

## **National Institute on Alcohol Abuse and Alcoholism: Retirement and Drinking Behavior**

*The purpose of an NIH-supported study is to examine four risk perspectives associated with the retirement process and the evaluation of their impact on drinking behavior in a cohort of retirement-eligible blue-collar workers employed in the construction, service, and manufacturing sectors.*

### **Lead Agency:**

National Institute on Alcohol Abuse and Alcoholism (NIAAA)/  
National Institutes of Health (NIH)

### **Agency Mission:**

NIAAA provides leadership in the national effort to reduce alcohol-related problems by:

- Conducting and supporting research in a wide range of scientific areas including genetics, neuroscience, epidemiology, health risks and benefits of alcohol consumption, prevention, and treatment;
- Coordinating and collaborating with other research institutes and Federal Programs on alcohol-related issues;
- Collaborating with international, national, state, and local institutions, organizations, agencies, and programs engaged in alcohol-related work;
- Translating and disseminating research findings to health care providers, researchers, policymakers, and the public.

### **Principal Investigator:**

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### **General Description:**

#### **Retirement and Drinking Behavior**

Although studies have shown that the prevalence of excessive alcohol consumption declines with age, a substantial proportion of older adults engage in consumption patterns that exceed the suggested guidelines of one drink per day for senior adults. In addition to the risk of adverse interactions with comorbidities and medications, changes in life course conditions are believed to contribute to increased risk for alcohol problems among older adults. These conditions may include retirement-related unstructured free time and availability of disposable income, gambling associated with binge drinking, or losses due to death of loved ones. Rates of problem drinking vary widely depending on methods and definitions of alcohol abuse and dependence.

A current longitudinal NIH-supported study aims to determine the impact of older blue-collar workers' transition to retirement on their post-retirement levels of alcohol consumption and associated alcohol-related problems. The focus of the research is to examine how four different risk perspectives (social isolation—depth and breadth of social support or lack thereof; social control—loss of or relief from work-based systems or rules governing drinking or permissive drinking norms; stress—e.g., financial, social role changes, marital strain; and social marginalization—e.g., lowered self efficacy, loss of self esteem) experienced over the course of retirement influence post-retirement drinking behavior.

***Excellence:*** What makes this project exceptional?

Results of cross-sectional as well as longitudinal studies have shown that older adults consistently consume less than younger age groups. However, there is a paucity of published data on long-term trends in alcohol consumption among older adults. For example, one study comparing survey responses from two large national surveys showed increased prevalence of alcohol abuse but not dependence among respondents over 65 years of age from 1992-2002. Another longitudinal study based on national survey data found that while alcohol consumption declined with age from 1975 to 1992, consumption declined more slowly among more recent birth cohorts. These results are suggestive of a potential shift in consumption patterns among older adults as birth cohorts continue to age. Thus, these data provide the basis for development of improved surveillance of consumption patterns through the latter part of the life course.

***Significance:*** How is this research relevant to older persons, populations and/or an aging society?

Population-level data show that about 48 percent of older men (age 65 or older) and 32 percent of older women drink. Most do so in moderation as defined by the US *Dietary Guidelines*. These studies have shown that only 10 percent of older men and 2.4 percent of older women are heavier drinkers. However, population-level data could obscure problem-drinking occurring in certain populations. Studies suggest that a significant proportion of "hidden" alcoholics may be age 60 or older. The diagnosis of alcohol abuse and dependence can be difficult in older people because its symptoms can be erroneously attributed to other age-related medical or psychiatric conditions (e.g. depression, insomnia, poor nutrition, and frequent falls) or to medication side-effects.

***Effectiveness:*** What is the impact and/or application of this research to older persons?

Reported rates of alcohol consumption range from as low as 4 percent among representative longitudinal samples to well over 50 percent among smaller targeted community samples of older at-risk drinkers (e.g., in primary care and hospitals, geriatric mental health clinics, nursing homes). The current study of older workers' transition into retirement found that a shift from full-time work to bridge employment and full retirement was associated with higher amounts of alcohol consumption per drinking occasion.

***Innovativeness:*** Why is this research exciting or newsworthy?

This research has the potential to provide timely information on important, emergent social factors that may increase the risk for alcohol problems in a growing understudied group during a critical period of life transition. This research expands beyond a more limited, short-term examination of retirement in prior studies to a broader view of retirement as a changing process. For example, the extent to which the drinking-retirement relation is altered by retirement status, occupation, gender, ethnicity, and time will be determined. Investigators are providing valuable information on the differential effects of retirement patterns (e.g., early vs. late; forced vs. voluntary; followed by full-, part-time or no additional employment) on drinking behavior. Results of the study will provide a better understanding of life course processes underlying the non-negligible rates of alcohol problems among older adults, due in part, to the stressor of retirement.