38. This point notwithstanding, the review has demonstrated a

paucity of literature regarding middle-aged women and home drinking. It appears that no studies have focused explicitly on middle-aged professional women and home drinking. A philosophical gap in the literature has been identified concerning the application of a conceptual framework. Only Brierley-Jones et al. (2014) adopted a conceptual framework within their study. Whilst they used Bourdieu's (1930-2002) conceptual tools of habitus, field and capital, the study focused primarily on the concept of habitus; hence could be considered limiting in its use.

Emanating from the literature review and subsequent critical appraisal, a gap in the literature has been found concerning middle-aged professional women and home drinking. A philosophical gap has also been identified concerning the application of a conceptual framework. This study, therefore, seeks to address these gaps and utilise the findings to inform future public health policy and practice.

2.10 Aim of the Study

There is an increasing body of literature that seeks to understand the "association of women's drinking and the meaning of cultural and social change in their lives" (Stepney, 2013, p.105). This study aims to explore the social and cultural functions of home drinking amongst a sample of middle-aged professional women living in North West England/North East Wales. Furthermore, the study seeks to explore whether the findings emulate the dominant theme arising from this review in which drinking alcohol is normalised and considered socially acceptable.

2.11 Research Questions

To achieve this aim, the research will address the following research questions:

1. Has there been a socio-cultural shift in professional middle-aged women's relationship with alcohol within the UK or England/Wales?
2. What are the implications for public health policy and practice?

2.12 Chapter Conclusion

This chapter has presented the literature review and described the search strategy. A critical review of the identified literature and key emergent themes have been presented. Emergent themes and conclusions have been discussed in relation to their relevance to the study aim and research questions. The chapter concludes with the presentation of both the study aim and the research questions which this research study seeks to address.

CHAPTER 3 – METHODOLOGY AND PROCEDURES

3.1 Introduction

This chapter describes the research methodology adopted for this study and the rationale for selecting such an approach. I present my ontological and epistemological positions as they have informed my methodological decisions and the lens through which this study is viewed. The conceptual framework is also discussed. The use of narrative inquiry as both a methodological and analytical tool is described and defined. The research method for the study, including unstructured interviews, recruitment sampling, data collection and analysis, is presented. Credibility is reflected using Yardley's (2000) principles for qualitative research.

3.2 Theoretical Framework

In this section, I seek to enable the reader to gain a deeper understanding of the theoretical lens through which this research has been undertaken, thereby assisting them in forming a judgement on the credibility and trustworthiness of the data and research findings presented (Cope, 2014). Avis (2005) views this clarity of the researcher's theoretical stance as critical, addressing the issue of "credibility" within qualitative research evidence. The subject of credibility is discussed further within this chapter on page 93.

3.2.1 Research Paradigms

Before describing the methods utilised within this study, I wish to lay out my paradigmatic stance, thus addressing my "authorial honesty" as a researcher (Sikes, 2010, p.18). The work of the American philosopher Thomas Kuhn (1922-1996) is closely associated with the development of the term *paradigm*, which he defined as a way of viewing the world and a framework from which to understand the human experience (Kuhn, 1962). Research paradigms can be considered a basic set of beliefs that guide action

encompassing four terms: ethics (axiology), epistemology, ontology, and methodology (Denzin & Lincoln, 2018). These beliefs shape how the researcher sees the world and acts within it, ensuring they articulate how their theoretical and methodological commitments frame their work, set out their ethical stance, and describe the methods used for analysis (Denzin & Lincoln, 2018).

Our experiences, habitus, and social and cultural capital, guide our epistemological and ontological positions, in turn influencing how we view the world around us (Bourdieu, 1990_a). Consequently, each research approach must be considered and applied following the researcher's epistemological and ontological stances (Kelly et al., 2018_a).

Philosophy provides the general principles of theoretical thinking within research and is used to obtain knowledge of reality (Spirkin, 1983). Two main branches of philosophy are essential: epistemology, the study of knowledge, and ontology, the study of being, "what exists in the world about which humans can acquire knowledge" (Moon & Blackman, 2014, p.1168). The term epistemology is derived from the Greek word *episteme*, meaning "knowledge" or "understanding", and *logos*, "account" or "reason" (Steup, 2020, p.1). It concerns knowledge's nature, forms, and expression (Cohen et al., 2007; Crotty, 1998; Silverman, 2003).

The researcher's epistemological stance reflects their way of looking at the world and making sense of it (Crotty, 1998), allowing them to consider the ways through which they understand themselves, others, and the world (Denzin & Lincoln, 2000; Spector-Mersel & Knaifel, 2018). Each epistemology implies an ethical-moral stance towards the world and the researcher's self (Denzin & Lincoln, 2000, p.157). The ontological position of the researcher is founded on what they believe is the nature of existence and the nature of reality (Al-Ababneh, 2020; Crotty, 1998; Spector-Mersel & Knaifel, 2018), "what it is possible to know about the world" (Snape & Spencer, 2003, p.19). Ontology and epistemology inform the researcher's theoretical perceptive

(Crotty, 1998). The researcher's ontological and epistemological stance is the foundation for their research, guiding the methodology and methods used within their study (Guba & Lincoln, 1989). The researcher must articulate how these theoretical and methodological commitments have shaped their work, describe their ethical stance, and explain the methods used for analysis (Denzin & Lincoln, 2018).

3.2.2 My Paradigmatic View

As a researcher, my epistemological position values knowledge and experience. This study is informed by a social constructionist approach, a perspective that acknowledges and examines the social processes relevant to the creation of all knowledge (Perrin & Miller-Perrin, 2011). This perspective influences how I understand the research topic, approach the research, analyse the data, and present the findings.

Positivists assert that numbers are unambiguous; I would challenge this. I support the view of Pinnegar and Daynes (2007), who argue that whilst a story invites participants into research, formulas can intimidate and exclude them. I do not hold to the positivist view of validity because there is only one objective truth. Instead, I contend that truth holds many meanings and cannot be measured by nomothetic data alone. I value people's knowledge and beliefs as meaningful and worthy of exploration and seek to understand their life as lived through narrative (Byrne, 2016; Polkinghorne, 1991). Ontologically, as a researcher, I consider that there is no definitive "truth" in the nature of the world or of people that can be measured and studied (Burr & Dick, 2017, p.6). I believe that multiple realities exist and are constructed and co-constructed by individuals and the contexts within which they live. Thus, social realities result from human activities (Luckmann, 2013). Professionally, as a public health senior manager and former Occupational Therapist, I value people's thoughts and opinions and believe that much can be learnt by listening to people.

3.2.3 Social Constructionism

Social constructionism is an epistemological position based on the belief that the social world is constructed by individuals through their social practices (Crotty, 1998). It opposes positivism and empiricism and the assumption that the world can be revealed merely by observation. While positivists seek “the truth”, social constructionism asserts that “truth” is a varying, socially constructed, and ever-changing notion; what exists is what we perceive to exist, challenging our assumptions as to what the world appears to be (Burr, 2003, p.6). There is no objective fact; instead, all knowledge is obtained from looking at the world in one way or another (Burr, 2003).

Social constructionism is critical of claims of objectivity within research; instead, it considers that the ways in which research is conducted will impact the knowledge generated (Burr, 2003; Gergen, 2015). Knowledge and understanding are viewed as being socially constructed rather than a “natural” feature of the world (Burr & Dick, 2017, p.25), overseen to a large extent by concepts and categories that are historically and culturally specific (Burr & Dick, 2017; Van Niekerk, 2005). Social constructionism posits that the creation and reproduction of what we think of as “knowledge” are intimately tied to power relations; people in some sections of society have more power than others to decide what counts as legitimate knowledge and some ways of speaking (or “discourses”) frame experience and identities in ways that can be oppressive (Burr & Dick, 2017, p.25). Consequently, “making our ‘knowledge’ of the world is considered ‘relative’ rather than absolute, rendering the idea of ‘truth’ problematic” (Burr & Dick, 2017). Research within the social constructionist paradigm attempts to: “denaturalize phenomena that have come to acquire a taken-for-granted character by highlighting the processes through which these are socially constituted” (Georgaca, 2013, p.56). As Owen (1992) highlights:

Social constructionism is the claim and viewpoint that the content of our consciousness, and the mode of relating we have

to other, is taught by our culture and society; all the metaphysical quantities we take for granted are learned from others around us.(p.386)

Taking a social constructionist stance, I support the assertion posited by Mauthner and Doucet (2003) that knowledge production will always be partial, provisional, and perspectival, sustained by social processes and action (Burr, 2003; Gergen, 2015). As a social constructionist, I have a fundamental interest in personal stories, whilst at the same time, having an awareness that dominant stories in the larger society may dominate those individual experiences (Van Niekerk, 2005, p.71).

Reflecting on Hjelm's (2019) assertion that there is "little agreement on what 'social construction' exactly means and how it should be operationalized" (p.228), my approach to social constructionism has been influenced and shaped by the work of Vivien Burr (1952-). Burr (2003) argues that no one feature defines a social constructionist position, instead suggesting that any approach that accepts one or more of the following key assumptions can be considered:

A critical stance toward taken-for-granted knowledge

- Be critical of the idea that our observations of the world unproblematically yield its nature to us.
- Challenge the view that traditional knowledge is based upon objective, unbiased observation of the world.

Historical and cultural specificity

- Social constructionism argues that the ways in which we commonly understand the world, categories, and concepts we use, are historically and culturally specific; they are products of that culture and history, dependent upon the particular social and economic arrangements prevailing in that culture at that time.

Social processes sustain knowledge

- People construct their knowledge of the world between them.
- It is through daily interactions between people in the course of social life that our versions of knowledge become fabricated.
- What we regard as truth may be our current accepted ways of understanding the world.

Knowledge and social action go together

- Each different construction also brings or invites a different kind of action from human beings.
- Constructions of the world sustain some patterns of social action and exclude others.
- They are also bound up with power relations because they have implications for what it is permissible for different people to do and how they may legitimately treat each other.

(Burr 2003, p.2-p.5).

Burr's four key assumptions resonated with me, particularly given my research's social and cultural focus, making me question whether my thoughts and beliefs were socially constructed.

3.3 Methodology

The fundamental difference between qualitative and quantitative research is their differing perceptions of knowledge (Efron & Rafid, 2019). Whilst both qualitative and quantitative research approaches are valid in different contexts and for different purposes, they represent different research paradigms (Creswell & Miller, 2000). Such paradigmatic distinctions are founded on knowledge production and the research process undertaken.

During the first half of the twentieth century, the positivist paradigm was dominant in social and educational research (Hammersley & Traianou, 2012). Positivism asserts that there is an objective world and the “goal of science is to discover it” (Corry et al., 2019. p.3). Furthermore, that proper knowledge can only be generated from objective empirical observation according to the scientific method (Crotty, 1998) using quantitative methodologies. It conceives the researcher to be neutral, free of values and biases (Spector-Mersel, 2010), who views the world through a “one-way mirror” (Guba & Lincoln, 1994, p.110).

Qualitative research is, perhaps, best referred to as a complex family of research methods (Denzin & Lincoln, 2000; Holloway & Todres, 2003). This complexity is borne out by Aspers and Corte (2019), who assert that there is a “meagre” quality of literature that provides a precise definition of the distinctive features that make it qualitative research (p.140). As a form of social inquiry, qualitative research focuses on how people interpret and make sense of their experiences and the world they live in (Seltman, 2015, p.3). It follows a naturistic paradigm based on the notion that reality is not predetermined but constructed by research participants, who continually interact with the world they occupy (Crotty, 1998; Efron & Rafid, 2019; Polit et al., 2001). Qualitative research is inductive in nature; the researcher generally explores meanings and insights in each situation (Levitt et al., 2017; Corbin & Strauss, 2008). The distinctiveness of this paradigm is the ability to explain the social processes from those who are participating in the study, orientated toward exploring and discovering something new (Avis, 2005; Flick, 2011), where meaning, rather than truth, is explored (Bailey & Tilley, 2002). The qualitative researcher is described as a “bricoleur producing a bricolage – a pieced together set of representations that are fitted to the specifics of a complex situation” (Denzin & Lincoln, 2018, p.11).

Many writers have sought to define the unique hallmarks of qualitative research. Reflecting on my study, Denzin & Lincoln’s (2018) definition

resonated for me: “the province of qualitative research is the world of lived experience, for this is where individual belief and action intersect with culture” (p.9).

My paradigmatic approach to this study is founded on my ontological belief that there are multiple realities, an epistemological stance of social constructionism, and methodologically through an interpretivist perspective. Founded within the qualitative paradigm, interpretivism aims to describe and understand how social values, beliefs and meanings are produced and reproduced in each social system (Hussain et al., 2013). Interpretative research does not aim to produce generalisations; instead, it seeks to generate relevance at a local level (Head, 2020). It aims to access a reality that is socially constructed (Walsham, 1995). Interpretivism argues that there is no objective reality which can be discovered by researchers and replicated by others, in contrast to the assumptions of positivist science (Walsham, 1993). It is based on the premise that the focus of qualitative research should be on revealing multiple realities instead of searching for one objective reality (Lincoln & Guba, 1985; Wang, 2017). As Denzin highlights: “Objective reality will never be captured. In-depth understanding, the use of multiple validities, not a single validity, a commitment to dialogue is sought in any interpretive study” (p.271).

Evidence from the literature review in Chapter 2 suggests a paucity of sociologically and culturally informed qualitative research concerning middle-aged professional women who drink at home. Qualitative approaches are known to enrich current understandings, particularly in under-researched areas (Smith, 2003). Research methods are more than the types of data collection instruments; they also encompass the process through which the researcher approaches and conceives the research phenomenon under focus (Costa et al., 2018). As a qualitative researcher, I seek to understand people (Pinnegar & Daynes, 2007) and believe that the reality I perceive and interpret is constructed by social, cultural-historical,

and individual contexts (Korstjens & Moser, 2017). Narrative inquiry has been chosen as the methodology for this study as it explores the experience of an individual and seeks to understand how “social, cultural, and environmental factors impact and shape the individual’s experiences” (Haydon & van der Riet, 2017, p.85). The method is also congruent with interpretivism. Using narrative inquiry as my research methodology will allow me to hear the women’s voices and gain a richer understanding of this under-researched area. As Holloway (2005) argues, one of the essential purposes of qualitative writing is to communicate the participants' voices, feelings, and thoughts so that their experiences are heard. Exploring these rich narratives of the women’s life as lived will enable a deeper understanding of the social and cultural changes the women have experienced during their lifetime, allowing consideration of how these may have impacted their drinking at home, enabling an “insider’s view” (Avis, 2005, p.3).

3.3.1 Narrative Inquiry

“Human beings, unlike cardboard figures, have stories to tell located in the integral scenes of their lives” (Gubrium & Holstein, 2009, p.7). Since the beginning of time, humans have been telling stories; narrative has been central to life, telling stories and sharing experiences (Wang, 2017). Mishler and Squire (2021) consider the paper written by the sociolinguist William Labov and his student Joshua Waletzky, *Narrative Analysis: Oral Versions of Personal Experience* (1997), as instrumental to the beginning of narrative inquiry (Labov & Waletzky, 1997), both in setting the scene for the development of narrative research within social sciences and as a “touchstone for narrative inquiry” (Riessman, 2008, p.81). Similarly, Dewey’s (1938) focus on temporality and continuity is central to how narrative inquirers consider experience as evolving over time (Caine et al., 2017). Since the late 1980s and early 1990s, there has been a move away from a positivist realist stance (Clandinin & Rosiek, 2007) towards a perspective focused on

interpretation and the understanding of meaning, with research in the social sciences taking a “narrative turn” to study experiences (De Fina & Georgakopoulou 2012; Grysman & Mansfield, 2017; Pinneger & Daynes, 2007; Spector-Mersel, 2010). The ensuing rise in this narrative approach is linked with the philosophical changes arising from the postmodern view that saw an interest in the individual and recognition of the influence of culture and experience on knowledge creation (Webster & Mertova, 2007). Postmodernism asserts that “the individual brings their own ‘baggage’ or past life experiences to a situation, truth and knowledge are constructed realities, and there is no truth free of bias” (Webster & Mertova, 2007, p.28).

Originating from the Latin word *narrate* to tell a story (Jovchelovitch & Bauer, 2000, p.2) in 1990, Clandinin and Rosiek named this evolving methodology *narrative inquiry* (Clandinin & Rosiek, 2007). Initially used within literary analysis (Riessman, 2008), narrative inquiry now encompasses several disciplines and covers a wide range of theoretical and methodological approaches (Ahmed & Rogers, 2017, p.3). As Chase (2005) highlights within her review of narrative research:

Contemporary narrative inquiry can be characterized as an amalgam of interdisciplinary analytic lenses, diverse disciplinary approaches, and both traditional and innovative methods – all revolving around an interest in biographical particulars as narrated by the one who lives them. (p.651)

3.3.1.1 The Use of Narrative Inquiry in this Study

During my doctoral journey, I have wrestled with how to present the women’s stories in a way that allows their voices to be heard, not diminishing the wholeness of their lives or “dissecting them” (Clandinin, 2013, p.10). Participants' quotations in some research papers are sparse, and the context in which they are said is omitted. I believe that the reader should be able to hear the participant's voice through the abstracts of their

narratives presented. As a researcher, I am privileged to receive their gift of time and their stories. However, I acknowledge that I cannot include the whole transcript or portions of it without undertaking interpretation and analysis. I explored several qualitative methods, notably Grounded Theory (Charmaz, 2014) and Free Association Narrative Inquiry (Holloway & Jefferson, 2013). Both methods advocate the use of coding during the first stage of analysis. I agree with Gergen's (2004) note of caution; an "analytical method of deconstructing stories into coded piles" could weaken "the aims of the research" (p.272) by moving away from narrative considerations of the experience. Given my concerns regarding participants' voices, I believe that narrative inquiry is the most suitable methodology to address my research questions and allow women's voices to be heard. As Josselson (2011) states, the uniqueness of narrative inquiry is that it seeks to "explore the whole account rather than fragmenting it into discursive units or thematic categories" (Josselson, 2011, p.226).

Narrative inquiry is both a "methodology and a way of understanding experience narratively" (Clandinin, 2013, p.9). Viewed as a critical strength of qualitative methodology, mainly when the focus of the enquiry is upon the relationship between "self, culture, and the influence of dominant societal discourses" (Weatherhead, 2011, p.47). The focus of this method is not only on individuals' experiences but also on the "social, cultural, and institutional narratives within which individuals' experiences are constituted, shaped, expressed, and enacted" (Clandinin & Rosiek, 2007). Considered a process of knowledge construction (Clandinin & Connelly, 2000), through inquiry into narratives, participants can reflect on what they have experienced in their lives (Chan, 2017).

Narrative inquiry is, therefore, a way of understanding and inquiring into experience through "collaboration between researcher and participants, over time, in a place or series of places, and in social interaction with milieus" (Clandinin & Connelly, 2000, p.20). Narratives, or stories, are part of our

lives, supporting our understanding of experiences as our narratives are interrelated in time, environment, and culture, reflecting our understanding of an event (Connelly & Clandinin, 1990). People live storied lives (Riessman, 2008) and, as individuals, navigate the world attempting to make sense of its natural storytellers (Bamberg, 2011). The appeal of narrative is that it expresses personal experience (Daiute, 2014, p7), as “we are storied selves” (Ingraham, 2017, p.56). Narrative inquirers aim to capture participants “life journeys” (Webster & Mertova, 2007, p.15); these “highly personal stories can illustrate wider processes of social change” (Waller, 2010, p.58). As Daiute (2014) argues, “narrating is culture in action” (p.2); thus, stories allow a “personal view of the life”, reflecting and influencing what happens in our social worlds (Mishler & Squire, 2020, p.7).

3.3.2 Narrative Challenges

Narrative approaches have been applied diversely through a vast number of distinct fields (Brown, 2017, p.216), viewed by Mishler and Squire (2021) as a source of strength. Indeed, the range of work within both methods and theories is seen as the “hallmark” of the field (Mishler & Squire, 2021, p.10). Ingraham (2017), however, adds a note of caution, commenting that narrative is “so ubiquitous and permanent in human interaction that scholars tend to heap value upon it like a bed piled with coats at a party” (Ingraham, 2017, p.56).

The increasing use of narrative inquiry has raised validation questions because it relies on individual perceptions. Mishler (1990) proposes validating narrative research through a process of “trustworthiness” (p.415). The integrity of narrative inquiry depends on the relationship between methods and findings regarding the social reality the research seeks to represent (Costa et al., 2018). Considering this within the social constructionist epistemology underpinning this research, I assert that knowledge is socially constructed; therefore, the focus lies on the researcher's trustworthiness, not on the positivist views of reliability (Costa

et al., 2018). As Riessman (1993) highlights, narrative researchers: “do not have direct access to another’s experience. We deal with ambiguous representations of it – talk, text, interaction, and interpretation” (p.8).

Reflections on the use of narrative inquiry are considered further in Chapter 5, page 209.

3.4 Conceptual Framework

The French philosopher and sociologist Pierre Bourdieu (1930-2002) sought, through his work, to overcome what he believed was the false opposition between structure and agency. Thus to: “escape from the ritual either/or choice between objectivism and subjectivism in which the social sciences have so far allowed themselves to be trapped” (Bourdieu, 1977, p.4). Much of Bourdieu’s work focused on class and the impact of social and cultural influences on the lives of individuals. Working primarily from a micro-level perspective, he sought to explain class, society, and culture by developing and applying several theoretical concepts. With his social and cultural focus, Bourdieu’s work has a strong congruence with my research.

A conceptual framework is a structure that the researcher believes best describes the natural development of the phenomenon to be studied (Camp, 2001). The conceptual framework guides the paths of a research study and offers the foundation for establishing its credibility (Adom et al., 2018). Viewed as the “researcher’s explanation of how the research problem will be explored” (Adom et al., 2018), it acts as a “blueprint” (Grant & Osanloo, 2015, p.12) for the entire research journey. The use of a conceptual framework assists the researcher to identify and build their worldview on the phenomenon they seek to investigate, shaped by their “identity and positionality” (Ravitch & Riggan, 2017, p.30), thus giving life to the research (Imelda, 2014).

In consideration then of both Bourdieu's work and the focus of my study, the conceptual framework of this study is founded upon the work of Pierre Bourdieu, utilising his sociological lens, critical concepts of habitus, field, and capital and further concepts of doxa and hysteresis. The next section of this chapter introduces Bourdieu and his concepts.

3.4.1 Pierre Bourdieu

Pierre Bourdieu (1930-2002) is considered one of the most notable social philosophers of the twentieth century (Grenfell, 2014). The philosophical context of the second half of the twentieth century is vital in understanding Bourdieu. The structuralist Claude Levi Strauss (1908 – 2009) contended that there were rigid rules for all of society and that these laid the foundations for all social life. However, postmodernists and existentialists such as Jean-Paul Sartre (1905-1980) posited that an individual's subjective outlook could never be quantified. Bourdieu considered both views an "absurd opposition between individual and society" and regarded both as necessary and working together (Bourdieu, 1990a, p.31). During his lifetime Bourdieu strove to overcome the limitations between these two dominant methodologies (Bourdieu, 1977). He developed a set of theoretical "thinking tools" to overcome this opposition (Grenfell, 2014, p.2), enabling him to "theorise human action as a dialectical relationship between objective structures and subjective agency" (Stahl, 2015, p.21). The most notable tools in his "conceptual toolbox" (Carlson & Schneickert, 2021, p.1125) are habitus, capital, and field; through these concepts, Bourdieu integrated objectivism (which emphasises the role of objective structure in social practice) and subjectivism (which emphasises the role of agency in social practice) (Maton, 2014, p.52). These tools have become research lenses through which social phenomena can be understood and explained. Grenfell (2014) asserts that habitus, field, and capital should not be viewed as separate entities; instead, they should be considered as interconnecting, creating the structure and conditions of the social environments studied by

Bourdieu. As Bourdieu and Wacquant (2007) note, “such notions as habitus, field, and capital can be defined, but only within the theoretical field they constitute, not in isolation” (p.96).

This interconnectedness is discussed within Bourdieu’s seminal text *Distinction* (Bourdieu, 2010/1984), in which Bourdieu formulated his theory of social practice with the equation:

$$[(\text{habitus}) \times (\text{capital})] + \text{field} = \text{practice. (Bourdieu, 1984, p101)}$$

“Practice” for Bourdieu is the product of the relationship between habitus and field, where, within the field itself, there are powers at stake, especially between people with capital and those without. Practice, therefore, results from associations between the person’s dispositions (habitus) and their position in the field (capital) within the current state of play of that social space (field) (Maton, 2014, p.50).

Bourdieu’s theoretical tools will be utilised in subsequent chapters of this study to support the analysis and discussion. An overview of the key concepts is given to assist the reader in introducing Bourdieu’s epistemology.

3.4.1.1 Habitus

Whilst perhaps a lesser-known tool within this theoretical toolkit, habitus is considered the primary area of Bourdieu’s focus, central to his theoretical framework and fundamental to his *field theory* approach (Power, 1999). Bourdieu developed his theoretical concept of habitus to explain individuals’ dispositions to action in relation to the field (Bourdieu, 1986; Bourdieu, 1990_a) and as a solution to what he saw as a “false opposition between objectivism and subjectivism” (Grenfell, 2014, p.4). Similarly, he used habitus to demonstrate ways in which the body is not only within the social world, but the social world is in the body (Bourdieu, 1977). One of the fundamental characteristics of habitus is that it is embodied and not simply

made up of mental attitudes and perceptions (Reay, 2004_a). Bourdieu (1977) defined habitus as:

the structures constitutive of a particular environment (e.g., the material dispositions of existence characteristic of a class condition) produce habitus, systems of durable, transposable dispositions, structured structures predisposed to function as structuring structures, that is, as principles of the generation. (p.72)

Considering this in more detail: “structured” by past and present experiences such as family, upbringing, education; “structuring”, as habitus shapes our present and future experiences; and “structured” as it is “rationally ordered rather than disorganised” (Maton, 2014, p.50). Bourdieu’s concept of habitus thus brings together the separation of agency and structure by asserting that through a “process of acculturation, social structures become embodied” (Wiltshire et al., 2019, p.228). “Agency” for Bourdieu relates to the influence of the individual or people on the socio-political structure. The definition of “structure” was clearly articulated within his early writings, with Bourdieu referring to this as a self-sustaining system: “a socio-political or economic structure is collectively orchestrated without being the product of the orchestrating action of a conductor” (Bourdieu, 1977, p.72). Whilst the social structures within habitus do not define behaviour, the person is nonetheless inclined to behave in accordance with the social structures that have shaped them; in effect, they carry those social structures with them (Power, 1999).

Central to the processes of the habitus is a system of “dispositions” through which we perceive and act in the world (Bourdieu, 2000). Disposition was, for Bourdieu, essential, as it brought together ideas for structure and agency. These dispositions are acquired and built over time, and the layers that makeup habitus inevitably reflect the social conditions in which they

were formed (Wacquant, 2011, p.86). For Bourdieu (1977), habitus is the result of history being codified into practice:

In each of us, in varying proportions, there are part of 'yesterday's man'; it is yesterday's man who inevitably predominates in us since the present amounts to little compared with the long past in the course of which we were formed and from which we result. (p.79)

All activity and knowledge are thus informed by the person's history and how this is combined on the one hand and their context or circumstances on the other (Schirato & Roberts, 2020, p.133).

For Bourdieu, habitus is more than a theory; it is an essential tool for tracing social practices (Costa et al., 2018). Bourdieu uses the concept of habitus to explain how similar behaviours are associated with social structures such as class, gender, and ethnicity, whilst at the same time preventing the determination of those social structures by either behaviours, or by neglecting the agency of the individual. Bourdieu (1990a) argues that an individual's primary habitus, instilled in childhood, tends to be more resilient than one's secondary habitus that may be learned later in life, for example, through education or work. As with gender the class disposition of a person's primary habitus is remarkably resilient: even if the individual moves away from the class origins of their childhood, their accent, mannerisms, and ways they present themselves, may uncover their provenance (Power, 1999).

Whilst habitus can both shape and produce practice, it does not define it. Power (1999) uses the analogy of jazz musicians who "bend and shape their music" (p.49) to explain the flexibility of practice which is governed by the habitus. Whilst the musicians may follow the basic music as written, and remain within certain musical boundaries, their improvisations, may result, in a composition that is barely recognisable from that of the original (Power, 1999). Costa and Murphy further describe the flexibility of the habitus as "an

evolving process through which individuals act, think, perceive and approach the world and their role in it”, thus they argue it “denotes a way of being” (Costa & Murphy, 2015, p.7).

Similarly, Maton describes habitus as an “enigmatic concept” (Maton, 2014, p.48) that orients our ways of constructing objects of study, highlighting issues of significance, and providing a means of reasoning about them. Thus, the principal contribution of habitus is to “engender a sociological gaze by helping to transform our ways of seeing the world” (Maton, 2014, p.49).

Bourdieu’s lifelong concern was how we interact sociologically – what glues society together. His particular interest concerned how individuals are both free and yet constrained by the rules of society and how these two phenomena interact, such as what determines taste (Waller, 2020). Habitus explains how our likelihood to act in a certain way is dependent on how we expect others to respond (Waller, 2020), allowing “researchers to explain how and why social agents conceive and (re)construct the social worlds in which they are inserted” (Costa & Murphy, 2015, p.1). Bourdieu sought to access internalised behaviours, perceptions, and beliefs that individuals carry with them, which, in part, are translated into the practices they transfer to and from the social spaces in which they interact (Costa & Murphy, 2015).

Some argue that the concept of habitus is overused and, because of its broad applicability, can become ambiguous and therefore lose its usefulness (Waller, 2020). Indeed Reay (2004_a) describes habitus as being “sprayed through academic texts like intellectual hairspray” (Reay, 2004_a, p.432). However, as Waller (2020) suggests, habitus is of most use in allowing us to consider what might be arbitrary, thus the ways in which we act and whether we might be behaving in that way for the good of other people, or other groups, in a way that is both limiting for us ourselves and for others.

3.4.1.2 Field

The habitus elucidates more comprehensive practice through its interaction or “unconscious relationship” with what Bourdieu describes as a “field” (Grenfell, 2011, p.21). When considering habitus, we must “seek to understand the social structures (fields) that create or alter it” (Costa & Murphy, 2015, p.7). Bourdieu and Wacquant (2007) contend that the “fundamental object of social science is the field” (p.107). To understand the social interactions between people, Bourdieu (2005) argues that it is not enough to look purely at what is said or what happened. Instead, the social space in which the events took place must also be considered (Thompson, 2014, p.65). As MacArthur et al. explain, “a field is a bounded social space with its own principles in which actors struggle or compete to change or preserve its boundaries and form in line with their interests” (MacArthur et al., 2017, p.3).

Bourdieu described this space as *le champ* or “field”. The importance of understanding the French definition of *le champ* is highlighted by Thompson (2014):

Bourdieu’s field was not one filled with flowers; instead, it describes an area of land, a battlefield or a field of knowledge. Many analogies have been used to describe ‘le champ’, notably a football field, a field in science fiction, and a field of forces in physics. (p.66)

Players must learn the “rules of the game” (Bourdieu, 1990_a) and are required to acquire the necessary skills to play. If an individual's habitus is structured to correspond with the structures within the field in which they play, they take on a “doxic” or taken-for-granted mode in which the rules of the game are accepted and unquestioned (Grenfell, 2014). The field is also a place of conflict and competition in which players seek to reach their goals (Bourdieu, 1990_a).

The social world comprises of vast fields (such as education, science, the arts, and religion) within which smaller fields function as subfields; it can therefore be viewed as a connection of harmonised and variable fields and interwoven fields. Thus, an individual can be part of multiple fields simultaneously and have a higher status in some fields and lower status in others. This last point is considered further within the capital theory, as “fields cannot exist without capital” (Power, 1999, p.31). Bourdieu uses field, alongside capital and habitus, to explore social practice. Players' positions within the field are determined by the amount of capital and power they possess in relation to that specific field (Bathmaker, 2015; Hilgers & Mangez, 2015). Although fields are bounded, they are not static and can “change over time” (Grenfell & James, 2004, p.510).

3.4.1.3 Capital

Bourdieu further developed Marx's theoretical concept of economic capital to incorporate cultural, social, and symbolic capitals (Fowler, 2020, p.440), arguing that the structure and function of the social world cannot be accounted for solely in terms of economic capital (Bourdieu, 1986, p.15). Field (2016) suggests that Bourdieu was the first to develop a systematic conception of social capital and that he, like Marx, shares concern regarding the unequal distribution of power (p.3). There is a strong relationship between capital and the concept of the field; as Bourdieu and Wacquant (2007) explain, “a capital does not exist and function except in relation to a field. It confers power over a field” (p.101), as possession of specific amounts and types of capital impose on the space of possible and conceivable “moves” within a field (Atkinson, 2021, p.197).

Bourdieu's concept of capital takes economic, social, cultural, and symbolic forms, which are mutually convertible (Bourdieu, 1986). Economic capital includes financial resources (for example, property, income, material possessions and savings) and is viewed as the easiest to convert (Bourdieu, 1986) Social capital comprises social networks or “relationships of mutual

acquaintance and recognition” (Bourdieu & Wacquant, 2007, p.119) and can be legitimised and institutionalised by family, class, and group memberships (Bourdieu, 1986). Cultural capital is considered Bourdieu’s best-known concept: it is a relational concept that exists in conjunction with economic, symbolic, and social capital and, therefore, cannot be considered in isolation (Reay, 2004b). Bourdieu (1986) describes cultural capital in three forms – embodied, objectified, and institutionalised. A person’s accent or regional dialect is a form of embodied cultural capital, and a luxury car, or record collection is a form of cultural capital in its objectified state. Qualifications such as degrees or titles that denote cultural authority and ability are viewed as institutionalised cultural capital. Symbolic capital is manifested in individual prestige and personal qualities such as authority and charisma (Bourdieu, 1985). Sharing similar forms of cultural capital with others, for example, the same taste in literature or films, or a degree from a university such as Oxford or Cambridge, creates a sense of shared identity and group position (people like us). However, Bourdieu highlights that cultural capital is also a significant cause of social inequality. It is differentiated as certain forms are viewed more highly than others and can limit a person’s social mobility as much as economic capital, such as income or wealth (Bourdieu, 1986).

Further Bourdieusian concepts discussed within this study are presented below.

3.4.1.4 Doxa

Within his theory of practice, Bourdieu highlighted the significant role of doxa, combining the work of Marx and Husserl (Fowler, 2020). The term *doxa* derives from the Greek word common belief or opinion. Bourdieu considered doxa the “cornerstone” of any field (Deer, 2014, p.116). People are intricately connected to fields by a specific doxa – a “taken-for-granted sense of what is done within the field underpinning conservative or subversive strategies” (Atkinson, 2021, p.197). These taken-for-granted,

unquestioned truths of a field provide the rules of play within the limits of what is thinkable and doable in a field (Fowler, 2020). Phrased by Bourdieu (2010),

Doxa occurs when we ‘forget the limits’ that have given rise to unequal divisions in society: it is ‘an adherence to relations of order which, because they structure inseparably both the real world and the thought world, are accepted as self-evident’.
(p.473)

3.4.1.5 Hysteresis

The term *hysteresis* originates from scientific experimentation; its key characteristics, which describe a mismatch or time lag in a previously well-behaved change, are derived from this context. Bourdieu viewed hysteresis as a necessary consequence of his definitions of habitus and field as mutually generating and generated. Hardy argues that change is a necessary consequence of Bourdieu’s definitions of habitus and field as interrelated and interpenetrating so that a change in one necessitates a change in the other (Hardy, 2014, p.126). Bourdieu uses this concept to describe the impact of change on the structure of the field: for example, a time of crisis or a transition period can result in an individual’s dispositions being incapable of providing them with a “feel for the game”, causing a disruption in the self-regulation (habitus) within the field (Hardy, 2014, p.129). Bourdieu conceptualised this disconnect as the “hysteresis effect” (Maton, 2014, p.58). Hysteresis can also occur if someone encounters a field to which their habitus is markedly unaccustomed. This dissonance between the habitus and field results in feeling like a “fish out of water” (Maton, 2014, p.56). New dispositions must therefore be acquired for the individual habitus to acquire a feel for the game within this altered or new field (Russell, 2014).

3.4.2 Using Bourdieu's Toolbox

MacArthur et al. (2017) assert that the concepts of habitus, field and capital can be utilised in the exploration of alcohol consumption due to "Bourdieu's focus on, and explanation of, the social world and the dispositions that shape behaviour, thoughts, and feelings within social contexts" (p.32). This is particularly relevant in exploring alcohol consumption, which, they argue, is shaped by "multiple factors" (MacArthur et al., 2017). Similarly, Waterson (2000) comments that Bourdieu's concept of habitus may be beneficial in alcohol research, suggesting that social groupings develop a culture of habits or unthinking actions that become part of everyday life (p.30). When considering patterns of drinking consumption more generally, Bourdieu (2010/1984) suggests that they can be understood in terms of the underlying unspoken inclinations or taken-for-granted preferences. These vary between groups and act as a way in which to differentiate one group from another. He argues that certain consumption patterns enable individuals to relate with other social groups. These patterns then gain symbolic meaning. In this way drinking a glass of wine, a glass of prosecco, or a gin and tonic, not only shows the social grouping of the individual, but often gives an indication of their age, as drinking trends change over time (Waterson, 2000, p.105).

