

**EXTREME DRINKING AMONG YOUNG ADULTS IN KELOWNA AND
VANCOUVER: AN ETHNOGRAPHIC INQUIRY**

by

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Abstract

This study presents an in-depth qualitative understanding of extreme drinking among young adults age 19-26 in Vancouver and Kelowna, BC and offers recommendations for harm prevention and reduction strategies. Extreme drinking is defined as the research participant's intentional consumption of alcohol with the explicit intent to achieve a subjective state of intense drunkenness or intoxication. I investigate young adults' conceptualizations of extreme drinking behaviours, their motivations for such behaviours and the cultural, economic, structural and political factors that influence the occurrence of extreme drinking. I identify issues harm prevention and reduction strategies should focus on. Methods include semi-structured interviews with self-identified current and former extreme drinkers and structured observations at licensed establishments in each city. I draw on personal experience, providing a component of autoethnography in my analysis.

Among extreme drinkers, the perceived positive outcomes of extreme drinking tend to outweigh the perceived negative ones. Alcohol functions as social lubricant, facilitator of sexual encounters and as a means of entertainment. Several study participants report using alcohol to decrease feelings of stress, anxiety or depression. Life problems related to securing financially and emotionally rewarding careers and actual or perceived barriers to mental health care are cited as motivations for extreme drinking. Alcohol consumption provides young adults a means of catharsis and release from negative emotions related to life problems. Extreme drinkers use black humour to cope with negative drinking outcomes and to justify continued extreme drinking.

Recommendations for harm reduction include implementing educational campaigns detailing particular health risks associated with extreme drinking and means for offsetting

risks, encouraging authority figures to promote the idea that it is safe and acceptable to seek medical attention when intoxicated, enforcing laws regulating the operations of drinking establishments, increasing traffic stops in suburban areas, implementing alcohol counseling hotlines and instituting cellphone charging areas or free public phones in drinking establishments. Recommendations for harm prevention include encouraging older adults to model moderate drinking behaviours, providing safe opportunities for young people to experiment with alcohol and fostering awareness of issues associated with youth sexuality, mental health, social skills development and transitioning from childhood to adulthood.

Preface

The structured ethnographic observations and semi-structured interviews conducted for this study were approved by The University of British Columbia (Okanagan) Behavioral Research Ethics Board. The approval certificate number is H14-00048. The research design, research project, data analysis and write up of results were carried out in their entirety by the author, Allison Sharkey.

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Dedication

I dedicate this dissertation to my research participants, without whom this project would not have been possible.

Chapter 1: Introduction

In this chapter, I provide an introduction to and summary of my research project. I begin by offering an overview of the topic of research and by defining key terms that are used throughout this dissertation. Then, I outline the research questions that my project is designed to answer and provide a brief description of the methods employed in the study.

Subsequently, I offer context for the project by presenting a summary of the relevant statistics concerning alcohol use and abuse in Canada and by situating my research within the cultural, political and economic climates of Kelowna and Vancouver, British Columbia (BC); the regions in which the study was undertaken. Finally, I present brief summaries of each of the chapters in this dissertation.

Summary of Topic and Research Questions

The purpose of this dissertation is to present an in-depth qualitative understanding of extreme drinking behaviours among young adults, age 19-26 in Vancouver and Kelowna and to provide data relevant for the development of culturally and contextually appropriate harm prevention and harm reduction strategies. Harm prevention strategies are approaches intended to delay or preclude the onset of alcohol use among people who have yet to begin using alcohol, to prevent risky drinking among people who use alcohol and to slow or stop the progression of risky drinking among people who engage in potentially problematic drinking patterns (Paglia and Room 1999:14). Harm reduction strategies, on the other hand, aim to limit the harmful outcomes of risky drinking without necessarily focusing on decreasing or eliminating the alcohol consumption itself (International Harm Reduction Association 2015).

Extreme drinking is a qualitative term that I use to refer to drinking behaviours that, in the quantitative literature, are often called *heavy* or *binge* drinking (Health Canada 2010; Martinic and Measham 2008a; Sheehan and Ridge 2001; Statistics Canada 2010c). The term *binge drinking* does not have a clear and consistent definition (Sheehan and Ridge 2001:348; Szmigin et al. 2008:359). While government agencies tend to give emphasis to quantity of alcohol consumed when assessing the riskiness of heavy alcohol consumption, studies show that young adults are inclined to assess their drinking behaviour in more qualitative terms (Measham 2004:316; Workman 2001:444). For example, young adults tend not to judge their drinking behaviour in terms of the number of beverages consumed but rather, by the subjective feeling of inebriation that is achieved by consuming those beverages (Workman 2001:444). Even when young adults do offer quantitative assessments of their drinking behaviour, the gap between medical and government recommendations for safe drinking and popular conceptions of a reasonable amount of alcohol to consume on one occasion, is vast (CCSA 2013; Sheehan and Ridge 2001:356-7; Workman 2001:444).

There are a number of problems with quantitative definitions of binge drinking. They fail to take into account the drinker's height, weight, age, drinking experience, tolerance, time period or the ultimate level of intoxication that the drinker achieves. The social and physical setting in which the drinking occurs, the process of drinking, the motivations behind drinking and the attitude towards intoxication held by either the drinker or those accompanying him or her are generally not considered. Furthermore, the definition of "a drink"—that is, what qualifies as one standard alcoholic beverage—varies across cultures and even subcultures (Martinic and Measham 2008a:6); a subculture being a group in society

that exhibits patterns of behaviour and social interaction that distinguish them as a distinct group within a dominant culture.

Martinic and Measham introduced the term *extreme drinking* as a more suitable replacement for the ambiguous *binge drinking* term (2008a:1). Extreme drinking refers to an individual's consumption of alcohol with the explicit intent of achieving a subjectively defined state of severe intoxication. Martinic and Measham identify five necessary components of extreme drinking: *intoxication, motivation, process, outcomes* and *alcohol experience*. The extreme drinker must achieve the subjective experience of *intoxication*. The *process* of achieving this intoxication must be viewed as enjoyable and be *motivated* by the desire to experience some loss of control. While the drinker attempts to minimize the negative *outcomes* associated with loss of control, it is acknowledged that their ability to do so is related to their *alcohol experience* or alcohol "maturity" (8-9). Despite drinkers' attempts to minimize negative outcomes, extreme drinking is often linked to risky behaviour and harmful consequences, including injury and death (Martinic and Measham 2008a:1).

Intoxication is required for the behaviour to be considered extreme drinking and complete loss of control due to severe intoxication occurs fairly regularly among extreme drinkers. However, it is important to note that the goal of extreme drinking is generally the achievement of a "controlled loss of control" (Measham 2002); that is, the extreme drinker desires to attain a level of intoxication that allows for the cathartic release that being "out of control" entails but also seeks to minimize the negative outcomes of this behaviour (2008a:8). I adopt Martinic and Measham's concept of extreme drinking for the purposes of this research project. Extreme drinking is defined herein as the research participant's

intentional consumption of alcohol with the explicit intent to achieve a subjective state of intense drunkenness or intoxication

Binge drinking has often been approached through the framework of addiction or dependency, especially its potential to lead to alcohol addiction problems later in life (e.g. Blane 1979; Schulenberg 1996; Zucker and Gomberg 1986). Bucholz and Robins (1999) and Singer (2012) have reviewed the extensive sociological and anthropological literature on alcohol problems and addiction. While it is possible that certain participants in this study may meet the criteria for a diagnosis of Alcohol Use Disorder (AUD) as per the DSM-5 (American Psychiatric Association 2013), this is not the focus of this study nor is it the perspective that I take. These drinkers do not self-identify as having an AUD or an addiction to alcohol and do not view their drinking as being in the same category as other sorts of addictive behaviours such as alcoholism. I am interested in extreme drinkers' self-definitions, subjective experiences and personal understandings of their drinking behaviours and thus do not make reference to potential medical diagnoses of these behaviours.

For the purposes of this study, I consider extreme drinking as a separate phenomenon from social drinking, given that extreme drinking is very much focused on the achievement of intoxication in ways that moderate social drinking is not. As such, my research focused on investigating a number of related issues or research questions. First, I sought to gather information regarding the ways that young adults conceptualize their own and others' extreme drinking behaviours. A primary focus is the meaning that they give to these behaviours. Second, I endeavoured to identify the motivations for extreme drinking behaviours and to understand how these motivations are related to the contexts in which they occur. My goal in doing so was to develop an explanatory framework for behaviours that

outsiders may view as entirely frivolous and destructive, but are, as I demonstrate in this dissertation, actually quite important and purposeful within their context.

The remaining two research questions that I set out to answer focused on gathering data that could be used to inform the creation and implementation of strategies and policies designed to reduce or prevent alcohol related harms among members of the population under study. I examined the cultural, economic, structural and political factors that encourage the occurrence of extreme drinking and, conversely, those that discourage it. I also sought to understand specific issues that harm prevention and harm reduction strategies should focus on and what the most culturally and contextually appropriate ways of implementing these strategies might be.

In order to collect data relevant to my research objectives, I engaged in semi-structured interviews with self-identified current and former extreme drinkers and conducted structured observations at premises licensed to serve alcohol in both my Kelowna and Vancouver research sites. I conducted preliminary research—a pilot study—during the summers of 2010 and 2011. I undertook the primary study from February 2014 to February 2015.

This study also contains elements of autoethnography, since I am what is referred to in the literature as an “insider ethnographer” (see Aguilar 1981), and I draw on my personal experiences as a member of the culture and subculture with which I worked. I have close ties to both of the communities where I conducted my research. I was born in Vancouver and attended secondary school in Kelowna. Upon graduation I spent two years living and studying at the University of British Columbia in Vancouver. I returned to Kelowna for the remaining years of my undergraduate degree and the majority of my graduate studies. I have

now moved back to the lower mainland and am living in the community where I spent my early childhood. I have maintained similar familial and social networks in Kelowna and Vancouver and I have worked and gone to school in both cities. Most importantly for this project, I have participated in and observed the extreme drinking subcultures in both cities as an insider and as a researcher. Thus, I have access to a great deal of ethnographic data regarding the kind of alcohol consumption that this study focuses on. I rely on my personal experiences within the extreme drinking subculture to inform certain aspects of my discussion and analysis.

My experience as an insider brought me to this research project. The leisure time of my adolescence and much of my young adulthood was spent at house parties, bars, pubs and clubs observing and participating in the consumption of alcohol for the express purpose of becoming inebriated. My time spent watching my peers engage in extreme drinking and observing the consequences of the behaviour took on a new importance as I studied anthropology. There were many aspects of the alcohol consumption that I observed and participated in that drew my attention. I took an interest in the courting behaviours associated with it, the implicit social rules that govern it and the inter-personal dynamics that it creates and sustains. What interested me the most was the fact that despite the rather serious consequences that many extreme drinkers faced—the devastation of relationships, loss of employment, legal troubles, injury and even death—people continued to drink alcohol. It became apparent to me that this behaviour was not all about the fleeting euphoria of intoxication and that the benefits extreme drinkers experienced were in many cases great enough to outweigh the potentially serious consequences. Extreme drinking is the cornerstone of a subculture; a subculture in which heavy drinking is not only condoned but is

also encouraged. My experience with this community demonstrated to me that extreme drinking behaviour is intertwined with many other aspects of society and is as deserving of ethnographic consideration as any other cultural phenomenon.

My status as an insider ethnographer calls for vigilance in practicing reflexivity on a consistent basis throughout my research. This is important for practical as well as theoretical reasons. For example, familiarity with the community of study can create problems with regard to the development of interview questions and it complicates the practice of probing during interviews (Aguilar 1981:21-22; Nukunya 1994:35; Simmons 2007:13). It is all too easy to overlook issues that seem trivial or transparent and to become desensitized to common-place occurrences (Aguilar 1981:15; Fainzang 1998:275; Godina 2003:479; Voloder 2008:29). It is my job, in approaching this topic as an anthropologist, to ask questions even when I think that I may already know the answer and to invite participants to challenge my pre-existing beliefs. Indeed, when reviewing the data that I collected during my pilot study, I identified several areas where my questioning could have been more thorough or where topics needed to be discussed and clarified but were not. Having the opportunity to conduct a pilot study assisted greatly in overcoming some of the challenges that working at home posed and allowed me to develop interview schedules that were more effective. Throughout this dissertation, I indicate when I am drawing from personal experience rather than from data gathered through traditional ethnographic methods. In the concluding chapter I discuss my insider status and autoethnographic contributions while considering the ways that my position may have influenced my research and analysis. Ultimately, I believe that my insider status and autoethnographic insights provide a more in-depth and nuanced understanding of the extreme drinking subculture that I studied.

Alcohol Use and Abuse in Canada

In Canada, alcohol abuse is considered a major health care problem that incurs substantial economic costs (Canadian Public Health Association 2011). Canadians aged 20-34 report engaging in *heavy drinking*—defined by Statistics Canada as consuming five or more alcoholic beverages at a time for men and four or more alcoholic beverages for women, at least once a month in the past year—more than any other age groups in Canada (2014d). Among Canadians 20 to 34 years of age, 40.9 per cent of males and 22.6 per cent of females report engaging in heavy drinking. These numbers are significantly higher than the overall national average; of all Canadians aged 12 and older, only 24.3 per cent of males and 10.7 per cent of females report engaging in heavy drinking (Statistics Canada 2014d). It is perhaps not surprising that 20.9 per cent of those aged 15 to 24 report experiencing at least one long term negative consequence due to their alcohol use, such as damage to social relationships, financial instability or legal problems, while only 15.2 per cent of Canadians 25 and older report such an experience (Health Canada 2010).

The Canadian Center on Substance Abuse (CCSA 2013) recently released Canada's Low Risk Alcohol Drinking Guidelines (LRDGs). These guidelines are an improvement upon Statistics Canada's standard definition of *binge drinking* (2014), which lacks context, specificity and is overly rigid in its characterization of problem drinking. The LRDGs suggest that women should only drink a maximum of ten standard drinks per week and no more than two drinks per day. Men are allotted a maximum of fifteen standard drinks per week and no more than three drinks per day. The guidelines also recommend planning non-drinking days every week in order to avoid habit formation. Special circumstances under which people may be reasonably expected to consume slightly more alcohol are taken into

account. On these special occasions, the daily allotment is increased by one standard drink. Circumstances under which no alcohol should be consumed are also considered. These circumstances include pregnancy, driving a vehicle or using machinery or tools, taking drugs that interact with alcohol, engaging in dangerous physical activities, living with mental or physical health problems including alcohol dependence, being responsible for the safety of others or being in the position of making important decisions. Importantly, the reality of teen drinking is addressed and ways to make teenage drinking safer are suggested, such as drinking under parental guidance. Health Canada now uses the LRDGs to assess drinking behaviours among Canadians. During 2008-2011, significantly more Canadians aged 15-24 exceeded LRDGs for acute (single occasion) alcohol use than those aged 25 and older (Health Canada 2012).

Research Locations

Kelowna is the largest city in the interior of British Columbia, with a population of 122,000 as of 2014. The median age of residents of Kelowna is 44.2 years (City of Kelowna 2014:3), which is higher than both the Provincial (41.9) and National (40.6) medians (City of Kelowna 2014:3; Statistics Canada 2015a). Kelowna has an exceptionally small visible minority population, with only 7.9 per cent of the population identifying as such. People of South Asian and Chinese descent make up the majority of the visible minority population (Statistics Canada 2014c). The majority of people living in Kelowna are married or living in a common law relationship (59.5 per cent). Single, never-married individuals make up 24 per cent of the population, the second largest grouping with regard to marital status (Statistics Canada 2015b). Kelowna is a relatively well educated population, with 65.8 per cent of the

total population aged 25 to 64 years holding a postsecondary certificate, diploma or degree (Statistics Canada 2014a). The majority of residents of Kelowna (52.7 per cent) identify as Christians (Statistics Canada 2014a).

Kelowna's economy is geared primarily towards tourism; the retail and service industries employ more people than any other industry in Kelowna (Statistics Canada 2014a). Most of the population of Kelowna is considered "working age" (20 to 64 years old); however, Kelowna is a popular retirement location and has a particularly high proportion of senior citizens (65+ years). In 2014, 19.9 per cent of the population was 65 or older and that proportion is expected to rise to 25.5 per cent by 2030, while the percentage of the population in the work force is expected to fall accordingly (City of Kelowna 2014:5). Kelowna has a median household income of \$60,360 and an unemployment rate of 6.4 per cent (3).

Vancouver is the largest city in British Columbia with a population of just over 600,000 (Statistics Canada 2014b). In this study, I include participants not only from Vancouver, but also the Greater Vancouver Area (GVA), as many individuals live outside the boundaries of the City of Vancouver but still work and spend much of their leisure time in Vancouver and consider themselves to be Vancouverites. As of 2011, the GVA had a population of 2,313,328 (Statistics Canada 2014b). The median age of the population of the GVA is 39.1; lower than the Provincial and National medians (Statistics Canada 2014b). The GVA has a remarkably large visible ethnic minority population in comparison to Kelowna, with 45.2 per cent of respondents to the 2011 Household Survey identifying as such (Statistics Canada 2014c). The largest visible minority groups are Chinese (411,470 individuals) and South Asian (252,405 individuals) (Statistics Canada 2014c). Fifty-seven per cent of the population of the GVA is either formally married or common-law married.

Thirty per cent is single and never married; the remainder are separated, divorced or widowed (Statistics Canada 2014b). The percentage of people in the GVA who have post-secondary certificates, diplomas or degrees (68.2) is slightly higher than that of Kelowna (Statistics Canada 2014c). The GVA is religiously diverse but the majority of people (41.7 per cent) identify as Christian. Nearly as many people (41.4 per cent) report no religious affiliation. The next most predominant religions are Sikhism (6.8 per cent) and Buddhism (3.4 per cent) (Statistics Canada 2014c).

The trade industry (electricians, plumbers, etc.) employs more people than any other industry in Vancouver. The health care, social assistance and professional, technical and scientific industries each employ a slightly smaller portion of Vancouver's workers (Statistics Canada 2014c). The population of Vancouver is somewhat younger than that of Kelowna. "Working age" Vancouverites—people age 15 to 64—make up 71.2 per cent of the population, while only 13.5 per cent are 65 or older (Statistics Canada 2014b). According to the 2011 National Household Survey (NHS), the median household income of the GVA is \$63,347 and the unemployment rate is 7.1 per cent (Statistics Canada 2014c).

I chose Kelowna and Vancouver as the locations for this study for a number of reasons. During the hot, dry summers, Kelowna plays host to numerous alcohol-oriented festivals and events. Although extreme drinking occurs year-round in Kelowna, it becomes particularly unbridled and visible during the summer months; so much so, in fact that Wakefest, an annual water sporting event, was banned by Kelowna City Council in 2007 due to the rowdy and disruptive behaviour of severely intoxicated individuals during the event (*Kelowna City Guide* 2008). That Kelowna has a reputation as a place where people engage

in precisely the kind of extreme drinking behaviours that I am interested in makes it an ideal location for this project.

I include Vancouver as a location of research in order to add a comparative aspect to the study. Data collected during my pilot study revealed that some young adults in Kelowna report engaging in extreme drinking behaviours simply because they feel as though there is nothing else to do. There is a sense that living in a relatively small city where many of the leisure activities available, such as boating, skiing and winery tours, are geared towards people with significantly more financial resources than most young adults have access to, puts these young adults in a situation where they feel their best option for affordable entertainment is alcohol consumption. I explore if and how the dynamic plays out differently in a large, metropolitan city like Vancouver. Conducting the study in two cities was also useful for gathering data regarding if and how motivations for extreme drinking behaviours and the behaviours themselves differ according to location. Although my study came to show that the extreme drinking subcultures of the two cities do not have many notable differences, there were some vicissitudes in attitudes towards extreme drinking that may be based in discrepancies in access to alternative means of entertainment. This phenomenon is discussed in the fifth chapter of this dissertation.

Chapter Summaries

In the second chapter of this dissertation I present a review of the anthropological literature on alcohol. First, I offer a chronological overview of key anthropological works on alcohol use. Then, I discuss several prominent themes in the literature, such as the notable contrast between the drinking patterns of people in Mediterranean Europe and northern Europe and

the effects of wage labour and the five-day working week on alcohol consumption. I also explore some of the theoretical debates regarding the anthropological study of alcohol.

The third chapter is an examination of theories of deviance. For the purposes of this project I define deviance as behaviour that is viewed as undesirable by society at large. I note that, in spite of its status as objectionable behaviour, this behaviour may be accepted and even encouraged by the subculture in which it occurs. Furthermore, it may be largely accepted by mainstream society as expected behaviour for members of said subculture. That is, though it is objectionable, it is not outside the realm of behaviour that can reasonably be expected for some members of society at a certain age. In this chapter I focus primarily on the theories of deviance developed by Emile Durkheim (1938; 1951) and Robert Merton (1938; 1959).

I discuss the methods employed in my study in chapter four. I explain the reasoning behind my selection of semi-structured interviews and structured observations for data collection and describe the specifics of how these methods were utilized to gather information relevant to the objectives of the study. I also describe the nature of my autoethnographic contributions to the project, focusing on the theoretical basis of auto- and insider-ethnography. Ultimately, I demonstrate that, in spite of varying criticisms, both auto- and insider-ethnography are valid ethnographic methods that offer unique and important perspectives on subjects of anthropological inquiry.

The fifth chapter of this dissertation focuses on the data collected during my semi-structured interviews with self-identified current and former extreme drinkers. Using this data, I provide answers to each of the research questions mentioned above. I also discuss

extreme drinkers' perceptions of people's culpability for behaviours that they engage in when drunk. I present auto-ethnographic and observational data as it relates to each topic.

In chapter six I describe the settings in which extreme drinking takes place. I utilize data gathered during semi-structured ethnographic observation in pubs, bars and clubs. I also present autoethnographic data regarding extreme drinking that I observed in private residences. I describe these drinking locations and discuss the particular kinds of alcohol consumption and related behaviours that occur in each setting. I focus particularly on the types of social interaction that take place in each setting and the risks that are present in each drinking scenario.

In chapter seven, I discuss the cultural context in which children, adolescents and young adults learn about alcohol and alcohol use. I explore the conflicting attitudes toward alcohol that are promoted when parents and other adults shield young people from moderate alcohol use and encourage abstention, while popular culture media promotes, glamourizes and sexualizes excessive alcohol consumption. I explain how this fosters an environment in which extreme drinking behaviours thrive.

A review of some of the relevant epidemiological and psychological studies on alcohol related harm prevention and harm reduction strategies is presented in chapter eight. These studies were selected because they provide quantifiable assessments of the outcomes of a large number and variety of harm prevention and reduction strategies. As such, they provide a general overview of what is and is not effective. Since the young adults in my study reported that the majority of their official education about safe alcohol use occurred in secondary school, I include studies on harm prevention and reduction strategies targeting adolescents, in addition to those that target older adults.

In the ninth chapter, I examine some of the themes revealed by my interviews and observations, and relate the findings to the theoretical underpinnings of the project. I discuss the use of alcohol as a socially condoned means of catharsis or “safety valve release” (Coser 1956), from societal pressures, its fundamental role in courtship rituals and its facilitation of the creation and maintenance of friend-groups. I then explore the use of “black humour” as a means of justifying and facilitating continued heavy alcohol consumption in spite of possible or actual negative consequences.

The tenth and final chapter of this dissertation offers a summary of findings followed by suggestions for harm prevention and harm reduction strategies aimed at young adults in British Columbia. The harm reduction strategies that I suggest concentrate on measures that can be taken to make the process of extreme drinking safer for drinkers and communities. The harm prevention strategies focus on shifting popular attitudes and cultural contexts in order to eliminate some of the factors that encourage the development of extreme drinking behaviours. I discuss the limitations of my study and, lastly, suggest future directions for research.