Bourdieu's theory has been applied to alcohol research by others (MacArthur et al., 2017; Brierley-Jones et al., 2014, Järvinen & Gundelach, 2007; Lunnay et al., 2011; Scott et al., 2017). Whilst these studies have utilised the work of Bourdieu, all bar Brierley-Jones et al. (2014), have focused on young people's alcohol consumption. Findings from the literature review (page 56) suggest that Bourdieu's theory has not been applied to research specifically concerning middle-aged professional women who drink alcohol at home. This study affords a unique opportunity, using a Bourdieusian lens, to explore the social and cultural functions of home drinking in this specific cohort of women.

3.5 Conclusion

In this section, I have discussed, defended my theoretical stance, and presented the conceptual framework utilised for this study. For ease of reference, Table 5 below provides a summary of my approach.

Table 5 – Summary of Approach

Conceptual framework	Paradigm	Epistemology	Ontology	Methodology	Methods
Bourdieu's theory of practice	Interpretivism	Social constructionism	Multiple realities exist	Narrative inquiry	Unstructured interviews

3.6 Research Methods

The next section of this chapter describes and critiques the research process undertaken. Seale (1999) describes this as “auditing”, whereby, through a process of reflexivity, researchers provide “a methodologically self-critical account of how the research was done” (p.468).

The research commenced following the receipt of ethical approval by the University of Chester Research Ethics Sub-Committee of the Faculty of Health and Social Care on 20 March 2018 (Appendix 2, page 269).

3.6.1 Study Design

3.6.1.1 Sampling Strategy

Building on the alcohol segmentation work undertaken by Public Health Wales (Emmerson, 2015), a purposive sampling strategy (Guest et al., 2006; Oliver, 2013) was used for participant recruitment. In contrast to random sampling (Gravetter & Forzano, 2015), this method ensures the selection of information-rich participants relevant to the research question through pre-

selected criteria (Schwandt, 2007). The selection of “information rich” and “illuminative” participants enables a greater in-depth understanding of the participants and the issues of “central importance” to the study (Patton, 2002, p.40). This sampling method relies on the researcher’s judgment in determining the population of interest for the research and highlights the importance of the researcher’s prior knowledge of the study population (Daiute, 2014).

3.6.1.2 Inclusion Criteria

Constructing inclusion criteria for this study ensured that the recruited participants identified with the required characteristics:

The inclusion criteria were defined as women who identified themselves as:

- being in a professional occupation
- being middle-aged
- drinking alcohol at home
- currently in employment

For the purpose of this study, *professional* is defined as “relating to work that needs special training or education” (Cambridge Dictionary, 2022). The period that defines middle-age is recognised as being somewhat arbitrary (Encyclopaedia Britannica, 2021). Indeed, epistemologically, I would argue that the term *middle-age* is a social construct. Whilst the Participant Information Sheet (Appendix 3, page 270) suggested 45 to 60 years; potential participants were asked to self-identify whether they considered themselves middle-aged. This resulted in an age range of study participants from 41 to 62 years, furthering my belief in the subjective nature of defining age.

3.6.1.3 Exclusion Criteria

This study seeks to explore and understand middle-aged, professional women who drink alcohol in their homes. The exclusion criteria were therefore defined as follows, women who:

- do not drink alcohol
- defined themselves as having alcohol problems or being alcohol dependent
- are known to the researcher

Due to the potential sensitivities of the subject, participants who were known to the researcher could potentially impact on the women's ability to speak openly and freely and could also be subject to bias.

3.6.1.4 Sample Size

Unlike quantitative studies, Ranney et al. (2015) advise against determining a priori or an exact sample size for a qualitative study. Narrative inquiry is an idiographic method that aims to gain insight into personal experiences; it does not aim to provide neutral, objective, generalizable data (Gilbert, 2002). Narrative studies require in-depth interview data explorations, and small sample sizes of one to ten participants allow for such in-depth engagement (Frank, 2012; Gilbert, 2002; Haydon et al., 2017; Wells, 2011). While some might view this figure to represent a relatively small sample size, Wells (2011) considers this appropriate for narrative studies, given the detailed and rich information narrative research generates. This view is supported by examples of recent doctoral theses where the narrative methodology has been used: Langley's (2015) study of six young mothers' experiences of relationship abuse and Sawyer's (2016) research concerning eight people recovering from alcohol dependence.

3.6.1.5 Recruitment

A purposive sample of two women was initially identified through a “gatekeeper” (Lavrakas, 2008), who contacted potential participants on my behalf, providing them with copies of both a recruitment letter (Appendix 4, page 272) and a Participant Information Sheet (Appendix 3, page 270). Further recruitment was sought from a Women’s Business Network within the Northwest of England and North Wales. The network brings together female professionals enabling them to share experiences, exchange ideas and foster ongoing relationships. As this study seeks to hear the voices of professional women, this was felt to be a potential recruitment source. Support was therefore sought and subsequently obtained from the local authority to broker introductions into the network via their Deputy Chief Executive (DCE). Approval was given for details of my study to be included on the network’s website and for me to attend a network meeting to give a brief outline of my research. Copies of the Participant Information Sheet (Appendix 3, page 270) were then shared with women at the meeting who expressed an interest, culminating in eight women agreeing to participate in the study. The women were asked to choose pseudonyms to both protect their anonymity and allow identification of self in the study (Lau & van Niekerk, 2011).

The first interview took place on 30 May 2018, and subsequent interviews continued until 28 November 2018. Verbatim transcription took place immediately after each interview. Following ongoing discussions with my Supervisory Team throughout the recruitment, interviews, transcription, and ensuing development of narratives, the stories of ten women are the focal point for this study.

Table 6 below provides an overview of the women’s ages and occupations.

Table 6 – Participants’ Demographic Details

Name	Age	Occupation
Wallis	57	HR Manager
Abbie	50	Banking Executive
Elaine	52	Regional Fund Raiser
Elizabeth	62	International Trade Advisor
Helen	52	Deputy CEO
Jessica	48	Managing Director and Personal Travel Advisor
Linda	41	Associate Director
Pixie	52	Business Director
Sarah	47	Wellbeing Coach
Barbara	53	Senior Government Officer

3.6.2 Ensuring Ethical Rigour

Tracy (2010) highlights the importance of ethical considerations as a critical criterion for “quality” in qualitative research; indeed, such considerations are essential throughout the research process (Agee, 2009). Ensuring such ethical rigour requires the adoption of a reflexive stance throughout. Reflexivity is discussed further in Chapter 5, page 209.

3.6.3 Ethical Considerations during the Interview Process

Information regarding the purpose of the research was provided during recruitment and restated at the commencement of the interviews; see Participant Information Sheet (Appendix 3, page 270). Informed Consent (Appendix 5, page 273) was sought in line with ethical principles (Brinkmann & Kvale, 2008; Bulmer, 2011) in accordance with *University of Chester Research Governance Handbook* (University of Chester, 2022, p.28). The ethical issues of exploring what may be a sensitive subject were recognised. Before commencing, I reminded each of the women that they could ask to pause the interview at any time for any reason. In recognition of my ethical responsibilities as a researcher, particularly non-maleficence (Singh & Ivory,

2015), the need to ensure that no intentional harm was caused to the women because they shared their stories with me was acknowledged. Participants were reminded of their right to withdraw from the study at any time. Sharing personal stories regarding their drinking may have invoked many emotions and concerns regarding the amount of alcohol they were consuming. In case support was required during or after the interview, I ensured that I had contact details to hand for the local substance misuse support services, recognising that reflections could necessitate such a request.

3.6.4 Interview Method

3.6.4.1 Capturing the stories

As Ryan et al. (2009, p.310) note, “it is pertinent that the type of interview is congruent with the research question and aims and objectives of the study”. The method, therefore, enables the participant to drive the research, thus allowing them to focus on what is most important to themselves rather than purely the research agenda. Mishler (1986) describes stories as jointly constructed via relatively few open-ended questions. Flick (2011) advocates using generalist questions to avoid hindering the participant's storytelling; a method also endorsed by Earthy and Cronin (2011), who recommend that researchers use broad questions such as “tell me about your life” (p.432). I started the interview by asking, “can you tell me about the social and cultural changes you have experienced during your lifetime concerning alcohol consumption, particularly within the home?”. Thereafter I adopted an “active listening” approach (Kvale & Brinkmann, 2009; Squire, 2008) to minimise any directive influence on my part during the interview. The interviews were captured using a digital voice recorder.

An issue of confidentiality arose concerning the interview location. Participants were asked to choose their location, whilst five women chose to be interviewed within their own homes; at the participants' request, two

were conducted within my workplace and three within cafés. Locations notwithstanding, a confidential environment was maintained, with the interview process paused, if necessary, until confidentiality could be re-established. These differing locations bring issues of power, particularly in terms of interviewing within my workplace and discussing what could be a potentially sensitive subject within a public environment. The interview locations are further explored within Chapter 5, page 213.

3.6.4.2 Transcribing process

After conducting the interviews and recording the women's stories, I transcribed the interviews verbatim. I support the view held by Ranney et al. (2015) that the analysis process begins during the interview itself and transcription when undertaken by the researcher themselves. The completed transcripts were returned to each woman for feedback to aid trustworthiness. In keeping with social constructionist epistemology, I sought to elicit "member reflections" (Tracy, 2010, p.848). I was not pursuing a single truth, instead asking the women to reflect on their narratives and confirm they were happy with the content. Only one of the women asked for changes to be made, making them herself within the returned transcript. A copy of a transcript can be found in Appendix 6, page 274. Sharing stories of a personal experience is a "balancing act, a process of choosing what to move from the private to the public" (McCormack, 2001, p.xviii). I listened to the women's stories when transcribing and continued to revisit the actual recordings during data analysis. This allowed me to become more immersed in the data and continually hear the women's voices throughout the process.

3.6.5 Data storage

Researchers must ensure that data are kept securely and that the form of any publication (including those published online) does not directly or indirectly lead to a breach of agreed confidentiality and anonymity, data protection principles were therefore adhered to. In accordance with

research governance, all data generated during this research will be held for a minimum of ten years from the date of final publication, after which time it will then be destroyed (University of Chester, 2022, p.43).

3.6.6 Narrative analysis

Just as there are multiple forms of narrative research (Riessman, 2008; Squire, 2008), there is no defined method of narrative analysis. Instead, the term refers to an analytical approach that focuses on interpreting data that appear in the form of stories (Mishler, 1995; Riessman, 2008). The veracity of the narrative is therefore founded upon the relationship between the methods of analysis used and the data presented. The emphasis then is on the “trustworthiness of the research rather than on more positivist conceptions of reliability” (Costa et al., 2018, p.26). Riessman (1990) argues that the main difference between narrative analysis and other forms of qualitative analysis is that it:

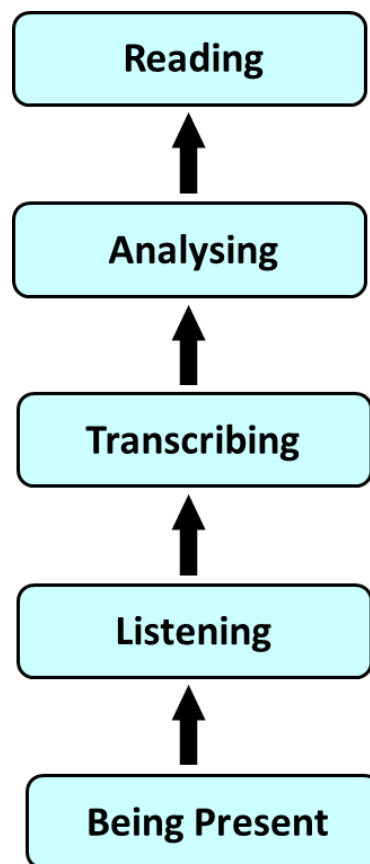
does not fragment the text into discrete content categories for coding purposes but, instead, identifies longer stretches of talk that take the form of narrative – a discourse organised around time and consequential events in a ‘world’ created by the narrator. (p.1195)

As discussed in Section 3.3.1.1 of this chapter, the form of analysis I use to allow women’s voices to be heard is fundamental to me. After much reading and consideration, I felt that using thematic narrative analysis, as described by Riessman (2008), was the best fit for what I sought to achieve. Whilst all forms of analysis are concerned with content; thematic narrative analysis primarily focuses on “what” is said (Riessman, 2008, p.53). One of the fundamental differences in this analysis is that narrative accounts are treated as units rather than fragmented into categories. The story “remaining ‘intact’ by theorizing from the case rather than from component themes (categories) across cases” (Riessman, 2008, p.53). I felt the ability to

theorise from each story would allow me to analyse and interpret each of the women's stories individually and, most importantly, let their voices be heard.

To aid the reader, figure 2, provides a visual representation of the process undertaken. The first stage describes the researcher's presence with the participant within the interview setting. In stage two, the listening process then begins when the participant begins to tell their story. Stage three focuses on transcription. The women's stories were then transcribed verbatim, and the process of analysis began – turning story into narrative. Following transcription, each story was printed out on A3 paper, and the story was read, and re-read from both the text and from listening to the digital recording. Notes were made, using coloured ink, from the stories as told to provide a focus on what had been said. A copy of an annotated transcript is found in Appendix 7, page 282. The stories from the transcripts were then developed into narratives. In the final stage, the narratives derived from the analysis are then shared with the reader within this thesis.

Figure 2 – Narrative Analysis Research Process Diagram



(Adapted from Riessman, 1993, p.10)

As narrative inquiry is situated within the interpretive paradigm, it cannot be viewed by quantitative standards of quality situated in the positive paradigm, such as validity and generalisability. However, in recognition of the need to demonstrate quality and credibility, Yardley's (2000) four principles for qualitative research have been applied to this study. These principles are discussed in section 3.6.7 below.

3.6.7 Quality and Credibility

As discussed on page 91, validation of narrative research focuses on the researcher's trustworthiness. This then raises the question of quality and credibility within the research process. The term "quality" has been challenged regarding what constitutes quality in research (Seale, 1999).

Lincoln and Guba (1985) highlight the challenge faced by researchers in terms of credibility, how could they “persuade their readers” that their research findings were “worth paying attention to” (p.290).

In recognition of the need to demonstrate quality and credibility in this research, Yardley’s (2000) principles for qualitative research have been applied to this study. Described by Yardley (2000) as “characteristics of good (qualitative) research” (p.219), these characteristics comprise four principles: sensitivity to context, commitment and rigour, transparency and coherence, and impact and importance. The use of these principles within this study is discussed in more detail below.

Sensitivity to context – the social and cultural context within which this research takes place is presented and discussed within Chapter 1. Literature pertaining to the area of study is appraised and the research questions developed. Ensuring synergy between the research question and method of analysis chosen (Yardley, 2000), through the presentation of my epistemological and ontological stance is described. The use of Bourdieu’s theory of practice (Bourdieu, 1977) as a conceptual framework, and details of the methodological approach are presented in Chapter 3. The relationship between myself as a researcher and the women who participated in this study, including the settings in which the interviews took place, are also discussed.

Commitment and rigour – overcoming the many challenges I have faced in completing this study; I believe this demonstrates my personal and professional commitment to this work. Taking an ethical stance, considering how to inform participants about the study, recognising the time taken for data collection, and treating all participants with respect and honesty. Ensuring rigorous data analysis, including direct quotes from participants and “member reflections” (Tracy, 2010, p.844). Further strengthened using Bourdieu’s theory of practice (Bourdieu, 1977).

Prolonged engagement with the data was achieved by regularly returning to the original audio recordings throughout this study's development, enabling me to gain a deeper insight and understanding of the women's stories and ensure their voices are heard in the developing narratives. Analysis, concepts, and findings have been regularly discussed with my supervisory team (Appendix 8). The team's critique and feedback have been used to enhance this work further, thus adding to the credibility and trustworthiness of this study.

Transparency and coherence – a detailed account of each data collection and analysis stage is provided. Extracts from transcripts and analysis are provided within the appendices to strengthen transparency, providing a deeper understanding of the “rich accounts providing a meaningful reality to the reader” (Yardley, 2000, p.222). I recognise that the interpretation of the data is my own and that others may have taken a different theoretical and epistemological perspective, potentially finding other meanings from the stories. The importance of reflexivity is recognised Mauthner and Doucet (2003). As Tracy (2010) states, “one of the most celebrated practices of qualitative research is self-reflexivity, considered to honesty and authenticity with one's-self, one's research, and one's audience” (p.842). A reflexive account of this study is provided in Chapter 5.

Impact and importance – this study has been conducted following an identified gap within the current literature. The dissemination of findings is recognised as a key impact of conducting research. As a professional doctorate, particular importance is given to the critical contribution of this research to public health policy and practice. Findings will be disseminated at both a local, regional and national level through both presentation and publication. This is discussed further within Chapter 5.

3.7 Chapter Conclusion

Research paradigms have been examined in this chapter, and my epistemological and ontological stances have been defined. The use of a conceptual framework for study has been presented, including a detailed discussion of Bourdieu's theory of practice (1977). Narrative inquiry has been propounded and considered the chosen methodology for this study. Research methods have been described, and quality and credibility, using Yardley's (2000) principles for qualitative research discussed.

CHAPTER 4 – NARRATIVE ANALYSIS AND DISCUSSION

This chapter presents the findings following the analysis of the ten transcribed interviews. A combined analytic and discussion approach has been used. I believe this provides the reader with a more congruent approach. In line with thematic narrative analysis (Riessman, 2008), each story is analysed and presented as an individual narrative. Each narrative is then considered further through the lens of Bourdieu's theory of practice (1977). Emergent themes emanating from the narratives are then drawn together and discussed. These are then presented as dominant and subordinate themes. Finally, the themes are compared against the extant literature.

4.1 Individual Stories

4.1.1 Wallis' story

Wallis' demographic details

Name	Age	Occupation
Wallis	57	HR Manager

Wallis began her story by reflecting on her early childhood and how coming from "just a middle-class family", alcohol was only drunk on special occasions or with Sunday meals. This cultural positioning runs throughout Wallis' narrative. In Bourdieusian terms, Wallis refers to her middle-class habitus (Bourdieu, 1977). As described in Chapter 3, habitus can be considered a system of dispositions, including tastes, through which we see and act within society (Bourdieu, 2000). Bourdieu argues that one's primary class habitus is instilled in childhood through parental transmission and is durable (Bourdieu, 1990_a).

Wallis recalled her parents' interest in wine and questioned whether this, alongside their holiday experiences, had contributed to her and her siblings' drinking habits, "I am not sure if that's influenced me and my four siblings?". Wallis grew up in the 1960s and 1970s, a period prior to the advent of package holidays where planes, due to their size, had limited seating capacity and only a small number of hotels were available. Consequently, foreign holidays were costly and limited to those who could afford such an expense. Considering this through a Bourdieusian lens, Wallis' parents' ability to travel during this period is a signifier of both economic and cultural capital and taste. Bourdieu describes how taste acts as a marker of distinction (Bourdieu, 2010/1984). For Wallis, her family's possession of economic capital afforded the opportunity for foreign travel, enabling them to experience a greater variety and choice of wine, enhancing both their cultural and symbolic capital and, ultimately, the acquisition of taste (Bourdieu, 2010/1984). For Wallis and her family, class, taste, and distinction are conveyed through their wine drinking, not only on special occasions or with a Sunday meal, but through the distinction offered to those who could afford a holiday abroad. This middle-class habitus instilled within her childhood upbringing can be used to explore Wallis' behaviour and attitudes towards alcohol in her adult life within the subsequent fields (social spaces) in which she interacts.

Wallis described what she considered the "dramatic" shift in the cultural practice of alcohol consumption that had taken place in the intervening years from her childhood into adulthood. From something that was, in her early years, viewed as occasional to it now being normalised; home drinking had become an "accepted" behaviour:

I saw a dramatic change from my parents who, when their family came round, they would have a cup of tea, to probably 20 years later, when in actual fact it was only during the daytime it was tea or cake or whatever, but when you got to a certain time in the afternoon it was kind of acceptable that they might

have a G&T or a glass of wine or something if somebody came round for a drink.

This acceptability and normalisation of drinking at home continues throughout Wallis' narrative.

Wallis spoke of her early married life and buying her first house with her husband. Recalling how they only drank alcohol on an occasional basis, generally at the weekend:

When we bought our first house, we would probably have a bottle of wine on a Saturday evening if we were in, or on a Friday evening. Won't name some of the wines as it makes us laugh now that we drank it.

Wallis' narrative again appears to act as a reminder to both herself and the interviewer of her status and distinction. Buying your first house is a significant life event and often a struggle for many to afford. The ability to do this and regularly be able to buy wine too can be considered a signifier of the economic capital they held. Wallis appeared embarrassed to say what types of wine they had drunk. Bourdieu discusses this apparent embarrassment within his seminal work *Distinction: A Social Critique of the Judgement of Taste* (2010/1984). He writes, "tastes are first and foremost distastes" (Bourdieu, 2010, p.49), arguing that a person's aesthetic choices are an indicator of class. In the 1980s, wine such as Blue Nun were marketed as a drink of sophistication; however, as tastes changed, it was no longer viewed as such and instead treated with derision (George, 2020). The shift in the socio-cultural position of this and other wines from the 1980s may give rise to the change in Wallis' aesthetic choices (George, 2020). Epistemologically, I would argue that this change in status can be viewed as a social construction. Initial marketing promoted a product of sophistication, which, through a change in the social purview, became one of distaste. This can be similarly observed in other areas of life, where taste and social acceptability change, smoking being one such example. Bourdieu

(2010/1984) combines this distaste with the habitus to explain the differences in the social positioning of the classes.

For Wallis, the cultural change in drinking at home began in the mid-1980s when, if friends came round, they would always have wine or beer. Again, friends sharing similar cultural and symbolic capital creates a feeling of shared identity, as in their shared drinking habits. Wallis recalled the subsequent shift of her drinking habits from “not got kids you go out” to the 1990s, when, with the advent of parenthood, home drinking manifested itself more predominately for Wallis. Being a parent, coupled with a lack of extended family for support (both her parents and in-laws had passed away), meant that she and her husband could not go out together. Drinking wine at home became the norm and something to look forward to:

So, I think it then became probably quite norm... I would look forward to thinking about eight o'clock, then I would be able to have a glass of red wine, sit down, read a book, or do whatever I wanted to do, and it's a kind of relaxation.

This normalisation of drinking continued, and for 15 years, Wallis drank almost every night; a glass of wine became a ritual after her children were in bed. Thus, it became embedded in the habitus. However, five years ago, Wallis became more conscious of her drinking and questioned whether she should be drinking every night. In response, she described how she now makes “good efforts”; however, this was said with laughter (again a common occurrence, was this embarrassment? Lip service?), particularly after summer holidays or at Christmas when drink was more available, to reduce her drinking. Wallis admitted that currently, she had “lost the plot”. This British idiom’s definition is “to no longer be able to act normally or understand what is happening” (Cambridge Dictionary, 2022), which resonates with the next part of her story. As Wallis does not work Fridays, she explained that she views Thursday as her “Friday night” and sees a gin and tonic as something to look forward to and a reward, particularly as

“work is hard”. Emphasis was placed throughout the interview on the challenges of work:

Well, it's kind of an effort, but I will say 'no' I am not going to drink Monday, Tuesday, or Wednesday; I don't work Thursdays or Fridays, so Thursday is always my Friday night, so a gin and tonic is an absolute necessity when you get in from a busy day at work.

Wallis works full-time as a Human Resources manager within a large organisation; she describes her work as demanding, and her reference to a gin and tonic as being an “absolute necessity” brings with it the suggestion that alcohol is used as a reward, a means of recompense from the challenges she experienced at work. On several occasions during her story, Wallis refers to her use of alcohol as a means of relaxation:

I suppose if it enhances, or you feel it enhances your relaxation, then I think that's the biggest reason why I drink alcohol.

Similarly, Wallis spoke of using alcohol to help her sleep, particularly after a difficult day at work:

I think work hard, so when you work hard, and I'm up at six, so think it's a long day, do I use it to go to sleep? Probably.

Wallis' use of alcohol as a means of reward, relaxation and sleep aid may be interpreted as a coping mechanism, a way of managing the stresses at work, and her choice of gin and tonic acting as a signifier of her middle-class taste.

Wallis spoke of her family gatherings and of having champagne for breakfast. The association between rarefied social practices, notably drinking champagne and attendance at art galleries asserting and reinforcing (her) status by distinction. Similarly, such practices act as a signifier of class habitus. The habitus, however, cannot be viewed in isolation and must be considered within the social space or field where the social interaction takes

place (Bourdieu & Wacquant, 2007). At these gatherings, Wallis and her family understand the rules of the game within this family drinking field, thus acting in line with the doxa (Bourdieu, 1990_a), her siblings sharing the same embodied class habitus gained through childhood acculturation. Attendance at art galleries acts as a signifier of cultural capital, whilst drinking champagne is a source of symbolic capital, the possession of economic capital required for both. Bourdieu argues that sharing these similar forms of cultural capital results in a sense of shared identity (Bourdieu, 1986). This can be seen within Wallis' narrative:

I suppose what's really bad is when we as a family have gatherings, we are on champagne at breakfast. You know at weekends if, assuming we are not going anywhere, because we do a lot of active trekky things. But if we are just lolling or going to do a bit of art gallery type stuff, you know I would call it, more cultural [...] then we would have a glass of bubbly to start with.

In the above section of her story, Wallis appears to feel the necessity to justify the drinking in family gatherings. Differentiating between active activities where they would not consume alcohol, counterposed with taking part in cultural pursuits such as visits to art galleries, where drinking champagne beforehand was perceived, certainly by Wallis, as a culturally accepted norm.

Wallis again reflected on how she felt that the culture of drinking had "changed quite dramatically", it was now "acceptable in the home", and both she and her family would "feel a bit sad if they don't have any". The statement suggesting that for both Wallis and her family, drinking alcohol was embedded in their habitus. Asserting too their cultural status. Older or retired family members, were in her opinion "worse":

I think as you get older though, and I have quite a few of my family a little bit older than me, and they are all retired now, lucky for them. So, in actual fact they are getting worse again,

because they think nothing of having a drink in the afternoon.
So yes, it's definitely more the norm than not.

The use of the word "lucky", suggests perhaps that Wallis feels envious of her older relatives who have retired and are no longer constrained by the challenges of "work that is hard". Drinking during the afternoon being part then of their habitus.

Drinking for Wallis was both as a means of socialising, she spoke of the enjoyment she had when drinking in nice weather, how alcohol made her more relaxed. The ability to aid relaxation was, for Wallis, the main reason she drinks alcohol:

I enjoy a good book and a glass of wine sat outside on a garden chair, it is heaven, and it's just so relaxing that's what you do. If you feel it enhances your relaxation, I think that's the biggest reason I drink alcohol. Relaxation makes you more jovial.

Throughout the interview, Wallis made very little mention of any potential negative impact that drinking alcohol could have on her health. The focus of her narrative was very much on the positive aspects of drinking, such as being relaxed and more sociable, any detrimental impact on her health appeared irrelevant. She did speak, very briefly, about the CMOs' Guidelines (Department of Health, 2016) of drinking no more than 14 units of alcohol per week:

I think if I go to the GP, they would put me in the box of, they would probably say 'she is a near alcoholic'. I probably do drink 14 units a week, so yeah, so it's a bit worrying, but then (laughs) at the same time, I would say that there is probably a lot of the population that fit into the 14 units of alcohol a week.

Whilst she acknowledged this, no further mention was made as to the possible impacts of drinking alcohol could have on her health. The above comments were made within the realms of laughter; whether the laughter

hid her embarrassment is unclear. Whilst she states that it is a “bit worrying”, Wallis appears to downplay or justify this with her comment “probably a lot of the population who fit into 14 units of alcohol a week”. This seems to uphold her view that it is not something to be concerned about, suggesting that Wallis ascribes to a culture of drinking being the norm within the middle-class field she occupies.

When reflecting on other cultural changes, Wallis’ middle-class habitus was apparent in her response:

I think it possibly depends on which demographic group you are in. I suppose it is scowled upon if you are at the lower ends of the socioeconomic group that people see you sat outside Wetherspoon's, or something midday and I myself would probably think, ‘what are they doing at 12 noon?’ And yet, if I was on the banks of the Thames on the way to a rugby match and we were having drinks, I wouldn’t think, it is just part of the process. So, I think it’s culturally much more acceptable on special occasions, holidays, gatherings, it’s the norm for lots of people who drink, it’s not necessarily frowned upon in that setting and even at home.

There is a clear differentiation between what Wallis perceives as acceptable drinking, notably champagne, versus her condemnation of those drinking at Wetherspoons¹. Her views of the social differences between class are clearly made. Appearing to stereotype those who frequent Wetherspoons. Again, Wallis signifies her taste by her distaste. Wetherspoons, she associates with lower-class drinkers, who are “scowled upon” if they are drinking at midday.

¹ “JD Wetherspoon is national pub company operating over 900 sites across the UK and Ireland.” (J D Wetherspoon, 2022)

This is counterposed by Wallis' view that her family drinking champagne at the same time of day is acceptable. Being able to buy champagne and attend rugby matches (viewed by many as a middle-class sport) are signifiers of economic and cultural capital; these aesthetic preferences are shaped by her ingrained habitus (Bourdieu, 1977).

Wallis then reflected again on the "significant" cultural changes that had occurred during her lifetime; of note were the marked changes she had seen in relation to the availability of and access to alcohol:

Well, I suppose culturally you can now go into the supermarket, and you can buy as much as you like. I remember when I was very young, we had to go to the wine shop to get wine or beer and you couldn't go to the supermarket to get it. So, I think the journey has changed significantly during my lifetime in what is available and how you can access it.

The cultural changes that Wallis had witnessed from her childhood to the present day are apparent, from the narrow choice of wine and limited access to purchase via specialist shops to now, where the choice is much greater, and wine can be purchased in unlimited quantities at the supermarket with your weekly shop. The ability to buy wine in unlimited quantities suggests that for Wallis, drinking wine at home is no longer "special" or a signifier of middle-class status as it is now available to all.

Wallis described how the media promotes a particular lifestyle, mainly through cookery programmes:

It's the lifestyle you see in cookery programmes, it's just always lovely and the weather's nice and I suppose if you are there in your little garden just by yourself with a glass of wine and a book, then you are taking part in a different lifestyle, a more enriched lifestyle in a way.

This narrative again highlights Wallis' aesthetic tastes. Her ownership of books is seen as a form of objectified cultural capital, economic capital and watching cookery programmes, signifying her cultural taste. This accumulation of capital leads to what Wallis perceives to be a "more enriched lifestyle", which could be argued, can only be attained through the possession of cultural and economic capital (Bourdieu, 2010/1984).

Wallis considered the positive aspects of drinking alcohol and socialising with friends and family to be more beneficial than any potential negative impacts it could cause:

When we have a family gathering [...] we go to an event or around an art gallery, then yes, the latter part of that gathering is then probably some food and then socialising and alcohol, whether it be at home or out. I know alcohol is probably the detriment in many ways, but actually socialising and having those connections is probably as beneficial for you as the detriment of having alcohol.

In this section of her narrative, Wallis again speaks of visits to art galleries with her family. Their shared accumulated capital and embodied class habitus highlight their shared sense of identity, the consumption of alcohol shared within their social field of drinking.

For Wallis, drinks such as whisky were associated with older people, recalling older people drinking spirits such as brandy or whisky when she was younger. She spoke of how she felt that people, particularly women, have moved away from "harder spirits" to longer drinks and questioned whether this was concerning health – this was the first and only time that any overt comment had been made about health. This move to "longer drinks", coupled with the increase in flavoured tonics and soft drinks, made her question whether people were "more aware of the alcohol content in their drinks, even though they are still drinking more than previous generations". Wallis spoke about what to her was acceptable to drink at home:

I would drink gin and tonic at home quite happily; not sure I would drink a lot of hard alcoholic content at home. I would probably feel a bit odd having a straight whisky and soda.

Neither gin, wine, nor prosecco were viewed by Wallis as “hard alcoholic drinks” and were therefore acceptable to drink without a qualm. When asked why she thought this was different, Wallis replied that it was more “socially acceptable with both the media and friends to drink prosecco, G&T or wine, they had less effect on you”. She expanded on this by saying that if she told her friends that she was going home to drink a whisky, they would wonder if she was “ok”, but if it were a glass of wine, they “wouldn’t bat an eyelid”. This reaction further highlights the social and cultural acceptance of wine amongst herself and her peers. Wallis gave a further example of this, stating that if she was pushing a trolley around a supermarket with 15 bottles of whisky in it, her friends would be “worried about her”. However, if the whisky was replaced with wine or prosecco, they “wouldn’t say anything”, emphasising for Wallis that there are “some norms, acceptance of the type of alcohol that you drink at home”.

It is of interest that Wallis perceives the consumption of what she describes as “harder spirits as more detrimental to health than alcohol drunk with a mixer”. Whether this is in fact, associated with this perception or the fact of the socio-cultural changes in alcohol that she has witnessed throughout her lifetime is unclear. As discussed previously, alcohol products are embodied with associations and meanings. Consumption of forms of alcohol is associated with symbolic capital, not purely taste. This can be seen in the rise of gin as a “trendy” middle-class drink in the twenty-first century – a view in stark opposition, as previously discussed in Chapter 1, page 14, to the one held in the mid-eighteenth century when it was seen as the ruin of the lower classes, particularly mothers, depicted in the famous illustration *Gin Lane* by William Hogarth in 1751 – highlighting how historical context both changes, and challenges, cultural beliefs.

4.1.2 Abbie's Story

Abbie's demographic details

Name	Age	Occupation
Abbie	50	Banking Executive

Abbie started her story by reflecting on both the cultural changes and what she considered was the developing role of professional women, which had occurred during her lifetime:

Is that different to what someone like me would have done ten years ago, 20 years ago, and 30 years ago? But I think what part is interesting is, you know, not many people would have had a career like mine that long ago. So, when you say 'professional women' it's like that whole population in theory, is bigger now than it used to be, and women will have been on a journey during that time.

The reflection "not many people would have a career like mine", serves as a reminder of the changes that women have seen in terms of their working role in society. Historically, women in banking were not afforded the same opportunities as men for many reasons, including unequal pay and the need to resign after marriage (Crompton, 1989).

Abbie spoke of how her mother "came from a family that didn't drink at all". Her mother's drinking, however changed when Abbie was a teenager; she then started drinking with friends at the weekends in her home. Abbie was adamant however that her mother never drank wine, explaining that her mother preferred vodka martinis:

That would have been Friday, Saturday night, and friends would come round, and all that stuff and they would have a laugh, but it wasn't her normal thing to just pop open a bottle of wine, my mother, she'd never had wine.

Bourdieu's work on status distinctions (2010/1984) highlights how tastes change over time. Abbie grew up in the United States, where vodka martinis were popular in the 1950s and 1960s and were associated with middle- and upper-class drinking (Cox, 2012). Her mother's drinking choice perhaps originated from her middle-class habitus and aesthetic taste acquired during her younger years. Abbie considered what could have driven cultural change in respect of drinking:

I suspect it's strongly driven as well by the types of families, or the environments people grew up in.

The statement "types of families" suggest that for Abbie, her family's social status and cultural positioning had influenced her drinking. Whilst Abbie spoke of her role as a professional woman in society; she also shared that her mother had been a school principal "*she too was a professional woman*". In the early 1960s, American women were accessing higher education, although this was primarily limited to female fields, such as education (Jones, 2009). Generally, teachers and women viewed women's "academic and career pursuits as secondary to their primary roles as wives and mothers" (Jones, 2009, p.248). This suggests perhaps that Abbie's mother would have been in the minority, certainly in her early career in respect of her professional occupation, particularly as a married woman. Her mother's habitus can be viewed as going against the social structure of the time as her primary role was not of a wife but rather a full-time professional. Therefore, Abbie's primary socialisation was influenced by her mother's position within a social space and their own social position (Bourdieu, 2010/1984). Bourdieu (2010/1984) contends that culture is inextricably tied to class and saw habitus as emerging from class experiences, viewing social class "not as the sum of actual individuals in particular groups but instead as a 'class' habitus" (Wiltshire et al., 2019, p.228). Behaviours of differing classes reinforce their preferences and tastes, strengthening their behaviours and dispositions

(Bourdieu, 2010/1984). This resonates with Abbie's assertion that one's family and environmental upbringing influence drinking cultures.

Abbie believed that the party culture in the 1970s, coupled with leaving home to go to college where "everyone was drinking", was instrumental to the start of her drinking. Secondary habitus is associated with experiences and associations gained through education, notably school, college, or university (Cornelissen, 2016). Abbie's habitus is structured by her past, including her family upbringing and educational experiences. Bourdieu was clear that the habitus did not act alone; the nature of the fields (social spaces) the person occupies is equally important (Maton, 2014). Abbie's apparent ease at college suggests that as her habitus matches the logic of the field, she is accustomed to the doxa and feels comfortable within the environment and those around her.

Abbie spoke of how she studied in France and developed what she described as her "appreciation of wine". The ability to travel and study in France increases Abbie's attainment of cultural and social capital, gaining institutional and cultural capital through attendance at university. Whilst cultural capital is expressed in all social fields as an essential status resource; it functions in consumption fields through a particular transformation into taste and consumption practices (Holt, 1998). Abbie's accumulation of cultural capital is displayed through her appreciation of wine; this "appreciation" in turn, defines her taste:

I mean I like wine in terms of, I really like wine. I don't like, sometimes I drink to drink it, but actually, I appreciate a bottle of wine, like a really nice bottle of red wine with my meal and so, absolutely, I can have friends over, or I can even be on my own eating, and I can have a bottle of wine with my meal, because it's just lovely, it's so absolutely lovely. I much prefer wine to other things, I think wine, compared to like, having a

vodka martini you know whatever, it is just softer and smoother.

In this part of her story, Abbie describes her “appreciation” and, in Bourdieusian terms, her “taste and preference” for wine. Bourdieu (2010/1984) considers taste and preference as “one of the most vital stakes in the struggles fought in the field of the dominant class and the field of cultural reproduction” (p.3). Bourdieu contends that those with the most amount of cultural capital are, in turn, those who determine what constitutes good taste in a society.

Abbie had been watching the television series *Mad Men* (AMC, 2019). Set within an advertising agency in America in the 1960s, the men and women were “constantly drinking and smoking” both at work and at home, and women were “drinking and smoking when they were pregnant too”. Abbie reflected that her mother had drunk and smoked during her pregnancies in the same period. Abbie felt this culture had clearly changed, as smoking and drinking at work are no longer supported, and neither were recommended in pregnancy. Smoking prevalence has decreased in the United States since 1964 (Cummings & Proctor, 2014).

Similarly, in the UK, smoking prevalence too has declined (ASH, 2021). For women, smoking prevalence peaked at 45% in the mid-1960s, decreasing to 12.5% in 2019 (ASH, 2021). Factors influencing this decline include the understanding of tobacco as a source of addiction and causal factor of cancer, coupled with the concerns regarding the inhalation of second-hand tobacco smoke (Cummings & Proctor, 2014), along with the numbers of smokers quitting (ASH, 2021). Social acceptance of smoking has also declined, particularly with the advent of legal restrictions on smoking in public places, including the workplace (Cummings & Proctor, 2014). Awareness of the adverse effects of alcohol consumption during pregnancy, for example, foetal alcohol syndrome (Royal College of Obstetricians & Gynaecologists, 2015), has also increased. It can be argued that whilst the

culture has changed; evidence suggests that adult alcohol consumption will continue to rise within the United States, the UK, and indeed globally too (Manthey et al., 2019).

As a professional woman, Abbie reflected on how effortless it was to have a glass of wine at home, particularly after a difficult day at work. The challenges of work permeated throughout the interview:

You have to really force yourself to be like actually because it's very, it's almost like the ritual itself has become habit forming that you are like well I'm done for the day now, so I am going to pour myself a couple of glasses wine of wine and relax and that whole journey of doing all that. It's a bedtime routine helps you get ready for bed, it's kind of that, you kind of unwind or whatever.

The word "forcing" highlights how difficult Abbie finds it not to drink alcohol. Describing her behaviour as "ritualistic" suggests that finishing work for Abbie equates to opening a bottle of wine and then pouring it into a glass. The wine, in turn, was used as a means of relaxation and unwinding before bed. Abbie also spoke of having "tea nights", where she chose to drink camomile tea instead of wine; she was currently training for a local 5k race and was "trying to get into shape". Even in her tea drinking, Abbie's middle-class habitus is evident; her choice of camomile tea, defined by Twinings (2022) as an herbal infusion "traditionally used to help you relax", could be considered a more middle-class taste than, say, a blended variety. Abbie consumed other non-alcoholic drinks, such as tea; however, she acknowledged that wine was often the drink of choice. Abbie appears to justify her alcohol consumption, comparing professional women's drinking habits to that of men:

Professional men have always drunk, drunk after work, so I guess it's kind of no different.

Abbie ascribes to a culture of drinking being the norm within the middle-class field that she occupies. Comparing this to the professional field men occupy, if she is then part of that professional field, she will have to learn the rule of the game, to become “people like us”, her dispositions arising from her embodied habitus.

Abbie questioned whether drinking at home differed from drinking outside of the home. Recounting when she was out with friends and they were not driving, they would meet up and have a glass of wine or two. She spoke of “trying to break the cycle” of drinking alcohol, describing that they would drink only water when out walking with friends and could “socialise” without alcohol. However, she then described meeting up with a friend after work the previous week and enjoying a couple of glasses of wine with dinner. The phrase “trying to break the cycle” suggests that Abbie found it difficult not to drink wine inside and outside the home. When out with friends, her habitus matches the logic of the drinking field. By occupying a close position within others in the field, her drinking behaviour is viewed as acceptable.

Abbie spoke of reading the statistics concerning alcohol consumption in relation to middle-aged women drinking more than the recommended 14 units per week and how this was a health concern:

I have read about the statistics that more and more middle-aged women are drinking more and more. Meaning they are going over the 14 units and that, that's a health concern. Some, something must be changing, if that's, something must be the new normal if the statistics I have heard are true.

Although Abbie commented that drinking over the recommended 14 units was a “health concern”, she then appeared to question this by her statement, “if the statistics I have heard are true”, suggesting perhaps she was questioning their validity. What then, for Abbie, was the new normal? She reflected on this and concluded:

So, it's acceptable, it's an accepted norm. I guess that's the challenge from a health perspective, it is accepted, and it can easily become more than what you are expected to have. I guess if it's in the home, well, you don't have to drive, so you can watch telly, or do whatever you want, have a glass of wine and have it at home.

Ascribing a culture of drinking being the norm in the middle-class drinking field she occupies resonates with Abbie's view that drinking is now "acceptable". Drinking at home is not constrained by factors such as driving, contributing to what Abbie considers to be one of the reasons people choose to drink at home.

Abbie questioned whether there was a difference between professional and non-professional women. She felt many professional women would have gone to university and concluded that their drinking behaviours would be influenced by the friends made within that environment:

Is there a difference between professional women and non-professional women? Well, a lot of professional women probably did go to Uni, so if I was going to draw my own conclusions, you know, I might start from there. Then obviously access to money, so if you have got money, you can afford a nice bottle of wine.

Considering this statement through a Bourdieusian lens, university attendance signifies institutional capital accumulation. At university, sharing similar forms of cultural capital with others within a social field result in the sense of shared identity (Bourdieu, 1986). Abbie's emphasis on the ability to purchase a "nice" bottle of wine and her association between quality wine and cost suggests that for Abbie, cheaper wine will not have the quality or taste of more expensive wine. Abbie differentiates her taste in her description of drinking a "nice" bottle of wine instead of something she perceives to be of lesser quality, acting as a signifier of both her economic

and cultural capital; her aesthetic preferences, in turn, are shaped by her ingrained habitus (Bourdieu, 1977).

Abbie spoke too about the accessibility of “good wine”, and with the advent of more local supermarkets, this accessibility had increased:

I mean, good wine is probably more accessible [...] than it was.

I am sure there wasn't a Co-op on every corner. The Co-op actually has a really nice selection of Italian and French wines.

So, when it comes to wine, then yeah, a lot more really good wine travels a lot further and a lot more people like it. Probably more accessible than the crap they would sell at the off license.

Good wine is probably more accessible than it was.

For Abbie, the availability of good quality wine and the influence of friends were key reasons for the increase in her wine drinking:

So, all the different grapes and all the different regions and all the tastes, so I think it's just that, there is just that element to it 'oh I think we're going to have a nice Châteauneuf-du-Pape with dinner, so it means you are doing something special, as opposed to, I don't know something cheap off the shelf. You end up interacting with people who like the same thing, and I think that's more influential than television or the movies. Certainly, the people you hang out with or what they like to do, I guess birds of a feather flock together.

The phrase “birds of a feather flock together” depicts Abbie's social position within the field. Sharing similar forms of accumulated capital with her friends whose dispositions are attuned to the rules of the game, results in Abbie's feeling of ease. Again, Abbie's reflection on the availability of good quality wine is a signifier of her aesthetic choices and an indicator of her class (Bourdieu, 2010/1984). Her lifestyle is seen as a product of her habitus, expressed in and through her taste in wine (Lunnay et al., 2011). Different types of wine are embodied with associations and meanings; Abbie's

reference to drinking Châteauneuf-du-Pape is associated with symbolic capital, not purely with taste (Bourdieu, 2010/1984). Symbolic capital can be considered as anything that the individual considers as having “value in a social situation, allowing prestige, honour, and an enhanced social status” (Lunnay et al., 2011, p.431). This can be seen in Abbie’s perception that other drinks are “cheap” and therefore undesirable as they do not hold the same symbolic capital. Drinking behaviours are not only a matter of taste but are associated too with the volume of symbolic capital the individual holds (Bourdieu, 2010/1984). Abbie’s final comment is that the people she meets socially have similar tastes to herself. In Bourdieusian terms, Abbie and her friends share the same drinking field and similar forms of cultural capital, which, Bourdieu argues, results in a sense of shared identity (Bourdieu, 1986).

4.1.3 Elaine's Story

Elaine's demographic details

Name	Age	Occupation
Elaine	52	Regional Fund Raiser

Elaine started the interview by returning to her childhood, recalling that her parents would “rarely drink at home” perhaps having a glass of wine with Sunday lunch or if friends came round. Alcohol was not generally kept in the house, apart from bottles of spirits which would only come out at Christmas. Once she reached 18, the pub was the place to go for a drink, although Elaine commented that she did not “really drink that much when she was younger” often choosing to be the driver when she went out with friends. From a Bourdieusian perspective, Bourdieu viewed the habitus as being a structure that “at every moment structures new experiences in accordance with the structures that are produced by past experiences” (Bourdieu, 1990_a, p.60).

Hence, habitus can help to explain the likelihood of social life as it engenders new experiences based on the embodiment of former situations and events. As Elaine grew up in a family where alcohol was only consumed on special occasions, her dispositions arising from her primary socialisation, particularly within her family, perhaps explain, in part, her drinking behaviours in her early adult life.

For Elaine, she “really got into drinking at home” in her mid-thirties, describing how she and her friend would meet at each other's houses on a Thursday night with their young children and share a bottle of wine. Elaine's habitus interacted with the drinking field that she occupied with her friend; their dispositions were shaped in part by their parenting roles.

There was a clear resonance with other women's stories in relation to what Elaine described as the “habit” of using alcohol to reduce stress; this she felt had a particular resonance for women within her demographic group:

From a middle-aged women's point of view, I think we have got into the habit of saying, 'oh, you know it's been a stressful day at work', come home and pour a glass of wine, which does seem to be a socially acceptable thing to do these days. When I was going through a bad period at home before I got divorced, then you would come home and have that glass of wine just to sort of chill, and it does get into a habit then.

Elaine begins this section of her story by positioning herself as one of the "we", indicating her view that other middle-aged women experienced similar stresses at work and chose to drink at home. This choice she describes as being "socially acceptable", suggests Elaine is ascribing to a culture of drinking being the norm within the middle-class field she occupies. Elaine uses the word "habit" on two occasions within this section of her narrative. Dewey defines a *habit* as "merely the power to repeat acts without thought" (Dewey, 2002, p.66). Bourdieu used the term "habitus" to move away from this conception of habit, perceiving the habitus as "more flexible and proceeding the physicality of the habit" (Waller, 2020). Considering the statement in Bourdieusian terms, Elaine's practice of drinking at home is shaped by her habitus, which is derived from social conditioning and history, and thus is always in a constant state of flux. The stress of her divorce clearly affected Elaine; she spoke of how her drinking had increased during that time and was used as a way of relaxing. Coupled with what she perceived was the social validation of drinking alcohol at home, it appears to have strengthened Elaine's view of the acceptability of home drinking. She reflected on evenings at home with friends:

And socially from that point of view, if you have friends' round, they always bring a bottle of wine, and you sit there and drink that wine. You might have a cup of tea afterwards, or you may open the second bottle of wine... It has definitely become a thing for women to do in the evenings.

This part of the narrative gives a clear insight into the home drinking field. Elaine and her friends understand and adhere to the doxa or “rules of the game”. Each person brings their own economic capital through the purchase of alcohol, embodied cultural capital and social capital in the form of her friendship group. Sharing similar forms of capital creates a shared sense of identity and group position, resulting in the sense of ease. However, this sense of ease disappears if there is a change in the field’s structure, as seen in the following part of Elaine’s narrative. The influence and pressure of others to conform to their acceptable cultural norms were clearly articulated when Elaine described the attitude of her friends when she gave up alcohol for a year due to health reasons. Even knowing why, she had chosen to give up drinking, her friends continued to encourage her to drink, telling her to “just have one as it won’t make difference”. This had been very difficult for Elaine, who felt like an outsider and not part of the social group. She spoke about the challenges she experienced and the feeling of being pressured to join in if others were drinking:

I think when people get together, it’s almost a pressure thing to have a drink because everyone is having a drink. If you decide to have a cup of tea or a coffee, you are looked at as if you are strange or, why are you having that? People are like, why aren’t you having a drink? Just join us.

Elaine’s feeling of discomfort and pressure is described by Bourdieu as *hysteresis*. As discussed in Chapter 3 (page 82), Bourdieu used the concept of hysteresis to explain the effect of change to the structure of the field; Elaine’s dispositions (not drinking alcohol) no longer provide her with a “feel for the game”, disrupting the habitus and the field (Hardy, 2014). This resultant discord between Elaine’s habitus and the field resulted in her feeling like a “fish out of water” (Maton, 2014, p.56). This can also be considered through the process by which symbolic capital is recognised and valued. Elaine’s drinking behaviours must be endorsed and respected by her friends to become a source of symbolic capital. Symbolic capital is a form

that any of the three species of capital can take when socially recognized, through categories of perception, generating dispositions of respect (Bourdieu & Wacquant, 2007). By Elaine choosing not to drink alcohol, her behaviour does not align with her friendship group's view of what is socially accepted drinking behaviour. This is then used by the group to formulate distinctions between their social positions and Elaine's. Bourdieu (1989) described this as a "symbolic struggle" over capital (p.21). Elaine's feeling of exclusion arises as her behaviour is not compatible with prevailing and legitimised views of social drinking held by her friends (Lunnay et al., 2011).

Continuing her reflection on why she felt drinking had become more socially acceptable, Elaine spoke of what she perceived to be the influence of the media in promoting a culture of drinking at home:

I think that it is on the TV as well you see it all the time in soap operas; they have always had a pub because that has been the hub and that is where people drink. But now, it is more noticeable that they will come home and pour a glass of wine or whatever. They do it every night in Emmerdale; virtually every night, someone will be at home pouring a glass of wine. So, it has become more acceptable on the TV, so that sort of influences you as well, doesn't it? Well, they do it all the time on TV, so why don't we do it? So, whether that is a reflection of what is happening generally in our society? Or whether that is encouraging it more, I am not sure really. It's the chicken, and the egg, isn't it? What came first? Because if you felt guilty about it and it was on the soaps or whatever, you probably might not consciously think about it, but subconsciously you would think, oh that's fine because that's what normal people do.

Elaine's description of the changes she witnessed on the television highlights, certainly for her, the persuasiveness of alcohol exposure via the television. Barker et al. (2018) assert that there is "strong evidence that

exposure to advertising, or other alcohol audio visual content (AVC) in the media, including television programmes increases alcohol use in adolescence” (Barker et al., 2018, p.1). There is no reason to suggest that similar findings would not be found within the adult population.

Whilst the study by Barker et al. (2018) is focussed on young people, consideration must be given to the influence of the television, and indeed wider media, in relation to Elaine’s view of the perceived “acceptability” of drinking alcohol in the home. Elaine describes this “acceptability” as something “normal people do”. This normalisation appears to negate any feelings of guilt that Elaine may have. Instead, she associates herself and her drinking habits with the “normal people” portrayed on television, thus appearing to strengthen the justification of her drinking. In Bourdieusian terms, this can be considered a shared habitus. Habitus emulates the “embodiment within individuals of the systems of social norms, understandings and patterns of behaviour ensuring that individuals are more disposed to act in some ways rather than others” (Bourdieu, 1977, p.7). The social norm of drinking wine at home portrayed within the media becomes embodied within the habitus, and other agents then share this within the social field of home drinking.

The cost of non-alcoholic drinks, coupled with the sense of enjoyment gained from drinking alcohol, appeared to contribute to the reason why Elaine chose to drink alcohol:

If you go out to the pub, having an alcoholic drink is nearly as cheap as having a soft drink, so actually, why am I going to go out and spend £2 on a glass of coke when I could have a glass of wine for just a little bit more and enjoy myself.

For Elaine, there appears to be a correlation between alcohol and enjoyment; the consumption of soft drinks, regardless of their price, did not appear to provide the same satisfaction. Elaine knew of the UK CMOs’ low-

risk drinking guidelines (Department of Health, 2016). However, as she could not see any apparent physical effects of her drinking, she, like many of the other women, appeared to have decided to carry on drinking above the recommended guidelines with seemingly little regard to them or her health:

We tend to, most people, would tend to pour a third of a bottle which is, probably, three units, whereas you would think it was one and a half or something. I suppose now, you know about the guidelines, but because you drink, and it doesn't have any effect, or you don't feel ill. I mean you don't really know what you are doing on the inside do you? But you think 'ah well, I am fine; it's not happening to me'. I don't binge.

The inclusion of the statement "I don't binge" appears again to be a justification for her drinking habits, suggesting that if no outwardly visible symptoms appear that have a negative impact on her health, Elaine will continue to drink at her current consumption levels. Whilst she had given up alcohol previously due to health reasons, the effect of hysteresis and loss of symbolic capital, alongside her enjoyment of drinking alcohol, may have contributed to Elaine's decision to readopt her previous drinking behaviour. Recalling reading information on the increase in younger women being admitted to hospital for liver conditions and liver failure, Elaine somewhat jovially indicated that there could be an impact on her liver from her drinking:

I know that I go through stages of having a drink every night, and then you rein yourself back in and think actually no, I don't actually need to do this, that cup of tea or sparkling water, or whatever is more acceptable to my liver (laughs).

Elaine appears now to question her alcohol consumption, recognising the possible detrimental effect that alcohol could have on her liver. Again, laughter permeated throughout the interview. Whether this was related to embarrassment is unclear.

As can be seen within other women's stories, Elaine differentiates between people who drank spirits and other forms of alcohol such as wine and beer, viewing the latter as causing no health harm:

I think they tend to think about alcoholics or people with liver problems as drinking spirits more than wine, beer, or cider. I don't tend to drink spirits; I just don't really like the taste of a lot of them. The alcohol content in wine and beer isn't that high; then people think, well, actually, I am not doing myself any damage because it's only wine or beer.

This view of not causing herself any "damage" appears to be used by Elaine to justify her drinking. It is of interest that Elaine views wine and beer as having a smaller alcohol content than spirits. Whilst this may be factually correct in terms of alcohol content per volume (APV), a glass of wine is often 11% ABV and a pint of beer 5% ABV, compared to a single 24ml of spirits which contains 30-40% ABV. However, wines from countries such as South America and Australia can exceed 14% ABV, with some craft beers exceeding 8% ABV. Consequently, one large glass of wine or one pint of strong beer can contain more than three units of alcohol compared to one unit contained within a single 25ml measure of spirits (Drinkaware, 2022).

Elaine described how, at times, she drank at home every night, often drinking more than she might normally do as she did not want to "waste" the wine:

Sometimes I drink every day. If I was drinking at home, I would drink a glass, which is probably a third of a bottle, on a Friday or Saturday I might drink two glasses. If the bottle is there and its open you tend to finish it rather than, because you don't want to waste it in the fridge. So, yes, then I would have three nights on the run where I would have a glass of wine because that would get rid of the empty bottle (Laughs).

Considering this narrative against the previous discussion suggests that Elaine is drinking more than the CMO's recommended 14 units per week (Department of Health, 2016). The use of alcohol for relaxation permeated throughout the interview; it was also used as an aid to sleep, particularly in times of stress. The "taste" of the wine for Elaine is clearly important:

It's sort of relaxing sit there and watch TV and have a glass of wine. Sometimes, it's not supposed to help you sleep, but it does help you to sleep if (laughs) if you are stressed. It just relaxes you, yeah. It's just nice to have that alcohol or that glass of wine. It's the taste of wine, the non-alcoholic stuff, it just doesn't taste the same.

Elaine reflected on the cultural changes in terms of drinking in the workplace that she witnessed during her working life. Firstly, in the 1980s banking culture where she worked when she left school, it was an accepted practice to go for a drink at lunchtime, and the Bank Manager had a drinks cabinet in his office from which he offered "important clients" a drink. This part of Elaine's narrative illuminates the social and cultural positioning of alcohol within the banking field during this period and the changes to the doxa that have occurred since drinking alcohol at or during work hours is no longer sanctioned, and tea or coffee would be offered instead of alcohol. These accepted socio-cultural norms were in stark contrast to her current employment within the Third sector, where drinking alcohol at work is not permitted. Elaine described how working for an air ambulance charity; she was more careful about the amount she drank at work and social events, as they saw "the effects of people drinking and driving". Interestingly, Elaine considers curtailing her drinking at such events, but any thought of doing so at home is not apparent. Whether this is related to drink/driving or that home drinking is secretive and hidden can only be surmised.

As seen within other narratives, the changes within Elaine's lifetime, in terms of the availability and accessibility of alcohol, were highlighted:

The other thing as well, I suppose the availability of alcohol makes it more accessible. It's in the supermarket on the shelf. Whereas obviously again, when I was kid you went to the off license to buy alcohol, it wasn't freely available in the supermarkets, you could only buy it at certain times. Whereas now you can go in on a Sunday morning at 11 am and buy a bottle of wine. So, I think the availability of it encourages it as well. You have two aisles in the supermarket that you wander down and think, 'oh yeah I will have a bottle of that.' [...] You go to the supermarket; you do your shopping, and you put that bottle of wine in your trolley.

Again, the cultural changes that Elaine has seen from her childhood, where wine could only be purchased at limited times from off-licences, to now, where a wider choice of wine can be purchased from various settings, including supermarkets, on any day of the week. Elaine had just come back from a holiday in Australia. She described what she felt were the differences in availability, contrasting this with America and Canada as countries she had also visited, where alcohol could only be bought from a "bottle shop" and not a supermarket. She felt this impacted people's home drinking as they had to make a "special effort" to buy it unlike the ease of purchasing within the UK. Reflecting on this, Elaine commented that perhaps the licensing laws should be reversed to stop supermarkets from selling alcohol, which might make "people less likely to drink". Her view that if alcohol were removed from supermarkets would perhaps reduce alcohol consumption suggests that Elaine's ease of access to and purchase of wine certainly contributes to her choosing to drink. The availability of wine as an everyday commodity within the supermarket enhances the social acceptance of alcohol.

4.1.4 Jessica's Story

Jessica's demographic details

Name	Age	Occupation
Jessica	48	Managing Director and Personal Travel Advisor

Jessica began by describing herself as a “sandwich mum” having both older parents and a young son. A recent study by Vlachantoni et al., 2020, found that one-third of 55-year-olds in the UK are “sandwiched” between multiple generations where at least one parent/parent-in-law and one grandchild are alive. Within this figure, half are looking after both generations at the same time (Vlachantoni et al., 2020). Jessica spoke of her husband “keeping the household afloat financially” as her business was still in its infancy. After leaving school, Jessica went straight into a job with a local Travel Agent, where she held a Saturday job. She explained that she had chosen the vocational route instead of college as, at the time, many people of her age were going to college and university, and although they gained qualifications, there were no jobs for them to apply for. Jessica felt the vocational route had been the right choice for her; the following section of her narrative suggests that she felt comfortable with her habitus:

So, I thought it will give me something, and I can train on the job, so that's what I did. That's something that actually I don't regret I wasn't academic, so that's fine.

Reflecting on her parent's drinking when she was growing up, whilst they had drunk, this had predominately taken place outside of the home:

We weren't a family really that drank at home [...]. Unless it was Christmas or something.

During her childhood, Jessica would occasionally go to the pub during the day with her parents and recalled being there with other children her age.

Her dad had been a drummer in a band, often performing seven nights a week on top of his full-time job. Jessica spoke of his drinking during this time:

My dad certainly used to enjoy a good drink. Saturday night, it used to drive my mum insane because she would drive, and my dad would come in absolutely bouncing off the walls.

Jessica could not remember her mum drinking during her childhood, though she recalled her dad telling her that she had done so when she was younger. Her mum's disapproval of drinking is clear:

She's become quite judgemental about it, really, almost as if she has never had a drink herself.

The above sections of Jessica's narrative describe her childhood and teenage years. Bourdieu (1990_a) considers the familial habitus, the place of early socialisation, to be where a person's most durable dispositions are formed. Growing up in a household where alcohol was only consumed in the home on special occasions, Jessica's habitus absorbed the social information it was exposed to within the social fields of home and of the pub (Bourdieu, 1990_a). Whilst her dad "enjoyed a good drink", Jessica's narrative highlights her mum's disapproval of her husband's drinking. Acculturation from both fields results in a system of dispositions that are within Jessica's habitus (Bourdieu, 1990_a). Similarly, cultural capital is mainly transferred through the family, where the children obtain "modes of thinking, types of dispositions, sets of meaning and qualities of style" (Reay, 2004_b, p.58).

Jessica's dad displays levels of cultural capital through his ability to play a musical instrument and economic capital in the ownership of his drumkit. In his work *Distinction: A Social Critique of the Judgement of Taste* (2010/1984) Bourdieu describes musical and artistic taste as manifestations of class positions developed in early life, "nothing more clearly affirms one's 'class', nothing more infallibly classifies, than tastes in music" (Bourdieu, 2010, p.10). Playing in social fields such as the pub brought a further accumulation

of his level of social capital. Whilst ownership of and the ability to play a drumkit provides cultural and economic capital, higher levels of capital may be ascribed to instruments associated with higher levels of social class. Similarly, the social field differs from the game that is played within it. Thus, playing a drumkit in the pub maybe viewed very differently to playing an instrument in an orchestra within a concert hall. As Bourdieu (2010) notes, “there is no more ‘classificatory’ practice than concert-going or playing a ‘noble’ instrument” (p.10). Each field is shaped by its own rules and accumulation of capital. It can be argued that higher levels of cultural, social, and symbolic capital can be attained within the social field of the concert hall. Accumulated social capital acts as part of the structuring process of the habitus (Maton, 2014). As previously discussed, Jessica’s dispositions are derived from her familial habitus, further explored in the next section of Jessica’s narrative.

Jessica described what she referred to as her “serious drinking” starting when she was 18, but this took place in pubs and nightclubs, not at home. She recalled spending many Sunday mornings in bed because she had been out late the night before or had drunk too much alcohol. Considering this through a Bourdieusian lens, Jessica’s primary socialisation in respect of drinking took place outside of the home. Her dad’s dispositions of “enjoying a good drink” suggest that they may have been inculcated within Jessica’s habitus, as her drinking levels imply.

Her drinking, she felt, had changed in her late 20’s and early 30’s:

I got to my late 20’s and 30’s, I would have three or four drinks a night and I would have had enough, I was drinking bottle of water instead, so it eased off, I actually lost a bit of weight as well.

Jessica considered that the amount of alcohol she was consuming had reduced during that period, and the weight loss achieved was a positive

outcome for her too. The habitus, whilst durable and transposable, is also evolving and interconnected with the field (Maton, 2014). Field conditions too change over time, and each person's history continues to evolve, borne out by the changes seen in Jessica's dispositions. She then questioned why these positive changes she had made had not continued, pressure appeared to be the catalyst:

I don't know, I think life pressures, it sorts of triggered it all again.

Jessica spoke of her relationship with both her parents and her in-laws. Losing her dad from cancer 12 months ago had been very hard for Jessica to come to terms with, as they had been very close – "I was a real dad's girl". Jessica found this, coupled with the demands of her job, a young son, her mum who was "very demanding", and her husband's parents too, all very stressful and had resulted in what she felt was considerable pressure being placed upon her. This description relates to Jessica's initial statement of describing herself as a "sandwich mum", reinforcing the challenges she felt emanating from this role.

The theme of pressure continued with Jessica describing how she sought to relieve this by relaxing with her husband in the evening:

So, we are in a position where we are actually under quite a lot of pressure and I guess my, it's not a safety net, but it's my get-out to sit down at night, watch the telly with my husband...So that's my comfort zone...and it usually involves a glass or more of wine, or Bacardi and coke. You sit down at nine or half past nine and go ahhhhhhhh and you have a glass of wine just to relax once the day is over.

This part of the narrative suggests that for Jessica and her husband, drinking has become embedded within their habitus, used as a means of reducing pressure and a source of comfort and relaxation for them both. "It's not a

safety net” can be seen as Jessica’s way of distancing herself from those whom she considers being alcohol dependent. Whilst she tries to manage her drinking, cookery programmes focused on holiday destinations appear to heighten Jessica’s desire to drink:

And the minute it starts with those lovely images of holidays, I think ‘shall we have a glass of wine?’ and it’s always more than one glass of wine, but I suppose it’s a sort of escapism really, to sit there and watch all those lovely places. You can imagine you are on holiday.

Jessica’s narrative appears to imply that the programmes evoke a sense of being on holiday – “all those lovely places”, which she associates with wine and relaxation, in turn, used as a means of “escapism” for the pressures she feels within her life. Jessica explained that she and her husband have now tried to reduce their drinking:

We are trying not to drink every night now. I would say about six to eight months ago I realised that it was probably getting out of control, not that I was waking up in the morning wanting to drink, but nearly every night, we were drinking.

Again, within this section of her narrative, “not that I was waking up in the morning wanting to drink”, Jessica appears to feel the need to distance herself between her drinking and those she views as being alcohol dependent. She explained that her weight gain and her husband’s health condition (exacerbated by alcohol) were the main drivers for their decision to reduce their drinking. She now tries not to drink more than three nights a week, although she admitted this was, at times, very difficult:

But on Sunday night, for instance, I had one glass, and I don’t know why I think I can stick to one glass, but one glass ended up as three.

Reflecting on her drinking, Jessica felt she could not determine when she “needed” to drink. There could be something that she saw on the television, a difficult day with her mum or the challenges of running her own business; all these contributed to the pressure she felt:

So, it’s just constantly on the treadmill for me at the minute,
and I think the alcohol when some days are worse than others
it’s the get out really when I sit down.

The use of the word “treadmill” depicts the situation that Jessica finds herself in and from which she finds it hard to escape. She felt life was more stressful now than it had been for previous generations. Again, this resonates with Jessica’s role as a “sandwich mum”. For Jessica, this stress contributes to her drinking at home; at times, even the thought of putting the kettle was too much:

And I can’t be bothered putting the kettle on and making a cup
of tea. I mean it’s no big deal, but when you are not sitting down
until nine, half past nine at night and you are absolutely
shattered, even putting the kettle on is an effort.

The description of the “effort” of boiling water suggests the ease with which Jessica perceives she can pour a glass of wine. Jessica then explained why she chose to drink at home, reflecting on what she saw as the cultural changes that had influenced this:

So, I think actually the drinking at home – a. it’s cheaper because
you can buy it cheaper through the supermarket and b. the
social circle isn’t there. I don’t know any of our friends who just
go to the pub for a drink. So, I think as a culture we have
changed and whether that is because the supermarkets have
made it easier and cheaper to buy, or whether just
generationally, it has just changed. I think what has happened
over generations is that going to the pub, whereby our parents
went to a pub, there are very few pubs these days where, we

are only in our 40's, but as an older generation, our generation doesn't go to the pub, it's also quite expensive. Our perception is that it is much younger people that go to the pub. So, it's not something that we would ever think of doing.

The above narrative clearly describes the cultural changes Jessica felt had taken place within the social drinking field. Viewing supermarkets as a place for conveniently purchasing "cheaper" alcohol, Jessica considers that the pub is no longer a venue she and her friends would choose to frequent. In Bourdieusian terms, "social and cultural practices produced by capital and habitus operate within autonomous fields of play" (Brierley-Jones et al., 2014, p.1056). When tastes change because of societal changes, the field is transformed to meet these changing tastes (Bourdieu, 2010/1984). For Jessica and her friends, the social field of drinking has moved from one of drinking in the pub to drinking within the home, her habitus then evolving and unifying within the structure of the field (Maton, 2014).

Jessica then returned to considering her health. She recalled a visit to the Practice Nurse a few months previously. Her blood pressure had been raised, and when questioned about her drinking, she told the nurse that she was drinking approximately three bottles of wine per week. The nurse advised that the maximum a woman should be drinking per week was half that amount. This advice made Jessica question her drinking habits:

So, the maximum allowance is a bottle and half a week to stay within reasonable limits. And that has stuck with me, that really resonated with me, it did stick with me, and I thought, 'oh god, really?'

Reflecting on the CMOs' advice of 14 units per week (Department of Health, 2016), Jessica did not feel that this was meaningful to her as she "didn't know what a unit was". For wine, she could use the one and a half bottles a week as a benchmark however for spirits; this was less clear and not as easy to determine:

It's difficult to measure, really. I know sometimes my husband pours me a Bacardi and coke, and I can taste the Bacardi. And I know if I can taste the Bacardi, then there is certainly more than a double in there. Because Bacardi, for me, I don't even taste it anymore. It's just like pop. But definitely, that bottle and a half is the thing that, I am not saying that I stick to it, but I am aware not that if I am reaching my bottle and half a week, I need to sit back and think, 'do I need that next glass of wine or do I need that extra Bacardi and coke?' So, it has certainly resonated with me. Units, I wouldn't look at a glass and think, 'is this a unit?' It means nothing. So, I think you need to simplify it.

For Jessica, the notion of *units* appears to have little conceptual meaning, bringing into question the relevance of this public health message to the population.

4.1.5 Helen's Story

Helen's demographic details

Name	Age	Occupation
Helen	52	Deputy CEO

Helen began by recalling the drinking culture she had grown up in, where her parents only occasionally drank at home and socially, the latter being confined to a Saturday night. She spoke of her early married life and parenthood when she never drank at home; for her then, alcohol was not something she thought about. Helen separated from her husband just before her 40th birthday, and she was left to care for her two sons; drinking alcohol at home was still not something she considered doing:

There was no drink in the house, really, and it wasn't something that I would have turned to through all of the divorce, it didn't really bother me.

Helen's narrative suggests that her habitus, gained through childhood acculturation, matched the logic of the home drinking field at that time resulting in her ease of not drinking within the home.

Helen met her current partner six years ago, their relationship progressed, and they bought a house together three years later. Helen described how both she and her partner enjoy cooking, particularly the social aspect of it, and felt this was the reason she started drinking at home:

One of the things we do like is to cook and enjoy, for us, it's a social thing. My partner, he's got to do everything properly, so if he is cooking a meal, he has to follow the recipe book, but he does cook really good, lovely food. And for us, yes, we did start drinking at home.

Helen's narrative indicates that her new relationship changed the conditions within the home drinking field and her dispositions. The habitus presumes

that the “body is constantly and unconsciously absorbing and enacting the social information it is exposed to via social interaction at the level of the field” (Ceron-Anaya, 2017, p.290). As the structure of the habitus is not fixed, our dispositions evolve (Maton, 2014). For Helen, her new relationship brought a further accumulation of capital. Purchasing a house (a form of objectified cultural capital) requires possessing economic capital. Her new partner also brings accumulated capital to their social field of home drinking, his ownership and use of cookery books acting as a signifier of both objectified cultural capital and aesthetic dispositions. Sharing similar forms of cultural capital – the enjoyment of cooking as an example, creates a sense of shared identity and distinction. Bourdieu (2010/1984) described *distinction* as an embodied taste arising from the habitus, defining the person’s cultural interests, oppositions, likes and dislikes. Helen’s change in lifestyle, expressed in and through her taste now for cooking and drinking, can be seen as a product of her evolved habitus interacting within the field.

Helen started her current job five years ago; she described the changes this had brought for her as a result:

My job changed quite a lot, more pressure, and actually, it got to the point where instead of just having a drink cooking a meal on a Friday or Saturday night, it was coming home and opening a bottle of wine quite regularly during the week as well. And we would open a bottle of wine and finish a bottle of wine you know of an evening and, probably, well not every night, maybe two or three nights in the week, but then you count Friday and Saturday night as well and that mounts up.