Chapter 2: Review of the Literature

This chapter offers an overview of the contributions that anthropology has made to the study and understanding of the use of alcohol in human societies. I present a chronological history of anthropology's involvement in alcohol studies, noting and discussing some of the most important works and debates. Next, I identify and elaborate upon some of the most common themes that appear in the literature, such as the disease concept of alcoholism (Hanson 1995; Heath 1987; Jellinek 1960), the northern European versus the Mediterranean pattern of drinking (Asmundsson 1995; Chrzan 2013; Cottino 1995; Gamella 1995; Heath 2000; Holt 2006a; Measham 2008; Nahoum-Grappe 1995, 2008; Nyberg and Allebeck 1995; Plant 1995; Schioler 1995) and the influence of industrialism and development of wage labour on the drinking practices of working class people (Asmundsson 1995; Gusfield 1987; Dunk 1991). Finally, I discuss the particular health risks associated with heavy drinking and extreme drinking (Heath 2000; Martinic and Measham 2008a)

Anthropology and Alcohol: A Chronological Review

Alcohol is by far the most commonly used psychoactive substance among humans. It is also the psychoactive substance with the longest history of use in human societies (Baer et al. 1997:75; Dietler 2006:229; Heath 2000). McGovern suggests that human experimentation with fermented beverages began 100,000 years ago in sub-Saharan Africa and hypothesizes that the first fermented beverages would likely have been made of figs, baobab fruit and sweet gourds (McGovern 2009:13-17). The earliest hard evidence of human alcohol use comes from Jiahu in China's Henan Province. Chemical analysis of pottery fragments shows that production of a fermented beverage composed of rice, honey and fruit took place as early

as 7000BC (McGovern et al. 2004:17593). Alcohol works on the brain by binding to acetylcholine, serotonin and GABA receptors, thus decreasing neuron activity and producing sedation (McGill 2015). Alcohol also stimulates release of dopamine (McGill 2015), a neurotransmitter that can create feelings of pleasure (Bressan and Crippa 2005:14). Alcohol is capable of producing feelings of relaxation and increased appetite (Heath 1995a:1), camaraderie and closeness (Gusfield 1987:79; Hanson 1995:300; Sheehan and Ridge 2001) and mood enhancement (Heath 2000:168-169). It is also a disinfectant (Chrzan 2013:25), a rich source of caloric energy and, depending on the form the alcoholic beverage takes, a source of essential vitamins and minerals that may not be otherwise present in sufficient amounts in a person's diet (Chrzan 2013:15; Measham 2008:17). A naturally occurring substance, alcohol can be readily manufactured with minimal labour in a short amount of time, using any of a vast array of organic matters that produce ethanol as they decay (Heath 1995a:1). For these reasons, among others, alcohol has been described as a gift to humankind (Bonner 2009:82) and, indeed, to living things in general, as humans are not the only animals who enjoy the benefits of the alcohol that fermentation produces (Dudley 2014:4-5; Siegel 1989). A study by Siegel and Brodie (1984) showed that elephants will self-administer alcohol to the point of intoxication. Many mammals, including chimpanzees, elephants (Dudley 2014:4), and tree shrews (Wiens et al. 2008) have been observed in the wild consuming fermented fruit that contains ethanol.

In spite of all of the ways that alcohol can benefit humankind, its intoxicating properties can also produce many negative outcomes for those imbibing. If consumed in large quantities, alcohol produces physical and mental impairment (Heath 2000:124). If large doses are taken chronically, long-term health problems—such as liver failure and stomach

cancer—can ensue (Health Canada 2014). If taken in a large enough dose in a short enough period of time, alcohol is a poison and its effects can be fatal (Martinic and Measham 2008a:3). As might be expected with a substance that has the potential to be so dangerous, alcohol use is, under almost all circumstances, regulated and rule-governed in human societies in a manner unlike any other beverage or foodstuff (Chrzan 2013:5-6; Heath 1973:43). Perhaps because of this cultural regulation, problem drinking—that is, drinking that causes harm to the drinker or those around her—is from a broad, cross-cultural perspective, quite rare (Douglas 1987:3). Alcohol production and use—particularly in Euro-Western societies—is intertwined with almost every other aspect of culture, including nutrition, health, social organization, religion, entertainment, leisure, economics, politics, interpersonal dynamics, sex, recreation and criminality (Chrzan 2013:26, 60; Dudley 2014:1; Heath 1987:109). The ability for alcohol to create a preponderance of both positive and negative outcomes for drinkers, its rule-oriented nature and its connections with so many aspects of culture, make it a topic that is particularly suited to anthropological inquiry.

It is surprising that, in spite of the long history of alcohol use within human societies and the widespread occurrence of this natural substance, systematic observations of human alcohol use only began about two hundred years ago and anthropological investigation, focused specifically on alcohol use, began as recently as the 1970s (Dietler 2006:230; Everett, Waddell, and Heath, eds. 1976; Madsen 1973; Marshall 1979; Pan 1975; Singer 2012:1748). As this review of the literature will demonstrate, although remarkable progress has been made since the 1970s, there are still many alcohol related issues that require anthropological investigation and the anthropology of alcohol still has much room for growth.

No social scientific studies of alcohol use have been identified prior to 1850. However, this time period is rich with what Heath calls “source material” (1973:46); that is, material which describes drinking patterns, behaviours and the rules governing such, throughout history (e.g. De Belmont 1840; Kant 1798; Wheeler 1839). Examples of such material include Wheeler’s work (1839), which documents alcohol use among Indigenous Australians and argues that the introduction of alcohol by colonists had a negative effect on the native inhabitants in New South Wales. Similarly, De Belmont (1840) recorded the negative impact that trade and use of alcohol had among the First Nations people of Quebec. From the mid to late 19th century, studies of alcohol use were largely characterized by “armchair scholarship;” that is, studies of patterns of alcohol use that entailed vast amounts of library research but virtually no fieldwork. Works from this period were anthropologically oriented, yet not strictly anthropological. It wasn’t until the early 20th century that studies based on firsthand observations of alcohol use in human societies began to appear (Heath 1973:48-49).

From 1935-1945, there was a momentous proliferation of literature on the use of alcohol in human societies (e.g. Bunzel 1940; Haggard and Jellinek 1942; Horton 1943; Strecker and Chambers 1938). This may in part be attributed to the repeal of prohibition in the United States in 1933 and the ensuing recognition that alcohol use could be treated as a topic of scientific study, as opposed to a moral problem (Heath 1973:50; 1987:100). Ruth Bunzel’s (1940) comparison of the drinking behaviours of the Chamula of Mexico and the Chichicastenango of Guatemala is commonly touted as the first truly anthropological study of alcohol use (Baer et al. 1997:78). One of the most important contributions that her

research made to the field of alcohol studies was to point out that culture not only influences drinking patterns but also the ways that people behave when intoxicated (Bunzel 1940).

The 1940s also saw the first major quantitative cross-cultural study of alcohol use. Horton's (1943) study utilizes data from the Human Relations Area Files to investigate hypotheses about the functions of and motivations for the use of alcohol in human societies (199). Horton's central hypothesis is that, in all societies, alcohol functions primarily as a means of anxiety reduction (223). Operating under the assumption that anxiety is a universal human experience and that levels of anxiety can be empirically measured by taking into account various anxiety-provoking conditions—for example, lack of food, the presence of warfare or the effects of colonization—Horton proposes that a statistical comparison of levels of anxiety and levels of alcohol use in various societies can prove or disprove his hypothesis. He also allows for the possibility that drinking alcohol can arouse counter-anxieties through the punishment of untoward behaviours that may occur when intoxicated. Therefore, he amends his hypothesis by stating that the strength of the drinking response will depend upon the relative strengths of the anxieties that supposedly encourage drinking, as compared to the anxieties caused by drinking and related behaviours. After conducting his statistical analysis, Horton concludes that his hypotheses are “tentatively” upheld (224-225).

While Horton's contribution to alcohol studies is important, his conclusions may appear somewhat questionable to contemporary anthropologists. In particular, his assumption that empirical and universal measures of anxiety can be isolated and statistically tested is untenable. What is considered anxiety-provoking to a member of one society may not be considered anxiety-provoking by individuals in another society. The validity of the data utilized in the study has also been questioned. Heath argues that the practical intricacies and

problems that accompany ethnographic data make statistical comparison of such data problematic (1973:100). Horton's conclusions should not be dismissed outright, but should certainly be approached with a critical perspective.

One of the most significant studies of the post-WWII period is Heath's (1958) study of the drinking patterns of the Camba of Bolivia. Heath repudiates Horton's (1943) claim that the primary function of alcohol consumption is, in all societies, its capacity to reduce anxiety. He does so by demonstrating that, among the Bolivian Camba, alcohol consumption functions as a force for social integration (Heath 1958). Heath's study also proves to be invaluable in demonstrating the ways that culture influences the behaviours that people engage in when under the influence of alcohol. Contrary to the common sense notion that alcohol has, in all people, a disinhibiting effect, the Camba exhibit no behaviours that could be interpreted as demonstrating a loss of inhibition, despite consuming remarkable amounts of very strong alcohol (MacAndrew and Edgerton 1969:21). Heath's (1958) paper makes apparent how greatly culture influences the experience of intoxication; a theme that is elaborated upon by MacAndrew and Edgerton (1969), as discussed below.

The 1960s saw the publication of a number of works which indicated a growing acceptance of the relevance of anthropological perspectives and methods to the field of alcohol studies (see Baer et al. 1997:82). Some of the more notable publications were Mandelbaum's (1965) *Alcohol and Culture*, a supplement to the Quarterly Journal of Studies on Alcohol devoted entirely to cross-cultural research on alcohol use by Child et al. (1965), and Popham and Yawney's (1966) extensive bibliography of studies on alcohol and culture. Perhaps the most important work published during this time period is MacAndrew and Edgerton's (1969) *Drunken Comportment*. Utilizing ethnographic data, this book

demonstrates persuasively what Ruth Bunzel's (1940) work had suggested so many years earlier; namely, that the ways people behave when intoxicated are dependent upon cultural context and are learned.

MacAndrew and Edgerton begin with the simple proposition that the behaviours and experiences that people in Euro-Western societies take for granted as being inevitably caused by alcohol are perhaps not so much a foregone conclusion as common-sense would have us believe (1969:4-12). It is widely accepted that, because of its potent psychoactive effects, alcohol impairs both sensorimotor skills and alters social behaviour when consumed. This idea is so deeply ingrained in the popular and scientific imaginary that it often goes unquestioned (4). The basic assumption underlying this common-sense understanding is that alcohol has, for all those who partake in it, a disinhibiting effect on the brain and thus allows people to engage in behaviours that they would not engage in if they were sober (10-11); although the mechanism by which alcohol supposedly does so is poorly understood (Källmén and Gustafson 1998). A 2007 psychological study showed that moderate alcohol consumption does indeed have a disinhibiting effect on higher cognitive processes and basic motor skills (Rose and Duka 2007). Exactly how disinhibition of cognitive processes and motor skills translates into changed behavior is unclear. Difficulties in controlling for variables and isolating cause and effect relationships have resulted in limited scientific interest in the mechanisms by which alcohol may or may not cause behavioural disinhibition (Källmén and Gustafson 1998:151). A meta-analysis of studies showed no clear mechanism by which alcohol causes behavioural disinhibition (Källmén and Gustafson 1998).

MacAndrew and Edgerton (1969) devote their book to debunking the myth that behavioural disinhibition and resulting behavioural "changes for the worse" are necessarily

caused by alcohol consumption (14-15), by providing various cross-cultural examples that demonstrate the wide array of behavioural changes—or lack thereof, as in the case of the Bolivian Camba—that may accompany the consumption of alcohol and the achievement of intoxication, many of these behavioural changes in no way being compatible with the theory of disinhibition (21, 36). In conclusion, the authors propose that it is not alcohol itself that dictates the behaviours people will engage in when intoxicated—aside from basic sensorimotor inhibition—but cultural ideas about how alcohol affects the people who consume it, what the consumption of alcohol means and what kinds of behaviours are to be expected when one consumes alcohol (89).

MacAndrew and Edgerton's (1969) explanation of the occurrence of disinhibited behaviour, when that behavior does arise, may be summarized as follows. The consumption of alcohol in many societies, particularly Euro-Western societies, creates what the authors call a "time out" from the everyday rules of social comportment (90). Drinking acts both as a symbol that indicates passage into time out and as a warning to bystanders that disinhibited behaviours are likely to occur (MacAndrew and Edgerton 1969:90; Gusfield 1987). In this way, the consumption of alcohol creates a socially sanctioned escape from many of the stresses and pressures of everyday life (MacAndrew and Edgerton 1969:90). However, it is made clear that in no case are all social rules discarded when intoxication occurs. Instead, the authors propose that there is a "within limits clause," meaning that, while intoxicated people may disregard some rules, there are still other rules that cannot be broken no matter how intoxicated a person is (90). MacAndrew and Edgerton indicate that people are aware, when drinking, of what the limits are and in almost all cases these limits are not breached (67). MacAndrew and Edgerton's study is a landmark contribution to the field of alcohol studies.

The assertion that drunken behaviour is far more culturally influenced than chemically induced played an invaluable role in the development of the anthropological study of alcohol from the 1960s onward.

During the 1970s, there was yet another expansion of the field of alcohol studies. The establishment in the United States of the National Institute on Alcohol Abuse and Alcoholism (NIAAA) provided greater funding and research opportunities for those in the field of alcohol studies (Heath 1987:104). The 1970s may be considered the decade during which the modern anthropological approach to alcohol studies emerged (Singer 2012:1748). Before the 1970s, most ethnographic studies of drinking behaviours were “incidental;” that is, they were the products of fieldwork that was initially focused on different topics (Dietler 2006:230; Heath 1973:42). Oftentimes, anthropological publications on alcohol emerged after a re-assessment of fieldwork notes brought to light the importance of alcohol use to the people under study (see Bunzel 1940; 1973). As a corollary of this, many anthropologists publishing studies of alcohol use were not familiar with the large, diffuse and cross-disciplinary literature on alcohol (Room 1984:173). During the 1970s, however, more ethnographic studies focusing specifically on alcohol use began to emerge and more of these studies were conducted by researchers who had gained familiarity with the literature on alcohol (Heath 1973:42).

Moving into the 1980s, anthropologists employed methods from fields such as history, sociology and semiotics when studying alcohol use, in addition to traditional anthropological methods (see Heath 1986; Hill 1984). The 1980s also saw an increased focus on the ways in which anthropologists portray alcohol use among the people they study and which aspects of alcohol use are emphasized. It is important to note that, up until at least the

1970s, anthropological publications on alcohol use had little impact on researchers in other disciplines or the public at large (Heath 1987:102). In 1984, Room suggested that social and medical problems associated with alcohol use were “systematically underestimated” by anthropologists (1984:169) as a possible explanation for the failure of those outside the discipline to take anthropological studies of alcohol seriously.

Room explains that he first became aware of the underestimation of alcohol related problems in the ethnographic literature by observing, at two conferences devoted to alcohol issues, that non-academics—for example, policy workers and the general public—viewed alcohol abuse as being far more problematic in the populations under discussion than did the anthropologists (169). The majority of Room’s argument is devoted to explaining why this problem deflation bias exists in the anthropological literature. He first argues that the ethnographic literature concerning alcohol has, for the most part, described alcohol use as ultimately functional for society at large. Room argues that an underestimation of the problematic aspects of alcohol consumption is unavoidable when employing a functionalist perspective, because functionalism assumes that if members of a society commonly engage in certain behaviour, that behaviour must have some sort of status-quo preserving function. According to Room, a functionalist perspective will attribute socially dysfunctional aspects of drinking to forces external to the society. Room notes that, although functionalism as an explicit theoretical framework has become rather out-dated within the discipline of anthropology, it continues to lurk, implicitly, in the background of many studies (1984:171).

Room also turns his attention to methodological issues that may predispose ethnographers to problem deflation bias. He notes that epidemiological studies tend to report far more alcohol related problems than do ethnographic studies. This, Room argues, is

because ethnographic methods are more suited to the study of the “everyday” and have difficulty picking up on rare or abnormal events. He asserts that epidemiological surveys, on the other hand, are more likely to detect problematic aspects of drinking behaviour. While Room concedes that some of the disparity in the results garnered by these two types of studies may be due to problem inflation in the epidemiological literature, he declares—without offering evidence—that it is largely the problem deflation in the ethnographic literature that is to blame for vicissitudes in results (172). He argues that ethnography and epidemiological survey methods, employed together, may offer a more accurate picture of the drinking behaviours of a given population (173).

Room also suggests that the problem deflation bias may be due to researchers’ membership in what he terms a “wet generation.” He argues that, post-prohibition in the United States, alcohol use came to be associated with well-educated, liberal, urban young adults—the “wet generation”—while abstaining from alcohol came to be associated with “rural conservative know-nothings;” the implication being that to express conservative attitudes about alcohol use was to open one’s self to criticism from academic colleagues (1984:173). According to Room, the tendency for academics to hold liberal attitudes about alcohol use persevered for at least 50 years and a tendency towards more conservative views of alcohol did not begin to appear until the mid-1980s, i.e., the time of Room’s writing (173). Associated with the wet generation’s liberal views on alcohol was the development of the sociocultural model of alcoholism. This model depicts alcohol use that conforms to the traditional norms of a society as unproblematic, while any patterns of alcohol related behaviour “imported” from sources external to the culture are automatically assumed to be problematic and socially dysfunctional (173).

The final facet of explanation that Room offers for the problem deflation bias is the possibility that the historical context of the fieldwork situation has influenced ethnographers to be reactive against depicting alcohol use in a negative light. In particular, he argues that the frequent tensions felt between missionaries and anthropologists in various fieldwork contexts have created a situation in which anthropologists attempt to explicitly set themselves apart from missionary workers. One of the ways they have done this, Room argues, is by expressing liberal attitudes towards alcohol use that are in stark contrast to those usually expressed by missionaries (1984:174-175). In conclusion, Room notes that at the time of his writing, trends in ethnographic literature concerning alcohol use in North America were beginning to lean toward problem amplification rather than problem deflation and he suggests that liberal attitudes towards drinking, so pervasive during the five or so decades prior to the writing of his paper, were on the wane (178).

Room's article was thoroughly criticized by a number of anthropologists. A special publication of the article in *Current Anthropology* includes several responses from other anthropologists in the field of alcohol studies. Bennett (1984:179), Sacket (1984:185) and Strug (1984:186) all point out a rather important hole in Room's argument; he simply asserts in the beginning that problem deflation exists, but does not offer any concrete evidence to back up this assertion. His only evidence for problem deflation is personal anecdote, which Bennett argues and I concur, is not sufficient (1984:179). Room's argument concerning why problem deflation occurs has little or no meaning if he has not demonstrated that such problem deflation does, in fact, exist. Room must offer clear examples of problem deflation from the outset if the remainder of his argument is to be taken seriously. A related issue, as indicated by Agar (1984), is the whole notion of problem deflation requires the

presupposition that problems can be objectively identified and the severity of such problems can be empirically measured. The concept of problem deflation assumes the existence of an objective point of reference from which inflation or deflation can occur (178). Room does not explicitly state where this point of reference lies. I am of the opinion that his inability to identify such an objective measure of problems is due to the fact that such a measure does not exist.

Also under attack are Room's claims about the implicit functionalism of much of the ethnographic literature on alcohol. Agar (1984) argues that ethnographies yield different results than epidemiological studies because they take into consideration the cultural context of phenomena and compare such phenomena across various cultures. The ethnographer demonstrates the ways that alcohol related behaviours are connected to other aspects of the culture in which they occur. As Agar states, "alcohol use is inevitably found to be a coherent social act, one that takes a variety of forms, usually *not* of the destructive sort" (178). In essence, he is arguing that anthropologists frequently present drinking behaviours as normal aspects of a functioning society not because of a functional bias but because, when understood within their cultural context, it is revealed that most drinking behaviours actually *are* integrated into—and are not detrimental to—society at large. Levy takes a different approach to the problem to argue that Room may simply be misinterpreting the employment of Durkheim's (1951) and Merton's (1938) theories of anomie as a functional bias (Levy 1984:182). Marshall (1984) asserts that Room is basing his accusations on ethnographic literature from before 1970 and points out that, the dominant theoretical frameworks in ethnographic studies of alcohol since the 1970s have not been functionalist at all; rather, they have been predominantly ecological, economic-materialist and phenomenological (184).

Room's (1984) argument, that the methods employed by ethnographers are more suited to gathering data about everyday drinking patterns than to gathering data about problematic or rare drinking patterns, has been critiqued enthusiastically. Room implies the fact that epidemiological studies tend to uncover far more problems associated with alcohol consumption than do ethnographic studies, indicates that epidemiologists are getting at the "truth," while anthropologists are not (178). Agar (1984) argues it is untenable to assume that focusing on rare events and having limited contact with vast numbers of people—as survey epidemiologists do—are the best methods for getting at the "real" problem (178). Negrete (1984) agrees, arguing that standard questionnaires are often too structured to create an accurate understanding of the situation and that the questions themselves may be irrelevant to the real issues at hand within the population under study (185). Bennett (1984) notes that participant observation carried out by ethnographers is the best and perhaps the only way that both positive and negative aspects of drinking within a population can be observed first hand (179). Baer and colleagues (1997:85) express a similar sentiment about the usefulness of ethnographic methods for developing an understanding of "socially hidden" behaviours.

Heath (1984) disagrees with Room's notion that ethnography is suited only for the study of the everyday, pointing out that many ethnographic studies focus explicitly on rare or problematic behaviours, such as incest. He further notes that epidemiological studies do not exclusively focus on rare events, citing such common epidemiological topics as coronary heart disease and cancer (181). Marshall (1984) suggests that it is perhaps not the methodology but rather the nature of the populations of anthropological concern that results in the discrepancy between epidemiological and ethnographic data. He points out that, for many of the populations anthropologists study, there is no reliable medical data to indicate

how severe alcohol related health problems are (184). Whatever the basis of the discrepancies between epidemiological and ethnographic studies, it is clear that the methods employed by ethnographers are not solely to blame. The issue is much more complex than Room presents it to be.

A final point of contention for commentators on Room's article is his characterization of ethnographers of alcohol use as members of a "wet generation." As Negrete (1984) indicates, Room's assertions about the "wet generation" are hypothetical; no concrete evidence is offered to back it up (185). Waddell (1984) is of the opinion that, while Room's assertions regarding the existence of a "wet generation" may be somewhat accurate in broad terms, this does not necessarily mean that the ethnographers of that generation uniformly held liberal attitudes toward alcohol (187). Agar (1984) points out that Room paints a picture of ethnographers as being "uniquely burdened with cultural baggage" (178). Heath (1984) seconds this motion, lamenting Room's failure to provide an explanation as to how epidemiologists and sociologists have not been affected by these same historical events that have supposedly created such a bias among ethnographers (181). Bennett (1984) argues that the historical events related to prohibition, which Room cites as the basis of the "wet generation" bias, actually occurred so long ago as to be of little importance to most contemporary ethnographers, noting that there is a range of attitudes towards alcohol present among contemporary ethnographers such that generalizations cannot be made (179).

While Room's article certainly raises some important points about the ways that anthropologists study and theorize about alcohol use, his lack of a sense of cultural relativity and his failure to provide sufficient evidence for his claims leave much to be desired. Heath (1984) points out that, problematically, Room's claim that ethnographers systematically

underestimate the problems that alcohol consumption causes is based on the inaccurate and ethnocentric assumption that heavy drinking and intoxication causes, in all contexts, problems for people and communities (181). Moskalewicz (1984) insists that the discrepancies between the severity of alcohol related problems as reported by epidemiological and ethnographic studies are due to differing conceptions of what a “problem” is. While epidemiologists study phenomena that they consider to be problematic, ethnographers are trained to describe phenomena as problematic when they are considered to be so by the population under study (184).

It is fair to argue that Room’s (1984) assessment that the anthropological tides were turning from a focus on moderate alcohol use to heavier and more problematic use proved somewhat accurate (Heath 1995c:351; e.g. Heather and Robertson 1989; Spicer 1997). In the mid-1990s, Heath suggested that there was too much focus on the drinking patterns of the minority of “problem” drinkers to the detriment of the recognition and investigation of the moderate patterns of drinking of the majority (1995c; 2000:7). To counteract this trend, Heath’s (1995) cross-cultural collection on drinking patterns focused predominantly on drinking behaviours considered normal within their context.

Hall and Hunter (1995) describe alcohol consumption in Australia, which entails a pattern of heavy periodic drinking in rural areas and moderate but more frequent drinking in urban centers (14). Cheung and Erikson (1995) present a broad overview of alcohol use in Canada, noting that alcohol use is generally more prevalent in the western provinces (23-24). Cardenas (1995) indicates that, among Chileans, there is a “national subculture of excessive intake,” and no correlation between knowledge of the possible negative outcomes of alcohol consumption and patterns of alcohol use (37). Schioler (1995) describes the Danish

government's permissiveness towards alcohol consumption, which is accompanied by readily available assistance for those with alcohol related problems (61), noting that alcohol abuse is extremely rare in Denmark (55). In France, processes of globalization are resulting in the traditional pattern of frequent, moderate consumption of alcohol with meals slowly being replaced by heavy drinking with the intent of becoming intoxicated (Nahoum-Grappe 1995:84). Similar trends are present in Italy (Cottino 1995) and Spain (Gamella 1995). Vogt discusses the permissive attitudes towards heavy alcohol consumption and intoxication, which have been present in Germany throughout history and endure in the present (1995:92). Icelandic society displays a pattern of alcohol consumption wherein alcohol is abstained from during the work week and then consumed in excess on weekends and holidays (Asmundsson 1995:120). This pattern is also present in Sweden (Nyberg and Allebeck 1995) and the United Kingdom (Plant 1995).

From the late 20th century on, studies of alcohol use have been breaking ground in a number of areas. In particular, ethnographers of alcohol have begun to devote more time and resources to investigating the drinking patterns and behaviours of adolescents and young adults in Western societies, such as Canada (Cheung and Erikson 1995), the UK (Jackson and Tinkler 2007; Measham 2008), the United States (Workman 2001), Australia (Sheehan and Ridge 2001), and France (Choquet 2008; Nahoum-Grappe 2008). Much attention is being focused on the phenomenon of extreme drinking; that is, the periodic consumption of large quantities of alcohol with the explicit intent of achieving—and the subsequent achievement of—a state of severe intoxication (Martinic and Measham 2008a:1-2). This is a pattern of drinking seen most often among youth in Western Europe and North America

(Martinic and Measham 2008a:1-2), although it is certainly present elsewhere (Gorgulho and Da Ros 2008; Koshinka 2008; Leigh and Lee 2008; March 2008).

Nahoum-Grappe (2008) employs examples from the ethnographic literature on the extreme drinking practices of youth in France and argues that a key motivation for these behaviours is the achievement of a “radical break” from the everyday (45). Brown and Gregg (2012) discuss the ways that the sharing of information and photographs on Facebook prolongs and enhances the excitement and positive feelings associated with heavy alcohol consumption among young women. Choquet’s (2008) case study of alcohol consumption in France provides an explanation for the lower rates of extreme drinking among French youth, in comparison to young people in other European countries, by describing cultural norms and informal controls that make such drinking patterns less likely. Gorgulho and Tamendarova (2008) review and assess a variety of interventions that have been employed in Western societies—primarily in educational, employment and community settings—with the hope of decreasing the frequency and severity of extreme drinking among youth. Dudley (2014) provides an evolutionary explanation for alcohol use and abuse, explaining that alcohol is a rich source of calories and attraction to it may have increased our ancestors’ evolutionary fitness. Measham (2008) puts current drinking patterns in the UK into historical context, examining the evolution of alcohol use through industrialization and the development of wage labour (17-19), to its present use by young people as a leisure time activity (26-30). Jackson and Tinkler (2007) explore the phenomenon of extreme drinking among young women in the UK, discussing the continuities and vicissitudes in the way that this behaviour has been judged by the general public from the 1920s through the early 2000s. They argue that, aside from concerns with health and social disorder (258-261), the culture of heavy

drinking is contrary to the expected behaviours of women and this is the primary issue underlying the ongoing criticism of women who binge drink (261-264). Workman (2001) conducts a narrative analysis of fraternity drinking stories and demonstrates that heavy drinking, regardless of its outcome, is viewed by fraternity members as a positive and worthwhile activity. Sheehan and Ridge (2001) examine binge drinking among female secondary school students in Australia, arguing that it plays an important role in social cohesion.

Despite this increased focus by qualitative researchers on the drinking patterns of young people, the vast majority of studies on the problematic drinking behaviours of young adults have been quantitative in nature (Martinic and Measham 2008a; Sheehan and Ridge 2001:349). More qualitative, anthropological studies are still required in order to understand the meanings and motivations behind the phenomena of extreme drinking.

Themes

A review of the literature reveals a number of themes or topics that appear in several works or hold great importance for situating oneself within the anthropology of alcohol. In the following section, I discuss some of the most prominent themes that I have identified through my review.

The Disease Concept of Alcoholism

Most people who drink, in most societies throughout the world, drink moderately and in a manner that is not harmful to themselves or those around them (Douglas 1987:3). However, even when it is generally agreed upon that a certain type of alcohol use is problematic,

alcohol researchers continue to struggle, as they have for decades, with defining the problem itself and identifying what it means to have that problem. Douglas asks:

What is meant by ‘problem drinking’? How severe must a problem be before it gets counted into the statistics? What is meant by ‘alcoholism’ or, by ‘alcohol related troubles?’ Are we to take the native view of troubles? In which case the incidence of drinking trouble is likely to be assessed by natives as lower in a heavy-drinking culture than by the medical sociologists (1987:4).

The issue of what does and does not constitute a drinking “problem” has been a topic of debate within medical anthropology for some time (Kleinman 1987). A large portion of the research conducted on alcohol related patterns of behaviour has focused on alcoholism (Heath 1987:114). Thus, whether or not alcoholism is a disease and, if so, how this disease should be defined has been a major point of contention among those involved in the field of alcohol studies.

For thousands of years, the majority of societies categorized alcohol as a food product, not a drug (Chrzan 2013:6-7). Even the Puritans—who are considered by many to be paragons of abstinence—viewed fermented beverages, like ale and cider, in a largely positive light and valued them, as they contained much-needed calories and were generally safer to drink than water (59, 62). However, with the development and increase in distribution of distilled alcohol between the 17th and 19th centuries, popular attitudes towards alcohol use began to change (Chrzan 2013:60; Measham 2008). The rapid and severe intoxication that distilled alcohol is capable of creating was judged by many to be problematic (Chrzan 2013:64). Among the Puritan colonies, in what is now the United States, alcohol lost its status as foodstuff and became categorized as a drug; a dangerous one at that (60).

The notion that alcohol abuse may be a disease first emerged among physicians in the United States during the 1830s (Jellinek 1960). While discussions of intoxication did not explicitly centre on its status as a disease, there was recognition among health care practitioners that special institutions were required for people who engaged in deviant forms of drinking, as these behaviours could neither be classified as definitively criminal nor as necessarily having to do with mental disorders (1). In 1872, a number of directors and owners of hospitals and homes designed for the treatment of heavy drinkers came together to create The American Medical Association for the Study of Inebriety and Narcotics (hereafter AMASIN). This society was devoted to the study of inebriety and began publishing *The Journal of Inebriety* in 1876. Although AMASIN published over 700 articles espousing the disease concept of alcohol abuse over the course of 38 years, the society and its journal had little impact on public opinions of drunkenness (Jellinek 1960:2-4). By and large, intoxication was seen as a moral and, perhaps, criminal problem and it was considered a social issue rather than an individual one (Chrzan 2013:71-75).

The Journal of Inebriety was last published in 1913 (Jellinek 1960:4), as campaigns for the prohibition of alcohol gained momentum (Chrzan 2013:71-80). Societal concerns about alcohol use in the United States reached their climax in 1919, with the passing of the 18th amendment, which legally restricted alcohol production, sale and use. Nevertheless, prohibition was a short-lived and unmitigated failure. The law was repealed in 1933 when it became clear that the restrictions on alcohol had done little but worsen the situation. Prohibition had inspired unregulated alcohol production and use and encouraged the growth of organized crime (79-80).

It wasn't until the repeal of prohibition that the scientific study of inebriety, by this time commonly referred to as alcoholism, recommenced (Jellinek 1960:4). This time around, the notion that alcoholism may be classified as a disease was accepted not only by the scientific community but also by the public at large. Writing in 1960, Jellinek problematizes the disease concept of alcoholism, refuting the notion that biomedical illness categories correspond to an objective reality. He argues that, within the biomedical context, "a disease is what the medical profession recognizes as such" and that, through the medical profession's acceptance of alcoholism as an illness, it becomes an illness (12).

Jellinek's paper represents an important early example of the recognition that biomedical disease categories are as much cultural constructs as are the disease categories of any other culture. However, it is problematic that Jellinek uses the terms "disease" and "illness" interchangeably throughout his discussion. Contemporary medical anthropologists acknowledge that "disease" and "illness" are two distinct concepts; a disease being a set of material processes which are directly observable and empirically quantifiable; and, an illness being the subjective experience of a disease (Obeyesekere 1985:135-136). Herein lies one of the most pivotal problems with attempting to define alcoholism as a disease. The biomedical system does not have a clear definition of alcoholism whereby quantifiable empirical observations can be made about its presence or absence in an individual (Chrisman 1985:14). Debates continue about the role and relative importance of genetic, psychological, social and cultural factors. As Chrisman notes, "in the absence of a consistent biomedical explanatory model, the broader cultural meanings of everyday life continue to play a strong role in popular conceptions of [alcoholism]" (1985:15). Thus, the distinctive symptoms of the disease, as identified by biomedicine, such as drinking alone, drinking rapidly or "gulping"

drinks, feelings of guilt associated with drinking and “loss of control” are far too subjective to lend themselves to a rigid definition (Jellinek 1960:12; Room 1984:175). Furthermore, such descriptions of symptoms are too steeped in Euro-Western cultural assumptions to have cross-cultural validity. For example, while the loss of the ability to control oneself may be viewed by Euro-Western society as problematic, this is not necessarily true of other cultures (Room 1984:176). Additionally, Euro-Western conceptions of emotions like “guilt” may not translate cross-culturally or be relevant at all in another society.

While the disease concept of alcoholism played an important role in the past by decreasing the stigma associated with problematic drinking and presenting it as a medical problem rather than a moral one (Chrisman 1985:17; Room 1984:175), most contemporary anthropologists have rejected the disease model for its lack of cross-cultural validity (Baer et al. 1997:82). As Room points out (1984:182), the diagnostic criteria mostly refer to learned behaviours, not biological processes. Even within the biomedical community, there is a growing recognition that a sociocultural model of alcoholism needs to be taken at least somewhat into account (Heath 1987:104). Within a sociocultural model, drinking behaviours are not considered to be random, but are seen as occurring within culturally prescribed patterns that render these behaviours meaningful (Baer et al. 1997:81). The sociocultural model also posits that the ways people behave when under the influence of alcohol are fundamentally shaped by the culture of which they are a member and the model acknowledges the various social functions that drunkenness may serve, such as creating in-group bonding and social cohesion (Baer et al. 1997:81-82). Many anthropologists stress that drinking and intoxication, even when they appear to an individual from Euro-Western society

to be excessive, may have significant positive effects; particularly their ability to function as a force for social integration (82).

Drinking Patterns in Mediterranean Europe and Northern Europe

A cross-cultural review of the literature reveals that there are distinct patterns of alcohol consumption that characterize the northern regions and the Mediterranean region of Europe (Chrzan 2013:39-41; Asmundsson 1995:121; Heath 2000; Schioler 1995:55). The drinking patterns of people who live in countries in northern Europe that have been heavily influenced by Protestantism, such as Sweden (Nyberg and Allebeck 1995:280), Denmark (Schioler 1995), the United Kingdom (Chrzan 2013:39-41; Plant 1995:289) and Iceland (Asmundsson 1995), tend to be characterized by periods of almost total abstinence followed by periods of heavy “drinking to get drunk.” For example, drinkers may abstain completely during the work week and drink heavily on weekends (Asmundsson 1995:120-121; Martinic 2008; Nyberg and Allebeck 1995:280; Schioler 1995:55). In contrast, inhabitants of countries in the Mediterranean region of Europe, like France (Nahoum-Grappe 2008; 1995), Spain (Gamella 1995) and Italy (Cottino 1995), exhibit much more steady, throughout-the-day drinking. In these countries, alcohol has traditionally been consumed in smaller amounts on a daily basis, slowly, with meals and with little or no intoxication (Heath 2000:121). Interestingly, while the Mediterranean countries generally have considerably higher per-capita alcohol consumption than most northern countries, problem drinking—drinking that results in negative outcomes for drinkers or people who come into contact with drinkers—tends to be less common in the Mediterranean region of Europe (Assmundson 1995:120; Heath 1995b:336; Plant 1995:289).

Several alcohol researchers suggest that these contrasting patterns may stem from the contrasting views of alcohol taken by the Catholic Church and the Protestant Church (Chrzan 2013:39-41; de Garine 2001:8; Holt 2006a; Measham 2008:15; Plant 1995). Catholicism is notoriously permissive towards alcohol consumption (see Holt 2006a), as reflected in the relatively quotidian treatment of alcohol in predominantly Catholic countries such as France, Spain and Italy (de Garine 2001:8). The Protestant ethos of asceticism, which is notably present in many northern European countries, on the other hand, holds the hedonistic pursuit of intoxication to be sinful (Asmundsson 1995:121). Although alcohol consumption does, indeed, take place in these Protestant countries, it is undertaken most often under the cover of night, away from the home and is surrounded with an air of shame and guilt. This likely perpetuates cycles of abstention and heavy indulgence (Asmundsson 1995:121). Whereas in the Mediterranean regions, alcohol has traditionally been seen as a food item with much social importance and few associated risks (Cottino 1995; Gamella 1995:257-258; Nahoum-Grappe 1995:80), in northern European countries, alcohol may be viewed predominantly as a means of achieving a state of intoxication, which is simultaneously desirable, shameful and risky (Assmundson 1995:120).

While Canada and the United States exhibit certain differences in drinking patterns, it is fair to conclude that both countries follow the northern European drinking pattern much more closely than the Mediterranean pattern. This is not surprising, considering the considerable Protestant influence in both countries (Cheung and Erikson 1995:20-21; Chrzan 2013; Hanson 1995). Alcohol is viewed and treated as distinct from other foodstuffs, age-related drinking regulations are strictly enforced and, for many people—especially young people—alcohol is surrounded with a mystique of inaccessibility (Chrzan 2013:39-41, 81-

105; Heath 2000:197). Day-time drinking is, for the most part, frowned upon and seen as being a possible indicator of a drinking problem. In contrast to the permissiveness in Mediterranean countries (see Nahoum-Grappe 2008), drinking while at work in Canada or the United States is considered to be inappropriate and, in many cases, grounds for termination of employment.

This cross-cultural comparison can inform us about harm reduction and prevention strategies. In general, the approach has been to restrict access to alcohol with the assumption that the harder it is to acquire alcohol, the less alcohol people will drink (Heath 1995c:358). Studies have shown that restricting access to alcohol by limiting hours of sale and increasing cost are somewhat effective in decreasing alcohol consumption and alcohol related harms (Campbell et al. 2009; Elder et al. 2010; Hahn et al. 2010; Middleton et al. 2010). However, we must acknowledge how powerful cultural attitudes are, considering that Protestant-influenced countries with strict laws and regulations related to alcohol purchase and consumption—such as the United Kingdom, the United States, Canada, Iceland, Sweden and Denmark—still have more problems with excessive drinking than do countries in which rules and regulations related to alcohol are less severe and less strictly enforced, such as Spain, Italy and France (Chrzan 2013:81-105; Gamella 1995; Hall and Hunter 1995:15-16; Heath 1995b:343). Furthermore, it has been clearly demonstrated that levels of per-capita consumption do not correspond with levels of problem drinking (Heath 1995c:358). Thus, it is likely that laws and regulations on alcohol purchase and use, while being somewhat effective, are only treating symptoms of larger cultural problems rather than dealing with the problems themselves.

This cross-cultural comparison suggests that restricting access to alcohol, treating alcohol like a “special” substance and hedging its use with shame and guilt, does little to curtail problem drinking; instead, these approaches give alcohol a mystique of inaccessibility which may make overindulging seem even more attractive (Asmundsson 1995:120-122; Hall and Hunter 1995:15-16). On the other hand, culture areas in which alcohol use is regarded as an unremarkable, everyday occurrence that is deeply invested with positive social meaning and values—places where alcohol is regarded as a food item and valued for reasons other than its intoxicating effect—seem to produce populations that are relatively immune to drinking problems (Hanson 1995:311-312; Heath 2000).

Understandings of the ways in which larger cultural contexts influence drinking behaviours have the potential to contribute greatly to harm prevention and reduction strategies. As Heath argues;

Addressing attitudes and values is probably the most effective way, in the long run, to change patterns of belief and behaviour, because even the strictest nation-state is hard put to enforce its laws and regulations when they conflict with the culture of the people (1995c:358-359).

It is important to note, however, that with the forces of globalization, the popular drinking patterns of Mediterranean countries underwent changes (Heath 2000:111). Particularly in urban centers, accompanying industrialization there has been a move away from traditional moderate drinking practices toward drinking for the psychoactive effects. This change in drinking patterns is especially apparent among young people (Gamella 1995: 255-258; Nahoum-Grappe 1995:84; 2008). Family-oriented sit-down meals, especially the large midday meal, are becoming less common and the cultural ideals that tie alcohol consumption to these occasions of food consumption are becoming weaker (Nahoum-Grappe 1995:80;

2008). In the following section, I discuss some of the specific ways that the particular conditions of the modern wage-labour work week have shaped drinking practices.

Wage Labour and the Work Week: Influence on Drinking Patterns

Several authors have commented on the ways that industrialization, capitalism and the move towards wage labour and the strictly delineated working week have influenced patterns of alcohol consumption among working class people (Asmundsson 1995; Chrzan 2013:82-83; Dunk 1991; Gusfield 1987; Measham 2008:15). The general argument can be summarized as follows: Because alcohol is strictly contraband in most work settings in industrialized countries, alcohol and drinking become more of an intense focus for wage workers during leisure time on evenings, weekends and holidays. My research suggests that this arrangement creates a situation in which people are more likely to drink more and to drink faster because the time during which they are allowed to consume alcohol is strictly delineated and limited by their employers' schedules. This creates a feeling of being rushed through drinking sessions, and needing to 'get it all in' while they can.

As Gusfield notes, although in most societies "play time" and "work time" are distinguished from one another to some extent, leisure "as a definite bounded part of time" is a distinctive characteristic of industrial and post-industrial societies (1987:73). Heath refers to "despair drinking," situations of heavy drinking motivated primarily by the desire for intoxication in circumstances of domination. "Despair drinking" often takes place in situations where "the social hierarchy tends to be rigid and those who are dominated tend to be resentful or otherwise stressed by pressures that derive from social and cultural conflict" (2000:184). Although Heath does not explicitly cite worker-employer relationships as one of

these circumstances of domination, it is possible to see how his description of despair drinking could be applicable.

Dunk (1991) explores this phenomenon in some depth in his ethnography of working-class men in Northern Ontario. Dunk describes the drinking patterns of ‘the Boys,’ a group of young working-class men with whom he conducted participant observation. In particular, he describes their drinking as it is related to their extracurricular sporting pursuits. The drinking sessions that occur in relation to lob-ball (soft ball or slow pitch) games are depicted as offering a polar opposite to the strict work environment of wage labour and described as a sort of modern carnival (86). He notes that, during these drinking occasions, “excessive consumption leads to excessive release—vomiting, farting, belching—all of which is turned into a joke. The emphasis on release contrasts with the emphasis on self-control in middle-class culture [the culture of their employers]” (Dunk 1991:93).

These drinking sessions are similar to carnival, Dunk argues, in that they create a space for themes of cultural resistance, while at the same time being acceptable according to hegemonic ideals as an expected part of working-class culture (1991:86). The drinking sessions are like carnival in that they are “time outs” during which usual social norms are relaxed and the Boys can behave in ways that are directly contradictory to what the ruling class would normally expect from them. These drinking rituals are all about contrasts to the work environment: group activity as opposed to individuation, interpersonal relationships as opposed to relationships shaped by larger economic forces and generalized reciprocity as opposed to formal market exchange (94). Though they do not engender real social change, these drinking sessions create a temporary escape for “the Boys” from the confines of wage

labour in which they have been trapped for most of their lives, and most likely will be for the foreseeable future (86, 94).

Heavy Drinking and Extreme Drinking: What are the Risks?

Although much of what a person with a Euro-Western bias might view as problem drinking is considered perfectly acceptable and non-problematic in other societies, it is undeniable that certain kinds of drinking are risky for the drinker and the people with whom the drinker comes into contact when intoxicated. As Heath notes,

there is a widespread agreement among many scientists and researchers that the threshold to risky drinking—that which puts an individual at increased risk for harm, whether from an accident, from long-term damage to any of a number of internal organs or from damaged social relationships at work or school, with friends or family, with police or others—is lower than many laypersons believe (2000:123).

There certainly seems to be a disconnect between institutionalized definitions of problematic drinking and popular conceptions of the same.

The CCSA's LRDGs (2013) suggest determining and setting limits for one's drinking, consuming no more than two drinks every three hours, eating before and while drinking, and considering individual factors such as age and body weight that may influence alcohol tolerance (2013:1). Women are advised to drink no more than two drinks per day or 10 drinks per week, while men are encouraged to limit their consumption to three drinks per day, or 15 drinks per week. Men and women are advised to plan drink-free days every week in order to avoid habit formation (2). The CCSA also takes into consideration situations in which these guidelines may be flexible as, for example, on special occasions. These guidelines go a long way in terms of acknowledging the many factors that are at play when considering how much alcohol can be considered safe. Still, Health Canada estimates that

four to five million Canadians engage in high risk drinking; that is, alcohol consumption that does not conform to these low-risk guidelines (2014).

The dangers of chronic heavy drinking are much more certain than dangers associated with periodic heavy drinking or extreme drinking. Chronic, daily alcohol abuse has been proven to cause many serious and, sometimes fatal health problems, including cirrhosis of the liver and cancer (Bonner 2009:88; Health Canada 2014). The health effects of occasional—for example, weekly or bi-weekly—very heavy alcohol consumption are somewhat less clear. The human body is very efficient at metabolizing alcohol; converting it to carbon dioxide and water at a rate of about one “standard drink” (about 1 oz. of distilled liquor, 12 oz. of beer or 4 oz. of wine) per hour (Heath 2000:123). People who engage in extreme drinking consume considerably more than one drink per hour. This results in the rising blood alcohol content (BAC) which produces the psychosomatic effects of alcohol consumption (Martinic and Measham 2008a:3). The danger here lies in the “unusual” nature of alcohol, which is that “the limit of behavioural tolerance so closely approaches a lethal dose” (Heath 2000:125). Essentially, once an individual begins displaying troubling symptoms, such as vomiting or loss of consciousness, their BAC may already be close to or at the potentially lethal 4.0 mg/ml level (Martinic and Measham 2008a:3).

Perhaps the greatest risk of extreme drinking is that indications something is seriously wrong may appear too late for aid to be administered. While most extreme drinkers, most of the time, emerge from their drinking sessions unscathed, alcohol poisoning is a very real and very present threat when drinking alcohol in such volumes (Martinic and Measham 2008a:1). There is also the risk of bodily harm presented by the loss of coordination and judgement that

severe intoxication entails, the risk of automobile accidents, and the possibility of engaging in risky or unwanted sexual encounters (Martinic and Measham 2008b:83).

Alcohol abuse is an important subject for anthropological study for a number of reasons, including the severity of the problems that it can cause and the unique insight that anthropology can offer into the meanings and motivations of this type of behaviour, thus offering a basis for the development of culturally and contextually appropriate harm reduction and prevention strategies. The distinctive cross-cultural understanding that anthropology offers is tremendously important in the quest to understand problematic drinking practices.

Discussion

In this chapter, I provided an overview of the contributions that anthropology has made to the study of alcohol use in human societies, focusing on some of the landmark works and prominent themes in the literature. Although there is much to discuss, the qualitative literature in general and anthropological literature in particular on alcohol use is still quite sparse when compared to other topics. Qualitative research can make important contributions to our understanding of alcohol use in human societies. Although qualitative data is often subject to accusations of imprecision and unreliability, one must wonder just how accurate the quantitative data concerning alcohol use is, when, in the United States, the most well-documented country in terms of alcohol use, the sum of self-reported alcohol use adds up, at most, to 60 per cent of the alcohol sold in the country in any given year (Heath 2000:36). The benefit of qualitative investigation is that it gives context to these numbers. Qualitative inquiry—and the cornerstone of anthropological research, participant observation—allow

investigators to ask questions and observe behaviours, to probe when responses seem incongruous or unclear and to answer questions about meaning and motivation that quantitative investigations cannot.

Since extreme drinking is a subcultural phenomenon that is not explicitly condoned by mainstream society, it is useful for theoretical purposes to consider it as a form of deviant behavior. In the following chapter, I discuss prominent theoretical frameworks for understanding the nature and processes of deviant behaviours and consider their suitability for understanding the qualitative data gathered in this study.

Chapter 3: Theories of Deviance

In this chapter I discuss classic sociological and anthropological theories of deviance—primarily those of Durkheim (1938, 1951) and Merton (1938)—that inform aspects of my research questions, my formulation of the subject of research as a subculture of deviant behaviour and my analysis of the data. Theorists generally acknowledge that deviance is a prerequisite aspect of any society such that, without it, there would be no standard against which to measure normality (see Douglas 1975:15; Durkheim 1938:67-69; Erikson 1967:13-15). As such, my analysis of extreme drinking behaviour is not in any way intended as a moral assessment, though the term “deviance” carries connotations of negativity in every-day usage. My usage of the term here is meant to indicate that the behaviour is not generally approved of by mainstream society, despite its being, for the most part, legal and routinely engaged in by many individuals without significant interference from those who purport to disapprove. It is a behaviour that, while theoretically “not allowed” in the culture in which it takes place, is a routine and expected behavior among certain groups of people (e.g., Dunk 1991:86). As Ferrell notes, much of what is labeled criminal [or in this case deviant] behaviour is in fact subcultural behaviour “collectively organized around networks of symbol, ritual, and shared meaning” (1999:403). Following Ferrell, I consider extreme drinking to be a form of subcultural behaviour that has been labeled deviant by mainstream society.

In the first section of this chapter, I provide a general overview of some of the more prominent and most-cited theorists’ approaches to what deviance is and how certain behaviours come to be labeled as such by societies. This discussion provides context for the second section of this chapter, where I assess theoretical frameworks for classifying deviant

behaviours and for considering why certain people come to engage in such behaviours. In the final section, I identify aspects of the aforementioned theories that I use in my analysis of the data gathered in my study.