The narrative highlights the increasing pressures Helen experienced within her job and how she felt this “pressure” had impacted her drinking. Her possession of economic capital allows Helen to purchase more quantities of wine; the shared habitus with her partner provides the ease within the field to adopt increased drinking practices. The change from drinking with a meal

at the weekend to drinking up to five nights a week was something Helen felt was “accepted”, particularly by other professional women:

I would never have thought of coming home and having a drink years ago, but it’s the accepted thing that everybody does now, or a lot of people do, and particularly professional people.

The word “accepted” suggests that for Helen, the drinking practices of professional women were something that had become established. Commenting on the fact that more women, particularly in their 40s and 50s, were now working full-time, whereas previously, many would have only worked part-time, Helen felt it had contributed to the acceptability of alcohol for these women. Helen’s view of the increased numbers of women working full-time is supported by the Institute for Fiscal Studies, which reports that women in full-time employment within the UK rose from 29% in 1985 to 44% in 2017 (Roantree & Vira, 2018). Because of their increased earnings, professional women who work full time may accumulate higher volumes of capital, particularly economic capital.

Helen then described the additional pressures of supporting both older parents and often grandchildren too; she felt these also added to the stress experienced by women such as herself:

You have got the responsibility at this particular age where you have elderly parents and in a lot of cases, you have got grandchildren too. So, you have many different people pulling at you and actually you know it’s difficult sometimes to try and cope with all that. And you feel guilty. You feel guilty because you are working too many hours. You feel guilty because you want to spend time with your grandchild and your family and actually there are many times when I have to put work first before my family and before my husband and that makes you feel guilty as well. So, I guess it’s a, yeah, it’s a difficult, you know and it’s more acceptable, definitely now, it’s just one of those

things. It's an accepted thing nowadays that you know, you have a stressful job, and we'll go home and have a drink.

The word "guilty" is repeated four times within this section of Helen's narrative, perhaps serving as a stark reminder of the challenges Helen faces in managing the responsibilities of being a partner, daughter, mother, and grandmother against the demands of a challenging job. As discussed within Jessica's narrative, Helen can be viewed as part of the "sandwich generation" (Miller, 1981). Indeed, as part of a four-generation family, the "double sandwich" generation (Ro, 2021). The use of the idiom "it's just one of those things" suggests that Helen views her levels of stress and the acceptability of drinking alcohol at home as a *fait accompli*. Considering the phrase "we'll go home and have a drink", Helen appears to acknowledge herself within this reflection. Helen's position within this narrative can perhaps be explained by Wacquant (2011), who suggests that a person's habitus and dispositions will differ depending on their social grouping and the direction it follows. Thus, as other women in the field are drinking when they get home, Helen's habitus, internalised via socialisation and acculturation, acts in line with the *doxa* within the field, where drinking is viewed as acceptable behaviour.

Whilst this was "accepted" within the field, many of Helen's female colleagues who were a similar age to herself had shared with her that they "needed to cut down" on their drinking. Despite their comments, this did not appear to be the case:

Quite often the last thing they will say on an email, or on a phone call conversation, or going out the door, 'I am going home to have a drink now', because they have had a bad day. It's like you know, you are stressed out. This happened, or that has happened, I am going home to have a drink. That's the acceptable thing now and actually people will say to each other, 'I am going home to open a bottle of vino'.

The stress Helen's colleagues feel is evident within this narrative appearing to negate any thoughts they may have to reduce their drinking. The fact that women are openly sharing this detail with their colleagues could, in Bourdieusian terms, suggest that for them, the culture of drinking at home to relieve stress has become a socially accepted practice within the field they occupy. The women then could be considered as sharing the same doxa of practise, as home drinking has become embedded within their habitus. This was a practice Helen acknowledged within herself 12 months previously. She described how her drinking had become more frequent, regularly coming home after a "stressful day" at work and opening a bottle of wine. Recognising that both she and her partner were drinking too much, they made the "conscious decision" to modify their drinking habits to just one glass of wine on a Friday and Saturday nights. Whilst they have continued to do this, it was clear that for Helen, this was not necessarily an easy change to make:

It's very easy to get into that cycle and it is quite difficult I suppose to get out of it. There are times now, even now, where I will go home and think 'I have had a really crappy day' and think 'will I have a drink?'

Helen's decision to reduce her alcohol consumption was driven predominately by health reasons. Her demanding job "working ridiculous hours", her husband having high blood pressure, her father's ill health and the birth of her granddaughter all contributed to her reflecting on her health. For Helen, she felt "unhealthy" and wanted to exercise, explaining that she now chooses to exercise when she gets home rather than relaxing with a bottle of wine:

Instead of coming home and using that to relax, there are other things that you can do, which are far healthier. You know, you can do some exercise, or do something else really.

Bourdieu (1977) describes the habitus as a “structured and structuring structure” (p.72), structured by present circumstances such as Helen’s family responsibilities and structuring in that it helps change behaviour. The structuring role of the habitus becomes clear as Helen’s dispositions have become structured by what she perceives to be her responsibilities, rather than being influenced by her peers.

Helen recalled a media awareness campaign focused on how many units of alcohol women should be drinking. Whilst she could not remember the details of the guidelines, it had, nonetheless, made her reflect on her drinking and realise how many units she could be consuming if she continued to drink up to five nights a week. Helen felt that there should be more such awareness-raising campaigns:

I think it’s really, really important that you do that, or have an awareness at least. Because all of a sudden you realise, hang on a minute, if you have a drink every night or whatever, it soon mounts up.

It is of interest to note that Helen, whilst she was aware of the CMOs’ Low-Risk Drinking Guidelines (Department of Health, 2016), was, like other women in this study, unable to say what they were, suggesting perhaps that effectiveness of such educational awareness campaigns should be re-evaluated.

The increase in the availability of wine, particularly from supermarkets, was again an area highlighted. Helen explained that she and her partner could now buy a “nice bottle of wine”, something they previously could not have afforded to do:

It’s so easy now; you go and do the weekly shop, don’t you? And it’s, its, for us, we will buy a good bottle of wine, we won’t buy, because, again that’s quite interesting, because there is no way we could have never of afforded a nice bottle of wine going

back. You know for me, even five years ago probably, whereas now it's, we like a nice bottle of wine.

The ability to purchase a “nicer” bottle of wine suggests Helen’s possession of economic capital and accumulated cultural capital. The differentiation between what Helen perceives to be a nicer quality of wine versus what she could have purchased before acts as a signifier of her aesthetic dispositions and a symbolic expression of taste, strengthening her position in the field (Bourdieu, 2010/1984). For Helen, attending wine pairings with friends, coupled with the increase of cookery programmes and social media posts featuring wine and food pairings, had, she felt, contributed to her increased interest and knowledge of wine. Bourdieu (2010/1984) considered lifestyles were a consequence of the habitus, conveyed in and through taste. The accumulation of cultural and social capital through these activities becomes active in the field, and Helen’s resultant social practices signify her taste distinctions. This is further highlighted later within Helen’s narrative:

I think particularly wine, it's acceptable, isn't it? If you said you were drinking cider or something, or whisky, people would be like. It's the same with gin isn't it now? I don't like gin, but now it's a fad, gin's acceptable, because it's, or wine, because it's sophisticated.

Helen’s assertion that drinking wine or gin (which she did not like) was both “acceptable” and “sophisticated”, contrasted with her view that drinking cider or whisky was unsophisticated, her distaste further exemplifying her middle-class habitus. As previously discussed, Bourdieu viewed taste as a signifier of class, asserting that distaste exemplified one’s taste (Bourdieu, 2010/1984). Helen’s view of what specific types of alcoholic drinks she discerned were acceptable provides a clear example of Bourdieu’s concept of class distinction (Bourdieu, 2010/1984).

The cultural change in drinking practices had also permeated outside of the home. Helen spoke of meeting up with friends after work for a glass of wine

instead of, as previously, a cup of coffee. This change for Helen had made drinking far more accessible and acceptable too. What she perceived as the “routine” of home drinking must be challenged:

Yes, I think it has changed, it’s a bit scary and unless people sit and take a step back and look at, it’s so easy to get into that routine, that before you know it, you are like, ‘hang on a minute’. And for me one of the things was I looked at our recycling bin and you know, you think, you don’t realise you open a bottle of wine. But you look at what’s in your recycling bin and you have got quite a few bottles of wine in there and you think, ‘am I drinking excessively’?

For Helen, acknowledging the number of empty wine bottles within her recycling bin had made her consider the amount of wine she and her partner were consuming and had, she felt, contributed to her decision to reduce her drinking.

4.1.6 Pixie's story

Pixie's demographic details

Name	Age	Occupation
Pixie	52	Business Director

Pixie started her story by saying:

Since I met you, I have thought about it, and basically, my group of friends, well since 18 onwards, drinking alcohol has been part of our social function, just has always been. And certainly, since I came to the city our social life was based around a club, a rowing club, there were lots of social functions so drink was part of that.

In Bourdieusian terms, there is a strong correlation between the accumulation of capital and taste (Bourdieu, 2010/1984). Habitus is manifested through taste, "drinking alcohol has become part of our social function" describes how this has become embedded within their habitus for Pixie and her friends. Bourdieu (2010/1984) argues that choices, for example, in sport, and food and drink, are related to a person's class position, and as a result, consumption becomes symbolically marked. Rowing is associated with being an "elitist" middle-class or upper-class sport (Ross, 2018). Pixie and her husband's membership of a rowing club act as a signifier of class and denotes possession of accumulated cultural capital, whilst attendance at functions provide opportunities to build social capital and develop connections, thereby strengthening field position. Bourdieu considers that sharing similar forms of cultural capital results in the sense of shared identity (Bourdieu, 1986), with accumulated social capital acting as part of the structuring process of the habitus (Bourdieu, 2010/1984). This can be seen in Pixie's earlier reflection that drinking had become the social norm for both she and her friends and embodied within their shared habitus.

Pixie explained that she usually did not drink during the week; however, this was not always the case:

We don't drink and I have never during the week generally, occasionally we might have a glass of wine if we have had a bad day at work, or when we have got visitors. So last week my brother was here, so we had a couple of glasses of wine more than we normally do during the week.

Pixie's decision to drink during the week seems to be predicated, in part, on her experiences at work. Like other narratives, Pixie describes the pressures she and her husband feel as a "bad day", for which alcohol appears to be used as a form of relief. Offering an alcoholic drink to visitors appears to form part of her social field of home drinking. The interview started with Pixie half-jokingly offering me a glass of wine. Pixie went on to describe her drinking at the weekend:

But generally, I, we, restrict our drinking alcohol to weekends and that could either be because it's the weekend, 'shall we have a glass of wine?' and that's a social thing between myself and my husband, or we have got visitors and rarely would we not have alcohol on the table. Somebody might be driving, and they wouldn't have alcohol, but usually, it's just part of our interaction, we have a glass of wine, or we have two glasses of wine, or a few more glasses of wine (laughs). And then you know, that's just part of the repartee I suppose. I haven't really analysed; it hasn't changed we have been fairly consistent. So, I guess that the people who I surround myself (laughs) with, in that sense, are in the same bracket really.

Reflecting on Pixie's narrative, drinking for herself and her husband can be considered to have become embodied in their habitus. Similarly, the structuring role of the habitus is understood through the dispositions it produces, including the embodiment of peer norms (Bourdieu, 2010/1984). This can be seen within Pixie's comment "the people who I surround myself

with, in that sense, are in the same bracket really”; these shared norms then resulting in their shared habitus and doxa of practice. Reflecting on what she had said, Pixie did not feel that her drinking had changed over time; she had “always drunk as part of a social interaction, so really it was normal”, signifying that for Pixie, the culture of drinking had become embodied. “Always drunk” suggests that Pixie’s habitus was inculcated by her familial habitus. Bourdieu considers habitus as a “multi-layered concept” (Reay, 2004_a, p.434); whilst Pixie’s personal history forms part of her habitus, her collective family history and class are also contributors. Hence, for Bourdieu “the subject is not the instantaneous ego of a sort of singular cogito, but the individual trace of an entire collective history” (Bourdieu, 1990_b, p.91).

As with Wallis, Pixie only works four days a week, and for her too, Thursday night was the start of her weekend – a time to relax:

For me I don’t work Fridays, Thursday night is my weekend, so
Thursday night ‘let’s have a drink’, because it’s the weekend –
social and relax.

Pixie continued the theme of socialisation; she described her parent’s drinking as “social”, whether at the weekend or with visitors. Wine was inevitably drunk at mealtimes when she visited. Pixie questioned whether her drinking behaviour had been learnt from her parents:

So yes, it’s been all the way though and learnt behaviour as well
because the family has drunk.

This resonates with Bourdieu’s view of the habitus as a product of a person’s early childhood experiences, especially socialisation within the family (Edgerton & Roberts, 2014). Reay (1998) defines familial habitus as the “deeply ingrained system of perspectives, experiences and predispositions family members share” (p.527). Pixie then reflected on her current drinking and felt that her parents would say she drank more than they did. Pixie refuted their assertion, appearing to justify her drinking by explaining that

she did drink the same amount as others; it was just that she started earlier and drank quicker but then slowed down, so, in essence, the total consumption was the same. Whilst habitus is instilled within childhood, it is not fixed; instead, Maton (2014) views it as both ongoing and active: “dispositions and fields evolving in light of histories and paths chosen which in turn, inform our understandings of both ourselves and the world” (p.25).

Pixie’s apparent comfort with her current drinking behaviours suggests that she feels at ease with her husband and friends in their social field of home drinking; her habitus matches the logic of the field and is attuned to the doxa.

Pixie spoke of her time at university; whilst she stayed at home, alcohol formed part of her socialisation:

Yes, I frequented the student’s union (laughs), made good use of that to, that’s cheap alcohol as well though isn’t it? So that was part, again it was a social thing, went to lots of social events and the alcohol was free flowing.

Pixie’s secondary habitus is associated with experiences and associations gained through education at school and university. Sharing similar forms of cultural capital creates a sense of identity and group positions “people like us” (Bourdieu, 1984, p.64). Her lifestyle of attending “lots of social events” with “free flowing” alcohol, as the alcohol was so “cheap”, was a product of habitus and dispositions enacted within the social drinking field she occupied. Pixie recalled how she could drink what she liked; even if she was ill the next day, she would just continue drinking. Reflecting on her student behaviour, Pixie felt that she drank less now; her drinking practices as a student were not something she could continue with:

But when you are younger you just think you are invincible, don’t you?

The use of the word “invincible” suggests Pixie felt, certainly when she was younger, that regardless of the amount she drank, she would experience no harm—reflecting again on her shared habitus and dispositions with others within the social drinking field at university.

Pixie then spoke of a recent holiday abroad with family and friends. The ability to travel is a signifier of economic capital. The adults were drinking around the children; a behaviour Pixie justified as both acceptable and the norm:

We were drinking around them and that is part of the social thing and then, they are used to us having, there you go I self-perpetuate with my own family. They know that drinking is sociable, or not, as they say to us “well you are drunk mummy”. Well, no I am not actually; I have had a glass of wine’. But I don’t think you should hide my drinking from the children because by hiding it you are almost making it, ‘why are you hiding it?’ Because I am not doing anything wrong, I am just having a glass of wine.

The use of the phrase “I am not doing anything wrong”, suggests that Pixie feels the need to both outwardly justify and normalise her drinking in response to her children’s statement that she was “drunk”. Describing her drinking practices as “self-perpetuating” with the family echoes Bourdieu’s view that habitus is a product instilled within childhood, mainly through interacting with the family. For Bourdieu (1977), the habitus is a result of history being codified into practice:

In each of us, in varying proportions, there are part of ‘yesterday’s man’; it is yesterday’s man who inevitably predominates in us, since the present amounts to little compared with the long past in the course of which we were formed and from which we result. (p.79)

Pixie then asked me whether I drank. None of the other women asked me this question. When I confirmed I did, Pixie appeared to take this as confirmation that I was no different to her “so it’s just normal”. The normalisation of drinking was reiterated by Pixie later in the interview, an apparent justification that drinking was something that both she and her friends did, as a matter of course, without question. Again, it reflected that drinking was embedded within her habitus and the social drinking field they occupied.

Pressure to conform to the cultural group norm was highlighted when Pixie took part in the *Dry January* campaign (Alcohol Change UK, 2021). Describing how she wanted to “prove I can do it”, Pixie recalled the challenge she received from her friends who continually goaded her to have just one drink, despite them knowing she was taking part in the campaign:

I got such a lot of stick from my friends because they were like ‘come on have a drink, just have drink’.

Considering Pixie’s experience through a Bourdieusian lens, by not drinking, Pixie was no longer acting in line with the doxa; in taking what could be viewed as the moral high ground, she is no longer following the rules of the game. As Ceron-Anaya (2017) describes, individuals may use their tastes and behaviours to exclude or ostracise others who do not share them. Pixie’s dispositions no longer give her a feel for the game, resulting in hysteresis.

Pixie felt that getting older had made her challenge her drinking more:

But the older I have a got being women, em I have found it affects me more if I drink, you know, do you know what I mean? The aftereffects – how my body recovers or responds symptoms of age are more pronounced I have found after even one glass. [...] So yes, over time, I have noticed that there has to be a good reason to have more than a couple of glasses because of the effects it has, it’s worse than when I was younger.

The onset of menopause had resulted in Pixie having to reduce drinking. She was clear that this was due to necessity and not a choice. She confirmed that she would have continued drinking at her previous consumption levels had she not experienced any aftereffects. Her menopausal symptoms necessitated a recent visit to the doctor, which Pixie then described:

I went to the doctor recently about my age and she asked me, they always ask you, don't they? And it depends; there was one point when I don't drink as much as I do now and even then, I don't actually drink that much. But it was the way she asked the question, and then she said 'well do you know that's poison? If they invented alcohol now, they would label it as poison because of what it does to your system.' I was bemused and I told my friends this. My immediate reaction was to play down how much I drunk/ drink because she is already judging me by the fact that I even have alcohol.

The doctor's view of alcohol as "poison" appears to invoke an instant response from Pixie to downplay her drinking and actual alcohol consumption, as she felt she was being judged. Pixie did concede that alcohol could cause health harm, "I know I have been very lucky so far" however, any changes to her alcohol consumption would only be considered if something went wrong:

Em, I know it has, it does things to your body, but I still drink, because so far touch wood everything else, I haven't had any medical issues. But I suspect that if something happens that will completely change how I feel about alcohol, because you know I have been very lucky so far really.

Pixie then asked me why I did not have questions. I explained that I wanted to hear her individual story without any predetermined questions. Pixie responded by referring to herself laughingly as a "lush, always being sociable". I asked her why she was laughing:

I suppose, because the reaction you get from you doctor is ‘you naughty person, you are drinking too much’ that’s probably why, that is why I was laughing. So, it was like, you are going to find out how much I drink.

This feeling of chastisement developed further when Pixie spoke about how she could drink two bottles of wine at the weekend and felt this would be considered “binge drinking” by the doctor. How, when she spoke to “professionals, i.e., her GP”, whilst she acknowledged they were checking that her health was ok, she was:

made to feel guilty, because, yeah ok, they do tell us that, because it is bad for us, but we are still drinking.

Pixie’s narrative highlights that whilst she acknowledges alcohol can cause health harm, “it is bad for us”, she chooses still to drink at her current levels, suggesting that the socialisation and relaxation she derives from consuming alcohol are of more importance. This is borne out by reflecting on Pixie’s *Dry January* experience when her feelings of being ostracised by her friends when she chose to stop drinking were clearly articulated. The conversation moved on to Pixie reflecting on the CMOs’ recommended guidelines of 14 units per week (Department of Health, 2016). Pixie questioned why the units had been lowered and what medical evidence supported this. She recalled an appearance by a CMO on television:

I do wonder when the lady comes on, it is almost comes across as patronising and that why people kind of go ‘fine thanks very much but don’t tell me what to do’. Even though actually it’s really sound advice but again as I said, how do you tell people? Because she is just being factual.

Whilst Pixie did not dispute what was being said, the “patronising” way she felt was being said appeared to negate the message. This view was furthered by Pixie’s clear statement that she would not change her drinking habits

unless something significant happened to her or her family. The culture of drinking being the norm within the middle-class field she occupies is clear.

Mm I don't want to change (laughs). So, at the end of the day, I would imagine because it hasn't happened yet, it would have to be something, either family has a problem, or I have a problem which would make me say 'enough is enough have got to make some big changes here'. Because I am surrounded by people who are, you know, we choose to be surrounded by those people, but we do drink. It is, it is part of the social function.

For Pixie, drinking alcohol had become "just a habit". When reflecting on whether this habit had changed over her lifetime, Pixie commented:

I haven't changed my habits, scary isn't? It's always been there. The only habits that have changed are what I drink and how actively I choose not to have a hangover the next morning, because I didn't bother when I was younger.

Reflecting on the name "Pixie" as the choice of pseudonym has a suggestion of hedonism. Mirrored perhaps in the pleasure and self-gratification portrayed in Pixie's comment that she "didn't bother" whether she had a hangover when she was younger, highlighting the carefree choices made in her youth.

4.1.7 Sarah's story

Sarah's demographic details

Name	Age	Occupation
Sarah	47	Wellbeing Coach

Sarah began her story by explaining:

I definitely think there is a problem with alcohol in society. I think that it is an accepted problem because it is legal; people accept that we are just drinking night after night not really thinking about the consequences. I think there is a big pressure on you if you choose not to drink when you go out with your friends, big pressure on you to drink. And then I think because life has got so stressful, for women especially; work, children, all the demands, from a women's perspective I think that you get home from your day and you have got all the demands and drink is a very, very easy way to relax and manage all the demands.

Sarah's comment that drinking is "an accepted problem because it is legal" is interesting. Sarah appears to use this as justification for her drinking, whereas it can be argued that the UK smoking ban emanating from the tobacco legislation in 2007 has "de-normalised" smoking (Kelly et al., 2018b, p.70). Sarah's perceived cultural acceptance of drinking is clearly articulated, "we are just drinking night after night". Similarly, as has been highlighted in other women's stories, the use of the word "pressure" signifies the need Sarah feels to conform to the norm of drinking within her friendship circle:

I have tried to go out with my friends and not drinking at all and it was just the worse night ever because all they did all night was moan at me to drink. [...] But I don't know if I would put myself through it again because it ruined my night. They couldn't talk to me. I think what happens is that people feel paranoid about their behaviour when they are drunk, they think I am going to

judge them. So, what they do is that they try and get you drunk so that you are stupid with them. (Laughs).

The influence and pressure of Sarah's friends for her to conform to their accepted cultural norms is evident. Sarah describes how her friends "could not talk" to her when she chose not to drink, suggesting she felt or was ostracised from the group. This section of Sarah's narrative resonates with Elaine and Linda's experiences. In Bourdieusian terms, Sarah and her friends inhabit a social drinking field. By Sarah not drinking, the structuring of her habitus no longer matches the logic of the field. Her habitus is no longer attuned to the doxa, the unwritten "rules of the game" that underlie practices within the field (Maton, 2014, p.56).

Sarah's childhood memories were of drinking being something people did on special occasions, her mum being one example. Sarah started drinking at 14, describing how she and her friends would drink cider in the local fields. This appeared to be more to ensure being part of her friendship group than the actual enjoyment of alcohol: that is interesting as, from a primary socialisation perspective, she was socialised into not drinking.

I drank at 14, that was like naughty, don't let anybody find out.
You didn't drink because you liked it; you drank because you wanted to fit in.

The word "naughty" is often associated with children misbehaving, suggesting perhaps that Sarah was not comfortable with her drinking during her adolescence, but as she reflects, she did so to "fit in". Considering this from a Bourdieusian perspective, Sarah entered the social field of drinking with her primary habitus instilled in her childhood through family socialisation (Bourdieu, 1990). Each social field has "distinction" (Bourdieu, 2010/1984) or quality, defining the amounts and forms of economic, social, cultural and symbolic capital at stake in the specific field (Thompson, 2014, p.67). The field can be viewed as a hierarchical structure, with those in dominant positions asserting power in relation to what happens within the

field (Bourdieu & Wacquant, 2007; Thompson, 2014). Sarah's dispositions, including her tastes (not liking alcohol), do not align with the logic of the field, rendering her with a feeling of unease. This unease is an example of hysteresis, wherein Sarah's dispositions are not in line with the field and the shared expectations of others as to what constitutes acceptability. Hysteresis then results in Sarah feeling like a "fish out of water" (Maton, 2014, p.56). Sarah's habitus, "structured" by both her past and present experiences, is also "structuring" as it shapes her present and future experiences (Bourdieu, 1977, p.72). Her decision to drink aligns with the logic of the field, and she feels a sense of ease; as Bourdieu and Wacquant describe, she feels "like a fish in water" (Bourdieu & Wacquant, 2007, p.127).

Sarah's childhood memories of only drinking on "special occasions" contrast with her next comment "now we drink for the sake of drinking". There appeared to be no sense for Sarah now that drinking was something special, more a fact of life. She felt that alcohol was used as a "crutch" by many people, helping them to get through their lives; describing how she used alcohol this way:

I divorced three years ago, and I did that whole thing, 'when I am divorced, I will give up alcohol'. You use it as an emotional crutch for a lot of the time.

Sarah explained that whilst she had considered stopping drinking after her divorce, she had continued to do so, predominately due to stress. She felt many people used alcohol as a form of self-medication to help manage their stress:

Because obviously we live in a stressful, obviously depression, mental illness, is getting bigger and bigger and I think people are using it as self-medication too.

Sarah spoke of the challenges she felt managing as a single parent with four children under 16 whilst working full-time. She spoke of using alcohol as a

way of calming her mind after work, something she felt helped her role as a parent:

Sometimes I will have a glass of wine when I get back from work because I just want my mind to be calm and then it probably helps me to be a better mum to my children... My children will say to me sometimes, 'oh mum, have a drink and then you will be relaxed'. This is interesting as the children's experiences of alcohol and stress reduction are being formed.

Sarah's comment that she feels wine helps her to be a "better mum", is of interest, suggesting that perhaps what she perceives as the calming property of wine positively supports her with her parenting. Similarly, the example given of her children almost encouraging her to drink, telling her she will be "relaxed", may indicate that Sarah's stress manifests itself openly with her children:

Yes, so obviously they have been born into that environment. So, it's terrible, because my son, sometimes he will see, in fact both of those two boys will see a glass of wine and they will try and drink some when I'm not looking. So yes, it has been bred into them, it's socially accepted.

Considering the above narrative through a Bourdieusian lens, as previously discussed, Bourdieu views a person's primary habitus as a product of their early childhood experience, particularly socialisation within their family (Bourdieu, 2010/1984). This premise resonates with Sarah's view that her son's drinking behaviour has been "bred into them". Sarah felt that she had to prepare her children for university:

I think you have to be prepared, as a child, for what is in store for you at university. Because I mean, you go and start at Uni, go to Freshers Week and its £1 a pint and that's allowed that's legal. So, I would rather my children understand alcohol before they go to university and they have moved into halls of

residence, than not being allowed to drink and suddenly they have, oh my god, I don't know who is looking after them, when they are sick, or, whatever. They have got to know their limits by the time they get to university, they have to be prepared.

This section of Sarah's narrative can perhaps, in part, be explained by the fact that Sarah felt unprepared in respect of her drinking when she went to university:

I didn't know anything. My parents didn't prepare me.

From a Bourdieusian perspective, as previously discussed, the habitus encountering a new social field such as university, with which it is not familiar, results in a disconnect that can produce "not only change and transformation, but also disquiet, ambivalence, insecurity, and uncertainty" (Reay et al., 2009, p.1105). If Sarah felt "unprepared", she may have behaved in a way that was not in line with the field or attuned to the doxa (Bourdieu, 2010/1984). Doxa can be thought of as a "silent, invisible bond" that links the habitus and field (Nairz-Wirth & Feldmann, 2019, p.797); the bond is "woven from the norms, perceptions, opinions, and prejudices which form the field-based view of the world, which are not called into question, and which determine everyday practice(s)" (Nairz-Wirth & Feldmann, 2019, p.797).

Although Sarah practises meditation, she feels nothing could give her the "quick instant hit" she gets from alcohol. The pressures facing women today, precisely the challenges of balancing family responsibilities with working lives, were seen by Sarah as the main contributors to why she and other women are drinking more. Her perception was that the expectations were much higher than they had been previously:

I just think that the pressures on women are getting more and more because we need, women have to work, and they have to raise a family and there is a lot expected of women these days.

And I think the pressure is too much and I think that alcohol is a quick fix to feeling good about yourself and that you are coping. And I just think there are far higher expectations of women and that they are going to use alcohol more and more as an emotional crutch really.

Again, the use of alcohol as a coping mechanism was highlighted, something Sarah considered could assist with reducing both the pressures she felt women, such as herself, were experiencing. Reflecting on this section of Sarah's narrative, she describes what she considers the greater "expectations" placed on women today, alongside the pressures she felt they experienced. These statements resonate with the narratives previously discussed. Sarah shared that she drank five nights a week:

I would probably have two nights off a week. It's very shocking; it's my vice, yeah.

The use of the word "vice" suggests that Sarah considers her drinking to be a bad habit. However, although she acknowledged that she was "well over" the government's low-risk guidelines (Department of Health, 2016), Sarah appeared to justify this by explaining that she was very healthy in other areas of her life and for her, alcohol was her only "unhealthy" behaviour.

I know that I am well over the government recommendations. But I think life is a balance and I do think that I am very healthy across the board really and alcohol is my one thing where I am not healthy. But I exercise regularly, I eat very well, and I meditate, and I practise all that kind of wellbeing stuff.

Sarah explained that she ascribed to the work of a cell biologist who argues that genetics is a myth, his work advocates that if you believe that "alcohol is bad for you, you trigger cells to make you ill". Sarah questioned that, as she had been drinking since she was 14 years old and now 47, if she were "doing damage to her body", would this not be manifesting itself in some

way? Again, justifying her drinking behaviour – if there were no visible signs that this was causing damage, there would not be any reason to stop:

But I feel like I am functioning well, so I feel that my ability to drink, I have an ability to drink. Whereas I know I have got friends who say, my friend says 'I can't drink anymore I have one glass and it really goes to my head really quickly, or I feel really ill the next day'; there are some people who have adverse effects aren't they? And I, for me it's just, it makes me feel great and then, I don't get a hangover, as long as I keep within my, I don't know, below a bottle, but three quarters of a bottle, not even that. Yeah, I can do it. I would like you to get my liver out and show it to me and then I might think differently.

Sarah's remarks echo those expressed by Pixie. Both women commented that as they cannot see themselves internally and have not experience any physical health issues, they personally do not perceive any issues associated with their drinking. Sarah was clear that drinking, certainly for her, was a "habit" part of what she referred to as the "English culture":

I suppose it is a lot to do with habit. Like my friend rang up before and said, 'shall I come over and I will bring a bottle of wine.' Culture, English culture.

Again, Sarah's view that drinking for her was a cultural norm resonates with other narratives. In Bourdieusian terms, Sarah's attitudes and behaviours have been learned and socialised through her interpretation of the external social environment. She enacts the dispositions and practices from her habitus within the field. Sharing similar forms of cultural capital with others, for example, the same taste in drinking generates a sense of shared identity and group position. If Sarah and her friends and family occupy close positions within the field, in this context, the social field of drinking, their behaviour is considered acceptable (Bourdieu, 1990a).

For Sarah, the acceptance of alcohol was encouraged through social media:

People always take pictures of themselves when they are out, and there is always the champagne flute next to it and yes, people see it as a luxury don't, they? 'Oh, look at me I am having a drink' and people, they celebrate that their drinking, they will post a picture of themselves on social media drinking a glass of wine and saying, 'oh look at me I am drinking'. So, it's almost, we are almost looking at other people and going 'oh that's so nice I wish I was doing that.' It's so great that you think you have got your bottle of wine, I will open my bottle of wine. It's like the equivalent of going for a Spa treatment; you go and open a bottle of wine. I think it is almost like treating yourself, isn't it?

As discussed within Elaine's narrative, the social norm of drinking portrayed in such a way through, in this instance, social media, propounds Sarah's perception of drinking as a normalised and perhaps valorised behaviour. Considering this in Bourdieusian terms, in this narrative section, Sarah speaks of the "luxury" she associates with pictures of champagne flutes and likens celebrating by drinking wine to a spa experience. These lifestyle reflections are a consequence of the habitus, expressed in and through taste (Bourdieu, 2010/1984). Social media itself can be viewed as a medium wherein life can be edited and portrayed, often as one of a perfect life.

Like many of the other women who participated in this study, Sarah reflected on why she laughed when she spoke about her drinking. Her response was of interest:

Maybe that is because it's the middle-age thing. Maybe it is because by the time you get to middle-age, a lot of women are kind of a little bit despondent about what life has brought them and they have turned to the bottle more.

Was she reflecting on herself? "Despondent" is a robust and emotive word, suggesting perhaps that Sarah felt that on reaching middle-age, she had not fulfilled her once held dreams or aspirations.

4.1.8 Linda's story

Linda's demographic details:

Name	Age	Occupation
Linda	41	Associate Director

Whilst the Participant Information Sheet (Appendix 3) defined middle-aged as being between 45 and 60, Linda, aged 41, wanted to participate in this research. As discussed in Chapter 3, epistemologically, I consider the term *middle-age* a social construction, Linda's narrative forms part of this study.

Linda began her story by recalling her parent's drinking when she was younger:

Mum was, and still is, a gin and tonic drinker, but not to excess. Mum will have a drink every single day, but it is a glass of gin and tonic with her tea. And my dad, he used to drink a lot, but I don't think I have ever seen my dad drunk. He used to work away a lot, so he would spend like, four nights a week in a hotel which is where he would have drinks... he was a bitter drinker.

Linda describes her parents' drinking where, for both, the consumption of alcohol was a regular, if not daily, occurrence. Whilst commenting that her dad drank "a lot", Linda appeared keen to qualify this by saying that she had never seen her dad drunk. Linda recalled how both she and her sister were "allowed" alcohol during their childhood:

We were always allowed a little glass of Lambrusco or Liebfraumilch, with a little top up of lemonade with our Sunday dinner in a little sherry glass. But I am talking at the age of, I could have been eight and my sister ten and we were always allowed a little taster with our meal. We were always allowed a Babycham on Christmas Eve; it sounds awful (laughs). They were always, they were ok with us having a drink, we had an open relationship with drink in our family.

Using the word “allowed” three times may imply that Linda felt she had to justify her parents’ decision to introduce their children to alcohol at an early age. Recent evidence suggests that early age drinking is associated with an increased risk of subsequent drinking (Jackson et al., 2021). The phrase “open relationship” suggests Linda’s parents took a relaxed approach to their daughters’ drinking. As noted previously, habitus is product of early childhood experience, particularly familial socialisation, wherein the most enduring dispositions are formed (Bourdieu, 2010/1984). This, for Reay (1998), develops what she describes as the familial habitus: “the deeply ingrained system of perspectives, experiences and predispositions family members share” (p.527).

Considering this definition within the context of Linda’s childhood experiences, the family habitus displayed parental dispositions of acceptance of alcohol consumption which structures Linda’s primary habitus (Bourdieu, 1990a). When Linda reflected on the alcohol she had drunk, particularly Babycham, she appeared embarrassed – “it sounds awful”. As discussed, Bourdieu considers a person’s tastes and, more importantly, distastes as an indicator of class (Bourdieu, 2010/1984). In the 1960s, Babycham was marketed as “posh and sophisticated” (Milne, 2013), described as the “happiest drink in the world” (George, 2020); it became popular in the 1970s, its popularity perhaps being associated with it being the first drink advertised on the television (George, 2020) and specifically marketed at women (Flint, 2020; Read, 2016). However, over the next decade, this view of sophistication dissipated, replaced in the late 1980s with the perception of Babycham being “old fashioned” (Read, 2016). This change in cultural taste may partly explain Linda’s apparent embarrassment. Her distaste acts as a class signifier.

Linda then spoke of drinking alcohol in her teenage years:

So, I think if I go right back, this sounds awful, but buying a bottle of Merrydown and putting it in a rucksack and drinking it

in a local park (laughs). It sounds terrible. But the sole aim of drinking was to get drunk, and we are probably talking about when I was 16, before I could actually go into pubs. So, this was, getting my sister to go to the Co-op with her driving licence, because she, you know, and she would pass the bottle to me, and my friends and we would go off and sit in a park. But it was not a case of being able to stay out late, because mum and dad would expect me to be back at half 10 or 11. So this was a case of drinking as much as I could, having a really good act of being sober when I got home and going to bed. That was drink; it was just about 'getting drunk'.