Defining Deviance

According to Durkheim, deviant behaviours are results of a mismatch between a person's desires and their ability to have their desires met. Deviance occurs when desires that are created by society cannot be satisfied by individuals in that society and people are driven to act outside of cultural norms in order get their desires met or to relieve feelings of distress associated with their inability to meet those desires (1951:65-69). Durkheim explains that crime is present in all societies; that is, it is general (1938:65). This generality would lead one to believe, therefore, that crime is normal (66). According to Durkheim, this is true because crime is necessary and useful; in order for conformity to exist, deviance must also (67-69). Deviance serves the function of being the backdrop against which normality can exist. Other theorists have tended to agree with Durkheim's assessment, but have added more emphasis to how and why certain behaviours come to be labeled deviant.

Akers (1986) considers two processes; first, how norms and values—the violation of which represents deviancy—are established and, second, how people react to others who have violated these norms (460). Group-conflict theory posits that what becomes labeled as deviant has to do with certain groups in society wielding enough power to have their interests represented by the law. However, the law does not always represent the interests of the dominant class and moral sentiments do not always overlap with public policy. The label does not create the deviant, nor is any sort of behaviour inherently deviant. However, both

labeling and behaviours play some role in the ultimate outcome. As such, Akers argues, it is important to pay attention to the ways that social definitions of behaviours and the behaviours themselves interact to create so-called deviant individuals (463-464).

Kitsuse (1967) suggests that deviance be defined as a process involving three steps. First, a group interprets certain behaviours as deviant, next they label people who engage in those behaviours as certain types of deviants and, finally, they treat them in ways considered appropriate to each type of deviancy (88). Even if a person is defined by another as deviant, if not treated as deviant, the person cannot be considered deviant in a sociological sense. Furthermore, Kitsuse argues that it is important to take into account the range of reactions towards deviant behaviour present in society, since reaction towards behaviour is as important in defining it as deviant as is the behaviour itself (101).

Erikson (1967) argues that there is a kind of “screening device” that people use in order to sift through which kinds of behaviours will result in which people being labeled as deviant and which will not. This screening device takes into account such considerations as the person’s history, social class and level of remorse displayed for their untoward behaviours (11). Erikson dismisses the possibility that deviance can be defined as that which is threatening to group life, since many acts that are considered deviant by dominant culture are not actually harmful to group life at all. Instead, he argues that many acts of deviance can be seen as forces that help to keep the social order stable (12). For example, deviant behaviour helps to maintain boundaries by showing where those boundaries are; the deviant demonstrates the point at which behaviour becomes socially unacceptable (13-15). Deviance, Erikson argues, should not be considered inherently “functional” for the social order; yet, we

should still be wary of theories that suggest that all of society is set up in such a way as to discourage deviance (18).

Douglas (1975) adds another level of complexity to the discussion by considering deviance (immorality) and respectability (morality) as being context-dependent. First, he verifies that deviance and respectability automatically imply one another; there can be no good without evil (261). Douglas asserts that the majority of studies have conceptualized morals as “disembodied...statements.” The assumption has been that the collection of such statements will eventually result in a set of universally true moral rules. The problem with this, of course, is its disregard for the fact that morality is dependent upon context (263). Once the context-dependency of morality is acknowledged, it becomes clear that analysis of morality must focus on its “everyday uses” in different social contexts (265). What follows from this is that the primary concern of the analysis of morality should be exploring the conditions under which members of a society consider certain things—concrete things—to be either moral or immoral (265). As follows, the issue is to determine under what conditions a person is held to be responsible for their behaviour and under what conditions they are not. Responsibility for a given action is normally attributed to the actor when two conditions are met: first, the actor must be aware of the rules related to the action and have intended to commit that action; second, the actor must not have been forced to commit that action, against his will, by an external influence (266).

Importantly, the above discussion indicates that, even when individuals in a society share the same morals, conflicts over morality will occur due to their context-dependent nature (Douglas 1975:266). As such, Douglas argues that, in a society that has absolutist moral values, there will be a difference between private and public morality since the public

morality is absolute and context-dependency does not allow private morality to be absolute (267). This kind of split between the morality of the public and the private is found in Euro-Western societies, due to the absolutist moral values these societies espouse (269). In societies with absolutist moral values, groups of individuals who have private moralities that differ from the public morality, tend to form (271). This may be one method by which subcultures are created. As the society gets more complex, these kinds of groups proliferate (272). Douglas argues that, because of the advances of the natural sciences, the social and psychological sciences, it is becoming easier to talk about “private” issues in public and, therefore, it is becoming common knowledge that absolute morality does not hold under all circumstances (272-273).

What each of these theorists recognizes is that deviance is not an objective category of behaviour, but a social construct created through various processes of labeling, action and reaction. Douglas’s (1975) analysis is particularly useful for the consideration of subcultures of deviance, as it provides a framework for understanding how the ideal morality of a society may differ from the morality that is exhibited in practice. Having discussed the processes by which certain behaviours come to be labeled deviant, in the following section, I present theories that explore the processes by which people come to engage in behaviours that are labeled deviant, and the categorization of those behaviours.

Processes and Classification of Deviant Behaviours

Merton (1938) describes aspects of the social structure itself that create situations in which deviance is likely. He describes two elements that are pivotal for understanding his theory; first, it must be acknowledged that each society has “culturally defined goals, purposes, and

interests,” toward which members of the society are expected to strive (672). Secondly, there are structures in place that control appropriate methods of accomplishing these goals (673). According to Merton, equilibrium between emphasis on achieving goals and availability of methods for achieving those goals must be maintained in order for a stable social structure to be upheld (674).

Merton (1938) describes three types of social orders. First is a social order in which both cultural goals and institutionalized means for achieving those goals are emphasized. Next is a social order in which cultural goals are emphasized and institutional means are not. Finally there is a social order in which culture goals are not emphasized but institutionalized means are (674-675). Five different individual adaptations that may take place within such social orders are described (see Table 3.1). “Conformity” occurs when an individual accepts both the culture goals and the institutionalized means of attaining these goals (675). “Innovation” refers to a situation in which the individual accepts culture goals but rejects institutionalized means of achieving them and, therefore, comes up with new ways of achieving goals. “Ritualism” occurs when culture goals are rejected but institutionalized means of achieving them are adhered to; the means becomes the end. “Retreatism” occurs when both culture goals and institutional means of achieving them are rejected. Finally, “rebellion” occurs when the retreatist substitutes new goals and means for the ones that have been rejected (676).

Merton (1938) notes that conformity is by necessity the most common of adaptations (677). Conversely, retreatism is the least common. Retreatism occurs when the individual has “assimilated thoroughly” culture goals and institutional means—that is, the individual believes in the appropriateness of these goals and means—but, because the means are

unavailable, both goals and means are rejected. Retreatism is a kind of defeatism or escapism (677, 678). Merton reiterates that a balance between goals and means is necessary for a stable society and that lack of opportunity combined with strong emphasis on achievement of goals is bound to produce deviance (680-682).

Table 3.1 Merton's Adaptation

Source: Merton 1938:676

	Culture Goals	Institutionalized Means
I. Conformity	+	+
II. Innovation	+	-
III. Ritualism	-	+
IV. Retreatism	-	-
<hr/>		
V. Rebellion ¹²	±	±

Horay (1966) critiques and expands upon Merton's (1938) theory, pointing out that this theory is problematic in a number of ways. In particular, although Merton's chart has a symbol for acceptance (+) and for rejection (-) of cultural goals and means, he lacks a symbol for apathy (1966:693); a concept that Horay believes would more accurately describe some of the attitudes toward culture goals and means in certain adaptations (693). Horay argues that Merton's use of the (+) and (-) symbols are ambiguous and inconsistent. In some cases, (-) simply means rejection, in others it appears to mean both rejection and substitution (for example in the case of innovation) and in some it appears to refer to a state of apathy (as in the case of ritualism). Furthermore, there is a symbol for rejection and replacement (-/+) that is used in only one of the cases in which it would be appropriate (rebellion) and not in the other (innovation) (694).

To deal with these issues, Horary suggests the introduction of a new symbol, zero (0), which represents apathy (1966:694). He creates a new chart of adaptations in which (0) means rejection without replacement (apathy), (+) means acceptance and (-) means rejection and replacement (694). Because of the extra possible variation (0), this chart identifies nine combinations of attitudes towards culture goals and means and, therefore, nine different adaptations (see Table 3.2). Five of the cells are already filled by Merton's terms. Where the first symbol indicates attitude towards means and the second indicates attitude towards goals; (0/0) signifies Retreatism, (+/0) signifies Ritualism, (+/+) signifies Conformity, (-/+) signifies Innovation and (-/-) signifies Rebellion (695).

This still leaves four empty cells or adaptations for which Horary (1966) develops new terms. The (+/-) adaptation indicates rigid adherence to culturally prescribed means accompanied by attempts at achieving new and innovative goals through these means. Horary calls this adaptation "Developmentism" and provides as example, engineers who engage in invention. The (0/+) adaptation indicates abandonment of culturally legitimate means for achieving goals accompanied by continued desire to achieve those goals despite not having a replacement for the means that have been abandoned. Horary calls this "Wishism," as it describes people who have conventional goals but do nothing to achieve them. The converse of Wishism is the (0/-) adaptation. Horary names this adaptation "Antiwishism," which entails the holding of unconventional goals accompanied by a failure to engage in activities to facilitate the achievement of those goals (696). The final adaptation (-/0), called "Beatnikism," entails rejection of conventional means and replacement with original ones, accompanied by absence of specific goals towards which these means are aimed (696).

Table 3.2 Horary's Adaptations

Source: Horary 1966:696

		<u>Goals Valence</u>		
		0	+	-
<u>Means</u> <u>Valence</u>	0	Retreatism	Wishism	Antiwishism
	+	Ritualism	Conformity	Developmentism
	-	Beatnikism	Innovation	Rebellion

Horary presents a further refinement and specification of attitudes towards cultural goals and means (1966:697). In this formulation, there are five possible attitudes; (i) indicates indifference, (p) indicates positivity, (n) indicates negativity, (a) indicates ambivalence and (r) indicates rejection with replacement (697). This chart produces twenty-five possible combinations but does not produce twenty-five different adaptations. What is interesting about this chart is it shows that different combinations of attitudes can, in some cases, produce the same adaptation (see Table 3.3).

Table 3.3 Horary's Adaptations 2

Source: Horary 1966:697

		<u>Goals Valence</u>				
		i	p	n	a	r
<u>Means</u> <u>Valence</u>	i	Vegetation	Indolence	Retreatism	Confusion	Preacherism
	p	Ritualism	Conformity	Fetishism	Mobility	Developmentism
	n	Retreatism	Wishism	Retreatism		Demagoguery
	a	Confusion			Confusion	Democracy
	r	Beatnikism	Innovation			Rebellion

Schweiker (1968) has also elaborated on Merton's theory of individual adaptation by integrating it with the status-consistency concept. The status consistency concept posits that, in a given society, certain ascribed statuses are necessary prerequisites for certain achieved statuses. It further states that status consistency (e.g., high ascribed status and high achieved status) is preferred to status inconsistency (e.g., high ascribed status and low achieved status),

and that high status is preferred to low status (531-535). This theory also posits that people will try to take the most direct route to achieving status consistency; that is, they will take the route that will require a change in the least number of statuses, even if the result is a low-consistent status (535). Schweiker argues that previous studies concerning status consistency “lack a predictive theoretical framework,” but by integrating status consistency theory with Merton’s theory, such a predictive theoretical framework can be produced (534).

Merton’s (1938) theory posits that all societies have socially prescribed goals and socially legitimate means for achieving those goals (672). Schweiker (1968) argues that high-achieved statuses are culturally prescribed goals and that high-ascribed status is often necessary—it is the socially legitimate means required—for attaining those high-achieved statuses (535). Using this conceptualization of statuses as means and goals, Schweiker argues that statuses can be used to predict which of Merton’s adaptations people will engage in. He asserts the most common adaptation of people with high-ascribed status is that of conformity because conformity gives the opportunity to attain high-achieved status and, therefore, high-consistent status, in the most economical way (535). If, however, conformity is not an option for a person of high-ascribed status, one can predict that they will engage either in ritualism or rebellion (536). Those who engage in ritualism aim to reduce their feelings of status inconsistency by continuing to value and engage in culturally legitimate means, while devaluing the goals. The status inconsistency is essentially “imagine[d]...out of existence.” The more aware a person is of the arbitrary nature of ascribed statuses, the more likely their status discrepancy is to lead to rebellion. Once the arbitrariness of ascribed statuses is recognized, culture goals are re-evaluated and often both ascribed and achieved statuses are modified, resulting in rebellion (537).

For a person of low-ascribed status, the most economical adaptation is retreatism because only one status—achieved status—has to be changed and nothing has to be substituted for it (Schweiker 1968:537). The retreatist lacks access to legitimate means for achieving goals and, therefore, devalues the goals themselves and ceases to work towards them (537). In some cases, since high-consistent status is preferred to low status, persons of low-ascribed status may engage in innovation. The innovator does not reject cultural goals, but rejects culturally prescribed methods of achieving those goals—high-ascribed status, access to which the actor does not have anyways—and replaces them with new and original means. The problem with innovation is that others tend to continue to judge the actor according to his low-ascribed status, despite high-achieved status, and this makes the adaptation somewhat unstable (538). Individuals in this unstable position may therefore attempt to achieve status consistency through the rebellion adaptation; by acknowledging the arbitrariness of ascribed statuses and by modifying the understanding of both achieved and ascribed status, the person achieves a subjective sense of status consistency (539).

Like Schweiker (1986), Thio (1975) reassesses Merton's (1938) theory of anomie by incorporating critical discussion of the impact of status on deviant adaptations. Thio (1975) argues that, while Merton's proposition that deviance results from a disjunction between goals and access to means for achieving those goals is justifiable, his assertion that anomie is more prevalent among the lower classes—because these people aspire to culturally prescribed success goals and yet lack means for achieving these goals—is not (139). Thio examines Merton's assumption that people of lower classes experience "a lack of success opportunity" more acutely than people of higher classes. He argues not only that socially structured obstacles—such as lack of education or discrimination—to achieving success

goals should be considered, but also sociopsychologically induced ones (145). By this he means that higher class individuals are more likely, because of their subjective knowledge of their social position, to expect themselves to achieve highly, while lower class persons expect less (146). According to Thio, people of higher social classes experience “relative deprivation” or a “relative lack of success opportunity;” that is, they feel a subjective sense of deprivation, due to their tendency for upward self-comparison. Lower socioeconomic class people, on the other hand, experience “objective deprivation” or an “objective lack of success opportunity” (147). He relates this to Merton’s concept of a disjunction between aspirations and opportunity. According to Thio, Merton does not consider that aspirations may be affected by objective lack of success opportunity (148). Thio suggests that, while both upper and lower class persons experience a significant sense of deprivation—the higher class persons experience a relative deprivation and the lower class persons experiencing an objective one—higher class persons hold much higher aspirations than lower class persons, which are more likely to create a disjunction between opportunities and goals (149).

Thio (1975) also argues that Merton’s assertion that more deviant behaviour occurs among people of lower classes is inaccurate. He indicates that people of lower socioeconomic status may appear to engage in more deviant behaviour simply because the kinds of deviant behaviour (or crimes) that they tend to engage in are more visible and because of their social position, people who commit these crimes are more likely to be arrested, charged and convicted. The crimes of higher class people, on the other hand, are less obvious—for example tax evasion and embezzlement—and if people committing these crimes are caught, they are less likely to be convicted (150). If Merton took white-collar

crime into consideration, Thio argues, he would see that very much deviant behaviour occurs in the higher social classes as well (151).

While the basic premise of Merton's theory—that a disjunction between aspirations and opportunities leads to deviance—is, in fact, valid (Thio 1975:154), Thio states, and rightly so, that Merton's theory has perpetuated negative stereotypes about persons of lower social status. This should serve as a warning, he asserts, against basing theories on common-sense and readily observable information (156). Thio does not argue that Merton's theory should be rejected altogether, but insists that the validity of the data used to support it should be assessed before employing it in any way (156).

As the above discussion demonstrates, Merton's (1938) theory of deviance is by no means perfect and there is plenty of room for refinement and improvement. However, its continuing endurance as one of the most referred-to sociological theories of deviance speaks to the timeless relevance of some of Merton's fundamental presuppositions. In particular, its focus on differential access to legitimate means for achieving socially prescribed success-goals has provided invaluable insight into the processes by which people come to engage in deviant behaviour. As Cloward (1959) notes, Merton's work defined one of two major phases of theorizing about deviant behaviour. The other phase—associated primarily with Durkheim—focuses more on the role that society's failure to control and limit individual expectations and desires for achieving success-goals plays in encouraging deviant behaviour (164). In the following section I discuss several theorists who have variously assessed the compatibility of Durkheim's (1938, 1951) and Merton's (1938) theories, and explain the differences between the two.

Durkheim and Merton: An Analysis

Durkheim (1951) asserts that humans have no internal controls for the regulation of social desires. Therefore, in order for a stable society to be maintained, the society must exert external pressures designed to limit individual social desires. Durkheim proposes that deviance occurs when these external controls break down and social desires become uncontrolled. Situations in which Durkheim believes this break down is likely to occur include sudden economic change like depression, prosperity or rapid technological advancement (241-246). Cloward believes this theoretical approach to deviance should be synthesized with Merton's (1938) consideration of access to legitimate means and combined with the consideration of another variable: differentials in access to illegitimate means for the achievement of culture goals (Cloward 1959:167). Cloward notes that, if we are to assume access to legitimate means is differentially distributed depending on a person's place in the social structure, then we should accept that access to illegitimate means will similarly be differentially distributed (167-168).

For the purposes of his discussion, Cloward (1959) takes the term "means" to include considerations of both learning and opportunity structures; as, for example, persons in certain locations in the social structure will be in a better position not only to learn how to engage in deviant behaviour but also to gain access to opportunities to carry out such behaviours (168). He also notes that both learning structures and opportunity are necessary for deviance to occur (169). This is an important assertion, as it suggests that deviant behaviour is not as disorganized and random as it is popularly conceived, but rather that specific social structures are required for deviance to be possible (169-173).

Cloward (1959:174) describes three possible relationships between access to illegitimate means and resultant deviance. First is the possibility that access to illegitimate means is distributed equally throughout the society. In such a situation, Cloward predicts that people of lower socioeconomic class will engage in higher rates of innovating behaviour than those in other classes. This, he suggests, is because people of lower socioeconomic status tend to experience more pressure towards engaging in deviant behaviour and fewer internal controls against such behaviour than members of other social classes. Next is the possibility that access to illegitimate means is highest among those in the lowest socio-economic statuses and access becomes more and more limited as one moves up the scale of social classes. In this situation, deviance—or innovation—will again be more common among those in lower strata but that the association will be even stronger. Third is the possibility that access to illegitimate means increases as one's socio-economic status increases. In this case, Cloward argues that the resultant levels of deviance will be difficult to predict, since higher-status people supposedly have more internal prohibitions to committing deviant acts (174).

In particular, Cloward (1959) discusses the relevance of the consideration of access to illegitimate means for Merton's conceptualization of the retreatist adaptation to incompatibility between societal pressures towards the achievement of success-goals and access to legitimate means for achieving those goals (175). According to Merton (1938), retreatism occurs when an individual repeatedly fails to achieve culturally prescribed goals via legitimate means and yet is unable to utilize illegitimate means due to internal controls against deviance. When access to illegitimate means is taken into account, it becomes apparent that these internalized prohibitions are not actually necessary in order for retreatism

to occur if the individual does not have access to illegitimate means in the first place (Cloward 1959:175).

Although Cloward's (1959) argument that illegitimate means should be taken into account in addition to legitimate ones is quite compelling, his argument that the theories of Durkheim and Merton can be synthesized is flawed. Mizruchi (1967) shows how these theories have different emphases and, therefore, lead to different hypotheses. Merton's theory of anomie involves a situation in which there is an imbalance between emphasis on socially prescribed goals and the socially legitimate means for achieving those goals (439).

Durkheim, on the other hand, emphasizes society's failure to constrain unrealistic goals and expectations held by individuals. According to Durkheim, people in upper social classes are more likely to have unrealizable goals and this leads to more anomie in upper social strata. Poverty is seen as a restraint on deviant behaviour because people in lower social classes tend to have lower expectations (440). Mizruchi points out that, problematically, and in contrast to Durkheim, Merton assumes that aspirations are uniform across various social strata and disregards the qualitative differences among social classes (441).

Hilbert (1989) makes the incompatibility of Merton's and Durkheim's theories of anomie apparent as he points out that their very conceptions of what anomie is differ significantly and are, in fact, mutually exclusive. Merton's theory posits that anomie causes deviance, while Durkheim's theory states that deviance prevents anomie. For Merton, deviance is something objective; the actions that he categorizes as deviant are assumed to be so before he engages in an analysis of their causes. For Durkheim, on the other hand, deviance is not objective but is produced through ritual activities. It is not the actions

themselves that are important, it is how they are ritually treated that results in their being understood as deviant (242).

For Durkheim, crime is a normal, healthy, and necessary part of society (1938:65-69). This is so because his conception of society is that it is *sui generis*; it transcends all of its members (1-3). In order for society to be “made real” for those who are a part of it, its reality needs to be demonstrated and reaffirmed through ritualized activities. The treatment and punishment of criminal behaviour is one of these ritualized activities. The punishment of crime reaffirms the reality of the norms that these crimes violate (67-69). In contrast, Merton does not identify crime or deviance as being necessary, desirable or inevitable (1938; Hilbert 1989:243).

Hilbert (1989) explains that for Merton, deviance itself is a social crisis. For Durkheim, a social crisis is the cessation of the existence of norms and, therefore, the death of a society. Durkheim’s social crisis cannot be the same as Merton’s since, in Durkheim’s formulation of a social crisis, there are no norms to be violated and, thus, there can be no deviance. This leads to a clearer understanding of their different formulations of anomie. For Merton, anomie is the disjunction between cultural goals and legitimate means for achieving those goals. This anomie leads to deviance. For Durkheim, anomie is the breakdown of social norms. Anomie is the negation of the reality of both deviance and conformity (Hilbert 1989:244). This discussion leads Hilbert (1989) to a rather interesting observation about the relationship between Merton’s and Durkheim’s theories; while the theories cannot be combined, as their conceptions of anomie are paradoxical, Merton’s formal typology of deviant behaviours can be seen as one of Durkheim’s ritualized practices that reaffirm the reality of the social order (248).

Discussion

While the preceding discussion provides important context for understanding what deviance is considered to be in a sociological and anthropological sense, I do not adopt any of these theories wholesale in my analysis of extreme drinking. I reject the notion that any single theory has all-encompassing explanatory power for a human social phenomenon, as I recognize that all such phenomena are subjectively observed and interpreted. Instead of adopting any single theory in its entirety, I adopt certain aspects of theories that I judge to have real explanatory value for the specific social phenomena that I observe. The fragmentary nature of the theories that I utilize in my later analysis is particularly important with regard to my use of Durkheim (1938, 1951) and Merton (1938) since, as Hilbert (1989) shows, these theories are paradoxical when examined *in their entirety*. I argue, however, that individual aspects of their theories, when removed from their closed systems of analysis, are not only compatible but are actually complementary. Specifically, I adopt Merton's (1938) notion that varying access to legitimate means for achieving culturally prescribed success-goals affects people's tendency to engage in deviant behaviour. I also adopt Durkheim's (1951) notion that unrealistic pressures and expectations regarding the achievement of socially prescribed success-goals influence people's tendency toward deviant behaviour. I argue, essentially in line with Cloward (1959), that two factors are at work in producing deviant behaviour; first the pressures and expectations to achieve, and then the access to means for achievement. This will form the theoretical basis of my analysis of the extreme drinking behaviours that I discuss in chapters five and nine.

In the following chapter I discuss the methods employed in my study. I explain my employment of semi-structured interview and structured ethnographic observations, as well

as my use of autoethnographic knowledge of the extreme drinking subculture. I also explore theoretical discussions of autoethnography and insider ethnography, considering the importance of these methods in the discipline of anthropology and in relation to traditional ethnographic methods.

Chapter 4: Methods

In this chapter I discuss the methods that I employed in this study and their theoretical underpinnings. I focus particularly on the literature concerning the practice of insider ethnography—the conducting of ethnography within one’s own society—since I undertook this study in my home culture within a subculture with which I was already familiar. While the primary focus of this study is the data that was gathered from interviews and structured ethnographic observations that I conducted with members of the extreme drinking subculture in Kelowna and Vancouver, it also contains a significant element of autoethnography; the use of personal experience to inform my approach to the subculture, my research design and my ethnographic discussion analysis. As such, I present a brief discussion of some of the debate surrounding the use of autoethnographic data and its place within the discipline of anthropology.