Linda again appears embarrassed – “it sounds terrible”, about her drinking during this period. In Bourdieusian terms, Linda and her friends occupied a social drinking field in which the structuring role of the habitus produced dispositions and tendencies, positioning drinking as acceptable behaviour. The person's position in the field depends on the amount of capital they possess. All capital – economic, cultural, and social – can be considered symbolic if it acquires specific or functional recognition (Bourdieu, 2000). Holders of such symbolic capital are perceived as being “visible, admired and invited” in turn, providing them with a “continuous justification” for being part of the group and continuing the lifestyle associated with this type of capital (Bourdieu, 2000, p.242). For Linda, she was not just drinking; she was drinking with the “sole purpose to get drunk”. Individuals can obtain knowledge of, and negotiate cultural fields, depending on their “logic of practice” or having a “feel for the game” (Bourdieu, 1990_a, p.82). This ability to “feel” provides the individual with knowledge of how to negotiate the field and what practices are acceptable in certain situations (MacArthur et al., 2017). Linda's narrative suggests that the accepted practice within this field was to get drunk, which can be viewed as a form of symbolic capital, gaining prestige within the field and accrual of capital as a result (Lunnay et al., 2011). Her symbolic capital confers too, a position of status, as her sister procured the alcohol for both Linda and her friends.

Linda then reflected on her university life, recalling how, during her first year, she and her flatmates only stayed in for one night over the entire year. Most nights were spent in the pub on campus, resulting in what Linda termed “not a healthy relationship” with alcohol:

We stayed in one night, for the entire year and I think we were the ‘winners’. But that’s just how it was. In year one we were fresh out of leaving home, we were all in student accommodation on a campus where there was a pub and you just went to the pub every night, and you know come home drunk after having there or four pints. I piled on the weight loads of within my first year as well because it was all pints, a pound a pint, Snakebite and Black. When I think back it’s awful, but yeah, it’s not a healthy relationship.

Linda describes moving from her family home into shared accommodation within the university campus. This “unique life transition period” (Jacobs et al., 2018, p.738) brings many lifestyle changes, including sharing living and learning spaces with others. Bourdieu considers lifestyles as “a system of classified and classifying practices – a unitary set of distinctive practices which express the same intention in the logic of each of the symbolic sub-spaces” (Bourdieu, 2010, p.169).

Linda’s description of what she now feels to be her “unhealthy” drinking practices whilst at university can be reflected upon through a Bourdieusian lens. Bourdieu views social fields to be dynamic and fluid rather than static entities (Bourdieu, 1985). Her lifestyle change resulted in Linda entering a new system of fields, the social drinking field within the pub being one of note. Fields are arranged around specific forms of capital, or combinations of capitals that are “both the process within and product of a field” (Thompson, 2014, p.67). Linda’s position within the field is determined by her possession of economic, cultural, and social capital (Lunnay et al, 2011). Whilst durable and transposable, habitus also evolves and is interrelated

within the field (Maton 2014). Linda's secondary habitus and dispositions thus emerge in relation to her experience and social interaction within the university fields (Bourdieu, 1990a; Nairz-Wirth & Feldmann, 2019). Habitus and the field continually interact, the habitus influenced by practice and cultural norms, drinking every night being one such example. By internalising the cultural norms and the accepted practices within the field, Linda's habitus becomes a structure that generates her dispositions and inclinations in this field (Bourdieu, 2010/1984). Sharing this practice with her flatmates who occupied close positions to her within the field suggests an alignment with the doxa, notably, the valorisation of drinking every night (Bourdieu, 2010/1984).

Linda contrasted her university drinking experience to that of her nephew and niece's recent experiences with alcohol during their first year at university:

I've got a nephew and niece and when I talk to them, I absolutely surprised at how they deal with drink. Because I know when I was their age, so they are just starting they are just first year into Uni, and their attitude towards drink is completely take it or leave it, whereas for me it was any opportunity to get drunk.

The difference in social and cultural behaviour is stark, from one that considers drinking a must-do to one that appears indifferent. Evidence suggests that young people in England are drinking less (Rao & Roche, 2017; Oldham et al., 2019), with decreasing participation in drinking, reduced consumption levels and a lower prevalence of drunkenness being reported (Fuller & Hawkins, 2015; Bhattacharya, 2016; Livingston et al., 2016). Bourdieu (2010/1984) acknowledges that tastes change over time; similarly, habitus too can change, with varying dispositions, situations, experiences, and histories, which, as a result, then lead to differing ways of feeling thinking and acting (Wacquant, 2011).

Linda described how her “drinking to get drunk” behaviour continued up until she was in her thirties:

It was never about having a glass of wine and chatting with friends, and this just wasn't for me, this for all my friends as well. And I can honestly say, drinking, for the sole purpose of getting drunk was the 'norm' for myself whatever my boyfriend was at the time and my friends, probably I would say up until my 30's.

From a Bourdieusian perspective, this section of Linda's narrative illuminates her shared habitus with her friends. Shared habitus results in the same dispositions within the field; for Linda and her friends, they drank to get drunk. This lifestyle had become embedded within the habitus. Her drinking behaviour continued until her early thirties when Linda met her husband. She described very vividly their initial relationship with alcohol and how she felt the subsequent change in their drinking behaviour had occurred following the birth of their first child:

We drank heavily, both of us, and we had a really bad relationship with drink, we didn't have a drink problem, but our weekends were always centred around drink, having a drink and wine. And we would always end up having a row if we got drunk. And then I don't really know what happened, I think it was about having children, I don't know, getting more mature? And it was always like we just recognised that there was a bit of a problem there and we just said, 'we are not doing this anymore'.

While the phrase “really bad relationship” is an acknowledgement of the issues that both she and her husband had with alcohol, Linda also emphasises that they did not “have drink problem” further on in the same statement. In Bourdieusian terms, Linda's apparent distaste for others with “drink problems” can be considered a class signifier (Bourdieu, 2010/1984).

As previously discussed, Bourdieu (2010/1984) argues that a person's aesthetic choices indicate class. Linda's choice of drink has changed from pints at university to wine. Considering the decision by both Linda and her husband to change their drinking behaviour can be viewed through Bourdieu's conceptual tool of habitus (Bourdieu, 2010/1984). Whilst the habitus is durable, "dispositions, knowledges and values are always potentially subject to modification, rather than being passively consumed or reinscribed" (Webb et al., 2002, p.41). The change in their social field with the advent of their children and parental responsibilities contributed perhaps to their decision to cease their previous drinking behaviour:

There is a huge responsibility on having kids and just drinking to excess in the house is just something that we don't do anymore.

Drinking to get drunk was therefore not something that either of them did anymore; for Linda, this change in behaviour had a positive impact on her relationship with alcohol:

I can't really remember the last time I got drunk because we don't drink to the point of getting drunk anymore which is great really. So, I can safely say we have got quite a healthy relationship with alcohol. It's become more of a way of life for us, just to treat it more respectably.

Linda spoke of health choices that she and her husband had made regarding their drinking. Linda chose to drink gin if she was on a "health drive [...] and wanted to be careful with calories". Similarly, her husband had decided to lose weight eighteen months previously and stopping alcohol had contributed to his weight loss. This reflection highlights the decisions regarding their drinking behaviours that both Linda and her husband have made. In Bourdieusian terms, Linda and her husband's tastes have changed, primarily due to health choices; their shared habitus resulted in the feeling of ease in adopting their changed dispositions (drinking behaviours) within the field. Whilst these are predicated on health choices, the next part of

Linda's narrative perhaps gives a deeper insight into her decision to reduce her drinking. Linda shared what was a difficult subject to talk about. She described why she made the decision to stop drinking white wine, primarily following an experience at her close friend's wedding:

I had too much wine and acted like a complete idiot, I could barely remember the night I was really ashamed and embarrassed. And what did it for me was that I was trying to desperately get in touch with my friend who I had known from nursery, and she wouldn't return any of my calls.

This experience profoundly affected Linda: her friend, whom she had known since childhood, did not want to speak to her because of what Linda described as her "blarey and aggressive behaviour". Had it not been for her friend's father's intervening, Linda felt their friendship could have been lost. For Linda this was her "turning point":

I can honestly say it was at that point when I said, 'I am not drinking wine again'. I will have wine, but it is literally a glass, or a glass of champagne. But red wine I am fine with, I can drink half a bottle of red wine and will just, that does have the effect of relaxing me if I am honest. White wine has a completely different effect on me, and I can be literally drinking my second glass and I can feel a bit aggressive. It's you know picking rows with people. So yeah, I can hand on heart say that that was the turning point.

Linda's narrative initially suggests she would not be "drinking wine again"; however, she clarified that this was only in relation to white wine due to its negative impact on her behaviour. Conversely, Linda spoke of using red wine as a way of relaxation. Although she and her husband had chosen to reduce their alcohol consumption within the home, Linda found encouragement from friends to drink challenging to turn down:

I am so conscious about having to pace myself because I know if I keep up with her, I would be on the floor. So, I am really aware of that and its I find with her because she is so much fun it is so easy to get carried along with her. She is always encouraging me to 'come on and have another drink' and I have to be strict and say 'no, I will drink at my pace, and you drink at yours'.

In Bourdieusian terms, practices, tastes, and dispositions are situated within the social field (Crossley, 2014); a change in the field occurs when there is a disruption between habitus and current conditions in the field (Thompson, 2014). Habitus "exists only in and through the practices of individuals and their interaction with each other and their environment" (Jenkins, 2006, p.75). Linda's once shared habitus with her friend has altered with her changed dispositions. They hold different positions within the social field and no longer have a shared understanding of the doxa.

For Linda, getting older has changed her perception of drinking. The move from drinking to getting drunk to drinking as a social function is made clear:

Yes, I think as I have grown older, I think I have become more of a connoisseur. You see I do love gin and we like trying. Whereas when I was younger it would be go out and it would be pints Snake Bite and Black just volume, volume, volume, whereas now it's 'ooh shall we try this gin with this mixer? Shall we have it with cucumber or? And it's more about the experience and the taste. Do you get my point? It's not about volume anymore and it's not about drinking to get drunk at all. It's just drinking because it is a nice social thing to do... With craft beers and the resurgence of gin the drinking experience is far more exciting now and people just want to try new things.

Linda appears to reflect on her younger self, drinking pints of Snake Bite and Black to get drunk, to her present self, who enjoys choosing garnishes for her gin and tonic and who drinks to be sociable. Considering this narrative section through a Bourdieusian lens, Linda describes herself as a

“connoisseur” and speaks of gin and craft beers instead of pints. These statements can be considered signifiers of her middle-class status. As previously discussed, Bourdieu considered class was defined through lifestyle and taste (Bourdieu, 2010/1984). The narrative highlights the changes in both Linda’s lifestyle and tastes, her secondary habitus and dispositions evolving through her experience and interaction within social fields, including university and friendship groups (Maton, 2014).

4.1.9 Elizabeth's story

Elizabeth's demographic details

Name	Age	Occupation
Elizabeth	62	International Trade Advisor

Elizabeth started her story by reflecting on whether she preferred drinking wine as opposed to tea:

Drinking wine and tea? I probably do both actually. I don't know whether it has replaced my cup of tea, but it is probably as well as, because I am a big tea drinker, I drink tea all day long when I am working. I have moved on to decaffeinated, to red bush tea, because I think it's better for me. And then, usually in the evening, I will have a glass of wine or two with my meal.

This statement is of interest – Elizabeth describes how she has chosen to drink decaffeinated or red bush tea as she feels it is “better” for her, suggesting she perceives this as beneficial to her health. This contrasts with her consuming at least one glass of wine with her evening meal. Red bush, also known as rooibos, is a tisane (herbal infusion) ascribed with having health benefits (Torrens, 2020); its consumption acts as a signifier of Elizabeth's aesthetic tastes and accumulated cultural capital. A person's choice of alcoholic drink represents the essence of taste; since taste classifies the choice of alcoholic drink, it is the “invariant” which principally defines the habitus (Bourdieu, 1984, p.229).

Elizabeth spoke of her early career in the 1980s in London's cosmetics industry. She described the culture of going to the pub after work with colleagues, then going home and having a drink with her evening meal. This is where she felt she developed her taste for alcohol, as her social life predominantly revolved around “going to nice restaurants after a hard day at the office”. The phrase “nice restaurants” perhaps gives an insight into Elizabeth's London lifestyle. Bourdieu (2010) defines lifestyle as “a system of

classified and classifying practices” (p.169). Lifestyle is always interactive, linked to other lifestyles through complex arrangements of distinction, whereby certain forms of quantities and actions become “defined as valued, right or good” (Järvinen & Gundelach, 2007, p.57). Seen as a product of the habitus, lifestyles are expressed in and through taste (Bourdieu, 2010/1984); going to “nice” restaurants can therefore be viewed as a symbolic expression of her good taste. Elizabeth recalled the drinking culture at work during that period, a behaviour she described as being “normal”:

It was just the norm that champagne came out at lunchtime.
We’d take clients out at lunchtime and wine and dine them.
We’d have big conferences where the wine was always flowing.
When I look back on it, I was even drinking in the day, and it was usually champagne.

The workplace field described by Elizabeth denotes one in which the consumption of both champagne and wine was normalised and seen as part of working life, one in which she acted in line with the doxa, the “unwritten rules of the game” (Maton, 2014, p.56). Reflecting on the differences between her younger self living and working in London and her present job in local government, Elizabeth spoke of the changes in the culture and attitude towards drinking alcohol at work she had experienced during that time. Recollecting her working life in London, she vividly remembers one of the top buyers telling her, “We will have to go for a glass of champagne my dear” and regularly submitting expense claims for Moët & Chandon champagne. Described as “the most valuable wine and champagne brand in the world” (Wine Industry Network, 2022), as consumption is symbolically marked (Bourdieu, 2010/1984), the choice and consumption of champagne, particularly this brand, act as a signifier of symbolic capital.

The difference between the accepted culture then and what she perceived to be socially and culturally acceptable in respect of drinking alcohol at work now is clear:

And now I think the attitude has changed, its frowned upon and certainly now I work in the public sector, absolutely no way would I ever touch a drink when I'm working or offer a client an alcoholic beverage to drink, it just wouldn't be done.

Elizabeth's view that drinking at work is no longer socially acceptable, particularly in her current role within the public sector, highlights the social and cultural changes she has witnessed concerning the acceptability of alcohol in the workplace. Whilst for most employees, there is no specific law that states they cannot consume alcohol at work, many employers consider drinking during worktime as gross misconduct and the reason for immediate termination of their contract (Peninsula, 2019). When such societal changes occur, the field reacts to such changes by transforming in response (Bourdieu, 2010/1984); thus, drinking alcohol at work is no longer viewed as socially or culturally acceptable.

A significant cultural change for Elizabeth from her early working life in London is that she now works predominately from home. Going to the pub with her colleagues after work and sharing similar social, economic, and cultural capital was embedded within her habitus; however, Elizabeth views this now as something in her past. Such changes in the workplace field can result in "slippage" occurring within the habitus (Bourdieu, 2010, p.152), and dispositions can change or adapt in response. Bourdieu argued that habitus is an "open system of dispositions that is constantly subjected to experiences, and therefore constantly affected by them in a way that either reinforces or modifies its structures" (Bourdieu & Wacquant, 2007, p.133).

This can be seen within the next section of Elizabeth's narrative. Elizabeth described the pressures of meeting report deadlines and achieving targets by working long hours, often into the evening. For her, drinking alcohol whilst working, regardless of what time during her working day, is no longer something she would consider:

We are sort of under pressure for targets, so you can't afford to be sitting by the computer with a glass of wine because it goes horribly wrong if you do that.

The pressure of work that Elizabeth felt was clear. She spoke of working into the evening on many occasions during the week and the need for her to concentrate on ensuring she "got things right". The need to complete reports and meet targets adds to her feeling of pressure. Although Elizabeth would not drink alcohol whilst working, she commented on how she found it helpful as a way of relaxing and relieving stress, particularly after work:

But it is just the glass of wine, it's a relaxing thing. I think we have all got into – a glass of wine equals relaxation, takes away the stress of the day.

Elizabeth's view that "the glass of wine" was, for everyone, synonymous with relaxation, her aesthetic appreciation of wine acting as a signifying of her taste. Sharing her habitus with friends, "people like us" may lead to Elizabeth's view that everyone would choose wine as a means of relaxation.

Health for Elizabeth was important; she explained how five years ago, she started to "water down" her wine because of weight gain:

I was reading about the fact that people were drinking too much and it's not good for you and I know it's full of calories, which is, when you get to a certain age, you start piling on the pounds much more easily than when you were younger.

In response to this, Elizabeth spoke of how she had made a "conscious effort" to reduce the amount of alcohol she consumed by drinking less and topping up what she did drink with sparkling water. Her narrative suggests that this was not easy for Elizabeth; whilst she spoke of "trying to cut down" and "not drinking excessively", she followed this by saying that she still liked to drink, mainly if friends came round:

I still like to do it, especially if a friend comes round and we're ah, let's open a bottle of wine, especially if its nice weather, (laughs), let's sit in the garden and open a bottle of wine.

Within the field of home drinking, Elizabeth occupies a position within her peer group, in which there exists an implicit group acceptance of drinking as an "admired social activity and thus a form of symbolic capital" (Lunnay et al., 2011, p.431). Sharing the same doxa of practice, Elizabeth and her friends understand the rules of the game, the practice of opening and sharing a bottle of wine, signifying their taste and, therein, their middle-class status. Although she had previously spoken of how she had reduced her alcohol intake, Elizabeth commented that she still drank every day:

But probably, I do drink every day which they say isn't a good thing. There are not many days when I don't drink and I know that is not recommended and that is the advertising I have heard, not that I listen to it yet (laughs). Yes, I have heard that you should give your liver a rest and have certain days when you don't drink, so that's something probably I should do.

Whilst Elizabeth appears to acknowledge non-drinking days and giving her "liver a rest" would be of health benefit, her comment "not that I listen to it yet" suggests that although she has heard the message and has to some extent responded to it, by watering down her wine in, primarily in response to weight gain, she chose not to follow the advice. Elizabeth then explained that as her husband got older, his alcohol tolerance had significantly reduced, now preferring a ginger beer to a bottle of beer "he doesn't like to drink", which she felt was "quite unusual". This suggests that her husband's dispositions do not match with the home drinking field that Elizabeth occupies. This disconnect can be seen within her comments regarding her husband's choosing to drink less at home:

So, I'll have a glass of wine while he is having his ginger beer, but we are not going to polish off a bottle together because he is not drinking it.

Elizabeth described her husband as being "health conscious" and said he often spoke about eating healthily and drinking healthily and felt this had encouraged her "not to go too far with the drinking", suggesting that if it were not for her husband's comments, she would be drinking more. Although her husband chose to drink less, Elizabeth spoke of how she still liked to drink at home, especially if family and friends visited. Wine was offered and drunk on such occasions:

I do enjoy it and I think most of my family and friends, I would say that I socialise with are the same. We are on a par with that. If we have dinner parties, we always have wine.... We spend a lot of time with my brother and sister-in-law..., we will go round to their house and its 'have a glass of wine'. That's the norm, but it wouldn't be to excess really.

The comment "that's the norm" is said as a matter of fact, a way of life, suggesting that there is nothing unusual about the behaviour, which for Elizabeth, appears to have become normalised. Elizabeth's habitus is drunk with her family and friends, which matches the drinking field's logic (Thompson, 2014). By occupying a close position within others in the field, her drinking behaviour is considered acceptable and thereby considered normal by those around her.

Elizabeth considered what had influenced her drinking. Reflecting on her newfound taste for New Zealand Sauvignon wine, she felt that it was her friend who had introduced her to it:

This particular friend I am quite close to lives near to me round the corner, she's quite a foodie and drinkie person and she is always saying to me 'let's go and try this new restaurant and let's try this wine and that wine'. She and I will go out and that's

when we will enjoy ourselves, we have a meal and a nice glass of wine.

Elizabeth's habitus thus interacts with the social drinking field that she occupies with her friend. By recognising her friend's knowledge of food and drink, this knowledge can be considered a form of symbolic capital, generating dispositions of respect (Bourdieu & Wacquant, 2007).

Whilst she would drink wine, Elizabeth's narrative had a similar resonance to that of other women concerning the consumption of spirits:

I don't drink spirits. I never really drink alcohol like gin and tonic, or whisky, or anything like that, I just find it too strong for me. I don't particularly like it.

Again, it is interesting to note Elizabeth's view that spirits are "too strong", appearing to associate wine as an acceptable drink but differentiating her taste by what she perceived as a weaker form of alcohol.

4.1.10 Barbara's story

Barbara's demographic details

Name	Age	Occupation
Barbara	53	Senior Government Officer

Barbara began her story by reflecting on her childhood. Her parents did not drink, and no alcohol was kept in the house except at Christmas or sherry for funerals. Barbara had not drunk during her teenage years, attributing this to the fact that her parents lived “in the middle of nowhere”, and none of her friends lived nearby. Barbara's sole ambition when she reached the age of 17 was to learn to drive so she could “get out” of where they lived; subsequently passing her driving test within four months of her 17th birthday:

Everything was about the driving; drinking didn't come into it.

Even when I was at college and doing my A levels, I never really bothered.

Barbara then went to university, and it was there that “everything changed” regarding her drinking. She explained her initial struggles with the university drinking culture:

And that was the culture at university, everybody was drinking.

I found it quite difficult because I wasn't used to it, I hadn't got acclimatised to it like a lot of other people had. I think a lot of people had been to mixed schools, or they had been living in cities and towns where they were going out with friends, you know, quite regularly. Maybe had tried alcohol earlier on, whereas I never did. So, it was a late start for me, wasn't it? I had to catch up. So, I used to get drunk very quickly. I had to learn to cope with that, so that was quite difficult. And then it just became part of the culture.

Barbara's narrative depicts the challenges she felt when she left home to go to university. Moving from a rural area to a city location, coupled with attending an all-girls grammar school, Barbara felt contributed to the difficulties she experienced entering the drinking culture at university. Describing how she had to acclimatise herself and "learn to cope" with alcohol, Barbara conveyed the sense of discomfort and unease she felt at that time, choosing to go home every weekend. Considering Barbara's narrative through a Bourdieusian lens, growing up within a family who did not drink alcohol and similarly not drinking throughout her teenage years formed dispositions and behaviours that were embodied within Barbara's habitus. Bourdieu's definition of habitus can, perhaps, go some way in explaining the "difficulties" Barbara experienced: "the embodiment within individuals of systems of social norms, understandings and patterns of behaviour [...] ensuring that individuals are more disposed to act in some ways than others" (Bourdieu, 1977, p.3).

On entering the social field of drinking at university, there was a disconnect between Barbara's habitus and the field, her dispositions unable to relate to the doxa or "feel for the game" (Deer, 2014, p.116). As Thompson (2014) explains:

Social space operates semi autonomously. It is a human construction with its own set of beliefs (theodicies) which rationalize the rules of the field behaviour – each field has its own distinctive own 'logic of practice' (p.68).

Entering a field to which her habitus was significantly unaccustomed results in hysteresis and a feeling of being a "fish out of water" (Maton, 2014, p.56). In a social field, "the amount of power a person possesses, depends on the capital they hold and their position within the field" (Webb et al., 2002, p.23). Students with previous drinking experiences bring their accumulated social and cultural capital to the field, strengthening their position and power. Conversely, Barbara having no prior drinking experience, enters the

field with less social and cultural capital than those with previous drinking experience. Vincent (2016) suggests that those who enter a field with less capital than others “typically adapt their habitus to make their experience more bearable” (p.1168). This resonates with Barbara’s reflection that she “had to learn to cope” with drinking when she first arrived at university. Over the following months Barbara became accustomed to university life:

After a couple of months, I was fine, and I really enjoyed it and didn’t want to go home.

As previously discussed, Bourdieu seeks to overcome the dichotomy between structure and agency, asserting that practice is always informed by a sense of agency (a person’s ability to understand and control their own actions), but the opportunities of the agency are required to be understood and seen within the context of its relationship with the objective structures of culture, namely the social field (Webb, 2002). During her initial months at university, Barbara’s attitudes, behaviours, and values were modified and internalised through her interpretation of the university environment. Similarly, acquiring cultural and social capital through socialisation with her fellow students. Both, in turn, add to the structuring of Barbara’s habitus and strengthen her position in the field. The changes in habitus and position in the field can, in part, explain her feeling of “enjoyment”.

On finishing university, Barbara’s father became ill, and she returned to her childhood home to help care for him. As in her teenage years, the rural location again meant that driving took precedence, resulting in a reduction in her drinking. As Barbara became older, her drinking changed, and she began drinking at home with her then-partner. She described the impact their relationship had on her drinking:

I used to live with a partner who had a drinking problem, so life revolved around drink a lot which was not good for me. We split up and I went off the rails in my 30’s and I did quite a lot of drinking.

No further mention was made of how much drinking was done in her 30s. It was clear that although Barbara wanted to share this with me, she did not give permission to discuss it further. Whether this was due to embarrassment in terms of the amount of alcohol she had consumed can only be surmised. Instead, Barbara moved the conversation on to talk about her present-day drinking. Now living with a new partner, she felt her views concerning alcohol had changed as she got older:

So, we have non-drinking nights and then sometimes a glass of wine with dinner. Now as I have got older, I see it as rather than something that you have when you go out, I see it as something that damages you, makes you ill.

As discussed within Pixie's narrative, Barbara too explained that the menopause "made her ill", in turn, significantly reducing her alcohol tolerance:

I am on the menopause, and I really struggle with drinking alcohol as I used to. So, I have kind of cut it out now and use it as a bit of aside. So rather than going out to get drunk, I will go out and enjoy a couple of glasses and then I have to go onto water, I just can't do it anymore'.

Although Barbara spoke of reducing her alcohol consumption, it appeared that she had done this more through necessity than choice. Like Pixie, it was clear that her inability now to tolerate alcohol had driven her decision to reduce her consumption:

So being older has kind of changed the way I view it [...] but that's more from me about not being able to tolerate it, it's kind of intolerance really that has changed how I feel about it.

Barbara continued by describing the effects that this intolerance had on both herself and her friends, reflecting that up until five or six years ago:

Everyone was drinking at home, when you went out for a BBQ, or a beer, or whatever, it was always drink.

This reflection contrasts with the next section of Barbara's narrative, where she describes how neither she nor her friends can "tolerate" the amount of alcohol they once did – something that she missed:

Whereas now I think me, and my friends are finding it more difficult to tolerate alcohol and I think we kind of peaked and I think we are moving onto the next phase. It involves a life where we can only tolerate a couple of glasses which is quite disappointing sometimes when you are out and about, and everyone is having a great time. But I can't really do it. I can be ill for about three or four days after alcohol now which is quite disappointing and not fun. You lose days, it causes migraines; I have quite a bad intolerance now, so I really have to watch it. So, my bingeing days are over sadly.

This narrative section depicts Barbara's sense of loss, personified by the word "sadly". The inability of both Barbara and her friends to tolerate alcohol is strongly made – she described the "next phase" of life as "disappointing", unable to partake in the "fun" she perceived others experiencing. Suggesting that for Barbara, alcohol was key to having a "great time". This intolerance, coupled with the recognition of the calorific content of alcohol and menopausal challenges of weight gain, appears to add to Barbara's disappointment. Getting older appeared to bring many negative experiences:

Well, this old age is bit rubbish (laughs) when you are trying to enjoy yourself. There is not a lot left after that. You have this thing in your mind, you are going to enjoy yourself, you are going to have a nice night out, you are going to binge a little, enjoy yourself, let your hair down and there is a culture with that isn't there? Everyone wants to have a glass of wine.

Barbara appears despondent about growing older – “it’s a bit rubbish”; “there is not a lot left after that”. The narrative suggests that Barbara’s enjoyment on a night out can only be obtained through drinking alcohol within what she perceives to be a culture in which “everyone wants a glass of wine”. Reducing her alcohol consumption appears to have been one not made through choice but through necessity:

I think if it doesn’t make you poorly then you carry on... I think if there were no aftereffects, I think I would be more likely to drink.

Returning to the menopause later in her story, Barbara reiterated again, like Pixie, her hope that her current alcohol intolerance alcohol would abate, enabling her to return to her previous drinking practices:

I’ve got the vain hope that in four- or five-years’ time when I get through it, I might be alright again (laughs) and I can get to a certain point when I can enjoy a glass of wine and go out, you never know.

Whilst Barbara had spoken about reducing her alcohol consumption; she did still drink, the availability of alcohol in the home appearing to make it, at times, an easier choice:

If you have got a bottle half open, it’s a lot easier to go to the fridge and have a slug of that than it is to make a cup of tea. It’s quicker; it’s a lot easier, a lot more satisfying. You feel that you have treat yourself a little bit, don’t you?

This resonates closely with Jessica’s narrative, who spoke too of the ease of pouring a glass of wine rather than putting the kettle on. Barbara further explored the subject of alcohol being considered as a “treat”:

You hear people at work, saying, women of my age, I work by Public Health (laughs), there’s always a glass of wine night tonight. You know it’s like, it’s been a bad day, going to treat

ourselves and have a little drink when we get home. Have a nice curry and a beer, or you kind of associate it with nice foods and nice things. It's kind of you know how. I used to smoke, when I gave up smoking, I read the Alan Carr book and that was a lot about, rewarding yourself for being at a certain point in the day or whatever. It's kind of that isn't it?

Working full-time, often over 40 hours per week, for Barbara, a glass of wine was not only viewed as a treat but a reward too:

So yes, we are looking to reward ourselves and a lot of people are working more hours as well. I mean my mum never worked and she would have never imagined having a drink at home. ...I try to think what will I do when I get home that is nice? I will have a nice meal and have a couple of glasses of wine and watch something nice on the telly and put my jimjams on.

Like other women in this study, this section of Barbara's narrative describes the social and cultural changes she has seen within her lifetime. Compared to Barbara herself, her mum, who had never worked and never would have "imagined" drinking at home, working full-time and drinking alcohol as a "reward" for her long working hours.

Reflecting on public health messaging, particularly concerning the CMOs' advice of 14 units per week (Department of Health, 2016), describing alcohol consumption by units, Barbara felt it was unhelpful. She spoke of the challenges of understanding how many units were in a bottle when labelling is often inconsistent. Variations in the size of glassware, she thought, contributed to drinking more significant quantities of wine at home:

We have those big fancy glasses, don't we? And we tend to just think; oh, it doesn't look like much does it? But 125ml is kind of down there in the glass and you tend to give it a good glug and before you know it, you have drunk the bottle. It's very easy to do. [...] I think when we are sat at home; it's a lot easier to over

the units, units are really hard at home, whereas in the pub it's much easier, you know what you are buying don't you?

Barbara's description gives a clear insight into the ease with which she perceived wine could be consumed at home "you tend to give it a good glug, and before you know it, you have drunk the bottle". This was countered against drinking in the pub, where she considered measures were more controlled. However, Barbara felt nights at home with her girlfriends were often more accessible for her than the planning involved in going out:

If you can't get a taxi home, you have to book things and it's quite hard to get out and about, particularly women, have to be a bit more careful than guys normally. So, you need to plan, if you are going out and you want a drink then you have to plan it all. Sometimes it's easier to think, 'do you know what I know what, I will just stay in', have some girls round here.

Barbara's narrative indicates that the planning involved in a night out was often too much and staying at home became an easier choice. There is also the suggestion that personal safety is an area of concern "have to be a bit more careful than guys", adding to Barbara's choice to drink at home. Barbara spoke of the cultural changes she had seen concerning alcohol. Recalling a recent event, she had attended, Barbara spoke of what she considered to be the current prosecco trend and the expectation for women to be part of this:

I went to an evening musical thing and everyone's picnic had a bottle of prosecco in it. It said, 'ladies bring your bottle of prosecco'. It's almost expected that ladies are going to bring a bottle of prosecco. If you bring a bottle of elderflower cordial, you are looked at a bit weird.

The statements "almost expected" and "looked at a bit weird" can be viewed through a Bourdieusian lens within the premise of a social drinking field. The

aesthetic choice of prosecco acts as a signifier of taste within this field, as Bourdieu's (2010) definition of taste explains:

Taste classifies, and it classifies the classifier. Social subjects, classified by their classifications, distinguish themselves by the distinctions they make, between the beautiful and the ugly, the distinguished and the vulgar, in which their position in the objective classifications is expressed or betrayed. (p.xxix)

Bourdieu (2010) considered that such cultural consumption was predisposed to “fulfil a social function of legitimating social differences” (p.xxx). Elderflower cordial can also be considered a signifier of taste – it is not lemonade or orange squash. However, as prosecco holds higher capital status within the field, it is viewed as more desirable and acceptable than the consumption of elderflower cordial.

Barbara recalled hearing about the reduction in teenage pregnancies on the radio that morning. She felt that sexual health and substance misuse awareness education for young people had contributed to this; an education she had never received:

It's quite nice to hear about the culture of the young people who are very anti-alcohol, anti-smoking and anti-drugs. It's quite nice to see that they've, obviously something has happened with them, in that they're actually taught which we never had [...] They are much more informed. I was in an all-girls grammar school. We just never thought about sex, or drugs or rock and roll or anything at our school. It was about getting your head down and exams. That's why going to university was such a big eye opener for me. I got there and you are into Freshers Week and gin is 25 pence a shot – get on with it.

The contrast between Barbara's experience of relationship and sexual health education to what she perceived was received today is clear. Barbara described the changes within the university culture within her lifetime—

contrasting her era of full grants where everything was paid for to the one now of student loans, perhaps contributing to students becoming “more responsible” about their drinking. This resonates with Linda’s narrative, where she, too, highlighted the differences in generational attitudes towards drinking. Reflecting on the cultural changes that had taken place in respect of smoking, Barbara felt that alcohol would be likened to smoking in 25 years:

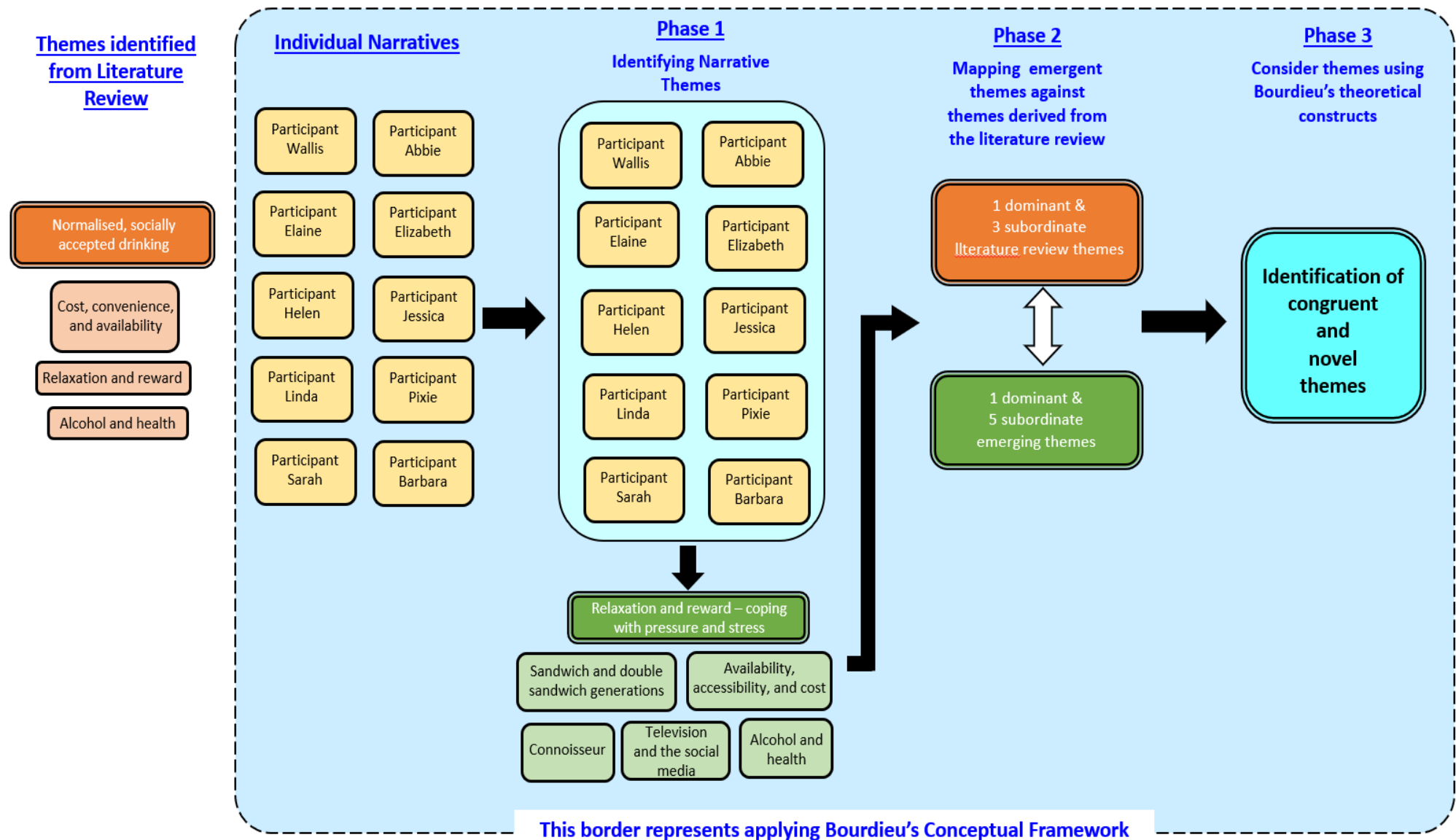
Everyone will be thinking’ oh my god did we drink alcohol?’ All those old biddies like me will be still having a glass of wine and people will look at us as if we were crazy.