Summary of Methods

Like many other at-home ethnographers (e.g., Dunk 1991; Mears 2013), it was personal experience that brought me to my topic of study and this personal experience shaped my methodological approach in a number of ways. I consider extreme drinkers as belonging to a subculture in which drinking to get drunk is both condoned and encouraged. I chose to conduct semi-structured interviews with self-identified current and former extreme drinkers as my primary method of data collection because I believe that extreme drinkers are far more knowledgeable and insightful about their behaviours than perhaps popular conceptions of them allow. I feel it is important that extreme drinkers be allowed an authoritative voice in discussions concerning why and how extreme drinking behaviours occur and how these

behaviours might be made safer. On a more pragmatic note, my prior experience with the subculture allowed me to identify several subcultural experts whom I knew would be willing to share their thoughts and experiences with me. My age, general appearance and knowledge of the subculture uniquely positioned me as a nonthreatening person with whom my participants felt comfortable speaking to honestly and openly. When conducting a semi-structured interview, the researcher comes prepared with a number of open-ended questions. The interview is directed by but not limited to those questions. This method was appropriate because, although there were specific types of information that I attempted to access during my interviews, I was equally interested in participants' informal elaborations on these topics; such as their subjective physical and emotional experience of intoxication. Semi-structured interviews allow participants to freely elaborate on their experiences, but provide enough structure to keep the conversation on topic (Fife 2005:94-96).

Participants were recruited via snowball sampling. Initial contact was made through my acquaintances in the communities of research. I provided my contact details and information about the study to extreme drinkers already known to me and requested that they pass this information on to anyone who they thought might be interested in participating. When potential participants contacted me and indicated that they were interested in participating, I responded by sending them an e-mail of initial contact, which explained my project in some detail. If the participant indicated continued desire to participate, I sent them a consent form and asked that they read this form before making their final decision regarding participation. If the potential participant ultimately decided to take part in the study, we arranged a mutually decided upon time and place to meet for the interview. Upon meeting, we read and signed the consent forms together and then carried out the interviews,

which ranged from one to three hours in length. I followed up after the interviews with willing participants to ensure my records of their responses were accurate and to gain clarification or elaboration where needed.

Interviews were audio recorded and subsequently transcribed. During the process of transcribing, I identified important themes. Topics that were repeatedly mentioned by participants, were stressed as being important by participants or provided direct responses to my research questions were selected as themes and assigned a code. I also noted patterns in responses among interviewees—for example, laughing when asked about negative drinking experiences—and assigned codes to these patterns. Interviews were coded manually for selected themes. Data was grouped according to themes and subsequent discussion and description of themes drew from these groupings of data.

I conducted 11 interviews in total; five with men and six with women. My sample is not meant to be representative nor is it designed to provide comparisons between men and women. Rather than focus on distinctions among gendered experiences, my intention is to present here a picture of the unifying aspects of extreme drinking behaviours in order to demonstrate the coherence of this subcultural group. As such, an analysis of gender differences is beyond the scope of this project, though it is certainly deserving of its own treatment elsewhere.

In addition to interviews, I engaged in structured ethnographic observations at licensed drinking establishments in Kelowna and Vancouver. I refer to this method of data collection as “ethnographic observation” as opposed to “participant observation” for a number of reasons. “Participant observation” refers to a process by which an anthropologist immerses herself in the culture of those being studied; observing the behaviours of members

of the group while, at the same time, participating in those behaviours with the intent of better understanding the ways that members of the group experience the world (Fife 2005:71-72). While my goal was to gain a detailed understanding of the cultural and subcultural contexts in which extreme drinking is carried out—and this is a goal to which participant observation lends itself—I felt complete participation inadvisable, as it would require my becoming intoxicated, which I believe would have had a deleterious effect on my research.

Furthermore, because of my past experiences with the subculture, at times engaging in extreme drinking myself, I already had a fairly vast repository of knowledge regarding what participating in the subculture entails; one that I could draw from to add context to the discussion of other data that I collected. What was missing from my understanding of the subculture was deliberate, goal-oriented observation. I knew that I had to approach the subculture in a methodical ethnographic manner in order to test my personal experiences against the experiences of others and to produce valuable anthropological data.

“Ethnographic” refers to a general approach to data collection under which the researcher approaches the community of study with the belief that the behaviours that people engage in are rule-oriented and organized. As Angrosino explains, the ethnographer operates under the assumption “that people’s behaviours, beliefs, interactions and material productions [are] not random, but rather [form] a “complex whole” [a culture] that [is] meaningful, logical, more or less consistent, and worthy of respect on its own terms” (Angrosino 2007:1-2). Thus the structured ethnographic observations that I engaged in were ethnographic in the sense that I approached extreme drinking behaviours as components of an integrative cultural text that I sought to understand in a holistic manner, and structured in the sense that I had a set of specific questions that I sought to answer (see Price 2007).

Observation sessions took place on Thursday, Friday and Saturday nights. I conducted observation sessions with a companion for safety reasons. Each session began between 9:00pm and 10:00pm and lasted until the establishment closed; between 12:00am and 2:00am, depending on the type of establishment. During observations, I made a point of moving around the drinking establishment in order to observe behaviours in all areas, including the areas immediately outside the entrances and exits. I observed social interactions among drinkers over the course of the evening, listened to conversations and made note of drinking patterns. Though I did not seek out direct interaction with the people I observed, I carried on conversations if approached and engaged. Notes were taken in journal form after each observation session ended. Observational field notes were reviewed for themes and coded based on those themes. Selection of themes was necessarily based on my subjective interpretation of field notes although my identification of important issues was guided by discussion with interviewees and key cultural collaborators. Coded data was grouped and my discussion here reflects my interpretation of grouped data.

As might be suspected, research concerning the use of a mind-altering and potentially dangerous substance like alcohol is accompanied by a host of issues concerning ethics, safety, and privacy. Below I discuss these issues and explain some of the precautions that I took to ensure that my study was ethical and safe.

Ethical Considerations

As Lederman (2006) notes, anthropologists who conduct research in naturalistic settings often have difficulties identifying their responsibilities with regard to the safety of the people they are researching, particularly when their research does not alter or interfere with the

activities that the people under study would be engaging in regardless of the researcher's presence (484-485, 487-488). My observational sessions took place in situations where, as a researcher, I had no control over how events "in the field" played out. In spite of this, I felt it was important to make whatever effort possible to ensure that the behaviours I observed took place in environments that were as relatively safe as possible, considering the inherently risky nature of the behaviours that I sought to observe.

I decided to conduct my observations in licensed premises because excessive alcohol consumption and the behaviours associated with consumption and intoxication can be dangerous for those partaking, as well as for those around them. In Canada, owners of premises licensed to serve alcohol can be held accountable for serving alcohol to patrons who appear visibly intoxicated, or for any injury or damage that occurs as a result of this intoxication (Mothers against Drunk Driving; hereafter MADD 2004). Although I have observed that people do drink to extreme levels of intoxication in public establishments, my rationale is that since the establishment is legally responsible for the safety of their patrons, alcohol consumption occurring in a licensed establishment may be more controlled and possibly safer than that occurring at, for example, a private residence. Furthermore, although I cannot have complete certainty, as use of fake IDs or ID "sharing" does occur among underage youth, it is more likely that the people I observed were of legal drinking age because my observations took place in licensed establishments. Establishments that serve alcohol in British Columbia require patrons to show identification proving that they are of legal drinking age (19 years or older) before serving them or, in some cases, even admitting them to the premises.

I chose not to engage in any interviewing, tape recording, or photographing during observation sessions in order to avoid ethical dilemmas associated with acquiring consent from intoxicated persons. Protecting the privacy of those observed was and is also very important and, to do so I did not record any identifying details of the people I observed or spoke to. I also deliberately obscured my records of the exact locations and dates on which the observations took place.

Protecting the privacy and, as such, ensuring the safety of the people I interviewed proved to be a somewhat more challenging task. Conducting ethnography at home, in a situation where all research participants and members of the community under study will have access to reports, presents the difficulty of ensuring that no details are included that may allow community members to identify participants or for participants to identify each other. As such, I have taken special precautions to ensure the confidentiality of participants' identities. My interviewees selected pseudonyms for themselves to be used in documents related to this study and my initial intent was to use those pseudonyms in my final write-up. Upon reflection, I wondered whether my interviewees' selected pseudonyms reflected their personalities and preferences and might therefore be too revealing. Indeed, many of them selected humorous names based on fictional characters or word-play and I suspected that based on this, they might be able to identify each other since many of them are acquainted with each other. I therefore decided to assign numbers to the interviewees and refer to them in my report only by their numbers. While it may seem rather impersonal to refer to participants as "interviewee #3" or "interviewee #7," I feel much more secure that their identities will be protected, as there is nothing to "read in to."

I have also chosen not to divulge the specific ages of each interviewee. This study was open to self-identified current and former extreme drinkers between the ages of 19 and 29. Ultimately, all interview participants fell within the 19 to 26 age range. My concern with specifying interviewees' exact ages has to do with the fact that some interviewees are the only participants in the study of certain ages. As such, divulging their ages would potentially reveal their identities to other members of the community who are aware that they participated in this study. I do, in relevant areas, indicate who belongs to the younger group of interviewees—those who are within the first few years after becoming legal drinking age—and the older group of interviewees, who have been of legal drinking age for longer.

Autoethnography

The autoethnographic elements of this study are mainly used to support or provide context for data gathered through structured ethnographic observations and semi-structured interviews and to relate personal experience to theoretical generalizations made about extreme drinking. However, in chapter six, I rely significantly upon autoethnographic observations to describe drinking events that take place in private residences, since my structured observations were limited to establishments licensed to serve alcohol. Thus, a brief discussion of some of the theoretical debate concerning the use of autoethnography in anthropology is warranted.

Autoethnography's increasing popularity in the late twentieth and early twenty-first century has been linked to the "crisis of representation" in social science (see Marcus and Fischer 1986) and the turn towards self-reflexivity, focus on emotion and cynicism concerning the generalizability of knowledge (Anderson 2006:373). Debates continue

concerning if and how autoethnography should be incorporated into the discipline (e.g., Ellis 2009; Ellis et al. 2011; Holt 2006b). One such debate, which I focus on here, centres on the use of autoethnographic writing for the production of theory and generalization (Anderson 2006; Ellis and Bochner 2006). I focus on this debate because, in this study, I draw from my personal experiences not only for descriptive purposes but also to theorize about extreme drinking and related behaviours.

Anderson proposes a method of autoethnography called “analytic autoethnography” (2006). Analytic ethnography is ethnography in which the researcher is “(1) a full member in the research group or setting, (2) visible as such a member in published texts, and (3) committed to developing theoretical understandings of broader social phenomena” (373). The key point is that Anderson includes the development of theory and generalization in his definition of analytic autoethnography and this is the primary point of contention between him and prominent autoethnographers Ellis and Bochner (2006).

Ellis and Bochner’s evocative version of autoethnography, with its focus on story-telling and emotion, leaves little room for theoretical analysis (see Ellis and Bochner 2006). They insist that autoethnographic stories and the emotions and experiences they invoke should be stand-alone works without the trappings of traditional sociological analysis (Anderson 2006:377; Ellis and Bochner 2006:438). To them, the deliberate use of autoethnographic stories for the furthering of anthropological theories is a misapplication of the practice of autoethnographic story telling (440). They fear that Anderson’s push for the inclusion of traditional sociological analysis of autoethnographic data runs the risk of taking autoethnography from a progressive and pioneering tool for understanding human experience—one that breaks free from many of the shackles of traditional Malinowskian

ethnography—neutering it of its revolutionary power by domesticating it back into the framework of mainstream social scientific analysis (433).

I appreciate Ellis and Bochner’s argument and agree that strictly evocative autoethnography can, in many cases, contribute tremendously to anthropological knowledge. However, I believe that certain ethnographic projects are more geared toward the use of autoethnographic data for theoretical analysis and for abstraction and generalization to larger cultural forces. In particular, projects that are concerned in the first place with the understanding of broader social phenomena, rather than being primarily focused on personal experiences with such phenomena, demand abstraction and analysis of autoethnographic data. Furthermore, autoethnographic projects that are designed to have practical application necessitate the development of theory and generalization.

For the purposes of this study, I employ Anderson’s (2006) definition and methodology of autoethnography. My discussions of my personal experiences are meant to assist in creating an understanding of the subculture of which I was once a member. I employ autoethnographic data along with ethnographic data gathered through more traditional methods to inform my theoretical analysis regarding how and why extreme drinking takes place. My inclusion of autoethnographic data is intended to contribute to the broader theoretical understanding of extreme drinking and to have some degree of generalizability, at least to members of the subculture that I studied.

Insider and At-Home Ethnography

Since I conducted my study not just in my home culture, but in two cities I have called home, it is important for me to address my position as insider ethnographer. At-home ethnography

has always been marginalized within the discipline of anthropology (Gupta and Ferguson 1997:12-13; Weston 1997:179). Also referred to as “insider ethnography” or “native ethnography,” at-home ethnography wasn’t practiced with any regularity until the 1960s (Godina 2003:473; Van Ginkel 1994:6). With the decolonization of many of the places where anthropologists had conducted research before and during WWII, came a resistance to the presence of Western researchers in these areas (Nukunya 1994:27-28; Van Ginkel 1994:6). This difficulty of access, combined with a decrease in the amount of funding available for projects conducted abroad and a reflexive turn that resulted in the realization that Euro-Western societies are just as worthy of research as any other, created a situation in which at-home ethnography became a more viable option than research abroad for some anthropologists (Van Ginkel 1994:7). In spite of the increasing frequency with which studies of Euro-Western societies are being conducted today (5), at-home ethnography remains a marginalized and somewhat stigmatized practice within the discipline (Gupta and Ferguson 1997:12-13; Weston 1997:179).

The most common critique that has been raised against the practice of insider research purports that anthropologists working in their own culture lack the necessary cultural “distance” from their object of research to be able to observe and analyses it in a scientifically meaningful manner (Aguilar 1981:15; Fainzang 1998:275; Godina 2003:479; Voloder 2008:29). Critics assert that conducting research at home prevents insider ethnographers from noticing certain structures and patterns because they appear too familiar, while the cultural distance of the outsider researcher makes these cultural phenomena more visible to them (Aguilar 1981:16). Some researchers have even suggested that it is best if anthropologists who are studying in their own societies focus on subcultures of which they

are not a part, in order to maintain some sense of “objectivity” (Fainzang 1998:275-276). However, as Bunzl (2004) notes, the whole notion of distance involved in discussions of insider versus outsider ethnography is based on a problematic, hierarchical and arbitrary distinction between self and other.

Within the Malinowskian model, the distinguishing characteristic of anthropological fieldwork is the encounter between the Self, who is an outsider capable of observing cultural rules, and the Other, who is an insider incapable of fully understanding the cultural rules that they operate under (Bunzl 2004:435). This distinction, it is clear, is hierarchical in its privileging of the ethnographer’s access to knowledge above that of the subjects of research (436). Indeed, anthropologists traditionally derive much of their “analytical leverage” from Self/Other distinctions (437), and the conducting of fieldwork on exotic Others in remote locations has long been seen as the defining factor of the discipline itself (Gupta and Ferguson 1997: 2, 4).

The Malinowskian model, Gupta and Ferguson (1997) argue, functions as an “archetype;” that is, although it is often spoken of ironically and dismissed as clearly not representing the way things are, it still functions, implicitly, as a model for how things *should be* (11). One of the most prominent implications of this is that the field is, in its purest form, a rural location set apart from urbanization and industrialization (8). It is assumed that the field is opposed to “home,” with the implied home being a Euro-Western industrialized nation (8, 16-17). This distinction between the field and home, Gupta and Ferguson argue, creates a “hierarchy of purity of field sites” (1997:12), with those closer to home—geographically or culturally—being considered less anthropological or less the sites of “real” anthropology than field sites that are geographically or culturally far removed from the West

(12-13). This results in a low valuation of fieldwork conducted in the archetypal home (the West) stemming from an apparent inability to acknowledge that home is as much a site of difference as any other “exotic” location (13-15). This recalls Agar’s (1984) argument that anthropologists are depicted as “uniquely burdened with cultural baggage” in a way that other social scientists—when studying their own cultures—are not.

A consequence of the discipline’s focus on the exotic field and the exotic Other as being central to the anthropological character of knowledge production is that it upholds archetypal notions of anthropological subjects and objects that are rooted in the colonial past of the discipline (Gupta and Ferguson 1997:16; Narayan 1993:672; Nukunya 1994:25-26). The default anthropologist who is implied by traditional constructions of the field and fieldwork is, Gupta and Ferguson argue, still the white, middle class, Euro-Western male (1997:16). Degrees of the Otherness of anthropological objects are determined by their location in the aforementioned hierarchy of purity of field sites; with those located farther from the archetypal home being considered more “Other” and thus more appropriate for anthropological study than other field sites (16-17).

While the notion that at-home ethnography is somehow fundamentally different from any other type of ethnography may be flawed, it is the case that at-home ethnographers face a somewhat unique set of practical problems. They may have difficulty probing during interviews, since the answers to many questions are assumed to be known (Aguilar 1981:21-22; Nukunya 1994:35; Simmons 2007:13) and there may be a failure to pick up on cultural subtleties, desensitized as these researchers are by familiarity (Aguilar 1981:16). At the same time there is the risk of assuming that one’s experience as an insider is representative of the experiences of all people in the community of study and thus the tendency to paint a falsely

homogenous picture of the culture (Nukunya 1994:35; Voloder 2008:29; Weston 1997:173). This does not mean, however, that the work of at-home ethnographers is uniquely compromised. As Van Ginkel notes, every research project faces its own particular challenges (1994:9).

At-home ethnography has been praised for its ability to overcome many of the practical problems that ethnographers face working abroad (Nukunya 1994:27), such as gaining access to communities (Palmer and Thompson 2010:426; Simmons 2007:10, 12), learning the language (Van Ginkel 1994:9), learning how to phrase questions in culturally sensitive ways and gaining the trust of research participants (Aguilar 1981:17-19; Palmer and Thompson 2010:428). It has also been suggested that at-home ethnography offers a more nuanced and empathetic understanding of cultures than outsider research does (Aguilar 1981:15). As Aguilar goes on to assert (25-26), neither insider nor outsider research is an inherently more legitimate anthropological practice than the other. The key to overcoming the practical issues associated with working in one's own culture is not to avoid doing such work but rather to cultivate awareness of the potential problems that being an insider may pose and then take tangible steps towards overcoming those obstacles (ex. Simmons 2007; Voloder 2008).

Discussion

As an insider ethnographer, I had to be attentive to the potential drawbacks of my status as I conducted my research, analyzed my data and wrote up my results. I devoted a significant amount of time and energy to developing and fine-tuning my interview questions in order to ensure that my investigation was thorough. I frequently followed-up with interviewees if

those interviewees were willing and if, upon reviewing my data, I realized that I had failed to probe sufficiently or had made assumptions about participants' responses without adequately clarifying. Although my status as an insider demanded that I was particularly vigilant about practicing reflexivity through all stages of my project, I believe that it ultimately allowed me to present a more in-depth and nuanced picture of the subculture at hand.

Practicing reflexivity with regard to my autoethnographic data meant examining my potential biases and questioning my observations and interpretations in light of my particular situationality. I consulted with several key cultural collaborators with regard to the autoethnographic data that I included in my study in order to assess the generalizability of my experiences to other members of the subculture. My autoethnographic discussion ultimately grew out of a dialogue drawn from my personal life, my research and my interactions with members of the extreme drinking community. Checking to make sure that my observations and experiences resonated with other extreme drinkers helped me to avoid presenting a falsely homogeneous picture based on my own experiences. This also enabled me to focus on issues that are of importance not only to me but also to other extreme drinkers. In the following chapter, I present and discuss the results of the semi-structured interviews that I conducted with self-identified current and former extreme drinkers, and provide answers to specific research questions.

Chapter 5: Results of Semi-Structured Interviews

Many people are aware of the stereotypical problem drinker who “can’t have just one.” This generally denotes a person who is addicted to alcohol and is unable to control their alcohol consumption. The disease concept of alcoholism, which goes back decades, is generally accepted by the public as having explanatory value for people who regularly drink to a level of intoxication that entails a loss of control and often results in negative consequences (Jellinek 1960). What we are perhaps less attuned to are the drinkers who refuse to have just one; people for whom regular and excessive alcohol consumption is a choice. There is a growing subculture of drinkers who do not meet the criteria for a diagnosis of alcoholism, despite regularly drinking quantities of alcohol that greatly exceed recommended safe limits (see Martinic and Measham 2008a). These are drinkers for whom the purpose of drinking is to become drunk. Their drunkenness is not driven by addiction and, for the most part, is not viewed by them as being the result of an inability to control themselves around alcohol or an inability to stop drinking once they start. Their extreme drinking is purposeful and often strategic. Extreme intoxication is the goal, not an accident or an unpleasant side effect. Within the public consciousness, extreme drinkers seem to occupy a precarious and as yet poorly defined position in an area somewhere between “normal” drinkers and alcoholics. Extreme drinkers could have just one but they choose not to because, for them, that would defeat the purpose of alcohol consumption.

In this chapter, I present and discuss the results of the semi-structured interviews that I conducted with members of a subculture of extreme drinkers. My discussion of these results is supported by observational ethnographic and autoethnographic data about the subculture. In all, I interviewed 11 participants; eight self-identified extreme drinkers and three self-

identified former extreme drinkers. My study was designed to answer four research questions. First, how do young adults conceptualize their own and others' extreme drinking behaviours; that is, what does it mean to them? Do they view it as normal or abnormal in the context in which it occurs? How do they think that their drinking behaviour compares to others? Second, what are the motivations for extreme drinking? How are these motivations related to the contexts in which extreme drinking occurs? Third, what kinds of cultural, economic, structural and political factors encourage the occurrence of extreme drinking and, conversely, which ones discourage extreme drinking? Are there meaningful patterns related to these factors? Finally, what specific issues should extreme drinking harm prevention and harm reduction strategies focus on? Do members of this subculture take notice of harm prevention and harm reduction campaigns that specifically target risky alcohol consumption? Do these campaigns affect their drinking behaviour? Why or why not? In this chapter, I address the first three of these research questions.

Participant Biographical Information

Interviewee # 1 was a single female Kelowna resident in her early twenties and a current extreme drinker. At the time of the interview, she worked as a barista at a coffee shop, making the minimum wage of \$10.25 per hour. Her work history and experience was limited to retail and food service jobs. She had not graduated from high school but had plans to complete her remaining courses through an off-campus program with the hope of eventually obtaining a post-secondary education.

Interviewee #2 was a single female Kelowna resident in her late teens and a current extreme drinker. She worked at a coffee shop making minimum wage and had never worked

outside of the food industry. Interviewee #2 had graduated high school and expressed a desire to attend a post-secondary institution but had not yet managed to gain entrance to a program of her choice.

Interviewee #3 was a single male Kelowna resident in his early twenties and a current extreme drinker. He was a high school graduate and had a history of working in service and retail for minimum wage. He was unemployed at the time of the interview. Interviewee #3 had a young child with whom he did not live but for whom he provided financial support.

Interviewee #4 was a single female Kelowna resident and current extreme drinker. At the time of the interview, she worked in the food service industry making minimum wage and had past work experience in retail. She was a high school graduate and had plans to attend a post-secondary institution after saving money and spending some time travelling.

Interviewee #5 was a male Kelowna resident in his early twenties and current extreme drinker. He was in a long-term romantic relationship at the time of the interview. Interviewee #5 was a high school graduate and he did not indicate that he had plans for further education. He worked as a labourer; a job that paid him approximately \$15 per hour.

Interviewee #6 was a female Vancouver area resident in her late teens and a current extreme drinker. At the time of our interview she was in a long-term romantic relationship. She worked in food service for minimum wage plus tips and all of her prior work experience had been in the food service industry. She was a high school graduate and had plans to attend university after upgrading her high school courses at a community college.

Interviewee #7 was a single male Kelowna resident and current extreme drinker in his mid-twenties. He had a history working in the food service industry for minimum wage but

was unemployed at the time of the interview. He was a high school graduate and was working on a Bachelor's Degree at a post-secondary institution.

Interviewee #8 was a single female Vancouver resident in her mid-twenties and a current extreme drinker. She was a high school graduate and did not express an interest in pursuing post-secondary education. Her work history was in the retail and service industries and at the time of the interview she worked as a manager in a retail store for approximately \$15 per hour.

Interviewee #9 was a female Vancouver resident in her mid-twenties and former extreme drinker. She lived in Kelowna for most of her adolescence and young adulthood and moved to Vancouver in her early twenties. Her extreme drinking and involvement in the subculture was quite intense and had gone on for a nearly a decade. She stopped regularly drinking to intoxication about two years before our interview. At the time of our interview, she was in a long-term romantic relationship and was cohabiting with her partner. She was a high school graduate and was attending a post-secondary institution where she was working on an Associate's Degree. She expressed little hope for her educational future and lamented that the cost of her tuition was unlikely to be outweighed by the benefits of her degree. She was actively seeking employment and intended to leave her program if she was able to secure a job that paid more than minimum wage. During a follow-up discussion, this interviewee revealed that she had found employment that paid enough to cover her living expenses and had dropped out of school.