4.2 Emergent Themes and Discussion

Following the development of individual narratives, a threefold analytic process took place: firstly, to identify themes emanating from the narratives; secondly, to map the emergent themes against those derived from the extant literature and finally, to identify congruent and novel themes. Both individual narratives and the emergent themes were considered through the lens of Bourdieu's theory of practice (1977). Theme titles were derived from the participants' narratives.

The above process is presented in a diagrammatic format in Figure 3 on page 187 .

Figure 3 – Emergent Themes and Discussion – Analytic Process



4.2.1 Social and cultural changes across the lifetime

Reflecting on the research question notably:

Has there been a socio-cultural shift in drinking alcohol at home for professional middle-aged women?

As discussed within the individual narratives, the consumption of alcohol can be viewed in Bourdieusian terms as taking place within the social field of drinking at home. In response to changes in taste over time, social fields transform and adapt:

Every change in tastes resulting from a transformation of the conditions of existence and of the corresponding dispositions will tend to induce, directly or indirectly, a transformation of the field of production, by favouring the success, within the struggle constituting the field, of the producers best able to produce the needs corresponding to the new dispositions. (Bourdieu, 2010, p.228)

The analysis of the emergent themes is founded upon the social and cultural changes that have taken place within the women's lifetimes. In acknowledgement of this, a brief overview of the social and cultural changes that have taken place in the UK over the last 60 years is given. I acknowledge that social and cultural history is a multifaceted area and recognise that there is no opportunity to cover all areas within the scope of this study; in recognition of this, the focus is on areas pertinent to the narratives as told.

The twentieth century saw substantial changes in Britain's educational and occupational opportunities available to women. Reflecting on the late 1970s and early 1980s, a period in which many of the women in this study would have left school, they faced a significant decline in employment opportunities (Berrington & Murphy, 1994, p.235). Unemployment rose substantially in the late 1970s and early 1980s, as result, in 1983, a quarter of economically active men and women aged 18-19 and one-fifth of those

aged 25-29 were unemployed (Berrington & Murphy, 1994, p.242). As discussed within her narrative, Jessica decided to go through the vocational training route rather than attend college in response to these high levels of unemployment. However, many women did go to university, as described within Linda and Barbara's narratives. From 1970/1971 to 1995/1996, the number of women in full-time undergraduate courses tripled (Finding, 2013). For those women who chose the further education route, many left homes to do so, electing to continue to live independently after the completion of their studies (Berrington & Murphy, 1994). This move away from the family, whilst providing opportunities in terms of independence, could also be viewed as a disadvantage, particularly concerning childcare support in forthcoming years. Wallis' comment, "I didn't have a lot of close family nearby" serves as a reminder of this.

The number of professional women in the workplace has increased over the last 60 years, and complex social movements have contributed to this change, including increased access to education, the feminist movement, and equal opportunities legislation (Hind, 2015). Abbie, Barbara, and Helen all commented upon the increasing numbers of women in professional occupations they had witnessed within their lifetime, many now working full-time:

I think there is more females that are working full-time now, you know particularly the age 40's and 50's. (Helen)

This rise in numbers has seen entry into a broader, more diverse range of employment, from supportive and caring professions, such as teaching and nursing, to occupations "previously regarded as the sole prerogative of men" (Hind, 2015). Abbie's role as a Banking Executive is one such example. In 2021, 24% of women worked in professional occupations such as engineers, teachers, nurses, doctors, and lawyers, compared to around 23% of men (Irvine, et.al., 2022, p.11). In Bourdieusian terms, the rising numbers of women in professional occupations allows the accumulation of higher levels

of capital economic concerning income, institutionalised in relation to educational and professional qualifications, and cultural capital and social capital through both work and social networks. Increased levels of capital, in turn, provide the opportunity to gain stronger positions of power within social fields, such as those concerning home drinking (Bourdieu & Wacquant, 2007).

Regarding economic inactivity, 24.7% of women aged 16-64 were economically inactive in 2020, compared to 45% at the start of the 1970s (Irvine et al., 2022, p.14). The rate has fallen quicker since 2010, partly due to the increases in the state pension age for women (Irvine et al., 2022, p.14). The average age for women to leave the labour market in 2022 is 64.3 years, an increase of 4.0 years since its lowest point in 1986 (Department for Work & Pensions (DWP), 2022). Three women, notably Jessica, Sarah, and Linda, all have young school-aged children and work full-time. In April to June 2021, 75.6% of mothers with dependent children were in work in the UK, the highest level in the equivalent time period over the last 20 years (ONS, 2022). Jessica and Sarah described how they used alcohol to support them with parental pressures, in Sarah's view, making her a "better mum". However, this was countered by Linda's decision to reduce her alcohol intake; for her, alcohol negatively impacted her behaviour and what she viewed as her ability to parent effectively.

The women's early childhood memories highlight the social and cultural changes concerning the availability and consumption of alcohol within the home. Many women recalled either no alcohol being present in the home or that it was limited to occasions such as Christmas or family celebrations. Only Jessica spoke of her father "enjoying a good drink"; however, this was about his drinking outside of the home. Similarly, the social and cultural changes regarding the acceptability of alcohol consumption within the workplace were highlighted. Elizabeth's reflection of her early career and the acceptability, and indeed normality, of consuming champagne within

working hours was a practice that she now felt unacceptable, certainly within her current role in the public sector. Elaine’s memories of the 1980s and the Bank Manager offering “valued customers” alcohol from his drink cabinet were also socially and culturally unacceptable for her. Both recollections serve as reminders of the changes in social and cultural acceptability of alcohol within the workplace that have occurred during their lifetime (Peninsula, 2019).

Reflecting on the present day, the social acceptability of drinking within the home was a common theme across the narratives – “it is accepted thing that everybody does now, particularly amongst professionals” (Helen); “have a glass of wine, that’s the norm” (Elizabeth); “it’s an accepted norm I guess, birds of a feather flock together” (Abbie). These findings resonate with the literature review where the consumption of alcohol was both normalised and considered socially acceptable (Dare et al., 2020). Considering this theme through Bourdieu’s theory of practice, the women, all middle-aged professionals, can be viewed as occupying the social field of home drinking. The women sharing the same doxa, thus feel a sense of ease.

Emergent themes arising from the narratives are now discussed in detail. To assist the reader, the themes are illustrated in Table 7 below.

Table 7 – Emergent Themes

Emergent Themes					
Overarching theme	Relaxation and reward – coping with pressure and stress				
Subordinate themes	Sandwich and double sandwich generations	Availability, accessibility, and cost	Connoisseur	Television and the social media	Alcohol and health

4.2.2 Relaxation and reward – coping with pressure and stress

The overarching theme emanating from this study was relaxation and reward in which alcohol consumption was used to cope with pressure and stress. All the women spoke of their association between alcohol and relaxation, rewarding themselves, primarily after the challenges they experienced at work, “it’s a very easy way to relax and help you manage all the demands” (Sarah). Relaxing though drinking alcohol had become a ritual for many, “so a gin and tonic is an absolute necessity when you get in from a busy day at work” (Wallis); “the ritual itself becomes habit forming, that you are like, ‘well I’m done for the day now’ so I am going to pour myself a glass of wine and relax” (Abbie). Pouring a glass of wine was perceived as easy and effortless; conversely, even putting the kettle on was viewed as “too much of an effort” (Jessica). All the women, bar Wallis and Pixie, who worked four days a week, worked full-time. Regardless of their contractual status, the pressure associated with work ran throughout all the narratives. Whether this was in relation to the number of hours worked (“the hours I work are ridiculous” (Helen)) or the demands of the job itself (“I think work is hard” (Wallis)), alcohol was seen as a way to take the pressure off and a way of relaxing – “it is very easy, to be like, hard day, grab a bottle of wine and have a couple of glasses of wine, while I relax” (Abbie). This assertion of work-related pressure is borne out by a recent study by the Centre for Ageing Better, wherein 52% of people in their 50s and 60s report work to be “excessively demanding”; this rate has almost doubled since 2002 (Centre for Ageing Better, 2021, p.5).

Family pressures were also evident, particularly for women with caring responsibilities, such as Sarah, Jessica, and Helen. Approximately 1 in 4 people in their 50’s and 60s care for an older or ill relative and 65% care for grandchildren. Of those who care, 52% are women, compared to 40% of men (Centre for Ageing Better, 2021, p.20). The use of alcohol appeared to be a coping mechanism in response to pressures within their lives. Describing

herself as a “sandwich mum”, Jessica’s narrative depicts the pressures she feels in trying to balance her role as a self-employed businesswoman, wife, mother, and daughter/daughter-in-law, using wine as a “get out”, particularly after “a really bad day with mum. [...] I quite often end up in tears because I feel under a lot of pressure, and I am trying to run a company”. The pressure is similarly evidenced in Helen’s narrative describing the “guilt” she feels in trying to manage her job alongside supporting her parents, children, and grandchildren. This four-generation family is described as a “double sandwich” (Ro, 2021). Sandwich and double sandwich generations are discussed further below. Pressure was also associated with what Sarah considered to be the heightened expectations placed on professional women, for which she considered alcohol acted as an “emotional crutch”.

These higher expectations were, in turn, linked to stress. Stress, too, was associated with work, where alcohol was perceived as an accepted way of alleviating this – “using alcohol is the accepted thing nowadays that you know, you’ve got a stressful job, we’ll go home, and you have a drink” (Helen). Similarly, alcohol was used to aid sleep, “it’s part of the bedtime routine” (Abbie), again related to reducing stress or pressure, “it does help you sleep if you are stressed” (Elaine). This broad theme resonates with the evidence found within the literature review in terms of relaxation (Bareham et al., 2019; Brierley-Jones et al., 2014; Emslie et al., 2015; Gough et al., 2020; Ling et al., 2012) and reward (Foster et al., 2010; Gough et al., 2020; Ling, 2012). Bareham et al. (2019) also highlighting the use of alcohol as an aid to sleep. Equally, the use of alcohol to destress echoes with the identified findings (Foster et al., 2010; Gough et al., 2020; Ling, 2012).

The use of alcohol specifically to reduce or manage pressure was not found in the literature. I acknowledge that stress and pressure could be viewed as one. However, as evidenced in this study, I would argue that the women

spoke explicitly about the pressure they felt either at or outside of work. I therefore believe this to be a novel finding of this study.

4.2.3 Sandwich and double sandwich generations

Jessica and Helen's narratives describe the pressures they both experience in their roles as "sandwich" individuals. The term *sandwich generation* was first conceived by Miller (1981) and is defined as "those people, predominantly women, who provide unpaid care for an older person while, at the same time, looking after one or more dependent children" (Centre for Policy on Ageing, 2015, p.1). The number of women who are simultaneously balancing their role as mother, carer and employee is increasing (Evandrou & Glaser, 2004; Evans et al, 2016; Manor, 2021). As discussed within Jessica's narrative, one-third of 55-year-olds in the UK are sandwiched between their surviving parents/parents-in-law and their grandchildren (Vlachantoni et al., 2020). Within this figure, half are "simultaneously supporting both generations" (Vlachantoni et al., 2020, p.1508). Increasing life expectancy has seen a rise in four-generation "double decker" (Ro, 2021) or "club sandwich" (Bostock, 2020) families, in which grandparents are sandwiched between the "ascendant generation of great grandparents and the descendant generations of adult children and grandchildren" (Manor, 2020, p.324).

Changes to the state pension age for women saw a rise from 60 to 65 between 2010 and 2018. The state pension age is now increasing in stages, alongside men, until it reaches 68 (GOV.UK, 2022). These changes have seen a rise in women in their 60s who are in paid work from 26% in 2002 to 35% in 2018 (Centre for Ageing Better, 2021, p.15). Similarly, in mid-2021, the employment rate for women aged 65 rose to 31%, the highest since the mid-1970s and conceivably the highest rate ever in the UK (Cribb et.al., 2022). These increasing employment rates can be viewed as a positive reflection of the value of older people within the workforce. However, Manor (2020) argues this is likely to result in additional pressure being placed on sandwich

generations, particularly in light of the rising life expectancy, which will bring with it increasing numbers of sandwich and double sandwich generations (Bostock, 2020). The “pressure” Manor (2020) refers to resonates closely with the women’s narratives, particularly those of both Jessica and Helen, who clearly articulate the pressure they experience as sandwich women and how alcohol is used to alleviate it.

4.2.4 Availability, Accessibility and Cost

Many of the women discussed the perceived changes that had occurred during their lifetime in terms of the availability and accessibility of wine. Reflecting on their childhood and early adult years, they recalled a limited choice of wine, only available from specialist shops. This contrasted with the present day, where the ready availability of wine made it more accessible. Wine had become part of the weekly shop, “you go in the supermarket, you do your shopping, and you put that bottle of wine in the trolley” (Elaine), and easier to purchase, “you can go to the supermarket and buy as much as you like” (Wallis). Only Jessica spoke of the cost of alcohol and the ease with which she could purchase “cheaper” alcohol from the supermarket.

4.2.5 Connoisseur

The word “connoisseur”, taken from Linda’s narrative, is used to describe this theme. Alcohol choice, a signifier of culture and taste, runs throughout the narratives. Differentiations were made between alcohol perceived as “socially acceptable”, such as wine, prosecco, craft beers or gin, against other forms of alcohol, particularly spirits (with the notable exception of gin), which were viewed as containing higher levels of alcohol. As previously discussed, forms of alcohol are embodied with associations and meanings; consumption choice is thus associated both with taste and symbolic capital (Bourdieu, 2010/1984). Considering the inclusion of gin in further detail, Pedeliento et al. (2020) contend that product categories such as gin are socially constructed and historically situated entities. As witnessed in its

move from the eighteenth-century associations with lower classes and “Mothers Ruin” to its current position as a “premium craft spirit”, this unequivocal change resulting in the current “ginaissance” (Pedeliento et al., 2020, p.975). As a social constructionist, I support the assertion made by Dare et al. (2020) that “alcohol beliefs and values are socially constructed” (p.36).

Reflecting further on the use of Linda’s term “connoisseur” The perceived quality of wine is not purely reliant on its material characteristics; instead, its value is bound by the symbolic qualities ascribed to it by those within a specific social field. Bourdieu’s field theory examines the method of the cultural value of specific goods within different social fields and connects these symbolic values to the economic and cultural status of consumers. The value ascribed to the product is thus related to the social context in which it lies and is not purely one of taste (Beckert et al., 2014). Bourdieu suggests that fields can be viewed as being made up of opposing forces, or in other words, as chiasmic (Thompson, 2014). Beckert et al. (2014) use this chiasmic structure to understand the wine field. Within one subfield (the heteronomous pole), the focus is on external criteria such as sales and profits. Thus, producers are driven by demand and a focus on mass production, such as supermarket sales. Whereas within the other subfield (autonomous pole), the focus is one of internal evaluation, usually concentrating on a small number of experts and organisations with higher amounts of symbolic capital, such as wine critics and specialist stores (Beckert et al., 2014). The production of certain goods, such as wine, is not seen purely as material production but also as a symbolic act (Bourdieu, 1996, p.229). Thus, as can be seen within Abbie’s reference to Châteauneuf-du-Pape, the women’s choice of alcohol is driven not only by taste but also by its symbolic value too.

One of the many social functions of food and drink and the modes in which they are consumed serves as a form of cultural capital. Those who hold the most capital determine what signifies good taste in society (Bourdieu, 2010/1984). Johnston and Baumann (2007) argue that much of the research focus on cultural capital has been on the arts, resulting in a tendency to neglect the “banal concerns of everyday life such as eating and drinking” (Johnston & Baumann, 2007, p.196). As previously drinking behaviours are not only a matter of taste but are associated too with the volume of symbolic capital the individual holds (Bourdieu, 2010/1984).

However, particularly within this theme, the possession of capital in respect of specific forms of alcohol is portrayed within the women’s narratives. Abbie describes her appreciation of wine (embodied cultural capital), having money (economic capital), with which she could “afford a nice bottle of wine”, specifically naming *Châteauneuf-du-Pape* (a form of objectified cultural capital). Helen also displays her possession of capital, describing how she now has the income (economic capital) to buy “a good bottle of wine” (embodied cultural capital).

4.2.6 Television and the social media

The women spoke of the impact of television; particularly cookery programmes had on their decision to drink alcohol. For Jessica, they functioned as a form of “escapism”; alcohol was associated with holidays and relaxation, thereby taking her away from the day-to-day pressures in her life. Evoking for Wallis a “different, more enriched lifestyle”, one that she wanted to be part of. Similarly, for Helen, wine pairings provided information on new wines to try, enhancing her lifestyle. While Abbie spoke of the television programme *Mad Men*, depicting the alcohol culture in the 1960s, it was only Elaine who spoke of what she felt could be the impact of television, specifically referencing soap operas, on reinforcing the cultural norm of home drinking, “so, it’s become more acceptable on the tv [...] it does normalise it, it’s something normal people do”. Sarah’s narrative

highlights what, for her, are the positive images portrayed on social media of women drinking alcohol; however, this is related to specific types of alcohol, notably champagne and wine. This perception of social acceptability is similarly borne out by Wallis, who viewed the consumption of wine, prosecco and gin and tonic as being more “socially acceptable by the media”, as they had “less effect on you”.

As discussed within the individual narratives, considering this theme through a Bourdieusian lens suggests that the media portrays drinking as a socially accepted norm for these women. These norms have become part of the embodied habitus, thus partly explaining, for the women within this study, their dispositions to drink and their perception of alcohol as both a socially and culturally accepted norm. The narratives also highlight a sense of class habitus, Wallis’ view of a “more enriched lifestyle” being one such example. Knowledge acquired from viewing cookery programmes and wine pairings adds to the women’s amount of embodied cultural and social capital, thus strengthening their power and subsequent position in the field. Whilst I recognise that research into the subject of alcohol marketing specifically in respect of the television and social media is not new, (Atkinson et al., 2022; Barker et al.,2018), this was not a theme identified within the literature review. Thus, I would argue, as this theme has not previously been identified for this specific population group, it is considered as a unique finding from this study.

4.2.7 Alcohol and Health

A sub-theme that resonated across all, bar Linda’s narrative, was the scepticism displayed by the women towards the government’s Low-Risk Drinking Guidelines (LRDGs) (Department of Health, 2016). As previously discussed, Pixie construed the CMOs’ message as patronising, and Barbara felt that many people did not know what a unit was, a fact also confirmed by Jessica. Although aware of the LRDG’s existence, Helen could not remember the number of units. Elizabeth knew the guidelines but spoke of

how she chose not to listen to them. Sarah, whilst aware of the guidelines, counterposed her high levels of drinking against her healthy lifestyle, describing drinking as her only “vice”. Abbie similarly knew of the guidelines, but in her view, as more people were drinking over the 14 units, these higher levels of consumption had become the “new norm”. The women’s responses, in part, resonate with recent research findings, which report that only 8% to 25% of the UK adult population know how many units are in the low-risk drinking guidelines (Alcohol Health Alliance, 2018; Buykx et al., 2018; Rosenberg et al., 2018). Furthermore, even if people know the guidelines, they may not understand them (Rosenberg et al., 2018). In summary, the use of this approach as a method of public health messaging was not viewed as meaningful or indeed relevant by the women.

Although there was mixed awareness regarding the LRDGs, the narratives highlight that many women had considered reducing their alcohol consumption for health reasons, particularly weight loss. Whilst Jessica felt supported by the practice nurse to reduce her drinking, Pixie’s description of the visit to her GP where she felt “guilty”, and a “naughty person” appeared to nullify any thoughts she had of changing her consumption habits. Elaine, Pixie, and Sarah’s narratives highlighted the challenge they experienced from others when they chose to stop drinking. All were encouraged to continue and were made to feel ostracized by their social group for not doing so. As discussed within their narratives, using Bourdieu’s work as a lens to consider this, the women in the social field of drinking chose not to follow the doxa – i.e., to drink alcohol, resulting in hysteresis (Hardy, 2014). Ceron-Anyas (2017) view that individuals may ostracise others who do not share their behaviours or tastes resonates within these narratives.

Others who chose to reduce their alcohol consumption, such as Wallis, found their decision challenging to adhere to, particularly during holiday periods and special occasions. Linda was the only woman who appeared to

have consciously chosen to significantly reduce her alcohol consumption, particularly white wine, due to its adverse effects on her behaviour. Both she and her husband had also reduced their alcohol intake on health grounds, predominately to lose weight.

For Helen, Pixie and Barbara, the onset of menopause had resulted in them reducing their drinking, which appeared to have been done more out of necessity than choice. Dare et al. (2020) similarly reported that women reduced their alcohol consumption in response to menopause. All three women spoke of their hope that at some time in the future, they could return to their drinking levels, Barbara appearing despondent about getting older – “this old age thing is a bit rubbish”.

Whilst many of the women contemplated reducing their drinking, this theme also highlights the apparent lack of concern shown by others concerning any potential negative consequences that drinking may have on their health. As discussed within Elaine, Pixie, and Sarah’s narratives, while they still perceived there to be no “visible signs” of any adverse effects caused by their drinking, they all carried on with their current levels of consumption, “Oh well, I am fine it’s not happening to me, I don’t binge, it’s more acceptable to my liver” (Elaine).

4.3 Congruence with the literature review

As presented in Figure 3, page 187, three themes identified within the narratives were congruent with the extant literature notably – relaxation and reward; availability, accessibility, and cost; and alcohol and health.

The dominant theme arising from the literature review was one in which drinking alcohol is normalised and considered socially acceptable. Whilst this is not an identified theme per se, the narratives clearly articulate that for this group of women, drinking at home is both normalised and, in their view, socially accepted.

The use of alcohol as a means of relaxation and reward was found to be a common theme within both the extant literature and the narratives. The narratives further extend this theme by illustrating how the women's consumption of wine within the home was used not only as a means of reward and relaxation but as a way of managing pressure and stress and, for some, as an aid to sleep too.

The social and cultural changes that have occurred regarding the women's working and family lives were clearly described. In particular, the pressure and stress experienced in relation to what they described as the ever-increasing demands of their respective jobs. What was of particular interest, and I believe a novel finding from this study was the apparent adverse impact experienced by the women who were within sandwich and double sandwich generations (Ro, 2021; Bostock, 2020). This finding supports Canefield et al., (2021) suggestion that "the use of alcohol may be a mechanism of coping with the burden of caring children and or older parents" (p.1). Jessica description of her life as a "treadmill" (p.131) with the challenges of work and caring for both her mum and her son, serves to further strengthen this assertion.

The theme of availability, accessibility and cost resonates with the evidence found in the literature review. Commonality was found in terms of the ability to purchase alcohol as part of a weekly shop. The findings support the claim by Canfield et al. (2021) that, for women, home drinking is no longer driven by cost; instead, it is now one of choice. Furthermore, as a social constructionist I support the assertion by Dare et al. (2020) the availability and affordability of alcohol may contribute to the "social construction of drinking amongst women as a normalised and acceptable behaviour" (p.42).

Alcohol and health is a theme found within both the extant literature and the women's narratives. Findings suggest that the government's low-risk drinking guidelines (Department of Health, 2016) were viewed as irrelevant and bore little conceptual meaning. The narratives support the participant's

views within the study by Ling et al. (2012) that the guidelines are a form of “nanny stateism” (p.5). Also, measuring alcohol consumption by units was met with scepticism and viewed as unhelpful. The narratives support the evidence Dare et al. (2020) found that the women in their study had little perception of the potential consequences of their drinking behaviour on their health. Similarly, reducing alcohol consumption following the onset of the menopause was found within both the extant literature and the narratives.

The concept of “othering”, where the positive, “healthy” self-identity is protected through contrast with those worse off (Bareham et al., 2019; Dare et al., 2020; Emslie et al., 2012; Gough et al., 2020; Ling et al., 2012) identified within the extant literature, was not found within the narratives. Whilst Wallis spoke of the differentiation between herself and others – drinking champagne on the Thames versus drinking in Wetherspoons. I contend this does not align with the definition but reflects more on her social and cultural positioning.

An incongruence to note is the lack of reference to young people’s drinking within the narratives. Only Helen and Linda commented on this; both spoke of young people now drinking less, a view supported by recent literature (Conroy & Measham, 2019). This is in opposition to the participants’ views within studies identified from the extant literature, which contended that young people drank more, not they (Brierley-Jones et al., 2014; Emslie et al., 2012; Gough et al., 2020). Within their study, which utilised Bourdieu’s tools of habitus, capital, and fields, a “home drinking habits” was defined as one in which home drinkers who drank wine in moderate amounts, viewing their drinking as “respectable and sophisticated”, compared to those who drank to excess, notably young people, whose behaviour was viewed as “undesirable” (Brierley-Jones et al., 2014, p.1061).

4.4 Reflection on themes

Reflecting on the themes from this study against those found within the literature review, the use of Bourdieu's theory of practice has, I believe, led to the discovery of several novel findings. A reflection on the use of a conceptual framework is discussed in Chapter 5, page 206.

The theme of sandwich and double generations and the impact of this on the women's alcohol consumption, is I would contend, a unique finding of this study. Whilst relaxation and reward were identified within the extant literature, the relationship between using alcohol both as a means of coping with and managing pressure and stress, was not specifically identified. Although I acknowledge that the use of alcohol as a means of relieving pressure and stress has previously been reported (Drinkaware, 2023; Wolf et al., 2021; Keyes et al., 2011), no direct references to this were found within the literature review. Thus, I would argue, this is a novel finding of this study for this population group. The strength of both Jessica and Linda's narratives in which they describe both the pressure and guilt of trying to manage both their responsibilities at work and at home as both child, parent and in Linda's case grandparent too, provide I believe a spotlight into the challenges they face and, for them, how the consumption of alcohol provides an almost instantaneous relief.

Similarly, television and social media portrayal of alcohol as a socially acceptable commodity was a theme not found within the literature review. Notwithstanding the research in this area, for example- Atkinson et al. (2022); Jernigan & Ross (2020); Törrönen & Simonen (2015), I believe this is a novel finding for this specific population group.

Acknowledging that research occurs within a particular temporal context (Miles & Huberman 1994), it is of interest that the women made little reference to young people's drinking, a subject discussed in the majority of the extant literature. The change in narrative between the extant literature

and findings from this study could be associated with the period in which the primary research was conducted. I believe that the women's narratives support the assertions made that the drinking culture for young people in England has been changing over the last decade, to one in which young people are drinking less (Ng Fat et al., 2018; Oldham et al., 2019; Rao & Roche, 2017). This cultural change may then explain, in part, the narrative change.

4.5 Chapter Conclusion

Using narrative inquiry and thematic narrative analysis, this chapter has presented the individual narratives of ten professional middle-aged women who drink alcohol at home. Bourdieu's theory of practice was adopted as a conceptual framework to explore further and analyse the narratives. Recurrent themes emanating from the individual narratives were then developed, discussed, and considered against the themes identified from the literature review.

CHAPTER 5 – CONCLUSION AND RECOMMENDATIONS

In this concluding chapter, I summarise the key findings from this research study. Contributions arising from these on public health policy and practice are discussed. The strengths and limitations of the study are considered, and recommendations for future research are made. Finally, the thesis ends with a personal reflection, most notably on Pierre Bourdieu's impact on my life.

I believe this to be a novel study. The literature review identified no studies focusing solely on middle-aged professional women who drink alcohol at home. I would argue that using Bourdieu's theory of practice as a conceptual framework adds further originality and value to this research. Whilst Brierley-Jones et al. (2014) employed Bourdieu's work in their research, this was focussed on a mixed-sex sample and considered drinking both within and outside of the home. Therefore, I contend that this empirical research study strengthens the limited body of knowledge concerning home drinking, particularly for this population cohort.

5.1. Summary of Key Findings

This section reflects the critical findings against the aim of this study and associated research questions. As an aide-mémoire for the reader, the aim and questions are presented below:

Study aim

- To explore the social and cultural functions of home drinking amongst a sample of middle-aged women living in North West England/North East Wales.

Research questions

- Has a socio-cultural shift occurred in professional middle-aged women's relationship with alcohol within the home?
- What are the implications for public health policy and practice?

This study used narrative inquiry to explore the stories of 10 middle-aged professional women. As I have argued previously, the aim of narrative inquiry is not to find one generalisable truth, but many truths (Webster & Mertova, 2007). The women's narratives provide a clear insight into the social and cultural changes that have occurred during their lifetime. Over the last decades, an obvious change in their drinking habits was seen. During the women's childhood, alcohol was a scarce commodity, rarely consumed within the home and predominantly then, when done so, only on special occasions. This is in stark contrast to their lives as lived today, where alcohol is regarded as an ordinary commodity, available as part of the weekly shop. Alcohol imagery is everywhere from cards, cushions, television, and social media – portrayed as the perfect life -we can have it all. Alcohol consumption is thus considered to be a normalised and socially accepted behaviour for these women.

Social and cultural changes were also seen in respect of the increasing number of women working full-time in professional occupations. The challenges of managing work and, for many, caring responsibilities, too, were vividly portrayed. Alcohol was used as an instant way of nullifying the resultant feelings of stress and pressure, a more accessible option than putting the kettle on. This immediate reward was seen as a means of relaxation and for some, as an aid to sleep too.

The narratives I believe provide a strong and indeed a compelling case that it is not merely enough to provide messages on lowering drinking through reduction of unit consumption. The study highlights the dearth of research into both drinking alcohol at home and, in particular, for this specific population group.

Public health policy and practice, despite advocating for population health interventions, continues to focus on individual lifestyle behaviours, Alcohol Change UK, (2023); NHS, (2022_b); Department of Health, (2016), as examples. The women's narratives clearly highlight that current public health alcohol prevention policies, such as the Low-Risk Drinking Guidelines (Department of Health, 2016), with their continued focus on reducing units of alcohol consumed, were seen by the women as irrelevant and indeed in some cases, meaningless. Similarly, alcohol reduction interventions delivered within primary care were regarded as patronising, or judgemental. Unless outward bodily changes could be observed, alcohol consumption, regardless of the amount consumed, was viewed as causing no health harms.

In conclusion, the findings from this research build upon the existing evidence base and support the need for a more nuanced approach to be taken within public health policy and strategy development, recognising the social and cultural functions of drinking alcohol within the home for this specific population cohort of women.

Use of a Conceptual Framework

This study is, I believe, strengthened by the application of a conceptual framework. As discussed in Chapter 3 (page 73), Bourdieu's conceptual tools were used as an interpretive lens to explore further and analyse the women's narratives. The use of the tools has provided a deeper insight, at a

micro level, into the women's lives. Offering, in turn, a purview of the impact that the social and cultural changes, which have occurred during their lifetime, have had on their relationship with alcohol in their worlds.

Reflecting then on the research question through a Bourdieusian lens, it can be argued that for the women, habitus became a structure that generated dispositions toward an expectation of drinking at home and a normalisation of that behaviour. Habitus placed alcohol as central to their social world, such that drinking unthinkingly occurred. This was, in turn, reflected in their understanding for the feel for the game within the social field of home drinking. When tastes change because of societal changes, the field, in turn, transforms to meet these changing tastes (Bourdieu, 2010/1984). As the findings have shown, the women's habitus, internalised via socialisation and acculturation, acts in line with the doxa within their social fields of home drinking, where drinking is considered acceptable behaviour.

Bourdieu (2010) describes taste and preference as "one of the most vital stakes in the struggles fought in the field of the dominant class and the field of cultural reproduction" (p.3). Those who hold the most amount of capital determines what constitutes good taste in society (Bourdieu, 2010/1984). The accumulation of economic capital, derived in part from professional occupations, allowed the women to purchase "quality", described by Helen as a "nice bottle of wine" (page 139). Similarly, the accumulation of cultural and social capital enabled the women to become "connoisseurs", differentiating their taste and displaying symbolic capital in what they viewed as a socially acceptable commodity, notably wine. Those sharing similar cultural and symbolic capital in turn creating a feeling of shared identity, as seen in their shared drinking habits. This delineation of taste, highlighted within Wallis' narrative, page 98, is a marker of distinction for Bourdieu (2010/1984).

Reflecting further on the social field of home drinking through the narratives presented, the women who drank alcohol, thus conforming to the doxa or rules of the game, felt at ease within the field. Alcohol was consumed in response to the pressure and stress experienced by the women through both work and for some, their caring roles too. This consumption subsequently becomes engrained in the habitus where drinking is viewed as an acceptable behaviour within the field.

Conversely, those women who had tried to stop, or reduce their drinking, such as Pixie and Barbara, experienced hysteresis and felt like a “fish out of water” (Maton, 2014, p.56) when not adhering to the rules of the game. The women then felt both ostracised by their friends and family and pressured to drink to regain their positions within the field.

Utilising Bourdieu’s toolkit as a conceptual lens has provided a different purview into the reasons why middle-aged professional women drink alcohol at home. Considering the narratives both through the use of Bourdieu’s concepts and epistemologically viewing them through a social constructionist lens I believe provides a novel perspective on this particular population cohort. The findings from this study both strengthen and give credence to the anecdotal claims that the social and cultural changes experienced by the women during their lifetime have contributed to the frequency in which they drink alcohol within the home.

5.2. Strengths and Limitations of the Study

As discussed in Chapter 3, page 95, the importance of self-reflection in qualitative research is well recognised (Tracy, 2010). The following section provides my personal reflection on the strengths and limitations of this study.

I contend that adopting a qualitative approach, notably narrative inquiry, is a strength of this study. In line with my epistemological stance, I believe the

reality I perceive is constructed by social, cultural, historical, and individual contexts (Korstjens & Moser, 2017). I support Webster and Mertova's (2007) assertion that narrative inquiry aims not to find one generalisable truth but multiple truths. This assertion aligns with my ontological belief that multiple realities exist and are created and co-created by both individuals and within the environments in which they live. I believe the use of thematic narrative analysis (Riessman, 2008), with its focus on the women's individual stories, allowed their voices to be heard by exploring their lives as lived (Holloway, 2005). The resultant analysis, further considered through the conceptual lens of Bourdieu, enabled deeper and richer narratives to emerge.

This study has focused on the narratives of ten women. Whilst I accept that this is a relatively small sample size, as discussed in Section 3.6.1.4 (page 86), previous research suggests that small sample studies can provide rich insights (Wells, 2011). Similarly, autobiographical accounts can bring different, if not more enlightened, insights (Tan & Hunter, 2003). As a qualitative study, it does not strive to achieve generalisability within the findings; instead, as previously discussed, it aims to provide a rich and detailed representation of meaning. Such rich and thick description creates *verisimilitude*, defined by Creswell and Miller (2000) as "statements that produce for the readers the feeling that they could experience the events being described in the study" (p.129).

Whilst acknowledging narratives represent a construction of events "composed jointly (between narrator and audience)" (Riessman, 2008, p.31), I view my decision to use unstructured interviews, with minimal directive influence, facilitated more of the women's stories to emerge. Adopting this emic approach, as opposed to using a pre-determined interview schedule, I consider it to be a positive and, indeed, a further strength of this study. The women told me their stories, not one defined or directed by my questions. That said, I acknowledge that using unstructured interviews was not without challenge. Firstly, a single opening question

allowed the stories to be driven and directed by the women rather than by me as the researcher, governing their depth and breadth to an extent. Secondly, some of the women initially found the unstructured interview approach somewhat unsettling. The act of conversation is usually a two-way process. Opening the interview with one question, without further set questions to focus the direction, appeared to be disconcerting for some. Pixie, for example, asked why I had no set questions to ask. As discussed previously, both Flick (2011) and Eathly and Cronin (2011) advocate this approach, which prevents the researcher from impeding the participant's storytelling. Once they had settled into telling their story, the women appeared to relax, many commenting that this was the first time they had thought, and indeed, spoken, about their drinking at home. From my experience, this interview approach requires a high level of active listening skills, a skill I feel comfortable and confident with, given my professional background as an Occupational Therapist.

The above challenges notwithstanding, I believe the interview approach provided the opportunity for the women to tell their stories in their own way. As Pinnegar and Daynes (2007) assert, "narrative inquirers recognise the tentative world of knowledge. They accept and value the way in which narrative inquiry allows wondering, tentativeness, and alternative views to exist" (Pinnegar & Daynes, 2007, p.25). Whether the same stories would have been elicited using a structured interview schedule is unknown.

This research is based upon stories shared by each woman during one interview. I acknowledge that this could be viewed as a limitation of this study. Reflecting on my choice of this approach, I recognise that had I chosen to undertake a follow-up interview, this may have enabled me to explore, in greater depth, areas of interest arising from the women's initial stories. Similarly, giving the women time for reflection on what they had shared may have sparked additional memories or addendums to their stories. I accept too that a single interview may also be a disadvantage regarding my

relationship as the researcher with the study participants. Interviews conducted on more than one occasion may have strengthened this relationship, perhaps leading to a greater sense of ease.