Interviewee #10 was a male Vancouver resident in his mid-twenties who engaged in extreme drinking for a short period of time during his teens but stopped several years before our interview. He was in a long-term relationship and was cohabiting with his partner. He

was a high school graduate and was enrolled in post-secondary school. He had past work experience in the food service and retail industries but at the time of our interview was working in the field of information technology. Although his job paid only slightly more than minimum wage, he felt positive about it because it was directly related to the degree he was pursuing in school and he believed that the experience would assist in developing his career.

Interviewee #11 was a single male Vancouver resident in his late teens and former extreme drinker. He stopped engaging in extreme drinking behaviour about a year before our interview. He was a high school graduate and was pursuing a Bachelor's Degree at a prestigious university, to which he had gained acceptance after completing part of his degree at a community college. Interviewee #11 had moderately positive expectations for his future career but worried that he may have difficulty finding a job in the current economy.

Young Adults' Conceptualization of Extreme Drinking

Perhaps the most important insight that I gathered from my interviews is that extreme drinking is not considered abnormal or particularly problematic by those who engage in it. Extreme drinking is viewed as being widespread and largely unremarkable as an isolated phenomenon. Although some of the outcomes of extreme drinking are thought to be undesirable and destructive, in general, the drinking itself is considered normal within its context. Negative outcomes that occur and are acknowledged as being related to alcohol consumption usually do not motivate extreme drinkers to stop or limit their alcohol consumption in the long-term. My findings suggest that this is partly because the perceived positive outcomes of extreme drinking outweigh the perceived negative ones and also

because extreme drinkers do not believe that there is anything that can satisfactorily replace alcohol and the role that it plays in their lives.

Extreme drinkers do not refer to their drinking behaviours as “extreme drinking” or “binge drinking.” For them, it is simply called “drinking” or, if the drinking takes place somewhere other than the drinker’s house or at a house party, “going out drinking.” Though it is not stated explicitly, to “go out drinking” or to “drink” is to get drunk. “Drinking” means something more than simply consuming alcohol and this is demonstrated by the fact that “not drinking” can mean having one, two or even three drinks, as long as significant intoxication is not achieved. For example, a person may say “I don’t drink when I’m with my parents. I only have a glass or two of wine with dinner.” Someone who is a former extreme drinker might describe their current drinking behaviour by stating “I have quit drinking. I just drink a couple of beers when I’m with my friends.” There was even an occasion on which an acquaintance at a bar told me, while they sipped an alcoholic beverage, “I’m not drinking tonight. I have to work in the morning.” This semantic idiosyncrasy used by members of the extreme drinking subculture is interesting in that it indicates that drinking and intoxication are so inextricably intertwined that if intoxication doesn’t occur, drinking can’t really be said to have occurred. A person may consume alcohol, but if they don’t get drunk, they’re not “really” drinking.

Members of the extreme drinking subculture that I studied tend to socialize with people who drink similar amounts of alcohol as they do, with the same regularity. The limiting of social circles to include predominantly people who engage in extreme drinking functions to normalize high levels of alcohol consumption and many of the negative outcomes associated with it. My structured observations revealed just how normalized heavy

alcohol consumption and visible intoxication is, especially when compared to low or no alcohol consumption. I repeatedly observed behaviours that are indicative of extreme intoxication—inability to stand or walk properly, dashing to a bathroom or outside to a bush to vomit, slurring words to the point of incoherency, and falling asleep or passing out at tables—brushed off and downplayed by companions and observers with no more than a laugh or a dismissive comment. Conversely, people who drank no alcohol or even a small amount of alcohol drew an inordinate amount of attention from their extreme drinking companions. Reactions toward those who chose not to drink to intoxication ranged from friendly inquiry about their refusal of alcohol to full-on hostility. Hostility almost always occurred in male on male interactions, with the extreme drinker questioning the non-drinker’s masculinity either implicitly or explicitly. The most common responses to abstinence or light drinking that I observed were repeated offers to buy or share alcohol with the sober party and light but persistent teasing regarding their sober state. In all of the interactions I observed among young adults in extreme drinking settings, there was a common thread: non-drinking or light drinking had to be explained while extreme drinking did not.

Within the subculture of extreme drinkers, marked intoxication is the norm and sobriety a deviation. However, when given the option of being sober while socializing with very drunk people, or becoming very drunk while socializing with people who are relatively sober, many extreme drinkers choose the former. Interviewee #3, a Kelowna man in his early twenties, explains:

I have enough common sense that I’m not going to go out with my friend who has one or two drinks and get shit-faced [while she is] almost sober... But I don’t have a problem going out and having two drinks with my friend who drinks a lot.

In general, extreme drinkers would rather face the teasing and pressure to drink from their companions than potentially engage in embarrassing drunken behaviour in front of sober friends. In fact, this is one explanation for why extreme drinkers put so much pressure on sober companions to drink. If everyone is drunk, no one is embarrassed. When I was a participant in extreme drinking this was an issue that was explicitly discussed among drinkers. Sober onlookers are viewed as people who have the potential to judge drunken behaviour. Many extreme drinkers believe that the solution to this problem is to get the sober onlookers drunk.

The amount of alcohol that is consumed on an average occasion of extreme drinking varies somewhat among those I interviewed but, on the whole, is vastly more than what is recommended by the CCSA's Low Risk Drinking Guidelines. These guidelines state that women should drink no more than two drinks per day or ten drinks per week, while men should limit their consumption to three drinks per day or fifteen drinks per week (CCSA 2013:2). During my interviews, I asked participants to tell me how much alcohol they consumed when they drank or "went out drinking." Some of their responses are as follows:

Depending on money... the most beer I have consumed before puking would probably be seven beers [or] two bottles of wine... or a mickey of vodka or ...of [Jaggermeister Herb Liqueur]... [or] half of a two-six of rum or just...individual shots of alcohol. Like four or five at the bar."
Interviewee #2, female, late teens, Kelowna

Oh [I drink] as much as I can... maybe six to eight cocktails.
Interviewee #8, female, mid-twenties, Vancouver

[I'll drink] anywhere from a couple drinks to ten to fifteen.
Interviewee #7, male, mid-twenties, Kelowna

It depends what's on sale. We used to drink tequila quite a bit. We'd usually drink a forty [ounce bottle] between the four of us or when I'd go out maybe like six vodka drinks... I remember on my...birthday I had

like 21 shots and that was crazy too much. I probably could get to ... like, ten drinks, before being really ridiculous.

Interviewee #6, female, late teens, Vancouver

When I really wanted to get drunk I would down a full bottle of red wine.

Interviewee #10, male, early twenties, Vancouver

Well, it depends what I'm drinking. If it's beer, I'll have about two beers. If it's coolers, I'll have about four. If it's gin and tonic, I'll have like five or six. If it's rum and coke [I'll have] ten.

Interviewee #5, male, early twenties, Kelowna

That these extreme drinkers' ideas about how much alcohol it is reasonable to drink on a single occasion differs so much from CCSA's (2013) LRDGs makes sense, keeping in mind that the goal of extreme drinking is the achievement of intoxication. The amount of alcohol that CCSA suggests should be consumed on a single occasion would be unlikely to result in the level of intoxication that extreme drinkers desire. Most of the people I interviewed were of the opinion that drinking alcohol without becoming intoxicated is a waste of time and money. Some even reported they felt a sense of anxiety and urgency upon commencing a drinking episode, fearing that they would not be able to get drunk enough with the alcohol or the money that they had available to them. One interviewee explains:

While I'm getting drunk [I feel] a little bit anxious and nervous I guess... hoping that I'll be able to get drunk enough [laughing] like to a certain point you know... hoping that I'll be able to get to a certain stage of getting drunk.

Interviewee #2, female, late teens, Kelowna

Despite their strong desire to become intoxicated, none of the people I interviewed actually wanted to get so drunk that they lost complete control, blacked out or engaged in dangerous or embarrassing behaviours. There is an ideal state of intoxication that extreme drinkers want to achieve and the descriptions that interviewees gave were very consistent as to what that ideal state of intoxication is. This state entails a definite feeling of

drunkenness—“feeling” the alcohol was almost invariably cited as an important aspect of this ideal state—a decrease in inhibitions, feelings of relief from psychological discomforts, a sense of mild euphoria and carelessness, a physical feeling of warmth and “looseness,” increased sociability and talkativeness and increased romantic and sexual feelings. Extreme drinkers desire a level of intoxication that will result in some loss of control and the excitement and uncertainty that will accompany it but they do not want to experience complete loss of control. This finding is in line with Measham’s (2002; 2008) discussion of the “controlled loss of control” that extreme drinkers in the United Kingdom seek through alcohol consumption. Extreme drinkers attempt to walk a fine line between feeling too sober and getting so drunk that they experience negative outcomes. The goal is to get as drunk as possible without having that drunkenness backfire.

Interestingly, participants had difficulty identifying exactly how much alcohol they have to consume in order to achieve their ideal state of intoxication. Participants acknowledged that reaching this state of intoxication is dependent upon numerous variables, including the settings in which they drink, their emotional state before they begin drinking, the type of alcohol they consume, the speed of their consumption and what and how much food they eat before and during their alcohol consumption. Even when attempting to control for these variables, extreme drinkers often unintentionally “overshoot” their desired level of intoxication. It is usually on such occasions that extreme drinkers experience the negative outcomes associated with alcohol consumption, such as physical illness, blackouts, unwanted sexual encounters and embarrassing or dangerous behaviour they would not have been engaged in if they were not heavily intoxicated.

In spite of this, it is important to note that many negative outcomes of alcohol consumption are not viewed by extreme drinkers as reasons to stop drinking. Often these outcomes are not even attributed to overconsumption of alcohol but rather to a failure to control for other variables, as described above. There is a tendency to blame the context of alcohol consumption for subsequent unpleasant experiences. In particular, drinking when in a bad mood or when something particularly upsetting had occurred immediately prior to the alcohol consumption was often mentioned as a precursor to negative outcomes. Another variable that participants cited as a cause of negative drinking experiences was the type, rather than the amount, of alcohol that was consumed. In one case, a particular brand of alcohol was identified as the culprit;

[Blacking out] kind of made me not want to drink Captain Morgan's [Rum] again because that's what I was drinking. And I had another time that I blacked out after I'd been drinking Captain Morgan's too. So I was, like, "well that's obviously bad." I haven't drunk it anymore.
Interviewee #4, female, early twenties, Kelowna

This woman had a frightening blackout experience after drinking Captain Morgan's Rum. This motivated her to change her drinking habits but not in a manner that resulted in a decreased intake of alcohol. She simply replaced the type of alcohol that she felt had caused her to black out with different kinds of alcoholic beverages.

There is also a tendency to justify continuing to drink after experiencing negative outcomes by simply assuming or hoping that those negative outcomes will not happen again. When asked why he continued to drink after experiencing deep regret and guilt over certain drunken behaviours, one participant responded,

I think for me, it's... along the lines of trying to tell myself that it's not going to happen again and that I have self-control over it.
Interviewee #3, male, early twenties, Kelowna

It is as if, each time an extreme drinker begins a drinking session, they are taking a “leap of faith,” hoping they will attain their ideal state of intoxication and the night will play out in their favour, despite having few mechanisms for ensuring that it does.

In sum, extreme drinkers do not view their drinking behaviours as particularly remarkable. Most extreme drinkers consider their drinking to be average and normal within the context that it occurs. Importantly, negative outcomes associated with extreme drinking, while not seen as desirable, are relatively normalized within the subculture. Blacking out, vomiting, engaging in socially disruptive activities and having inappropriate or unwanted sexual experiences are very common and generally not viewed or treated as serious problems. I discuss the mechanisms that members of this subculture use to normalize and make sense of negative drinking outcomes and experiences in greater depth in chapter nine.

Motivations for Extreme Drinking

A key goal of my research project was to identify extreme drinkers’ motivations for drinking large and potentially dangerous amounts of alcohol despite their knowledge of and experience with the potential negative outcomes of this behaviour. The most frequently reported motivations for engaging in extreme drinking are:

- 1) social lubrication
- 2) relief from anxiety and stress
- 3) escape from life problems
- 4) facilitation of romantic encounters
- 5) entertainment

The use of alcohol as a social lubricant is already well documented (see Gusfield 1987:79; Hanson 1995:300; Sheehan and Ridge 2001). As such, it is perhaps unsurprising that the easing of social encounters is a primary motivation for alcohol consumption among the young adults I interviewed. Interviewees reported that consuming alcohol makes it easier for them to relax around large groups of people and that it facilitates conversations and friendly interaction. Intoxication not only makes these social encounters easier for extreme drinkers but it also sometimes gives them the desire to engage in them. A person who usually prefers to be alone or in the company of only a few people may drink alcohol in order to create in themselves a desire to attend a large house party or go to a club or a bar. Drinking allows normally reserved people to become more social and outgoing and to enjoy situations that they might otherwise not find enjoyable. One interviewee explains:

I'll binge drink... in any party scenario generally, just because I don't like being around large groups of people. It just freaks me out ... I just can't handle it. Like, if I drink ... I just feel like there's this wall where I don't have to actually communicate with people. It's just like mindless interactions... [Then] I feel pretty chatty and outgoing. Most people don't know that I'm not outgoing at all, because I only ever see them when I'm really drunk... When I'm drunk I'm like a completely different person, just, different.

Interviewee #2, female, late teens, Kelowna

Another participant describes his experiences;

I think [when I drank] it was because everyone else did it and I hated everyone a little less when I was drunk... Same goes with [my] roommate and his friends; they didn't annoy me as much when I was intoxicated."

Interviewee #11, male, early twenties, Vancouver

What is striking about the use of alcohol as a social lubricant in this population is that it seems to be implicitly required for many social events. The idea of socializing with a group of peers without consuming at least some alcohol is quite foreign to the people I interviewed. Most interviewees indicated that being sober at a party or other relatively large social

gathering was a distinctly uncomfortable experience, which they actively avoid. Even the perceived awkwardness of arriving sober at a party, bar or club is often avoided by engaging in something called “pre-drinking.” Pre-drinking is a well-known and widespread practice in the extreme drinking community. It entails drinking alcohol, usually with a relatively small group of close friends, before arriving at the primary drinking event location. Among the community that I studied, pre-drinking normally occurs at the home of one of the drinkers, though it may take place in a restaurant or pub. The purpose of pre-drinking is manifold. Keeping in mind that the purpose of the drinking is to become intoxicated, people may engage in pre-drinking in order to avoid the high cost of consuming all of the evening’s alcohol at a club or bar, where the price of alcoholic beverages is considerably higher than alcohol purchased from a liquor store. Pre-drinking may also be used as a way to extend the drinking experience. However, as mentioned above, it primarily serves as a social “warm-up” for the drinking event to follow. Most often, the intention is to achieve a low level of intoxication in order to ease the transition into a high-energy party environment and to assuage anxieties that may arise when socializing in a very large group of people.

It is interesting to note that the settings in which extreme drinking often occurs—bars, clubs, house parties—are, despite being highly social environments, settings in which the extreme drinker may feel a sense of anonymity or at least that their presence and behaviour are less likely to be the object of scrutiny. Drinking establishments are dark, loud and generally densely packed with people. In some of the clubs where I conducted observations, it was difficult to see a few feet in front of me, let alone discern nuanced facial expressions or body language of those around me. Add to this a noise level that makes conversation difficult in some situations and nearly impossible in others, and I can see how pressures to perform

socially may not be felt as intensely in these places. Furthermore, the expectation that the majority of people in these settings will have their senses dulled from alcohol consumption contributes to the feeling that one can relax without concern that their behaviour will be judged too harshly. It is ironic that settings that are packed with so many people seem to offer a sort of safe haven to people who have anxiety about socializing. Drinkers can drift in and out of social interactions as they please, easily lose themselves in the dark crowd if a situation becomes uncomfortable, and reasonably expect that any untoward behaviour on their part will go unnoticed, be forgiven or be entirely forgotten by the next day. In chapter six, I provide detailed description and analysis of the particular social and drinking behaviours that I observed in various drinking settings.

Strongly related to the use of alcohol as a social lubricant is its use as a facilitator of romantic encounters. Alcohol is a crucial aspect of courtship among the young adults with whom I worked. One of the women I interviewed estimates that, nine out of every 10 of her friends' long-term romantic relationships began with a drunken sexual encounter. I can say with confidence that, among this subculture, consuming alcohol and subsequently becoming intoxicated with potential sexual partners are the primary means for young adults to initiate romantic relationships. Indeed, participants who were asked if there are alternative ways to initiate a sexual or romantic encounter had little to suggest. Some proposed that if alcohol were not an option, they would simply resort to alternate intoxicants, such as marijuana or other illicit drugs.

The following are quotes from some interviewees explaining their use of alcohol in their romantic and sexual endeavours. Two participants noted that a loss of inhibitions enabled them to approach and proposition the people to whom they were attracted;

I think you have less restraint on what you say and more willingness to do things that you would normally not do or say... You know, when you're drunk, you might go up to a girl and say "ah, let's do it [have sex]" ...It gives you less inhibition and more leeway.

Interviewee #3, male, early twenties, Kelowna

I guess sometimes [drinking] makes you want to take action on things. If you like someone [romantically] you might be like "oh, I want to text them and tell them that I like them."

Interviewee #4, female, early twenties, Kelowna

Another interviewee explained her need to be intoxicated during romantic and sexual encounters in order to ease her feelings of anxiety and self-consciousness.

If it was like a date or any sort of romantic situation, I was really, really, *really* self-conscious and insecure and did not feel comfortable for years having any sort of romantic or sexual interaction with a person without being near blackout drunk. I guess [it was] so I didn't have to feel like...responsibility for it... You know, droopy eyed and falling over is now considered sexy which is a really strange contrast to how aware we are of like date rape and consent issues... It's a shortcut because you lower inhibitions and cut out a lot of anxiety. And because of our archetypes that we look to in greater cultural situations, it's totally acceptable and it's become a part of courting to get drunk with someone. When I was dating people, it was like "let's go get a lot of beer." Like, that was our first date... I've probably had sex with over 50 people and maybe 15 of those people were sober the first time we slept together, which is really sad and disturbing, but it is what it is.

Interviewee #9, female, mid-twenties, Kelowna-Vancouver

It is notable that this interviewee indicates she believes that extreme drunkenness may absolve drinkers from at least some of the responsibility for sexual interactions that take place when intoxicated, while at the same time she acknowledges the problems that alcohol consumption poses for issues of consent to sexual activity.

Interviewee #10, a Vancouver male in his mid-twenties and former extreme drinker, reported that he did not enjoy the taste of alcohol or the feeling of intoxication but, despite this, had engaged in extreme drinking on a number of occasions for the explicit purpose of facilitating romantic relationships. He explained that the last time he drank to intoxication

was when he met his current girlfriend— with whom he had initially become acquainted over the internet—in person for the first time. He justified his choice to drink by simply stating “... [I knew that] she drank a lot and I wanted to be cool.” His alcohol consumption on this occasion resulted in a sexual encounter which then developed into a long-term romantic relationship. That someone finds both the experience of consuming alcohol and the resultant intoxication to be significantly unpleasant but is nonetheless willing to engage in extreme drinking in order to facilitate romantic relationships, speaks to the importance of alcohol use in courtship behaviour among young adults.

Another major reason for alcohol consumption among extreme drinkers is the release that it offers from anxiety and stress. All but one of the people I interviewed reported using alcohol in this way at least some of the time. Stressors that alcohol is used to counteract include difficulties with romantic relationships, problems or general dissatisfaction with work or school, and conflicts with friends or family members. Interestingly, feelings of impotence and hopelessness regarding the causes of stress seem to increase the desire to drink. Alcohol appears to function as a means for releasing stress and anxiety related to life problems that the drinkers cannot change or that they perceive as being too difficult to change. It is a method of releasing negative emotions without actually addressing the basis of those negative emotions. Interviewee #9, who was an extreme drinker in her late teens and early twenties but had significantly decreased her alcohol consumption in the years leading up to our interview, explains:

I was completely self-medicating. I was drinking to get drunk because I had extreme social anxiety and I was constantly stuck in a social situation that I was uncomfortable with. I was living in a very small town [Kelowna] that I grew up in and I had rough teen years and I was being forced to be in contact on a regular basis with people who just brought up really, really uncomfortable memories and situations... Drinking was a

way to escape that because I blacked out very quickly and just lost my, you know, chronic embarrassment and anxiety.
Interviewee #9, female, mid-twenties, Kelowna-Vancouver

It is particularly notable that alcohol is sometimes used to escape or forget about problems that have occurred *because* of drinking. The same woman quoted above related this to me in quite explicit terms.

Unfortunately getting blackout drunk just kind of compounded the embarrassing situations thing. So I think I was drinking more because I was embarrassed about the stuff that was happening when I was drinking and there was no escape from it.
Interviewee #9, female, mid-twenties, Kelowna-Vancouver

In this way, extreme drinking may become a cyclical process. The drinker becomes very intoxicated and engages in or is the victim of behaviours that leave lingering negative feelings after the drinking experience ends. The drinker is then driven to become intoxicated again, in order to experience relief from those negative feelings. Their intoxication may result in more negative experiences, which then encourage more drinking and thus the drinking spiral perpetuates itself.

Contextual Factors

Upon reviewing my research data, I realized that my questions regarding the cultural, economic, structural and political factors that encourage or discourage extreme drinking are not easily answered. My primary method of data collection—semi-structured interviews—elicited information that was very much focused on personal experiences and discussion of context tended to centre on the social, rather than on larger, more abstract cultural factors. Though they were very enthusiastic about discussing their personal experiences with alcohol consumption, for the most part, interviewees were not interested—even when prompted—in

engaging in prolonged or explicit discussion of the broader cultural, economic, structural or political factors that affect their alcohol consumption. In spite of this, there are some observations that I can make based on my interpretation and extrapolation of the data, combined with my own experiences in the extreme drinking community.

I found one notable difference between the reported drinking experiences of interviewees from Kelowna and those from Vancouver and I believe that this difference speaks to some of the cultural factors that influence extreme drinking. Among Kelowna participants, alcohol consumption and the resultant intoxication is viewed, in and of itself, as an extracurricular activity. There is a sense that alternate extracurricular activities are either not available or not appealing. I have some insight into this issue, as I spent most of my teens and young adulthood in Kelowna and often engaged with the extreme drinking community there. Until recent years, options for entertainment and leisure activities for young adults were very limited, particularly for those of us who did not come from wealthy families. Kelowna is a tourist and retirement destination and the entertainment options that are available in the city reflect that demographic. Kelowna and the surrounding area are replete with wineries, golf courses, ski-hills, spas and resorts. These attractions are primarily geared towards older, relatively wealthy adults and leave little room for more affordable means of entertainment. There is an overwhelming sense among the extreme drinkers in Kelowna that they drink for fun because there is simply nothing else to do. One interviewee explains:

What can I do for fun? When I was 13, I'd call my friends and we'd play videogames in my basement for 18 hours and come upstairs and not know what [we were] doing. When you're [older] it's like 'let's go to the bar and have some drinks.' I feel like I still could be that 13 year old in the basement and still have as much fun but it doesn't work like that for some reason.

Interviewee #3, male, early twenties, Kelowna

Even when non-drinking activities were engaged in, such as going bowling, going to see a movie or going for a hike, these activities were often viewed as add-ons to drinking. Drinking was the “main event” while other endeavours engaged in during the drinking session were simply the side show. Interestingly, alcohol consumption and its association with other activities seem to have a reverse relationship among the group of current and former extreme drinkers I interviewed in Vancouver. Although drinking to intoxication is or was, without a doubt, an essential part of their extracurricular activities, it is more likely to be seen as something that enhances other pursuits, rather than being the primary activity. I speculate that this difference may be due to the wider range of entertainment options available in Vancouver.

Luxury attractions are, of course, abundant in Vancouver but, unlike in Kelowna, so are lower-cost entertainment options. There was a palpable sense of boredom among the people I interviewed in Kelowna and I did not sense that same boredom among the people I interviewed in Vancouver. Of course, it is important to note that my interviewees were by no means a representative sample from the two locations. Furthermore, three of the five interviewees in Vancouver were former rather than current extreme drinkers; that is, all of the former extreme drinkers in my study were concentrated in the Vancouver group. Thus, it is entirely possible that the differences I found between the two groups in the reporting of their extreme drinking experiences were due, at least in part, to the lopsided occurrence of current versus former extreme drinkers. It is also possible that this thematic difference was a mere coincidence. I note that it is unclear whether the lack of low-cost, youth-oriented entertainments options in Kelowna is real or simply perceived by extreme drinkers. These are

certainly issues that deserve further inquiry and I intend to investigate them in future research.

Structurally, my study suggests that extreme drinking is encouraged by a real or perceived lack of access to mental health support and resources. Conversely, it tends to decrease when people feel that they are receiving adequate treatment for their mental health issues. Though it is beyond my expertise to say whether or not any individual in this study suffers from mental illness, two of my research participants explicitly stated that they drank or still drink to relieve the symptoms of what they recognized to be mental illness.

Interviewee #9, who engaged in significant, long-term extreme drinking, greatly decreased her intake of alcohol after accessing mental health care.