One of the criticisms made against narrative inquiry is that of its subjectivity (Dowling, 2005). I strove to present the women's lives as they shared them with me, endeavouring to ensure that their "lives represented are respected" (Clandinin, 2013, p.211). Nonetheless, I recognise that others may have presented and interpreted the narratives differently. However, I sought to give the reader a "plausible account" (Connelly & Clandinin, 1990, p.8) of the women's stories, one the reader could envisage having taken place. As Riessman (2008) posits, "a narrative is not simply a factual report of events, but instead one articulation told from the point of view that seeks to persuade others to see the events in a single way" (p.187).

I acknowledge that research is "not neutral or free of values or biases, and as a researcher, I read and interpret through a prism of values" (Spector-Mersel, 2010, p.216). I recognise that this study is a partial version of reality. Whilst as researchers, we aspire to tell the "whole truth", our narratives are "our worldly creations" (Riessman, 1993, p.15). As the researcher, it was my decision as to which parts of the women's stories to include in the study. Connelly and Clandinin (1990) describe one of the "dangers" of narrative inquiry as the "Hollywood plot, where everything works out well in the end" (p.10). To avoid this and ensure the quality and rigour of this research, the emerging narratives were discussed with my supervisory team (Appendix 8, page 289) and Yardley's (2000) principles for qualitative research followed to demonstrate quality and credibility within this study (page 93).

This study has focused on alcohol policy and public health practice as it relates to England. I acknowledge that two women live in North Wales; on reflection, recruiting participants who live in England may have been more appropriate. However, I believe the findings are of relevance to the UK. For example, the CMOs' LRDGs (Department of Health, 2016) was ratified by the

four Chief Medical Officers in England, Scotland, Wales, and Northern Ireland. Thus, while the devolved nations may have their own alcohol policies and guidance in place, the guidelines remain universal. Nonetheless, further research could be beneficial to determine whether social and cultural differences are seen across the four nations within the UK.

The foundation of this research was built upon the segmentation work by Emmerson (2015) and the identification of professional middle-aged women as a defined cohort. Reflecting on this cohort definition through my epistemological stance as a social constructionist, I would assert that the terms “professional” and “middle-age” are both social constructs. This assertion is borne out by the lack of agreed definitions of what constitutes middle-age, as highlighted within the Literature Review (page 85). Similarly, reflecting on this term *professional*, whilst definitions exist, the women came from a wide range of occupations, identifying themselves as professionals. It could be argued then the term *professional* can also be viewed as a social construction.

Reflecting on my literature review, I acknowledge that by only using the search term “professional” this may have limited the search results returned. “Professional” has other synonyms, including “white collar”, defined by the Cambridge Dictionary (2023_a) as “relating to people who work in offices, doing work that needs mental rather physical effort” and “middle class”, a “social group that consists of well-educated people, such as doctors, lawyers, and teachers (Cambridge Dictionary, 2023_b). Had these terms been included, a wider selection of studies may have in turn been identified.

As discussed in Chapter 3, page 89, the women chose their location for their interview. This resulted in various settings – from the women’s own homes to my place of work. I acknowledge that the “very fact that the story is being told in a research setting bears an influence” (Spector-Mersel, 2010, p.216) in terms of the story as told. In particular, the balance of power between

myself as a researcher, particularly with those who chose to meet within my workplace. Whilst I endeavoured to make the women feel comfortable and at ease in my workplace and tried to ensure confidentiality within café settings, I recognise these settings may have had an adverse impact on the women's choice of story. However, I uphold my decision to enable the women to decide on their choice of location. By giving a choice as researchers, I maintain that we afford more power to those who give their time to participate in our research.

I acknowledge that this study does not consider the women's ethnicity. All the women in the sample were white, and all bar one was born in the UK. On reflection, if I were to conduct further research, this is a question I would ask of my participants, recognising the potential impact ethnicity and cultural diversity could have on the stories as told.

This research will not, as Costa states, "endure a positivist examination" (Costa, 2013, p.180). As a qualitative researcher, I do not assert that the findings from my study would be replicable; merely, they give rich insight through one kaleidoscopic lens. As Loh (2013) describes non-positivist researchers "push against the boundaries of the established doxa" of the positivist paradigm (p.1).

As the research is novel, I believe, with the former caveats notwithstanding, that the rich insights gained can add to the limited knowledge that currently exists in relation to this area. I seek to merely add a "grain of sand in the beach of knowledge" (3D Astrophysics, 2014).

5.3. Future research and public health policy and practice

5.3.1 Implications

This research is the culmination of the learning and knowledge gained throughout my doctoral studies. As stated at the outset of this thesis, I want to use the findings and knowledge gained through this research to develop my professional practice and influence public health policy and practice at both local and national levels.

As discussed in Chapter 1, page 21, the COVID-19 pandemic has given rise to an increased interest in home drinking (Callinan & MacLean, 2020; Nicholls & Conroy, 2021). During the three national lockdowns (Institute for Government, 2022), people had a legal requirement to stay at home. Callinan and MacLean (2020) raise the question of whether home drinking patterns established during the pandemic would continue in some form when all remaining restrictions were lifted. Recent survey data indicates that the number of people drinking more than 14 units a week increased during the first national lockdown in March 2020 and that these figures have remained at similar levels since (OHID, 2022b).

As I have acknowledged previously, I recognise that this research was conducted prior to the COVID-19 pandemic, however I believe that the findings are still of relevance to public health policy and practice, particularly given the lack of evidence that exists in relation to home drinking and notably for this population cohort. Many of the women in this study did not perceive their levels of drinking to be of concern - if no apparent detrimental effects could physically be seen happening to their bodies, they appeared oblivious to the potential health harms caused by their consumption of alcohol. Even those who had reduced their drinking due to negative impacts on their health, which they associated primarily with the onset of the menopause, described how they would still return to their previous consumption levels if they could.

Despite the awareness of the CMOs' LDRGs (Department of Health, 2016), many of the women in this study continued to drink above the recommended 14 units per week. Drinking more than 14 units had become the "new normal" (Abbie, p.113). As discussed in Chapter 1, behaviour change models, focused on lifestyle changes such as the Better Health campaign (NHS, 2022a) remain the mainstay of public health policy and interventions (Blue et al., 2014). The evidence from this study highlights that interventions focused on lifestyles and risk-based health behaviours hold little meaning for this population group. The women clearly articulated their opposing views on the focus of unit-based consumption, rejecting public health messaging that they considered at best irrelevant and patronising for some. I believe the findings from this study strengthen the view that notwithstanding the importance and value of this approach, it cannot be used as the sole means of addressing this public health issue. The women's narratives highlight the complexity as to why they drink alcohol at home. A whole population approach, for example the CMOs' Low-Risk Drinking Guidelines (Department of Health, 2016), must then be tailored to meet the needs of this specific population group.

This study highlights that the reasons why the women drink alcohol are multifaceted. There is however a clear association between the pressure and stress they experience at work and for many, this is compounded by caring responsibilities too. Alcohol is readily available as part of the weekly supermarket shop and promoted both by the television and social media. The World Health Organization (2017) states that the most effective and cost-effective interventions for reducing alcohol consumption are "increasing the price of alcohol as well as reducing and restricting both the physical availability and the marketing of alcohol" (Jernigan & Ross, 2020, p. 13). Public health must, I believe, be cognisant of ways in which alcohol is marketed and lobby where necessary to advocate for change. The challenges of influencing the marketing strategies of the alcohol industry are well recognised (McCambridge et al., 2014). However, it is necessary to

challenge the current cultural norm that sees the prolific promotion of alcohol throughout society.

The use of Bourdieu's conceptual toolkit has provided a different lens with which to consider this issue. Bourdieusian analysis adds weight to the argument that calls for a more nuanced approach to be taken. The doxa (rules of the game) within the field of home drinking, strengthened by the media portrayal of alcohol consumption within the home as a normalised and socially acceptable behaviour for professional middle-aged women. From a Bourdieusian perspective, the social field of home drinking for middle-aged professional women is one in which the habitus acts in line with the doxa of the field wherein drinking is viewed as an acceptable behaviour. Drinking wine at home has become an embedded social practice for the women, a means of distinction and source of capital. Such practice then, may be averse to any suggestion of change.

In conclusion, I believe the findings from this research support the need for a more nuanced approach to be taken within public health policy and practice in respect of alcohol consumption within the home. The continued policy focus on individual lifestyle and risk-based behaviour must be reframed to consider the broader societal and cultural change that impacts the reasons why women within this population cohort drink alcohol at home.

5.3.2 Recommendations

Riessman (2008) argues that the ultimate test of validity within a narrative research study is whether it has the potential to form the "basis for others' work" (p.193). I acknowledge that this is a small study; however, the findings add weight to the assertion made by Nicholls and Conroy (2020) of the need to undertake further research in relation to home drinking. This argument is strengthened by the fact that the increased alcohol consumption reported during the COVID-19 lockdown has remained (OHID_b, 2022).

Public health is everyone's business. This research highlights the complexity of the reasons why middle-aged women drink alcohol at home and I believe highlights the need for a partnership approach to be taken. Partnership working has become an essential component of British public policy, especially since the late 1990s (Perkins & Hunter, 2014). The formation of the partnership approach deemed necessary to address the "wicked issues" faced in public health (Hunter, 2009). Ling (2002, p.6222) describes such "wicked issues" as: "[...] a class of problems whose causes are so complex, and whose solutions are so multi-factorial, that they require a multi-agency response". Whilst I acknowledge Hunter and Perkins (2014) assertion that such wicked issues have "complex interdependencies, and causality is difficult to ascribe" (p.20). I believe that the findings of this research study shine a light upon and reveal the complexity of the reasons as to why middle-aged women drink alcohol at home, often exceeding public health guidelines.

Having taken a partnership approach to my work for over twenty years, I support Hunter and Perkins (2014) view that partnerships can bring both new insights and develop new ways to tackle the issues they are presented with. Thus, to quote the adage - the partnership is more than the sum of its parts.

Reflecting on the literature review and the range of disciplines undertaking alcohol research identified (Section 2.7.2, page 48), I support McCambridge's (2021) recommendation to "forge research partnerships with new disciplines to develop more open communication styles in both individual and population level attention to alcohol" (McCambridge, 2021, p.8). Through working in partnership with other colleagues both in research and policy fields, I believe that opportunities to develop a more nuanced approach to public health policy for this population cohort who drink alcohol at home can be achieved.

5.4 Dissemination

Reflecting now, as I near the end of my research journey, I have undertaken this professional doctorate to apply my research to the area of home drinking, and I hope to contribute to both public health theory and practice and in the development of professional knowledge.

As previously discussed, recognising that the findings from this study highlight the multifaceted nature as to the reasons why middle-aged women drink alcohol at home, the dissemination too requires a similarly wide reaching in response.

At a policy level, the first *Women's Health Strategy for England* was published in August 2022 (GOV.UK, 2022). The strategy sets out the government's plans to improve women's health, shaped by responses received from almost 100,000 women across the country. Interestingly, only two references are made to alcohol: the negative effect of alcohol misuse on mental health and alcohol as a risk factor for breast cancer. The Strategy highlights plans to appoint a Women's Health Ambassador to raise awareness of risk factors for long-term conditions and cancers. There may be opportunities to undertake further research into women's home drinking to support this role going forward.

To explore opportunities to share this research with The Centre for Ageing Better, a charitable foundation funded by the National Lottery that focuses on ways to enable everyone to age better (Centre for Ageing Better, 2023).

At a regional level to continue discussions with the Office for Health Improvement and Disparities (OHID) in relation to dissemination of this work through their policy and commissioning networks. At a local level, as a Senior Public Health Manager, to present my findings to both public health colleagues and relevant strategic partnerships.

5.5 Reflexive Account

This concluding section of my thesis provides the opportunity for a personal reflection on my doctoral adventure.

Discovering Pierre Bourdieu has opened a door into my life. I see him everywhere, from the clothes people wear to the cars they drive. My family find my fascination with this man quite bemusing. My discovery of Bourdieu and his work has enabled me to make sense of something I have struggled with all my adult life, namely why I never felt that I “fitted in” at school. My father was a fishmonger. He left school at 15 with no formal qualifications. My mother worked as a secretary until she got married. My parents wanted their three children to “have the education they never had”; for them, private school was the epitome of this. I left the local state primary school aged nine to complete my education at a private school for girls. Although we lived in what was considered a posh suburb of Glasgow and my father was a successful businessman, other parents were in what I considered professional occupations. Academic success was the school's sole focus, with university admission seen as the ultimate achievement. I chose to train as an Occupational Therapist, which, in the late 1970s, was diploma based. This only strengthened my feelings that I was, in some way, less clever than my peers, a view that has remained with me throughout my adult life and one that I still struggle to overcome at times. Bourdieu considered that a person's habitus is conditioned not only by their social conditioning but also by how they classify themselves. This partly explains my self-perception: “agents shape their aspirations according to concrete indices of the accessible and inaccessible, of what is and is not for us” (Bourdieu, 1989, p.64).

With Bourdieu's help, reflecting now on my feelings of unease, I understand why I felt so much like a “fish out of water” (Maton, 2014, p.56). The first four years of my primary education took place in the local state primary

school. The classes were mixed sex, and I could walk to and from school with my friends. I had learnt the rules of the game within the field of primary education and formed friendships with my peers, thus strengthening my cultural and social capital. Then everything changed, I passed an entrance exam, and at age nine, I was transported into a new world, a new social field of education. One in which I could no longer walk to school, where I knew no one, there were only girls, and I had to wear the regulatory purple uniform, including a beret – a clear form of objectified cultural capital.

My primary class habitus was inculcated in my early years through my parents' transmission and attendance at a state primary school. Entering then the field of private education, my habitus and dispositions did not match those of the field. Unlike most of my peers who had been at the school since the start of their education, I did not possess the same amount of capital or understand the rules of the game (doxa). This structural change between anticipated practices and the new social reality within the social position resulting in hysteresis (Fowler, 2020, p.458). As discussed earlier in this study, Bourdieu used the term “hysteresis” to describe the dislocation and disruption between the habitus and the field (Maton, 2014, p.58).

My doctoral journey has not been easy, fraught with self-doubt and, at many points along the route, one that has felt unachievable. However, my determination to finish the journey, whilst at times may have wavered, has remained. Despite the many obstacles I have faced, the point of submission is now in clear view. I believe that the many challenges I have encountered along my doctoral road have, in turn, supported me to become both stronger and more resilient, enabling me to find my voice as a researcher. The successful completion of this thesis may at last put to rest the feelings of unease felt by that schoolgirl in the purple uniform—the ultimate award of a Professional Doctorate confirmation that she is indeed academically able.

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APPENDICES

Appendix 1: CASP Table

CASP Qualitative Checklist	
Study	Habitus of home and traditional drinking : a qualitative analysis of reported middle –class alcohol use Brierley- Jones et al., 2014
Section A: Are the results valid?	
Was there a clear statement of the aims of the research?	Yes- aim was to explore the attitudes , meanings and reported behaviour in relation to alcohol consumption of professional, managerial and clerical employees who worked fulltime – at least 35 hours per week
Is qualitative methodology appropriate?	Yes , congruent with study aim
Was research design appropriate to address the aims of the research?	Yes, contend that focus groups provide forum for views to emerge. Focus on nature of home drinking. State that research conducted thus far has not gone beyond describing the reasons and motivations given by individuals, argue that the socioeconomic and cultural influences need also to be addressed
Was the recruitment strategy appropriate to the aims of the research?	Can't tell, participants responded to email, no details provided as to the content of the email. Acknowledge that there was some self-selection. Junior office staff to senior managers- not broken down in relation to the numbers/ages within each respective group. No socioeconomic details provided. No definition of what is perceived to be 'middle class'. No reason given as to why participants had to work fulltime least 35 hrs.
Was the data collected in a way that addressed the research issue?	Yes in part, five focus groups deemed appropriate facilitated around loose themes. Two facilitators per group, one male and one female facilitated four groups of the five groups however the last group was facilitated with the original male plus new male, no comment made re this. No details of focus group make up provided, details given in earlier study (Ling et al., 2012). FG's took place in the workplace during lunchtime 8-12 participants per group 40-75 min audio recorded & transcribed verbatim. No reference to data saturation.
Has the relationship between researcher and participants been adequately considered	In part - acknowledge that the FG's were conducted in work premises often with senior management, HR or occupational health present and this context was therefore not neutral No acknowledgment made regarding the change in facilitator and the potential impact of this.
Section B: What are the results?	
Have ethical issues been taken into consideration?	Yes, importance of ethical considerations clearly considered. Participants given information on study prior to commencement. Ground rules established within FG's. Participants advised that they were not required to disclose any sensitive information. Approval given by lead Institutions Research Ethics Committee.
Was the data analysis sufficiently rigorous?	In part, very brief description- initial analysis by facilitators, discussion with research team then analysis and themes developed by a member of the research team not involved in the data collection. No explanation as to how themes were developed. Quotes from participants selected because they were the 'most illustrative of a particular aspect of habitus.' acknowledge that quotations may indicate a better story told in some groups rather than others, rather than a reflection in practice. No other evidence of critical evaluation of researcher's role.
Is there a clear statement of findings?	Yes, very detailed findings section. Runs for nine and a half pages. Layout of text makes challenging reading.
Section C: Will the results help locally?	
How valuable is the research?	Yes, discussion is over six pages long, again layout makes reading challenging. Propose further research in terms of drinking patterns of the habitus into wider cultural context of cultural practise and taste and explore relationship between gender and alcohol consumption within each habitus.

Appendix 1 – CASP Table (*continued*):-

CASP Qualitative Checklist	
Study	The 'other' in the patterns of drinking: A qualitative study of attitudes towards alcohol use among professional, managerial and clerical workers Ling et al., 2012.
Section A: Are the results valid?	
Was there a clear statement of the aims of the research?	Can't tell Not explicitly stated, however authors state that the study explored white collar worker's views of alcohol use. Sought to develop an understanding of how public health messages were viewed, as well as exploring contextually the role of alcohol within the personal and professional lives of white collar workers - no definition of 'white collar worker' given.
Is qualitative methodology appropriate?	Yes, though very limited justification as to why method was chosen, authors state 'assessing individuals in the workplace provides an important opportunity to increase understanding of the views underpinning health behaviours of working people.' Same study cohort as Brierley-Jones et al., 2014
Was research design appropriate to address the aims of the research?	Can't tell, no explanation as to why focus groups were chosen.
Was the recruitment strategy appropriate to the aims of the research?	Can't tell, vague description given. Participants recruited by co-ordinator (HR/Health Improvement/H&S) within each workplace. No details as to what information was provided to participants during recruitment phase. No explanation as to why participants had to work fulltime.
Was the data collected in a way that addressed the research issue?	Yes, took place in workplace. The potential challenges in relation to this setting are acknowledged within the limitations section are acknowledged. Open ended questions. Audio recorded themes broad themes. No statement re saturation.
Has the relationship between researcher and participants been adequately considered	Can't tell -acknowledge that the FG's were conducted in work premises
Section B: What are the results?	
Have ethical issues been taken into consideration?	Can't tell Not explicitly stated -Participants given information on study prior to commencement. Ground rules established within FG's. Participants advised that they were not required to disclose any sensitive information.
Was the data analysis sufficiently rigorous?	In part, very brief description- initial analysis by facilitators, discussion with research team then analysis and themes developed by a member of the research team not involved in the data collection. Constant comparative analysis used in the development of themes. No explanation as to the rationale for the narratives presented. No evidence of critical evaluation of researchers' role.
Is there a clear statement of findings?	Yes
Section C: Will the results help locally?	
How valuable is the research?	Yes, highlights the challenges in relation to effective public health policy and messaging.

Appendix 1 – CASP Table (*continued*):-

CASP Qualitative Checklist	
Study	'Sainsbury's is my local': English alcohol policy, domestic drinking practices and the meaning of home Holloway et al., 2008
Section A: Are the results valid?	
Was there a clear statement of the aims of the research?	Yes – 'Aim is to challenge contemporary geographical imaginaries of problem drinking as a city-centre issue by focussing on the home drinking practices of a diverse cross-section of the population from two locations in Britain'p536
Is qualitative methodology appropriate?	Yes
Was research design appropriate to address the aims of the research?	Yes
Was the recruitment strategy appropriate to the aims of the research?	Yes, research design explained and recruitment strategy
Was the data collected in a way that addressed the research issue?	Yes, Mixed methods Paper from a large study – questionnaire survey and in-depth interviews – stratified random sample 1139 residents (Eden 575 and Stoke 560) Retrospective seven day drinking diary completed. Purposeful 63 in-depth interviews. Additional young people recruited through street surveys.
Has the relationship between researcher and participants been adequately considered	No, no evidence of any reflection undertaken by researchers on their roles
Section B: What are the results?	
Have ethical issues been taken into consideration?	Can't tell- only reference is made in relation to pseudonyms being given to participants
Was the data analysis sufficiently rigorous?	Can't tell – state that analysis was undertaken using 'conventional social science techniques', no further details are provided.
Is there a clear statement of findings?	Yes
Section C: Will the results help locally?	
How valuable is the research?	Adds to the body of evidence in relation to home drinking.

Appendix 1 – CASP Table *(continued)*:-

CASP Qualitative Checklist	
Study	Why do people drink at home? Foster et al., 2010
Section A: Are the results valid?	
Was there a clear statement of the aims of the research?	Yes – seeks to understand the reasons for drinking away from licensed premises
Is qualitative methodology appropriate?	Yes
Was research design appropriate to address the aims of the research?	No – no reason given as to why focus groups were chosen
Was the recruitment strategy appropriate to the aims of the research?	Yes, recruitment strategy well explained including the reluctance from participants to give demographic details
Was the data collected in a way that addressed the research issue?	Yes, to an extent -unclear as to setting in which interviews took place. Data collection explained, themes /prompts uses. Data recorded then transcribed. No reference to data saturation
Has the relationship between researcher and participants been adequately considered	Yes, to an extent – highlight that this study took place in a small geographical area .No discussion re potential bias
Section B: What are the results?	
Have ethical issues been taken into consideration?	Yes - Ethical approval stated
Was the data analysis sufficiently rigorous?	Yes to an extent, themes recorded principles outlined by Miles and Huberman, although no further explanation given on this. Themes presented in order of the frequency in which they were presented, accompanied with an illustrative quote. No evidence that researchers considered their own role, however do state that as this is qualitative research it is subject to a degree of selection bias.
Is there a clear statement of findings?	Yes, findings are explicitly stated .Credibility also discussed in relation to whether conducted in another setting the results can be replicated. Limited research resources resulted in not being able to access certain groups.
Section C: Will the results help locally?	
How valuable is the research?	Yes, study still cited given its sole focus on home drinking

Appendix 1 – CASP Table *(continued)*:-

CASP Qualitative Checklist	
Study	Older and wiser? Men's and women's accounts of drinking in early mid-life Emslie et al, 2012
Section A: Are the results valid?	
Was there a clear statement of the aims of the research?	No, aim is stated but implicit not given as a specific aims statement
Is qualitative methodology appropriate?	Yes, exploring perceptions of drinking therefore qualitative methods appropriate
Was research design appropriate to address the aims of the research?	Yes
Was the recruitment strategy appropriate to the aims of the research?	Can't tell- explanation given states that focus groups used to explore social context of drinking in mid-life, no further information given.
Was the data collected in a way that addressed the research issue?	Yes, state that it was difficult to recruit this age group, handed out flyers posters. When one person was identified, they were asked to identify others; some participants were therefore younger or older. Non-drinkers also recruited. No discussion re data saturation.
Has the relationship between researcher and participants been adequately considered	Yes, recognised that participants responses maybe influenced by presence of researcher.
Section B: What are the results?	
Have ethical issues been taken into consideration?	Yes, ethical approval stated.
Was the data analysis sufficiently rigorous?	Yes, table provided with description of focus group participants. Focus groups were transcribed verbatim, field notes written up. Thematic coding. Hypotheses developed then checked against transcripts. No statement made as to the role of the researcher.
Is there a clear statement of findings?	Yes
Section C: Will the results help locally?	
How valuable is the research?	Yes, adds to the body of knowledge in relation to early midlife drinking. Highlights areas for further research.

Appendix 1 – CASP Table (*continued*):-

CASP Qualitative Checklist	
Study	Transformation and time –out: The role of alcohol in identity construction among Scottish women in early midlife Emslie et al., 2015
Section A: Are the results valid?	
Was there a clear statement of the aims of the research?	Yes, solely focussed on female respondents exploring how alcohol is associated with doing 'femininity' in early midlife.
Is qualitative methodology appropriate?	Yes, same study as Emslie et al., 2012 DRAM Drinking attitudes in midlife study. Same authors methods and theoretical perspective.
Was research design appropriate to address the aims of the research?	Yes, Focus groups conducted wished to explore social nature of drinking. 34 females, 11 discussion groups 6 mixed sex, 5 single sex. Five of the women were excluded from the latter part of the findings as they did not have children, not in 'settled' domestic routines with their partners and had few obligations apart from paid work. No further explanation given as to why these exclusions were considered necessary. Whilst the study is sole focused on responses from female participants, no acknowledgement is given as to the potential effects on responses in a mixed group.
Was the recruitment strategy appropriate to the aims of the research?	Yes, broad recruitment, posters emailing community websites , those interested in taking place asked to invite up to five colleagues or friend who drank regularly .
Was the data collected in a way that addressed the research issue?	Yes, focus groups, semi structured topic guide analysis informed by social constructionist epistemology. Thematic analysis used.
Has the relationship between researcher and participants been adequately considered	No, no comment made in relation to the role of the researcher, or any potential for bias.
Section B: What are the results?	
Have ethical issues been taken into consideration?	Yes, ethical approval stated
Was the data analysis sufficiently rigorous?	Yes, used thematic analysis, description of process given. Whilst some of the focus groups were mixed, analysis presented is solely focussed on women's narratives.
Is there a clear statement of findings?	Yes, including study limitations.
Section C: Will the results help locally?	
How valuable is the research?	Contributes knowledge to this under researched area.

Appendix 1 – CASP Table *(continued)*:-

CASP Qualitative Checklist	
Study	"Women of my age tend to drink": the social construction of alcohol use by Australian and Danish women aged 50-70 years Dare et al., 2019
Section A: Are the results valid?	
Was there a clear statement of the aims of the research?	Yes, social construction used to investigate the social construction of alcohol consumption amongst middle –aged to young-old women aged 50-70 yrs. in Australia & Denmark.
Is qualitative methodology appropriate?	Yes, seeking rich data.
Was research design appropriate to address the aims of the research?	No, no justification given as to why semi structured interviewing was used.
Was the recruitment strategy appropriate to the aims of the research?	Yes, explain selection of age range, rationale provided for numbers sought for recruitment, purposive recruitment through personal contacts, (no concern raised re potential conflicts in doing this) then snowball sampling.
Was the data collected in a way that addressed the research issue?	Yes, digital recording then transcribed participant home or via phone or research institution, no explanation given as to the reasons behind the varying venues. Data saturation n=25.
Has the relationship between researcher and participants been adequately considered	No, no discussion within the paper in terms of the role of the researcher within the study.
Section B: What are the results?	
Have ethical issues been taken into consideration?	Yes, ethical approval gained from Edith Cowan University in Australia, whilst in Denmark ethical standards followed including informed consent.
Was the data analysis sufficiently rigorous?	Yes in part, in-depth description of the analysis process given. Constant comparative analysis, agreement reached between authors re coding framework, themes .No explanation given as to why the data that is presented was chosen. No mention of the role of the researcher in the research.
Is there a clear statement of findings?	Yes, findings explicit and framed within the context of previous research. Research findings discussed and argued within the context of previous studies. Conclusion references research question.
Section C: Will the results help locally?	
How valuable is the research?	Highlight the need for health messaging for this population to focus wider than the biomedical effects of alcohol consumption .

Appendix 1 – CASP Table *(continued)*:-

CASP Qualitative Checklist	
Study	How do older people normalise their drinking?: An analysis of interviewee accounts Gough et al., 2020
Section A: Are the results valid?	
Was there a clear statement of the aims of the research?	Yes, the study aims to provide insights into the issues that older drinkers make relevant in relation to (their) alcohol consumption, and how they manage these issues discursively when addressing a third party.
Is qualitative methodology appropriate?	Yes, discursive study, seeks to gain insights.
Was research design appropriate to address the aims of the research?	Yes, justification made as to the use of semi- structured interviews.
Was the recruitment strategy appropriate to the aims of the research?	Yes, recruitment described in detail, although no discussion as to how many people approached declined to take part.
Was the data collected in a way that addressed the research issue?	Yes in part, interviews conducted in participants homes by two researchers. No comment made as to the rationale for two researcher team members, or indeed who they were, as the study seeks to understand the conversations with pharmacists, and the potential impact this may have had. Topic guide used with open ended questions. No statement on data collection. No discussion re data saturation.
Has the relationship between researcher and participants been adequately considered	Yes, acknowledgement made that researcher may have had in respect of the accounts given.
Section B: What are the results?	
Have ethical issues been taken into consideration?	Yes, authors' state this is a National Institute of Health Research funded study and include details of ethical approval.
Was the data analysis sufficiently rigorous?	Yes in part, study uses discursive psychology, a brief explanation of this is provided. Whilst the first reviewer is described as reading the transcripts, no mention of other members of the research team being involved in the review. No mention of the role of the researcher within analysis.
Is there a clear statement of findings?	Yes, discussion well presented, although no other studies referenced.
Section C: Will the results help locally?	
How valuable is the research?	Highlights the importance of consideration not only to what people say, but how they say it.

Appendix 1 – CASP Table *(continued)*:-

CASP Systematic Review Checklist	
Study	Drinking in later life: a systematic review and thematic synthesis of qualitative studies exploring older people's perceptions and experiences Bareham et al., 2019
Section A: Are the results valid?	
Did the review address a clearly focussed question?	Yes, aims to synthesise the qualitative evidence exploring the perceptions and experiences of alcohol use by those over 50.
Did the authors look for the right type of papers?	Yes, in part, qualitative studies sought no further details on study design.
Do you think all the important, relevant studies were included?	Yes in part. Searches conducted on five bibliographic databases, specific headings and key words developed applying JBI recommendations for systematic review. MeshTerms for Medline, included grey literature searched applying key search terms, NHS evidence, Open Grey and Dissertation Abstracts International Full details available in separate document. No mention of follow up from ref lists, or personal contact with experts or non-English language studies. 25 articles retrieved.
Did the review's authors do enough to assess quality of the included studies?	Search terms Joanna Briggs Institute systematic recommendations for systematic reviews. Non English titles and abstracts translated; authors contacted when information not accessible on line. Reviewed by two independent reviewers using Saini and Schlonsky's Qualitative Research Quality Checklist. Authors' state that studies were not excluded on the basis of quality appraisal as 'poor reporting is not necessarily indicative of poorly conducted research'p135, however this statement appears contradictory when they further state that assessing for quality prevents unreliable results influencing review results. Provide key limitations and comments on the richness of the studies.
If the results of the review have been combined, was it reasonable to do so?	Yes, in part. Brief descriptive summaries provided with key limitations identified during quality appraisal. Supplementary data, including references of identified studies only available for subscribers of Age & Ageing, study title not included therefore making it difficult to retrieve papers.
Section B: What are the results?	
What are the results of the overall review?	Authors synthesise results into four key points : <ul style="list-style-type: none"> • Alcohol presents risks to older people's health , but also plays an important roles in their lives • Alcohol use is routinised in older people's lives, and can be an important part of social occasions • Most older people consider themselves to be responsible drinkers, making them less likely to recognise risks in their drinking • Public health interventions to modify older people's drinking should consider targeting older adults identifying as responsible drinkers
How precise are the results?	N/A

Appendix 1 – CASP Table *(continued)*:-

Section C: Will the results help locally?	
Can the results be applied to the local population?	N/A
Were all the important outcomes considered?	Yes, four key themes presented with supporting quotes
Are the benefits worth the harms and costs ?	N/A

CASP Systematic Review Checklist	
Study	Constructions of alcohol consumption by non-problematised middle –aged drinkers: a qualitative systematic review Muhlack et al., 2018
Section A: Are the results valid?	
Did the review address a clearly focussed question?	Yes, review sought to systematically review and synthesise qualitative literature that describes the way in which non-problematised middle – aged drinkers construct their alcohol consumption.
Did the authors look for the right type of papers?	Yes, three databases chosen in light of advice from University’s discipline specialist. Clear inclusion and exclusion criteria given. Hand searching of publication lists of authors identified by subject experts.
Do you think all the important, relevant studies were included?	Yes, in terms of English language .Non-English journals were not included, these may have yielded further papers , although it must be recognised that translation facilities be required to enable this to take place
Did the review’s authors do enough to assess quality of the included studies?	Yes, clear process provided, including independent and thereafter joint reviewing of papers. CASP Qualitative Checklist used, to assist with determining quality. All studies included were published peer reviewed journals.
If the results of the review have been combined, was it reasonable to do so?	Yes, four themes presented with excerpts from studies included.
Section B: What are the results?	
What are the results of the overall review?	Yes, highlight that for middle aged non problematised drinkers alcohol drinking and non-drinking is a complex and social process four themes presented.
How precise are the results?	N/A
Section C: Will the results help locally?	
Can the results be applied to the local population?	N/A
Were all the important outcomes considered?	Yes, from information presented.
Are the benefits worth the harms and costs?	N/A

Appendix 2: Ethical Approval letter

MC/bh

22nd March 2018

Gillian Cowan-Williams
10 Llys Preswylfa
Mold
Flintshire
CH7 1UP

Dear Gillian



Faculty of Health and Social Care

Tel 01244 512600
Fax 01244 511270

Ethical Approval Granted

FH&SC Ethics Number: RESC0218-909
Course of Study: Professional Doctorate in Public Health
Supervisor: Prof. Lynne Kennedy & Dr. Andi Mabhala
Student Number: 1430617

I am pleased to inform you that the Research Ethics Sub Committee of the Faculty of Health and Social Care approved your project ***"Is alcohol the new cup of tea? An exploration of the social and cultural functions of home drinking in professional middle aged women; opportunities for Public Health"*** on 20th March 2018.

Approval is subject to the above and following conditions:

1. That you provide a brief report for the sub-committee on the completion of your project.
2. That you inform the sub-committee of any substantive changes to the project.

We approve your application to go forward to the next stage of the approval process. For studies taking place in the NHS, Trust permission must be obtained before data collection can commence. If you are applying to IRAS and require a sponsorship letter and insurance documentation please contact Barbara Holliday.

If you have any questions or require any further assistance please contact Barbara Holliday on 01244 511117 or by email hscethics@chester.ac.uk.

Yours sincerely

A handwritten signature in black ink, appearing to read 'A.P. Finnegan'.

Prof. Alan Finnegan
Chair, Faculty Research Ethics Sub-Committee

cc Research Knowledge Transfer Office
cc Academic Supervisor

University of Chester, Riverside, Castle Drive, Chester, CH1 1SL

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Appendix 3: Participant Information Sheet



University of
Chester

Participant Information Sheet

Alcohol, the new cup of tea: an exploration of home drinking in middle aged women

Thank you for considering taking part in this research study. This Information Sheet is provided to assist you in making your decision as to whether you wish to participate, please read this carefully as both the details and the process of this study are outlined within, as well as information you should consider before you agree to consent.

If you agree to participate, please complete the attached consent form and return it to me either by hand, or by post in the stamped addressed envelope provided.

Thank you.

What is the purpose of the study?

The purpose of this study is to explore with women their stories in relation to alcohol consumption within the home. Currently the majority of research in relation to alcohol focuses on children and young people, however there is some evidence to suggest that middle aged women have different perceptions towards alcohol today than women in their age group may have done in the past; this study seeks to acquire information that may support or dispute this view.

Why have I been chosen?

You have been chosen because you consider yourself to be middle aged women.

Do I have to take part?

It is entirely up to you to decide whether or not to take part in this research study. If you do decide to take part, you will be given this Information Sheet to keep and be asked to sign a consent form. If you decide to take part you are still free to withdraw at any time and without giving a reason.

What will happen to me if I take part?

If you decide to take part, you will be given this Information Sheet to keep and asked to sign the consent form. This will give your consent for the researcher to contact to you to arrange to meet you. The meeting will be held at a mutually agreed time and place. The researcher will ask you about your thoughts in relation to drinking alcohol at home. There will be no set questions, as for the purposes of this study the researcher would like to listen to your thoughts without guiding or leading you in any way. The researcher would like to record the conversation as this will help to ensure that she has correctly understood what you have said. The recording will only be reviewed, transcribed and then analysed by the researcher and will then be erased.

Appendix 3 – Participant Information Sheet (*continued*):-



University of
Chester

What are the possible disadvantages and risks of taking part?

There are no disadvantages or risks foreseen in taking part in the study.

What are the possible benefits of taking part?

By participating you can help to further develop the understanding of the current views of middle aged women towards drinking alcohol at home. By taking part, you will be contributing to the development of future Public Health policy.

What if something goes wrong?