A lot of that dangerous drinking... was very much fueled by hopelessness. I did not see any worth to my existence or any chance that I could lead a happy normal life so [I thought] I might as well take the numbing effect of getting wasted because it was [laughing] socially acceptable. There was a way that you could numb yourself out and mind the pain and still somewhat present yourself as a participating member of society. About three years ago I was actually diagnosed with ADHD by a proper psychiatrist and began treatment and medication for that and, combined with moving to a new city [Vancouver], I instantly lost any and all desire to drink because I lost any and all desire to escape uncomfortable situations.

Interviewee #9, female, mid-twenties, Kelowna-Vancouver

Aside from this, 9 of eleven interviewees stated either explicitly or implicitly that they drank to intoxication to overcome some degree of social anxiety, which may be indicative of mental health issues. Mental health services can be difficult to access, especially when one does not have an extended health care plan through school or an employer.

Inability to pay out-of-pocket for mental health care usually excludes the possibility of accessing a psychologist or counselor since British Columbia's Medical Services Plan does not cover the cost of these services (British Columbia Psychological Association 2015). On

top of this, accessing mental health professionals can entail a long and convoluted process of referrals and months-long waiting lists and several of the people I worked with reported difficulty navigating the system. In the case of interviewee #9, it was her enrolment in a community college that eventually allowed her to access the services of a psychiatrist and counselor. With these barriers in place to accessing care, young adults may feel helpless in their suffering and turn to alcohol for relief.

Politically, a society focused on neoliberal values that lacks access to avenues for culturally sanctioned forms of success cultivates feelings of apathy and hopelessness that lead to the desire to engage in extreme drinking as a means of escape. To this effect, young adults in this study have struggled economically with entering or attempting to enter the work force in a recession era following the global market crash of 2007-2008. The majority of participants in this study report working in low-paying service sector jobs with little—if any—opportunity for advancement. Among this subculture, living pay cheque to pay cheque is the norm and incurring credit card and student loan debt is routine. These young adults perceive that their labour is undervalued as is reflected not only in their poor wages but also in poor treatment by their employers. Those who were enrolled in post-secondary school expressed minimal and often only tentative hopes for their employment future. There is a saying among this subculture that “a Bachelor’s Degree is the new high school diploma,” which indicates a general awareness that, in the present economy, an expensive university education is no longer enough to ensure gainful employment. Interviewee #9 explains her perspective on the situation:

We’re [at] this really weird point where a lot of us are brutally poor... but we have iPhones or whatever. So it kind of fuels the apathy where we have all of these things and gadgets. You know, [we have] instant gratification items but we’re living pay cheque to pay cheque and we

have no hope of ever escaping that situation. But then there's alcohol. ... Like we don't have any route. There used to be a track that you could follow that was guaranteed to be success or at least you could really believe that you were guaranteed success. Our generation has nothing like that. We don't. Most of us can't even be deluded into thinking that. So alcohol works.

Interviewee #9, female, mid-twenties, Kelowna-Vancouver

In general, these young adults feel that their economic outlook is bleak, regardless of what they do. At the same time, our neoliberal culture suggests that a lack of economic success is due to a failure to work hard enough or to work at the right things. Young adults live in a society that denies them access to success goals, while at the same time placing blame for failing to attain economic success squarely on their shoulders. This manifests feelings of despair and impotence. In the context of a culture of instant gratification and distraction, as the above interviewee suggests, sustained feelings of inadequacy and impotence can generate apathy. It is interesting to note that of the three former extreme drinkers I interviewed, the one who had the most success in continued avoidance of extreme drinking behaviour and the least desire to engage in it at any time in the future was the only one who expressed a firm belief that his current employment and education would lead him to a stable and comfortable career. Although far from being conclusive, this is suggestive of the possibility that an improved economic outlook and a more certain employment future for young adults can function to decrease their desire to engage in extreme drinking. The effect that perceived or actual prospects for the achievement of culturally sanctioned success goals and attitudes towards these goals have on extreme drinking behaviours is discussed more thoroughly in chapter nine.

Culpability for Drunken Behaviour

As a member of the extreme drinking subculture in Kelowna and Vancouver, I noticed that there was an apparent conflict between drinkers' reported beliefs about culpability for drunken behaviour and the way that they actually treated drunken behaviour. Extreme drinkers say that drunkenness is not an excuse for bad behaviour yet, in practice, they often treat intoxication as a mitigating factor when considering the amount of blame that a person will be allotted when they behave in an undesirable way. During my study, I asked all interview participants about their perceptions regarding drinkers' culpability for behaviours that they engage in when under the influence of alcohol. Specifically, I asked if they thought that people ought to be held accountable for the behaviours they engage in when they are drunk, to what extent, and why.

Most participants responded that people should indeed be held responsible for their drunken behaviour and that drunkenness is not a valid excuse for engaging in bad behaviour.

Interviewee #5 explains:

I think that they should be held responsible... I think that depending on the outcome or the circumstances... I think that it doesn't matter if someone cheated on someone and they were drunk. I think that they would have been at least thinking about it when they were sober so there's no excuse. If they steal when they're drunk I think it's funny but there's no excuse.

Interviewee #5, male, early twenties, Kelowna

This participant's response suggests that socially unacceptable drunken behaviours are manifestations of desires that people repress when they are sober, indicating that the drinker was likely considering engaging in the untoward behaviour even before they became intoxicated. This interviewee later stated that the only circumstance in which he might

believe that a drinker was not responsible for their behaviour was if they were passed out on the ground. Interviewee #2 concurs that drunkenness should not be used as an excuse.

Yeah, they should be held [accountable]... The very classic example would be like “oh, you slept with my boyfriend.” [Their excuse may be] “but I was so drunk I don’t remember.” It’s like no, I’m sorry, but you’re really drunk. It would be the same as if you were sober. Like why would you do that? You don’t get that drunk with those kinds of people if that’s how you’re going to behave. I guess you should have the same consequences.

Interviewee #2, female, late teens, Kelowna

This interviewee suggests that drinkers should be able to predict negative outcomes of drinking in certain contexts—as, for example, getting drunk with a friend’s boyfriend—before they start drinking. For her, avoiding negative outcomes is strongly associated with the setting and social context of alcohol consumption. If a drinker can avoid drinking in a situation where their drunken behaviour may become a problem but does not do so, then they are to be held as fully accountable for any negative outcomes as they would be if they had been sober.

Another interviewee explained:

Yeah, [they have to take responsibility] for anything they do when they’re intoxicated because they have to take full responsibility for putting themselves in that situation. As far as how they conduct themselves, I would understand they may not have wanted to do a certain thing... not that it wasn’t their fault but that it was not who they are normally. [But] as far as taking responsibility for their actions; absolutely. Anything that happens [and] anything that they do... As far as choosing to drink that much. Even if they kind of didn’t necessarily mean to drink that much, they should still be responsible.

Interviewee #7, male, mid-twenties, Kelowna

This interviewee suggests that he might take an easier stance—that is, that he might be more forgiving of a person’s undesirable behaviour—if that behaviour occurred when they were drunk. However, this forgiving stance only holds true for this interviewee if the drinker in

question is willing to take full responsibility and not blame their behaviour on the alcohol. Ironically, this creates a situation in which alcohol can only be used as an excuse for bad behaviour when the drinker himself does not rely on it as an excuse. An observer may dismiss a fellow drinker's behaviour as being "because of the booze," as long as the drinker is sufficiently apologetic and accepts responsibility.

The most liberal response to this question regarding culpability came from a participant who stated that drinkers only really need to be held responsible for their behaviour if that behaviour is harmful;

For drinking and driving and stuff, I think people should be held accountable. If people are getting hurt, people should be held accountable. But, like, if it's something accidental that doesn't really hurt anybody, I don't know... I guess they should be held accountable if it hurts anyone...or, like, if someone's constantly getting way too drunk and it's affecting people then they should be held accountable for that.
Interviewee #6, female, late teens, Vancouver

This interviewee suggests that it is not really necessary to engage in consideration of culpability for troublesome drunken behaviour as long as the behaviour doesn't cause harm. Behaviour that is not harmful to others can be excused by drunkenness; for example, there is no need to ridicule or punish someone for simply engaging in silly or embarrassing behaviour. This interviewee suggests that drinkers need only answer for their actions if those actions hurt other people.

Another interviewee suggests that people should try to identify whether or not a drinker's problematic behaviour is perhaps being caused by underlying mental health issues. If there are mental health issues, problematic behaviours should be dealt with accordingly.

[They should be held accountable] to an extent. I believe that there is a certain line at which instead of trying to discipline people for what they did while drunk, one should start trying to forward them to a mental health professional This line is usually for when people obviously drink to

cope with their problems and then it spirals out of control. But if you were drunk and groped someone, you should be held accountable, because it's obvious that you did that because you're an asshole who thinks that it's allowed.

Interviewee #11, male, late teens, Vancouver

While this echoes interviewee #6's concern about whether or not the behaviour was harmful, it goes a step further by suggesting that the root of the harmful behaviour needs to be investigated beyond the role that alcohol plays. In Interviewee #11's view, a person who engages in harmful behaviour should either be disciplined (and have moral judgements made about their character), or be sent to a mental health care provider to assess underlying issues that may be causing their untoward behaviour, depending on the factors motivating the behaviour and the form that the behaviour takes. While there is recognition that culpability can manifest in different ways, in no scenario is drunkenness by itself seen as an acceptable excuse.

Another interviewee explained:

I mean, your perspectives might be off when you're drinking but you're making that choice. I think that's why there's a legal drinking age. You have to be responsible enough to take those precautions when you're drinking.

Interviewee #8, female, mid-twenties, Vancouver

This interviewee's mention of legal drinking age is an interesting caveat. She is the only interview participant who mentioned age as being a deciding factor in whether or not a drinker should be held accountable for the behaviour they engage in when they are intoxicated. It would be interesting to investigate in the future whether or not, in general, people's perceptions of culpability for drunken behaviour are influenced by the age of the drinker. In line with the responses of other interviewees, this participant notes that the choice

to engage in alcohol consumption means taking responsibility for the outcomes of that drinking even if those outcomes were not desired.

Interviewee #4 suggests that a drinker should be held responsible for their behaviour so long as they are not in a blackout state when the behaviour occurs:

I think unless you are like blackout, falling-over drunk, you pretty much know what's going on and... you're still making choices in your mind, like "should I do this?" "Should I say this?" Like you're still aware of what you're doing. So I think that must be the extent [of] that. If you're not going to remember, if you wake up and you don't remember what happened, then you can't really be held responsible I guess, because you obviously don't even know what was going on. But if you do remember it and you remember making the choice and remember everything that happened then it's like, well, you knew. You knew what was going on.
Interviewee #4, female, early twenties, Kelowna

This response brings up some interesting questions. The interviewee suggests that when a drinker is blackout drunk and cannot remember their behaviour the next morning, they should not be held accountable for that behaviour. For this participant, the crux of the issue is choice and whether or not any degree of drunkenness results in an inability for the drinker to choose their behaviours. Implicitly, she suggests that a person who is blackout drunk is not really choosing to behave the way that they do. If the drinker is not making choices about their behaviour, then the question of who *is* making those choices remains. This issue of choice is further complicated by other interviewees' observations that the drinker is responsible for choosing to drink and is therefore responsible for any outcomes of that drinking.

Interviewee #3 focuses strongly on the role that choosing to drink plays in placing blame and responsibility for behaviours that occur after that drinking takes place:

I think 100 per cent they should [be held accountable]. I think part of being drunk is knowing that you're responsible for what happens when you're drunk. I've had a situation where... a friend of mine's girlfriend

went out to a club and we were all there [but he wasn't] because he had to work in the morning and she ended up dancing with another guy and he kissed her. She didn't kiss him back, apparently. I didn't see it but anyways, the point is... she said "I was drunk. It's not my fault." I think that's complete bullshit. I mean [if] you hit someone when you're drinking and driving, you're still hitting someone with your car. I mean, drinking should have no bearing on how much responsibility you take for your own actions. I think that people who drink and expect to not have to pay for the consequences are just being ignorant. I think that... and, at least for me... part of drinking is knowing what's going to happen once you start drinking.

Interviewee #3, male, early twenties, Kelowna

Again, the ability to assess the context of alcohol consumption and predict likely outcomes is cited as an important part of being a drinker, and expectation that drinkers can and do engage in such deliberate assessment and prediction contributes to the belief that drunk people must be held accountable for the outcomes of their drinking. It is of note that Interviewees #5, #2 and #3 all used examples of problematic sexual behaviour to make their points about culpability for drunken behaviour. Drinking and driving was also mentioned numerous times. These seem to be "go-to" issues when socially unacceptable drunken behaviour is raised as a topic of discussion and this suggests that these negative outcomes are frequently experienced by members of this subculture.

Interviewee #10 provided a particularly detailed and insightful answer to the question regarding culpability for drunken behaviour, also ultimately concluding that drinkers should be held responsible for their behaviour:

It's a multipronged question - in a perfect world, people would not be held accountable for their actions while drunk. But we live in a world of miscommunication and deliberate falsehood. What if you get drunk intending to do something? Are you still accountable? What if you don't intend to get drunk, but do, and then do something? All in all, I feel that as an adult, it is your responsibility to A) monitor your alcohol intake and B) drink in safe places, just as if you were doing LSD or mushrooms. I know that that is also idealistic—not everyone is sound of mind to begin with, and of course you can have your drink spiked even among friends or

at a 'safe' party. So the issue is really "Should people be held responsible for their intentions," in which case the answer is "no," but we cannot police that accurately. People should be held responsible for their actions and in some cases the consequences of their actions (e.g. neglect). This may result in unfortunate cases, in which the presence of just and rational rulings that include rehabilitation and therapy to help cope are obvious (but lacking) necessities; but overall, inebriation should not be available as an alibi.

Interviewee #10, male, mid-twenties, Vancouver

As noted above, a common theme in several of these responses is the notion of choice. There are many choices to be made when embarking on a session of extreme drinking. First and foremost, there is the choice to drink. The drinker also chooses where, when, and with whom they drink. They make choices about what and how much they are going to drink, how quickly they will drink, and if and what they will eat while drinking. But as discussed above with regard to the ephemeral, "ideal" state of drunkenness, despite attempts to make choices that will create a pleasant experience, extreme drinkers frequently fail to achieve precisely the state of drunkenness that they desire. Extreme drinkers generally make choices with the goal of getting as drunk as they possibly can without losing complete control. It's safe to say that none of the people I worked with ever really wanted to get blackout drunk, embarrass themselves or put themselves in danger. I sincerely doubt that any of them ever made a conscious decision to drink so much that they behaved in ways that put their social relationships in jeopardy or got them in trouble with the law. Nevertheless, these kinds of negative outcomes happen to extreme drinkers on a fairly regular basis.

Despite espousing relatively uniformly the notion that drinkers should be held accountable for the behaviours they engage in when drinking—in much the same way they would be if they were sober—in my experience, members of the extreme drinking subculture do not usually hold themselves or their fellow drinkers to quite such strict standards. From

both a traditional ethnographic and autoethnographic standpoint, my observations of this subculture indicate that alcohol use and drunkenness is almost always used and accepted as an excuse for problematic behaviour that occurs when intoxicated. That is not to say that a drinker will be excused completely for anything they do when drunk but rather, the presence of alcohol in a situation definitely influences people's perceptions of how culpable a person is for their negative behaviour. Extreme drinkers are more likely to investigate motives for negative or socially unacceptable behaviour when the person who engaged in that behaviour was sober when it occurred. If a person breaches social rules when drunk, motivations for this breach tend not to be explored in depth; "they were drunk" is usually considered a sufficient explanation. That extreme drinkers' actual response to drunken behaviour is so different from their ideals about culpability for negative drinking outcomes strongly suggests extreme drinkers are aware that they are not quite as in control of their drinking and related behaviours as they would like to be. In chapter seven, I explore cultural influences that limit young adults' ability to control the outcomes of their alcohol consumption by examining the context in which they learn how to drink.

In this chapter I emphasized presentation of data from the semi-structured interviews that I conducted. In the following chapter, I present ethnographic data that I gathered during my observations of extreme drinking behaviours that took place in bars, pubs, and clubs in Vancouver and Kelowna. I also draw from personal experience to offer autoethnographic discussion of extreme drinking events that take place in private residences. I discuss characteristics of each setting, the kinds of drinking and behaviours that take place, and risks and potential harms that are associated with them.

Chapter 6: Results of Ethnographic and Autoethnographic Observations

In this chapter I provide detailed descriptions of settings where the young adults in this study engaged in extreme drinking. I also discuss the behaviours that I observed in each setting and the differences among the settings with regard to expected and allowed social conduct and drinking patterns. I focus particularly on the risks associated with each drinking setting. I draw from structured ethnographic observations that I conducted in pubs, bars and clubs in Vancouver and Kelowna. I also utilize autoethnographic knowledge of these drinking settings. Private residences are equally important as settings for extreme drinking, although I was unable to conduct formal structured observations in them as a part of this study. I therefore rely on my past experiences in such settings to offer autoethnographic insights regarding drinking and related social behaviours extreme drinkers engage in at private residences.

Hutton et al. (2013) note that drinking often escalates over the course of a night as drinkers move from relaxed, low-key environments like pubs, to more exciting, high-energy settings, like dance clubs. A similar pattern is present among the extreme drinkers with whom I worked. Though I discuss each setting individually, readers may find it helpful to keep in mind that a full night of drinking often takes place in several locations. I present my discussion of drinking locations in roughly the order that they would be attended by drinkers over the course of a night of drinking. While the pattern varies somewhat, an average night of drinking begins with pre-drinking at a private residence and moves to a pub, then a bar, and then a club. Sometimes drinkers attend after-parties at private residences to end a drinking session after drinking establishments have closed and house parties have ended. The most common outliers of this pattern are house parties and small gatherings in private residences.

Drinkers who drink in these settings are more likely to remain at the small gathering or house party for the entirety of the drinking session, rather than move from location to location.

Private Residences

The extreme drinkers I worked with drank at home for various reasons including desire to limit or control social interactions, to avoid rules and regulations associated with drinking in licensed establishments and to save money on alcohol, since alcohol purchased in licensed establishments is considerably more expensive than that purchased from a liquor store and consumed at home. Interestingly, private residences were the settings in which I observed the most reserved drinking behaviour and the most extreme, as compared to behaviours that I observed in any of the licensed establishments. When used as the sole location for a night's drinking event, a private residence may be selected as the setting because the drinkers want a relatively low-key night with a small group of selected friends. Alternatively, private residences are sometimes used for house parties, which can be large gatherings, often with indiscriminate guest lists, where extreme drinkers can drink and behave in ways that go beyond what is allowable in licensed establishments. When used as one setting during a night of drinking that involves multiple locations, private residences are usually used at the very beginning of the night for pre-drinking or at the very end, for the "after party."

Small Gatherings

The nights of drinking I observed or participated in that were limited to a drinker's home and occurred in the company of a small group of friends—usually fewer than ten—rarely escalated into any kind of problematic behaviour. Although these occasions entailed drinking

to intoxication, and certainly drinking more than CCSA's LRDGs recommend (2013), I seldom observed anyone get so drunk that they lost control of their behaviour or entered a blackout state. Although I did observe vomiting on a few occasions, these occasions were rare. These nights of drinking usually end earlier than those that take place at licensed establishments, house parties or after-parties. My observations suggest that, due to contextual factors, drinkers at small gatherings are better able to identify a point at which they have had enough to drink. In my experience, small gatherings are settings where drinkers are most likely to attain and sustain their "ideal" state of intoxication. As discussed in chapter five, this ideal state entails a feeling of drunkenness without complete loss of control. The ideal state is one where the drinker is as drunk as they can be without experiencing negative outcomes.

I suggest that the relaxed, relatively quiet nature of small gatherings in private residences allows drinkers the opportunity to reflect on their state of intoxication and the ability to better identify their cut-off point. Unlike more crowded, high-energy drinking environments like bars, clubs or house parties, the primary activity of small gatherings in private residences tends to be—aside from the drinking—conversation with friends. The distinctly social nature of these gatherings and the focus on conversation plays a role in drinkers' identification of their limit for alcohol consumption, as they are likely to notice when they begin slurring, stumbling over words or repeatedly losing a train of thought. Whatever the reason, the drinkers I observed rarely overshot their desired level of drunkenness or experienced negative drinking outcomes when they drank in small groups in private homes.

The rarity of negative outcomes associated with drinking at small gatherings in private residences might be related to a lack of opportunity for these outcomes to occur. At small gatherings in people's homes, drinking sometimes has to stop because the drinkers run out of alcohol and are either unmotivated or lack the means to obtain more. In such situations, the most common obstacles to replenishing alcohol supplies are lack of access to transportation, lack of financial resources and liquor stores' limited hours of operation. These barriers put a limit on how much alcohol is consumed at small gatherings and thus reduce potential negative outcomes. As I discuss later in this chapter, negative outcomes often occur when drinkers become separated from their trusted companions. When drinking with a small group of friends in a private residence, there are no crowds to get lost in and no strangers to go home with. The people present are usually all friends and are therefore looking out for each other's safety. This contributes to the relatively low-risk nature of drinking in such settings. The primary negative outcomes that I observed as being associated with drinking at small gatherings were driving home drunk, calling or texting someone and saying something that the drinker regretted the next day and waking up with a hangover that interfered with the next day's responsibilities.

Pre-Drinking

Pre-drinking sessions in private residences are high-energy affairs that usually involve loud music, dancing and a general sense of excitement for the main drinking event to follow. Pre-drinking allows drinkers to loosen up before socializing with a large group of people and to limit the amount of money that is spent on expensive drinks at pubs, bars or clubs. Pre-drinking is also meant to prolong the night's drinking experience by allowing drinkers to get

an early start. In my experience, pre-drinking by itself almost never results in negative outcomes like vomiting, injury, embarrassing one's self, blacking out or passing out. This is partly because pre-drinking sessions are relatively short—usually only one to two hours duration—and are understood by those engaging in them to be a prelude to the main drinking event where most of the night's alcohol will be consumed. Drinkers know that if they drink too much when pre-drinking they may be denied access to the drinking establishment or event that they are headed to. If they really go too far they may become ill and have to go home before the main event begins. These are all motivating factors in drinkers' limiting of alcohol consumed during pre-drinking sessions.

One significant negative outcome of pre-drinking is that it often results in young adults driving to the next drinking event location while they are intoxicated. This obviously carries with it a serious risk of car accidents, injury or legal repercussions. Another notable issue is that pre-drinking, by design, results in drinkers arriving at drinking events already intoxicated. This sets the stage for poor decision making regarding subsequent alcohol consumption. I observed that people who engaged in pre-drinking tend to drink more and to drink faster once they arrive at the main drinking event. I also observed that people who engage in pre-drinking seem less able to judge when their limit of intoxication has been reached. Since it increases the overall amount of alcohol consumed over the course of an evening, pre-drinking is a precursor to many of the negative outcomes that I discuss below.

House Parties

House parties differ from small gatherings and pre-drinking in a number of ways. First, house parties have far more people in attendance. When house parties reach peak capacity, houses

are packed with people, often to the point that guests are spilling out onto balconies, front lawns, driveways and streets. Second, house parties do not have strictly delineated guest lists and attendees are not limited to the host's friends. News about house parties is spread by word-of-mouth and often over social media, which usually results in attendance by people who are several degrees removed from the host; for example, a friend of a friend. Third, although the drinking that occurs at house parties is not uniform among all attendees, it is generally geared toward achieving a state of intoxication that is significantly more extreme than that achieved at smaller gatherings. I note that social pressure to drink large amounts of alcohol is particularly pronounced at house parties. Guests who arrive relatively sober or who drink slowly are usually encouraged to "catch up" by more intoxicated attendees; that is, they are pressured to drink quickly in order to reach the same level of intoxication as their companions.

Common to all house parties that I observed was the presence of a significant group of people whose clear goal for the evening involved getting as drunk as possible as quickly as possible. Interviewee #9 gave a very frank assessment of house parties, describing them as "like a circus of seeing who could be the most outrageous with alcohol." Indeed, house parties tend to involve a lot of competitive and experimental drinking. Drinking games like beer-pong—a ping pong-like game that involves the loser rapidly consuming large quantities of beer—are common. Creative methods of ingesting alcohol that would not be allowed in licensed establishments also occur at house parties. These run the gamete from the ubiquitous beer-bong to the much less common anal insertion of tampons soaked in vodka. While extreme drinkers in general are quite permissive with regard to drunken behaviour, house parties are notable in that drunken people tend to "get away with" even more than they would

normally. Behaviours that would end an evening for drinkers in other situations—that is, behaviours that would result in forcible removal from a licensed establishment by the drinker’s friends or the establishment employees—are less likely to result in censure at house parties. Examples of such behaviours that I observed include urinating in one’s pants, jumping into pools or lakes fully-clothed, vomiting somewhere other than a toilet, stripping naked, falling over or being unable to walk or stand.