If you wish to complain or have any concerns about any aspect of the way you have been approached or treated during the course of this study, please contact: Professor Annette McIntosh-Scott, Executive Dean, Faculty of Health and Social Care, University of Chester, Riverside Campus, Castle Drive, Chester, Cheshire, CH1 1SL. Tel: 01244 513380. Email: a.mcintosh@chester.ac.uk

If you are harmed by taking part in this research project, there are no special compensation arrangements. If you are harmed due to someone's negligence (but not otherwise), then you may have grounds for legal action, but you may have to pay for this.

Will my taking part in the study be kept confidential?

All the information you give will be treated in the utmost confidence, will not be passed to anyone else, and all the materials will be safely stored within the researcher's own home. The only exception this would be if any of the information you provided gave rise to serious concerns about the safety or well-being of a vulnerable person, if this were the case, then this would have to be shared with the appropriate people. Your name or details that would identify will not be used however, with your permission; something you may have said may be reproduced in the final report as an example.

What will happen to the results of the research study?

The researcher is conducting this research study as a student of the University of Chester to fulfil the requirements for a Professional Doctorate in Public Health. The research has been approved by the University of Chester's Research Ethics Committee. It is hoped that the findings may be used to inform future Public Health Policy. A copy of final report will be sent to you if you wish to receive it.

If you require any more information or wish to discuss this study further, please do not hesitate to contact the researcher Gillian Cowan- Williams by e mail: 430617@chester.ac.uk

Thank you for your interest in this research.

Appendix 4: Participant Recruitment letter

10 Llys Preswylfa
Mold
Flintshire
CH7 1UP

Dear.....,

Thank you for considering taking part in this research study.

An Information Sheet is provided to assist you in making your decision as to whether you wish to participate, please read this carefully as both the details and the process of this study are outlined within, as well as information you should consider before you agree to consent.


If you agree to participate, please fill in the attached consent form and return it to me either by hand, or by post in the stamped addressed envelope provided.

Thank you,



Gillian A. Cowan-Williams

Appendix 5: Consent Form

		
University of Chester		
Title of Project: Alcohol the new cup of tea? An exploration of the social and cultural functions of home drinking in professional middle-aged women		
Name of Researcher: Gillian Anne Cowan-Williams		Please tick the box
1. I agree to take part in this research which is to:		
a) Gather the perceptions of professional , middle aged women towards drinking alcohol at home and		<input type="checkbox"/>
b) Explore whether the social and cultural function of drinking a cup of tea have now been replaced by alcohol.		
2. The researcher has explained, to my satisfaction, the purpose of the study.		<input type="checkbox"/>
3. I have had opportunity to read the Information Sheet for the above study, and confirm that I have had the opportunity to ask questions.		<input type="checkbox"/>
4. I understand that I will be asked to talk about my own experiences.		<input type="checkbox"/>
5. I understand that the information that I provide will be treated as confidential and will be safely stored.		<input type="checkbox"/>
6. I understand that my participation is voluntary, and that I am free to withdraw at any time, without giving reason.		<input type="checkbox"/>
7. I agree to the interview being audio recorded.		<input type="checkbox"/>
8. I agree to the use of anonymised quotes in the written study.		<input type="checkbox"/>
_____ Name of Participant	_____ Date	_____ Signature
_____ Name of Person taking consent (if different from researcher)	_____ Date	_____ Signature
_____ Researcher	_____ Date	_____ Signature
(1 for participant; 1 for researcher)		

Appendix 6: Copy of Transcript

Wallis

So, I suppose I am going to start by recalling my early life with my parents. I suppose we were just a middle-class family and I do remember actually that alcohol was very occasional, but both my parents had an interest in wine, and we went to different holidays and that got me interested in wine in particular. But it was very, very different and yes, we would perhaps have wine on a Sunday with meals, special occasions, or occasional, but even in my parents' lifetime, I am not sure if that's influenced by me and my four siblings, because as we grew up and probably 18, 20, then occasions when we would gather together, we would have probably, have some form of alcohol, a drink at home, even if we weren't out. So I suppose in my lifetime I saw a dramatic change from my parents who, when their family came round they would have a cup of tea, to probably 20 years later, when in actual fact it was only if it was quite during the daytime, it was tea and cake or whatever, but when you got to a certain time in the afternoon it was kind of acceptable that they might have a G&T or a glass of wine or something if somebody had popped round for a drink.

So, I suppose having seeing that, when my husband and I first got together and we laugh about it now, because we used to not drink very much and when we bought our first house we would probably have a bottle of wine on a Saturday evening if we were in, or a Friday evening, won't name some of the wines as it makes us laugh now that we drank it. So I suppose that is when I would first say that culture of home drinking, so that would be 1980s, 85ish, started to really, really change and even when friends came round, and when we were 18, we wouldn't have had a drink of alcohol, but by the time we got to 25, 30, and friends came round, we would always have a glass, you would always have to go and get wine, you had to go and get a

few bottles of wine and a few beers as somebody would want a drink of alcohol.

So to the extent that now I suppose, let's go back a little bit, so then when you are relatively young and you've not got kids you go out, you socialise, so you have a drink out and I think then when your kids arrive (laughs) and your life changes (more laughter) and then, we weren't fortunate enough to have a lot of family support around, because by the time that happened, I was about 34 by the time I had children, and both my parents were then poorly and soon passed away. My husband's parents had both died pre that, so we didn't have a lot of close family nearby. So, we couldn't go out a lot, it's around special occasions, we would go out, weddings and special, you know, we didn't go out every week for the pair of us, we would go out separately, play sport or whatever, but not together.

So, I think it then became probably quite norm. I would look forward to, if my husband was going away overnight somewhere, or what have you and the kids were in bed, then I had, then I would look forward to thinking about eight o'clock, then I would be able to have a glass of red wine, sit down, read a book, or do whatever I wanted to do and it's kind of relaxation. So yes, it wasn't a cup of tea, it was a glass of wine that you would look forward to. And then I think, as you go through kind of 20 years of kids, you get used to, I suppose coming in from work, if you know you are going out, I wouldn't have a drink of alcohol, but it could be any day of the week, then that you think actually, particularly if it's nice and sunny, or what have you and you will think, do you know what, I will have a glass of wine, and yes it is just I suppose the norm. And I think probably for, oh, probably 15 years, maybe 10 or 15 years, I probably would have had a glass of wine almost every night. When you came in and once the kids had got kind of sorted in to bed, homework done, running them round whatever they were doing, I probably would have had a glass of wine.

Then I think probably in the last five, mm five or just a few years longer, that actually you become a bit more conscious of actually whether actually should I be doing this every night of the week? So, I make good efforts (laughs) and I am now thinking to myself, and it happens for periods of time, so at the moment I've lost the plot, but I will try, particularly after Christmas, or after the summer holidays. I think actually I am not going to drink Monday, Tuesday, Wednesday, I don't work Thursdays or Fridays, so Thursday is always my Friday night (laughs), so a gin and tonic is an absolute necessity when you get in from a busy day at work, then over the weekend yes, any gatherings, you know when people come round, you would have a glass of wine.

I suppose what's really bad is when we as a family have gatherings, we are on champagne at breakfast, you know at weekends if, assuming we are not going anywhere, because we do a lot of active, trekky type things, but if we are just lolling, or going to do a bit of art gallery type stuff, you know as I would call it, more cultural, then as long as we can get from A to B, legally, we are very conscious, then we would have a glass of bubbly to start off with, you know probably on a Saturday or Sunday morning. So, I think it's changed quite dramatically, it is kind of acceptable within the home and in actual fact I think we feel a bit sad, if we were having a gathering (laughs) and we weren't having, em then I think we would have lost the plot probably. Em, but on the other side of it, we all make big efforts individually, well I do, say Monday, Tuesday, Wednesday, I will, well it's kind of an effort, but I will say 'no' I will not have a glass of wine, I am not going to have a gin and tonic tonight', and then come Thursday, Friday, the rest of the weekend, well that's more acceptable.

So, I don't know what else you want me to say really. Yes, I think it's a way of socialising. Why do we do it? I think work hard, so when you work hard, and I'm up at six, so think it's a long day, do I use it to go to sleep? Probably. Do I? I suppose it's the time, I'm up at six, I tend to go to bed around 11, half

11, occasionally I might stay up later, but that's often an ordeal for me, because I can only do it for one night and then I'm absolutely exhausted. So I suppose I would say I also drink earlier, so therefore for me to get home at half six after being up since six in the morning, when I look at my two sons who are in their early twenties and I think well you actually don't get up till 10, so actually (laughs) I have already done four hours, so whilst they may not be going out until 10pm, half six, seven o'clock to me is actually a fair way through my day time, so I don't see it as an issue (laughs), six, seven, I'm having a glass of wine now.

Weather makes a big difference, I think if its nice weather it makes you more inclined to, I don't know, it makes you feel good, it makes you feel kind of more relaxed, I suppose, I don't know, you think I enjoy a good book and a glass of wine sat outside on a garden chair is heaven, and it just is so relaxing that's what you do. Would I want to go inside and swop it for a cup of tea? Probably not and I do like tea, but not in certain, you know I suppose if it enhances, or you feel it enhances your relaxation, then I think that's the biggest reason why I drink alcohol. Relaxation makes you slightly more jovial, and I find it probably to be acceptably more and I know for some people, I think if I go to my GP, they would put me in the box of, they would probably say 'she is a near alcoholic'. I probably do drink 14 units a week ah, so yeah, so it's a bit worrying, but then (laughs), but then at the same time, I would say that there is probably a lot, a lot of the population that fit into 14 units of alcohol a week.

GC: Do you think culturally it has changed?

Absolutely.

GC: Are there other influences?

I think it's a bit sad. I also think it possibly depends on which demographic group you are in. I suppose it's scowled upon if you are at the lower ends of

the socioeconomic group that people see you sat outside Wetherspoons, or something at midday and I myself would probably think what are they doing at 12 noon? And yet if I was on the banks of the Thames on the way to a rugby match and we were having drinks, I wouldn't think, it's just part of the process. So, I think it's culturally become much more acceptable on special occasions, holidays, gatherings, it is the norm for lots of people who do drink. It's not necessarily frowned upon in that setting and even at home.

Well, I suppose culturally you can now go to a supermarket, and you can buy as much alcohol as you like. I remember when I was very young, we had to go to a wine shop to get wine or beer, and you couldn't go to the supermarket to get it. So, I think the journey has changed significantly in my lifetime in what was available and how you had access to it.

And different groups and I think as you get older though, and I have got quite a few of my family a little bit older than me, they are all retired now, lucky for them. So, in actual fact they are getting even worse again because they now think nothing of having a drink in the afternoons. Because if they are at home and they are not away, or if they are on holiday, then wherever it is in the day, but if they are at home, I know my three brothers who are all in their 60's, late 60's, if I pop round to see any of those, I would be offered a gin and tonic if it was after three o'clock and not a cup of tea. So yes, it's definitely more the norm than not.

GC: Do you think the media has anything to do with it?

The media? Possibly. I think it's more of lifestyle and perceptions of lifestyles. Yes, that comes via the media, but if you I suppose, films, I don't do many kind of soaps or things, even, I don't know, it's that lifestyle that you see in cookery programmes, it's always lovely and the weather's nice and I suppose if you are there in your little garden, just by yourself with a glass of wine and a book, then you are taking part in a different lifestyle, a more enriched lifestyle in a way. So yes, they do play a part, but I think it is

just a promoting sociability really rather than you know staying inside behind closed doors with a cup of tea. So, I don't think necessarily that's bad in a way and I know a few people who might be able to quote a few studies over the time to say because as a matter of fact if you are drinking alcohol and you are socialising with your family and you are out with your friends, then you are probably attending events, whether that be a party in the park or whatever. Yes, you are having some alcohol, but actually is that benefitting you in other ways and I possibly put that hand in hand.

For me and my family, I would say for at least 50% of the time when we are having a family gathering, we will go and do a four or five mile walk round the Lake District, or to an event or around the gallery then yes, the latter part of that gathering is then probably some food and then socialising and some alcohol, whether it be at home or out, which actually is probably, I know alcohol is probably the detriment in many ways, but actually socialising and having those connections is probably as beneficial for you as the detriment of having the alcohol that joins with it, rather than the cup of tea. Would we have as much fun, or do it so often if we were having a cup of tea? I'm not sure we would together. We would, but I think we would not be quite so jovial as people I suppose tend to do, we are not wild in any way, I'm not saying for one minute that we do really stupid things, but people do, can therefore have, see the funny side of things, or what I would say, more so when you have had a couple of glasses of bubbly, then when you are there with a cup of tea. So, I think it enhances, probably your wellbeing in different ways, in as much as we are all know it's a detriment at the other side of it.

I do recall when I suppose, when I was younger, the more older generation, perhaps 20 or 30 years older than me, would be more inclined to perhaps have whisky, or, as a matter of fact, I used to have an auntie who used to drink brandy, I think I've probably drunk brandy with something twice in my life. As I think people have reduced the type of alcohol they are drinking, and they yes, particularly women, have probably gone from harder spirits to kind

of longer drinks which obviously again are still alcoholic, but perhaps that's an element of health consciousness in it.

And also, you know some of these, which have just come on to the market recently, a lot of these nice tonics and nice soft drinks, are often mixed in, people are more conscious of that, and people will have a mixture of not just all alcoholic beverages but will mix them in a little bit as well. So perhaps people are more conscious of the alcohol content of their drinks, even though they are still drinking more alcohol than previous generations.

In my family, blokes still very much on, they like a pint of beer, we have to travel for ages to find a nice pint of beer. But that again depends upon the setting, but whether it is you know, well actually we are conscious, they are very conscious of the alcohol content, whether it's a 4%, which they may well have a pint or two, or if they find something that is 6 or 7%, which some of these modern microbreweries are, then they are definitely more conscious about how much, from an alcohol intake, they are having.

So, I think people probably are more aware of the level of alcohol intake, the actual alcohol value intake, they are having, rather than just the number of drinks, which may be beneficial in the long term?

So, I am not sure whether, 'she says this', we drink gin and tonic at home quite happily, but I am not sure I would drink a lot of hard, kind of alcoholic content at home. I would probably feel a bit odd having a straight whisky and soda by myself at home; I don't know whether that would be ok. A glass of wine, a glass of prosecco is, not so much a hard alcoholic drink, I would perhaps feel I had lost the plot.

GC: so why do you think it's different?

So why do I think it different? Because maybe I have lost, gone to, I am using alcohol in a different way, than if I was going to higher content alcohol, maybe I would be using it for a different purpose, rather than, a glass of

wine, or prosecco, or gin and tonic is, it has less effect on you and is more sociably acceptable, particularly in the media and with friends. I have said I am going home for a whisky; I think even my friends would look at me and think 'is she ok? Whereas if I said when I got in, I was going to have a glass of wine, they probably wouldn't bat an eyelid. So, it's definitely more socially acceptable, than having a hard drink of alcohol, but then I think people would be worried if I said I am going home to drink, if they saw me muttering round Waitrose with 15 bottles of whisky in my trolley (laughs) they would really be quite worried about me. They probably wouldn't say anything if I had 12 bottles of prosecco and wine in my trolley, they would just think that I was going to be having a party or have got friends coming or something. So, I suppose yeah, I do think there is some, what's the word? Some sort of norms, acceptance of the type of alcohol you drink at home as well.

But as I get older who knows, maybe some of the, I don't know why I associate it with older people but I do, and even now, my older relatives and friends will sometimes, even at the end of an evening out, or even at the end of an evening at home, will actually say, have you got a Scotch, or whatever rather than, I am more, I tend to more than quite happy with a glass of prosecco or whatever, rather than a hard alcoholic drink.

Appendix 7: Copy of Analysed Transcript

Limits of scene 30/5/18 - 31/5/18 18/5/18 - 19/5/18	Normal acceptance. 10-15 years glass is actually very much. Absolute necessity. Make big effort. More conscious good efforts. Last the plot. In fact. changed quite dramatically. See if we don't drink. Heaven's big effort.	30/5/18 - Walter So I suppose I am going to start by recalling my early life with my parents. I suppose we were just a middle class family and I do remember actually that alcohol was very occasional, but both my parents had an interest in wine and we went to different holidays and that got me interested in wine in particular. But it was very, very different and yes, we would perhaps have wine on a Sunday with meals, special occasions, or occasional, but even in my parents' lifetime, I am not sure if that's influenced by me and my four siblings, because as we grew up and probably 18, 20, then occasions when we would gather together, we would have probably, have some form of alcohol, a drink at home, even if we weren't out. So I suppose in my lifetime I saw a dramatic change from my parents who, when their family came round they would have a cup of tea, to probably 20 years later, when in actual fact it was only if it was quite during the daytime, it was tea and cake or whatever, but when you got to a certain time in the afternoon it was kind of acceptable that they might have a G&T or a glass of wine or something if somebody had popped round for a drink.	30/5/18 - Walter So I suppose having seen that, when my husband and I first got together and we laugh about it now, because we used to not drink very much and when we bought our first house we would probably have a bottle of wine on a Saturday evening if we were in, or a Friday evening, won't name some of the wines as it makes us laugh now that we drank it. So I suppose that is when I would first say that culture of home drinking, so that would be 1980's, 85ish, started to really, really change and even when friends came round, and when we were 18, we wouldn't have had a drink of alcohol, but by the time we got to 25, 30, and friends came round, we would always have a glass, you would always have to go and get wine, you had to go and get a few bottles of wine and a few beers as somebody would want a drink of alcohol. So to the extent that now I suppose, let's go back a little bit, so then when you are relatively young and you've not got kids you go out, you socialise, so you have a drink out and I think then when your kids arrive (laughs) and your life changes (more laughter) and then, we weren't fortunate enough to have a lot of family support around, because by the time that happened, I was about 34 by the time I had children, and both my
	So I suppose having seen that, when my husband and I first got together and we laugh about it now, because we used to not drink very much and when we bought our first house we would probably have a bottle of wine on a Saturday evening if we were in, or a Friday evening, won't name some of the wines as it makes us laugh now that we drank it. So I suppose that is when I would first say that culture of home drinking, so that would be 1980's, 85ish, started to really, really change and even when friends came round, and when we were 18, we wouldn't have had a drink of alcohol, but by the time we got to 25, 30, and friends came round, we would always have a glass, you would always have to go and get wine, you had to go and get a few bottles of wine and a few beers as somebody would want a drink of alcohol. So to the extent that now I suppose, let's go back a little bit, so then when you are relatively young and you've not got kids you go out, you socialise, so you have a drink out and I think then when your kids arrive (laughs) and your life changes (more laughter) and then, we weren't fortunate enough to have a lot of family support around, because by the time that happened, I was about 34 by the time I had children, and both my	Early life. Middle class family. Alcohol very occasional. parents had an interest in wine. Different holidays at interest in wine. 20 years later. it's not so far away. OK - acceptable. to have G&T or glass of wine. Didn't drink very much. Culture of home drinking started in 80's. relating young to children so over 30 years.	Early life. Middle class family. Alcohol very occasional. parents had an interest in wine. Different holidays at interest in wine. 20 years later. it's not so far away. OK - acceptable. to have G&T or glass of wine. Didn't drink very much. Culture of home drinking started in 80's. relating young to children so over 30 years.
	So I suppose having seen that, when my husband and I first got together and we laugh about it now, because we used to not drink very much and when we bought our first house we would probably have a bottle of wine on a Saturday evening if we were in, or a Friday evening, won't name some of the wines as it makes us laugh now that we drank it. So I suppose that is when I would first say that culture of home drinking, so that would be 1980's, 85ish, started to really, really change and even when friends came round, and when we were 18, we wouldn't have had a drink of alcohol, but by the time we got to 25, 30, and friends came round, we would always have a glass, you would always have to go and get wine, you had to go and get a few bottles of wine and a few beers as somebody would want a drink of alcohol. So to the extent that now I suppose, let's go back a little bit, so then when you are relatively young and you've not got kids you go out, you socialise, so you have a drink out and I think then when your kids arrive (laughs) and your life changes (more laughter) and then, we weren't fortunate enough to have a lot of family support around, because by the time that happened, I was about 34 by the time I had children, and both my	So I suppose having seen that, when my husband and I first got together and we laugh about it now, because we used to not drink very much and when we bought our first house we would probably have a bottle of wine on a Saturday evening if we were in, or a Friday evening, won't name some of the wines as it makes us laugh now that we drank it. So I suppose that is when I would first say that culture of home drinking, so that would be 1980's, 85ish, started to really, really change and even when friends came round, and when we were 18, we wouldn't have had a drink of alcohol, but by the time we got to 25, 30, and friends came round, we would always have a glass, you would always have to go and get wine, you had to go and get a few bottles of wine and a few beers as somebody would want a drink of alcohol. So to the extent that now I suppose, let's go back a little bit, so then when you are relatively young and you've not got kids you go out, you socialise, so you have a drink out and I think then when your kids arrive (laughs) and your life changes (more laughter) and then, we weren't fortunate enough to have a lot of family support around, because by the time that happened, I was about 34 by the time I had children, and both my	So I suppose having seen that, when my husband and I first got together and we laugh about it now, because we used to not drink very much and when we bought our first house we would probably have a bottle of wine on a Saturday evening if we were in, or a Friday evening, won't name some of the wines as it makes us laugh now that we drank it. So I suppose that is when I would first say that culture of home drinking, so that would be 1980's, 85ish, started to really, really change and even when friends came round, and when we were 18, we wouldn't have had a drink of alcohol, but by the time we got to 25, 30, and friends came round, we would always have a glass, you would always have to go and get wine, you had to go and get a few bottles of wine and a few beers as somebody would want a drink of alcohol. So to the extent that now I suppose, let's go back a little bit, so then when you are relatively young and you've not got kids you go out, you socialise, so you have a drink out and I think then when your kids arrive (laughs) and your life changes (more laughter) and then, we weren't fortunate enough to have a lot of family support around, because by the time that happened, I was about 34 by the time I had children, and both my

parents were then poorly and soon passed away. My husband's parents had both died pre that, so we didn't have a lot of close family nearby. So we couldn't go out a lot, it's around special occasions, we would go out, weddings and special, you know, we didn't go out every week for the pair of us, we would go out separately, play sport or whatever, but not together.

So I think it then became probably quite norm. I would look forward to, if my husband was going away overnight somewhere, or what have you and the kids were in bed, then I had, then I would look forward to thinking about eight o'clock, then I would be able to have a glass of red wine, sit down, read a book, or do whatever I wanted to do and it's kind of relaxation. So yes, it wasn't a cup of tea, it was a glass of wine that you would look forward to. And then I think, as you go through kind of 20 years of kids, you get used to, I suppose coming in from work, if you know you are going out, I wouldn't have a drink of alcohol, but it could be any day of the week, then that you think actually, particularly if it's nice and sunny, or what have you and you will think, do you know what, I will have a glass of wine, and yes it is just I suppose the norm. and I think probably for, oh probably 15 years, 10, 15 years, I probably would have had a glass of wine, almost every night. When you came in and once the kids had got kind of sorted in to bed, homework done, running them round whatever they were doing, I probably would have had a glass of wine.

Then I think probably in the last five, mm five or just a few years longer, that actually you become a bit more conscious of actually whether actually should I be doing this every night of the week? So I make good efforts (laughs) and I am now thinking to myself and it happens for periods of time, so at the moment I've lost the plot, but I will try, particularly after Christmas, or after the summer holidays. I think actually I am not going to drink Monday, Tuesday, Wednesday, I don't work Thursdays or Fridays, so Thursday is always my Friday night (laughs), so a gin and tonic is an absolute necessity when you get in from a busy day at work, then over the weekend yes, any gatherings, you know when people come round, you would have a glass of wine.

Planning
No close by →

Sign of a special occasion

become quite norm
Eight o'clock have a glass of wine.

husband away, relaxation.
look forward to cup of tea and a glass of wine.

The norm.

For 15 years I would have a glass of wine almost every night.

last five years become more conscious

should I be doing this every night?

Make good efforts.

at the moment lose the plot.

Don't work Thursday.

Thursday is my Friday night -
G & T is an absolute necessity when you get in from a busy day at work.

a glass of wine when people come round.

I suppose what's really bad is when we as a family have gatherings, we are on champagne at breakfast, you know at weekends if, assuming we are not going anywhere, because we do do a lot of active, treky type things, but if we are just lolling, or going to do a bit of art gallery type stuff, you know as I would call it, more cultural, then as long as we can get from A to B, legally, we are very conscious, then we would have a glass of bubbly to start off with, you know probably on a Saturday or Sunday morning. So I think it's changed quite dramatically, it is kind of acceptable within the home and in actual fact I think we feel a bit sad, if we were having a gathering (laughs) and we weren't having, em then I think we would have lost the plot probably. Em, but on the other side of it, we all make big efforts individually, well I do, say Monday, Tuesday Wednesday, I will, well it's kind of an effort, but I will say 'no' I will not have a glass of wine, I am not going to have a gin and tonic tonight', and then come Thursday, Friday, the rest of the weekend, well that's more acceptable.

So I don't know what else you want me to say really. Yes, I think it's a way of socialising. Why do we do it? I think work hard, so when you work hard, and I'm up at six, so think it's a long day, do I use it to go to sleep? Probably. Do I? I suppose it's the time, I'm up at six, I tend to go to bed around 11, half 11, occasionally I might stay up later, but that's often an ordeal for me, because I can only do it for one night and then I'm absolutely exhausted. So I suppose I would say I also drink earlier, so therefore for me to get home at half six after being up since six in the morning, when I look at my two sons who are in their early twenties and I think well you actually don't get up till 10, so actually (laughs) I have already done four hours, so whilst they may not be going out until 10pm, half six, seven o'clock to me is actually a fair way through my day time, so I don't see it as an issue (laughs), six, seven, I'm having a glass of wine now.

Weather makes a big difference, I think if its nice weather it makes you more inclined to, I don't know, it makes you feel good, it makes you feel kind of more relaxed, I suppose, I don't know, you think I enjoy a good book and a glass of wine sat outside on a garden chair is heaven, and it just is so relaxing that's what you do. Would I want to go inside and swap it for a cup of tea? Probably not and I do like tea, but not in

Really bad - family gathering
Champagne + breakfast
Just lolling - more cultural.

Think its
Change quite dramatically

sign Big efforts
Mon - Tuesday - No wine.
No Gin Tonic!

Its a way of socialising.

Drink more in nice weather —

Being a good book & sleep
One sat outside on a garden
chair.

Swap for a cup of tea? → Probably not.

if not doing anything.

Acceptable with the home.
Feel a bit sad if we
didn't have any.

Rest of the weekend more accepting
Why do we do it?
Work is hard.
use it to help sleep.

Makes you more inclined.
More relaxed.
Makes you feel good.

Its heaven.
Just so relaxing.

Acceptable

relaxed.

relaxation

certain, you know I suppose if it enhances, or you feel it enhances your relaxation, then I think that's the biggest reason why I drink alcohol. Relaxation, makes you slightly more jovial, and I find it probably to be acceptably more and I know for some people, I think if I go to my GP they would put me in the box of, they would probably say 'she is a near alcoholic'. I probably do drink 14 units a week ah, so yeah, so it's a bit worrying, but then (laughs), but then at the same time, I would say that there is probably a lot, a lot of the population that fit into 14 units of alcohol a week.

GC Do you think culturally it has changed? Absolutely.

GC Are there other influences? I think it's a bit sad. I also think it possibly depends on which demographic group you are in. I suppose it's frowned upon if you are at the lower ends of the socioeconomic group that people see you sat outside Weatherspoons, or something at midday and I myself would probably think what are they doing at 12 noon? And yet if I was on the banks of the Thames on the way to a rugby match and we were having drinks, I wouldn't think, it's just part of the process. So I think it's culturally become much more acceptable on special occasions, holidays, gatherings, it is the norm for lots of people who do drink. It's not necessarily frowned upon in that setting and even at home.

Well I suppose culturally you can now go to a supermarket and you can buy as much alcohol as you like. I remember when I was very young, we had to go to a wine shop to get wine or beer, and you couldn't go to the supermarket to get it. So I think the journey has changed significantly in my lifetime in what was available and how you had access to it.

And different groups and I think as you get older though, and I have got quite a few of my family a little bit older than me, they are all retired now, lucky for them. So in actual fact they are getting even worse again, because they now think nothing of having a drink in the afternoons. Because if they are at home and they are not away, or if they are on holiday, then wherever it is in the day, but if they are at home, I know my

Enhances relaxation

Relax makes you more jovial.

used to go to box of 'near alcoholic'

Probably drink 14 units per week.

Culture Influences.

Bank of the Thames
going to rugby. just part of process.

It's the norm - now frowned upon.

Younger changed dramatically in terms of availability.

Different groups - retired.
Get worse drinker as age increases.

Biggest reason I drink alcohol.

Be more acceptable.

Bit funny - but (laughs)

probably close to the point that fit into 14 units a week.

Depends on demographic

Scouted up as it is lower end of socioeconomic group sitting outside Weatherspoons.

Culturally more acceptable.

Culturally go to the supermarket & buy as much alcohol as you like.

Younger go to wine shop for older beer. couldn't get it for the supermarket.

three brothers who are all in their 60's, late 60's, if I pop round to see any of those, I would be offered a gin and tonic if it was after three o'clock and not a cup of tea. So yes, it's definitely more the norm than not.

GC Do you think the media has anything to do with it?

The media? Possibly. I think it's more of lifestyle and perceptions of lifestyles. Yes, that comes via the media, but if you I suppose, films, I don't do many kind of soaps or things, even, I don't know, it's that lifestyle that you see in cooking programmes, it's always lovely and the weather's nice and I suppose if you are there in your little garden, just by yourself with a glass of wine and a book, then you are taking part in a different lifestyle, a more enriched lifestyle in a way. So yes they do play a part, but I think it is just a promoting sociability really rather than you know staying inside behind closed doors with a cup of tea. So I don't think necessarily that's bad in a way and I know a few people who might be able to quote a few studies over the time to say because as a matter of fact if you are drinking alcohol and you are socialising with your family and you are out with your friends, then you are probably attending events, whether that be a party in the park or whatever. Yes, you are having some alcohol, but actually is that benefitting you in another ways and I possibly put that hand in hand.

For me and my family, I would say for at least 50% of the time when we are having a family gathering, we will go and do a four or five mile walk round the Lake District, or to an event or around the gallery then yes, the latter part of that gathering is then probably some food and then socialising and some alcohol, whether it be at home or out, which actually is probably, I know alcohol is probably the detriment in many ways, but actually socialising and having those connections is probably as beneficial for you as the detriment of having the alcohol that joins with it, rather than the cup of tea. Would we have as much fun, or do it so often if we were having a cup of tea? I'm not sure we would together. We would, but I think we would not be quite so jovial as people I suppose tend to do, we are not wild in any way, I'm not saying for one minute that we do really stupid things, but people do, can therefore have, see the funny side of things, or what I

Offered a G&T or 3pm
- cup of tea.

Media - lifestyle cooking again.

Enriched lifestyle

Don't think that's bad.

Drinking doesn't see as positive
socialising with family & friends.
Sig to events: socialising.

Socialising connects are as
beneficial for you as the
detriment of alcohol.

Wouldn't be so jovial without
the alcohol.

More the norm than not.

Partially socialising rather than
staying behind closed doors
with a cup of tea.

possibly benefiting you.

I know that alcohol is a
detriment in some ways.

- impact on regulating
see before.

would say, more so when you have had a couple of glasses of bubbly, then when you are there with a cup of tea. So I think it enhances, probably your wellbeing in different ways, in as much as we are all know it's a detriment at the other side of it.

Walter 2

I do recall when I suppose, when I was younger, the more older generation, perhaps 20 or 30 years older than me, would be more inclined to perhaps have whisky, or, as a matter of fact, I used to have an auntie who used to drink brandy, I think I've probably drunk brandy with something twice in my life. As I think people have reduced the type of alcohol they are drinking, and they yes, particularly women, have probably gone from harder spirits to kind of longer drinks which obviously again are still alcoholic, but perhaps that's an element of health consciousness in it. And also you know some of these, which have just come on to the market recently, a lot of these nice tonics and nice soft drinks, are often mixed in, people are more conscious of that and people will have a mixture of not just all alcoholic beverages, but will mix them in a little bit as well. So perhaps people are more conscious of the alcohol content of their drinks, even though they are still drinking more alcohol than previous generations.

In my family, blokes still very much on, they like a pint of beer, we have to travel for ages to find a nice pint of beer. But that again depends upon the setting, but whether it is you know, well actually we are conscious, they are very conscious of the alcohol content, whether it's a four %, which they may well have a pint or two, or if they find something that is six or seven%, which some of these modern microbreweries are, then they are definitely more conscious about how much, from an alcohol intake, they are having. So I think people probably are more aware of the level of alcohol intake, the actual alcohol value intake, they are having, rather than just the number of drinks, which may be beneficial in the long term?

So I am not sure whether, 'she say this', we drink gin and tonic at home quite happily, but I am not sure I would drink a lot of hard, kind of alcoholic content at home. I would probably feel a bit odd having a

Enhances probably your wellbeing,

- as much as we all know it's a detriment at the other side of it.

Recalls when younger - older generation drink whisky - and drink brandy.

Women gone from harder spirits to longer drinks.

Nice tonics nice soft drinks.

People will have a mix of alcohol & non alcoholic.

In family blokes like a pint of beer - conscious of alcohol content

People more aware for an alcohol intake, than they are having.

Not sure we drink gin & tonic at home quite happily.

People have reduced the type of alcohol they are drinking.

obviously still alcoholic - perhaps a health ~~concern~~ ^{consciousness} is it.

Perhaps people more conscious of alcohol content of their drink. Even though they are drinking more the previous generation.

May be beneficial in the long term?

Not sure I would drink a lot of hard alcoholic content at home. Feel a bit odd.

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straight whisky and soda by myself at home; I don't know whether that would be ok. A glass of wine, a glass of prosecco is, not so much a hard alcoholic drink, I would perhaps feel I had lost the plot.

GC so why do you think it's different? So why do I think it different? Because maybe I have lost, gone to, I am using alcohol in a different way, than if I was going to higher content alcohol, maybe I would be using it for a different purpose, rather than, a glass of wine, or prosecco, or gin and tonic is, it has less effect on you and is more sociably acceptable, particularly in the media and with friends. I have said I am going home for a whisky, I think even my friends would look at me and think "Is she ok? Whereas if I said when I got in I was going to have a glass of wine, they probably wouldn't bat an eyelid. So it's definitely more socially acceptable, than having a hard drink of alcohol, but then I think people would be worried if I said I am going home to drink, if they saw me muttering round Waitrose with 15 bottles of whisky in my trolley (laughs) they would really be quite worried about me. They probably wouldn't say anything if I had 12 bottles of prosecco and wine in my trolley, they would just think that I was going to be having a party or have got friends coming or something. So I suppose yeah, I do think there is some, what's the word? Some sort of norms, acceptance of the type of alcohol you drink at home as well.

But as I get older who knows, maybe some of the, I don't know why I associate it with older people but I do, and even now, my older relatives and friends will sometimes, even at the end of an evening out, or even at the end of an evening at home, will actually say, have you got a Scotch, or whatever rather than, I am more, I tend to more than quite happy with a glass of prosecco or whatever, rather than a hard alcoholic drink.

Whisky & soda - Don't know
Glass of wine or prosecco is
not such a hard alcoholic drink.

Using it in a different way.
Different people.

Even have a glass of wine
wouldn't bat an eyelid.
Would be worried, if I said
I was going home to drink.

Some sort of norms -
acceptance of the alcohol you
drink at home.

hard drink &
Associate older people.

but this could be ok.

- would perhaps think I had
lost the plot.

Glass of wine or
prosecco is more
acceptable on you.

More socially acceptable,
particularly with media friends.

Going round Waitrose with
15 bottles of whisky would be
worried. If it was other
prosecco would be okay.

More than quite happy with
a glass of prosecco rather
than a hard alcoholic drink.

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Appendix 8: Supervisory Notes

PGR supervisory meeting			
<p>Held on 24 May, 2021 Venue: Microsoft Teams Attendees: LK, DH, & GC-W</p> <p>Progress since last meeting Progressing work on Literature Review. Have utilised table format to capture and describe pertinent literature. Three narratives have been sent to LK and DH for comment and review.</p>			
No.	Update/Action	By Whom	Timescale
1.	Literature Review – reading commenced using ‘A Post-graduate’s Guide to Doing Literature Review’ by Aveyard et al. as a reference point. To locate and read peer reviewed research that has utilised Bourdieu’s concepts within the study to support writing.	Gillian	Ongoing
2.	Focus of study now on reviewing narratives through Bourdieusian lens. Initial step to undertake this work using Wallis’ narrative To read <i>Distinction</i> and then refer to supportive works by other authors to aid this work.	Gillian	By next meeting
3.	Initial first analysis of Wallis, Abbie and Elaine completed. These have been sent to supervisors for comment. Further reading as outlined in 1. above will support the deeper analysis of these, and the remaining seven narratives going forwards.	Gillian	
3.	To continue immersion into Bourdieu	Gillian	Ongoing
4.	Date of next meeting agreed		Wednesday 30 June 12 noon -1pm UK time