I suggest that this permissiveness with regard to these extreme behaviours is at least partially due to an unspoken collective understanding that people who have completely lost control of themselves serve as the unofficial entertainment at house parties. It is generally expected that if one stays and watches for long enough at a house party, one will be treated to a spectacular show of ridiculous behaviour. I note that the outrageous behaviours described above often occur when the drinker becomes separated from his or her friends. “Losing” a friend who is too drunk is something that I and several of my interview participants have experienced since people who are very intoxicated have a tendency to wander off and get lost in crowds.

As I mentioned above, guests at house parties are not always acquainted with everyone else at the party and attendees may come from a variety of social circles. The presence of people who are not immediately acquainted with the drinker is a particular contextual risk that I call “the stranger factor.” The stranger factor becomes a problem when drinkers get separated from their friends and engage in embarrassing or risky behaviour. Spectators may feel comfortable allowing the behaviour to continue and less responsible for intervening because they are not well acquainted with the person they are observing. It is not a flattering depiction of extreme drinkers, but the truth is that unless the person engaging in

embarrassing or dangerous behaviour is a friend, many people will not try to stop the behaviour or offer assistance. In fact, the most common response to such behaviour is laughter. It is usually appreciative rather than mocking laughter, as spectators are inclined to enjoy the entertainment, but it is laughter nonetheless.

Unlike at small gatherings, where alcohol often runs out, house parties are generally very well stocked. Since the hosts and attendees plan on spending the majority of the drinking session at the party and consuming most if not all of the night's alcohol there, they make sure to purchase a great deal of alcohol in order to ensure that the party doesn't "run dry" after liquor stores close. Since alcohol has a tendency to "go missing" at house parties—that is, it gets consumed by someone other than the purchaser—drinkers may overcompensate and purchase far more alcohol than they actually intend to drink. Overcompensation in alcohol purchases also occurs because drinkers anticipate the possibility that one or more of their friends may run out of alcohol. It is an implicit rule that if a drinker's friend runs out of alcohol, the drinker will be expected to share their remaining alcohol with that friend. As such, drinkers sometimes over-purchase in order to ensure that they have enough for themselves and for their friends' potential shortcomings. Thus, there are usually enormous quantities of alcohol available at large house parties.

The drinking that occurs at house parties is the most extreme of the extreme drinking that I observed and it occurs in a setting without formal controls over alcohol consumption and associated behaviours. The crowds of people, the presence of strangers, the overabundance of alcohol and the loud, high-energy party atmosphere give house parties an ambiance that is similar to that of a club. A crucial difference between a house party and a club is that house parties do not have bouncers looking out for risky behaviour or underage

attendees. Furthermore, drinkers at house parties serve alcohol to themselves. There are no bartenders or servers obligated to refuse service to heavily intoxicated people. This combination of a club-like atmosphere with a lack of the legal and regulatory controls that clubs have, makes for the most extreme and risky of settings for alcohol consumption. Of all of the drinking settings that I observed, house parties had the most frequent and the most severe negative outcomes for extreme drinkers. In my experience, embarrassing behaviours, vomiting, blackouts, accidental injuries, physical violence, unwanted sexual encounters and alcohol poisoning requiring hospitalization occurred more frequently at house parties than in any other drinking setting.

After-Parties

Private residences are sometimes used as locations for after-parties. These are continuations of drinking and socializing once licensed establishments have closed and larger parties have ended. For a number of reasons, drinking, drunkenness and associated behaviours at after-parties are not usually as extreme or intense as they are at house parties. The number of people in attendance is lower at after-parties than at house parties, pubs, bars or clubs. Since after-parties by definition take place after other events have ended, usually in the early hours of the morning, many people have already gone home and gone to bed. The most intoxicated people don't usually make it to after-parties since, more often than not, they become ill or fall asleep before these events begin. Furthermore, the amount of drinking that takes place at after parties is constrained by some of the same barriers that limit drinking at small gatherings as, for example, running out of alcohol and being unable to obtain more.

After-parties do, however, carry some particular risks. Drinkers may bring a person or persons that they met at a drinking event back to their home for after-parties. Conversely, drinkers sometimes go home with a person or persons that they met at a drinking event. Most of the time, this does not result in negative outcomes for the drinkers in the communities that I studied. However, some women experienced sexual encounters that they regretted and others experienced sexual assault. While it is possible that male members of this subculture also experienced these outcomes at after-parties, no such events were disclosed to me. Illicit drug use is another risk factor that is particularly salient at after-parties. This is especially true of stimulants, such as cocaine. Drinkers are typically quite drunk and very tired by the time after-parties begin and some of them use cocaine to boost their energy and allow them to prolong the drinking occasion. More benign stimulants like coffee or energy drinks are also used alone or in conjunction with cocaine. Decisions to consume illicit drugs are facilitated by the lowered inhibitions that result from alcohol consumption and use of illicit drugs at after-parties is often followed by feelings of regret and guilt the following day.

Pubs

Pubs are locations for relatively relaxed, low-key alcohol consumption, usually with a small to medium group of friends. In my classification scheme, pubs differ from bars and clubs in a number of ways. First, pubs place significant emphasis on food sales. Pubs have menus that feature a variety of appetizers, entrees and desserts. Patrons are seated at tables in fixed locations and are not as mobile they would be in a bar or a club. Most food and beverage orders are taken at the table by a server and brought to the seated patrons. Pubs also differ from restaurants in that they are somewhat more focused on selling alcohol and are not open

to minors. Pubs also have large and highly visible bars to which patrons can walk up and order drinks without waiting for a server to come to their table to take their order. Pubs are generally louder and dimmer than restaurants, though not so loud as to preclude conversation.

Pubs encourage extreme drinking by offering special low prices on particular alcoholic beverages each day of the week. For example, one of the pubs where I conducted observations holds “Tequila Thursday” each week. On Thursdays, shots of tequila are offered at a deeply discounted price. The pub benefits since their promotion draws in plenty of customers who not only purchase tequila but other food and beverages too. The drinkers benefit in that they are able to get drunk for considerably less money than they would usually have to spend. Many pubs also sell novelty beverages and shots that are high in alcohol content but are designed to taste like familiar sweets like cotton candy or root beer. One pub, in which I conducted observations, has a drink menu that is dozens of pages long and contains every alcoholic beverage imaginable. Alcohol is served in many creative ways—in milkshakes, in nested glasses, with multi-coloured whipped cream and even set on fire. These novelty beverages make alcohol consumption, in and of itself, a form of entertainment and encourage drinkers to keep drinking when they might otherwise stop. As an example of this, I observed highly intoxicated people, who acknowledged that they shouldn’t really be drinking anymore, continue to order and drink novelty beverages because they were so tempted to sample as much of the menu as they could.

In addition to the temptation of novel beverages, there are several reasons why patrons at pubs may continue to drink despite recognizing that they’ve reached their limit of controlled intoxication. In pubs, alcohol is readily available and, unlike at small gatherings, it

does not run dry unless the drinker runs out of money. Servers regularly come around and offer to refill drinks. Repeatedly refusing can be embarrassing when everyone else at the table is still ordering and drinking alcohol. In my experience, patrons are most likely to continue drinking even after they've reached their cut-off point, if their friends are still drinking. The drinker may continue consuming alcohol of their own volition by continuing to order drinks; alternatively, when friends notice that a drinker has stopped ordering alcohol, they may purchase beverages for the drinker. This is often done as a means of pressuring the drinker to "keep up" with the level of intoxication of their friends.

In spite of these pressures, drunkenness and related risky behaviours at pubs are limited by certain factors. Pubs boast many food choices and drinkers usually order at least a few appetizers when drinking at pubs. Eating food while consuming alcohol can slow the absorption of alcohol into the body and, as such, can temper drunkenness. Some of the social factors that are present at small gatherings in private residences are similarly present in pubs and help to limit the amount of alcohol that drinkers consume in these settings. Although there is significantly more background noise and distraction, as compared to small gatherings in private residences, socializing at pubs is still very much focused on conversation among friends. Patrons are seated, usually facing one another, and talking is their primary method of interaction. My observations suggest that social situations that focus on sustained conversation help drinkers to assess their level of intoxication and to identify when they should stop drinking. Still, as indicated above, it is clear from my observations of pub patrons that accurately assessing one's state of intoxications and identifying a point at which one should stop drinking does not always result in cessation of drinking.

My statement that socializing in pubs is conversation-focused comes with somewhat of a caveat. Throughout my observations, I noted that when couples or groups of drinkers first arrived at pubs, many of them began using their cellphones or tablets immediately after being seated. They played with and stared at their phones or tablets while making minimal conversation with one another. Often, conversations that did occur entailed sharing or showing something on a phone or tablet. As these people drank and became intoxicated, they paid less attention to their electronic devices and more attention to their companions. Conversations became more engaged and focused on the people who were present. It is as if cellphones and tablets are used as social “buffers” to avoid the awkwardness of sober conversation. As the drinkers become more intoxicated, alcohol replaces the electronic devices as a buffer, and the cellphones and tablets are no longer required to play that role. While I sometimes observed drinkers using phones or tablets as social buffers in other drinking settings, the behaviour was most evident at pubs. It remains unclear to me exactly how and why electronic devices function as social buffers or mediators in drinking settings, and this is an issue that deserves further investigation.

In summation, the drinking that takes place in pubs is relatively less extreme than that which takes place in bars, clubs and at house parties. Although pubs do have the stranger factor, the presence of friends somewhat mediates the risks associated with this. Unlike at a house party or a club, it is relatively easy to keep track of friends who may have had too much to drink. Pubs tend to be less crowded than other venues and the fixed, seated positions of the patrons allow for quick and easy identification of who is where, doing what. I characterize the drinking that takes place at pubs as relatively low risk; however, pubs are often just the “first stop” on the course of an entire night of drinking. The pubs where I

conducted my observations close earlier than the bars and clubs. Most of the pubs are closed by 12 a.m., while bars and clubs are open until 2 a.m. When pubs close, many patrons who are already quite intoxicated make their way to bars and clubs to continue their drinking.

Bars

A bar is a type of transitional space between a pub and a club. While bars offer a few food choices for patrons, they focus overwhelmingly on alcohol sales. Bars generally have fewer seating areas than pubs. Thus, many bar patrons stand and are more mobile than pub patrons. Because entrance to bars is not limited by availability of tables, these settings tend to be more crowded than pubs. Patrons are responsible for eking out their own space within the crowd of people inside the establishment. Bars generally have a few servers canvassing the room for drink orders. Drinks delivered by servers require up-front payment, usually in cash. Most alcohol sales are made to patrons at walk-up bars, rather than delivered by servers. Patrons usually return to the walk-up bar to purchase each drink individually but some people purchase several at once if they are lucky enough to have a table to store them on. Bars, as I categorize them in this study, do not have dance floors, although standing patrons may dance a little if there is enough room for them to do so.

While the focus in pubs is usually on conversing with close friends and companions, bar patrons are more inclined to mingle with the crowd and meet new people. The conversations that take place at bars are quite distinct from those that take place at small gatherings in private residences or in pubs. Conversations at bars frequently occur between people who do not know each other particularly well and are both quite intoxicated. The verbal interactions that I overheard often lacked focus and were usually limited to superficial

topics and “small talk.” I repeatedly observed and overheard conversations between or among people who were quite clearly not listening to or processing what the others involved in the conversation were saying. On some occasions, people were talking—or shouting, as the noise level in bars requires—about completely different subjects and becoming increasingly frustrated with the miscommunication while making little effort to resolve it amicably. Another form of conversation that I frequently observed and was sometimes party to, is the “one-sided” conversation. Such conversations involve a talker—usually the more intoxicated party—conveying a lengthy, rambling monologue to a listener who is not afforded many chances to respond. Typically, the listener shows visible signs of annoyance, which the talker either does not notice or ignores. During both types of conversations described above, drinkers are talking *at* people rather than conversing *with* each other. These conversations, during which no real communication takes place, are one of a number of drinking-related behaviours I observed, which I call “anti-social socializing.” These behaviours also include flaunting body parts or material possessions at companions and strangers, stealing items or alcoholic beverages from other bar patrons, and aggressive verbal or physical sexual propositions targeted toward people who are obviously unreceptive and uncomfortable.

It is apparent to me that during certain episodes of drunkenness, some extreme drinkers experience severely limited capacity to recognize, process and interpret social cues from others. These episodes produce the behaviours associated with antisocial socializing. When they stop picking up on social cues, the drinker’s focus seems to tunnel down to their individual experience rather than the experience of the group. During such episodes, drinkers focus on getting their own needs met—needs for attention, drinks, food, sex and expression

of aggression—often to the detriment of those around them. Other people at the drinking location, including friends and strangers, continue to be important for the drinker as objects to *act on*, but are treated less as people to be *interacted with* as the drinker gets more intoxicated. My observations suggest that this behaviour gets worse as drinkers continue to drink and that this behaviour contributes significantly to conflict and physical altercations among drinkers. Interestingly, I rarely observed these behaviours at small gatherings, regardless of how intoxicated drinkers became. This suggests that episodes of antisocial socializing are strongly influenced by the settings in which drinking takes place.

The risks and negative outcomes associated with drinking in bars are considerable. The stranger factor in bars is significant and it is quite easy to lose track of one's companions in these places. This is true because of the large number of people and the high mobility of the crowd. Regular trips to the walk-up bar that must be made for drink purchases increases the chances of getting lost in the crowd. Additionally, the loss of inhibitions associated with a state of extreme intoxication makes it easy for drinkers to take up with new groups of people and, for lack of a better word, “forget” about the people that they arrived with. The use of cellphones and texting to locate companions mitigates this risk but only to a certain extent. Many drinkers attend bars relatively late in the evening, often after visiting one or two other drinking locations, and their cellphone batteries may be running low. Problems with losing track of friends often occur when cellphone batteries die and, thus, people lose the ability to locate their companions. The loud, crowded, high-energy atmosphere of bars, accompanied with the reality that most patrons are already intoxicated when they arrive, set the stage for poor judgements regarding whether or not one should continue drinking. Despite the severe and obvious intoxication of many patrons in the bars that I observed, I very rarely saw

bartenders or bouncers remove patrons from the establishment or refuse to serve them. Those who were refused service or asked to leave were people who began vomiting on the floor, falling down or engaging in violence. All of the factors noted here converge to make bars particularly risky settings for alcohol consumption, especially when compared to small gatherings and pubs.

Clubs

Clubs are rather similar to bars but I used several criteria to differentiate them for the purpose of this study. First, clubs have dance floors, while bars do not. Second, clubs usually have more than one walk-up bar at which alcohol can be purchased. Third, clubs do not serve any food beyond snacks, while bars and pubs generally do. With regard to licensed establishments, I observed the most extreme drunkenness and the most extreme drinking-related behaviour at clubs. Motivations for going to clubs included the desire to dance and let loose, to meet a sexual partner and to continue drinking when pubs and bars had closed.

The number of walk-up bars in the establishments that I observed ranged from two to four. These bars are located strategically throughout the clubs so that alcohol is easily accessible and line-ups are limited. Not all walk-up bars are open for service all night. During the slower periods—on week days or on weekends early on in the night—only one or two of the walk-up bars serve alcohol. Later, when pubs and bars close, clubs become busier and all of the walk-up bars will usually be open by 11:30pm. After the walk-up bars open, they tend to stay open until the clubs close at 2 a.m.

One of the primary motivations for going to clubs is the opportunity to dance. In clubs, music blares at a level that makes conversing impossible without shouting. Music

videos play on one or more large screens located above the dance floor, showcasing sexualized imagery and glamourizing heavy alcohol consumption. I observed two primary types of dancing at clubs. First, “fun” dancing which usually takes place among groups of three or more people and is characterized by carefree, energetic, exaggerated, showy movements. This kind of dancing is playful, often comical and shows that the dancers are not taking themselves too seriously. The other kind of dance that I observed is serious, sexual dancing. Sexual dancing occurs solo or in pairs. I observed female-female and female-male pairs but no male-male pairs. I also only observed solo sexual dancing among women, not men. Women sway their hips provocatively, and run their hands over their bodies while delivering “come-hither” looks. Men participate in sexual dancing by holding their bodies against their female partners and swaying along to the music. Often this dancing culminates in a kind of simulated sex; a form of dancing that is referred to as “bumping and grinding” or simply “grinding.” Dancers sometimes cycle between the two kinds of dancing depending on the kind of song that is playing and who they are dancing with.

For extreme drinkers, a major motivation for going to clubs is to meet people with whom they can have a sexual or romantic encounter. Sometimes drinkers intend to bump into a particular person with whom they are already acquainted and other times they simply hope to meet an attractive stranger. Much of the mingling that takes place in clubs involves approaching members of the opposite sex and attempting to initiate romantic encounters by conversing, dancing or buying each other drinks. Sometimes these interactions lead to newly acquainted couples leaving the club together, either to continue their drinking at an after-party or to go to one or the other’s home. When couples leave the club together, the intention is generally to have a sexual encounter.

I observed several negative outcomes associated with the kinds of drinking and socializing that occur at clubs. Not infrequently, sexual dancing resulted in women being groped by men by whom they did not wish to be touched. Rather than confront or directly rebuff their gropers, women would usually just quietly leave the dance floor in order to end the encounter. This kind of unwanted touching is treated somewhat as par for the course. There seems to be an unspoken understanding that if a woman does not want to be touched she should stay off the dance floor. I also observed hostile or violent encounters much more frequently at or immediately outside clubs than at any other licensed establishments. These violent encounters were almost always between or among men, although I did observe a few such encounters among women. Like bars, clubs are locations where drinkers are prone to lose track of their friends, wander off, go home with strangers and become unable to locate their companions when their cellphone batteries have died. I observed many drinkers vomiting in the bathrooms or outside of clubs, falling over or falling asleep at tables. To their credit, club owners and employees seem somewhat proactive in removing overly intoxicated patrons from their premises. At clubs, I observed far more heavily intoxicated patrons being asked by bouncers or bartenders to leave than I did at any other licensed establishments.

While it is clear that the drinking that takes place at bars and clubs is often very high risk and can have many negative outcomes, my observations indicate that drinkers are less likely to drive home intoxicated from these settings than from a small gathering or a house party. This is largely for pragmatic reasons. The bars and clubs that I went to were located in dense urban areas where parking is limited and costly. This discourages drinkers from bringing their vehicles with them. Additionally, on busy nights, there are almost always taxis parked outside the establishments or circling the block, waiting for customers. Thus,

alternative transportation is readily available. The bar and club patrons that I observed were more likely to drive home drunk if they had parked their car somewhere within short walking distance of the establishment or had spent all of their money and could not afford to pay for a cab. Public transit is unpopular in general but utilized more by the people that I observed in Vancouver than those in Kelowna.

Discussion

In this chapter I have presented the results of my structured ethnographic observations and my autoethnographic observations and experiences in various drinking locations. My observations confirm the findings of Hutton et al. (2013), who note that drinking behaviours can change and often escalate over the course of a drinking session, as drinkers move from low-key settings like pubs or small gatherings, to bars, clubs and house parties. The behaviours detailed here show that extreme drinking is not one uniform kind of drinking. Extreme drinking entails a spectrum of intoxication and associated behaviours which depend upon the settings in which drinking takes place. The data presented here also show that risks and potential harms change, increase, or decrease depending on where and how drinking takes place. My observations of the behaviours and risks that are present in each particular drinking setting inform my suggestions for harm prevention strategies, which are detailed in chapter ten. In the following chapter, I explore the ways that historical attitudes toward alcohol use and intoxication and contemporary popular culture and media come together to influence the drinking behaviours of young adults and facilitate their engagement in risky drinking behaviours.

Chapter 7: Learning to Drink

In chapter 5, I describe the ideal state of intoxication that extreme drinkers strive for when they drink. This state entails walking a fine line between being drunk enough to escape from the everyday and being so drunk as to completely lose control and experience negative outcomes. My observations and interviews indicate that despite significant motivation and effort to achieve and sustain an ideal state of intoxication extreme drinkers regularly become far more intoxicated than that state requires. When this happens, drinkers often experience numerous negative outcomes related to their drinking behaviour.

In this chapter, I briefly discuss subcultural circumstances that result in overshooting desired levels of intoxication. I then explore certain cultural factors that may have explanatory value regarding extreme drinkers' difficulties assessing, predicting and controlling the outcomes of their alcohol consumption. I propose that drinkers learn how to drink in a culture that holds conflicting values about alcohol and alcohol use, values that are at opposite ends of a spectrum of attitudes toward drinking. Officially, our values about alcohol are very conservative while, unofficially, the consumption of excessive amounts of alcohol is depicted as a fundamental aspect of young adulthood. Essentially I argue that people from whom young people would be likely to learn about moderate drinking practices, like parents or other trusted adults, work to make their alcohol consumption invisible. Meanwhile, popular culture media makes risky, overindulgent alcohol consumption highly visible and glamorizes, sexualizes and normalizes extreme intoxication.

Subcultural Factors

There are certain subcultural factors that interfere with the extreme drinker's ability to achieve their ideal state of intoxication. Drinkers find that their judgement becomes clouded after consuming even a small amount of alcohol and, for the people in this study, this sometimes results in them making decisions that they would not have made when sober.

While a drinker may approach a night of drinking with certain strategies in mind for achieving their ideal state of intoxication, the choices and plans that are made before drinking can quickly change as an individual becomes intoxicated. This problem is particularly pronounced when people engage in pre-drinking. As per my observations, people who engage in pre-drinking generally engage in riskier drinking—drinking more and drinking faster—during an evening's main drinking event, as compared to people who arrive at a main drinking location sober.

Another subcultural factor that significantly affects drinkers' decisions to continue drinking even after their ideal state of intoxication has been reached is the pressure that companions put on them to continue drinking. Among members of this subculture, much emphasis is put on having all members of a drinking group achieve similar levels of intoxication. People who appear relatively sober, who are not drinking or are drinking slowly, are frequently pressured to drink more in order to "catch up" or "keep up." A primary motivator for pressuring one's friends to drink more is the desire to avoid having one's drunken behaviour judged by friends who are less intoxicated. Sober or relatively sober observers are viewed as potentially hostile or judgmental. While these subcultural factors play key roles in excessive alcohol consumption, I suggest that they are symptoms of larger cultural forces, as discussed below.

Protestant Ethos and Conservative Drinking Attitudes

The anthropological literature shows that drunken behaviours are learned and largely shaped by culture (e.g., MacAndrew and Edgerton 1969). As discussed in my review of the literature in chapter 2, the anthropological data indicates that there are distinct differences in the characteristic patterns of alcohol consumption in countries that have historically been influenced by Protestantism and those influenced by Catholicism (Chrzan 2013:39-41; de Garine 2001:8; Holt 2006a; Measham 2008:15; Plant 1995). While the literature has focused mainly on the Mediterranean region of Europe for the Catholic example (Cottino 1995; Gamella 1995; Nahoum-Grappe 2008; 1995), and the northern region of Europe for the Protestant example (Asmundsson 1995; Chrzan 2013:39-41; Plant 1995:289; Nyberg and Allebeck 1995:280; Schioler 1995), researchers recognize that North American countries like Canada and the United States exhibit drinking patterns that have a basis in Protestant ideals (Cheung and Erikson 1995:20-21; Chrzan 2013; Hanson 1995). The drinking patterns of people who live in countries where laws and social customs have historically been influenced by Protestantism tend to be characterized by abstinence punctuated by episodes of drinking to intoxication or drinking for the purpose of getting drunk (Asmundsson 1995:120-121; Nyberg and Allebeck 1995:280; Schioler 1995:55). As Asmundsson notes (1995:121), this drinking pattern is likely fuelled by an underlying Protestant ethos of asceticism, which holds that alcohol consumption and intoxication are hedonistic and sinful. Thus, in Protestant-influenced countries, alcohol consumption is, in many ways, “hidden.”

In our culture, alcohol use is governed by strict rules and regulations, and its use is often shrouded in secrecy, particularly from the perspective of children and adolescents. Alcohol is treated as a substance that is distinct from other beverages and foodstuffs and, in

many households, is hidden away in liquor cabinets, on high shelves or in a refrigerator separate from other food and beverages. In my experience, many parents are reluctant to drink with or in front of their children for fear of setting a “bad example.” As a child, I recall that my friends and I were always acutely aware of adults’ “secret” stashes of intoxicating liquids, and we would make a game of searching them out. The secretive nature with which alcohol was treated certainly did not discourage us from investigating it. If anything it made it more attractive and interesting. Of course, one rationale for hiding alcohol is safety; alcohol poisoning can kill an unsuspecting child. But speaking from my own experience as a member of this culture, I can say with confidence that another reason for hiding alcohol and alcohol use is that exposing children and adolescence to it is considered by many to be “bad” parenting.

In Canada, we drink most often at night, under the cover of darkness, as drinking during the day time is considered distasteful and possibly indicative of a drinking problem. We drink behind closed doors, in our homes or in establishments that are specially licensed to serve alcohol, since drinking in public is usually against the law. Minors are barred from entering liquor stores and many establishments that serve alcohol. While we may not, as individuals, view alcohol as something to hide or be ashamed of we do, collectively as a culture, treat alcohol like something that needs to be hidden and that carries with it feelings of shame and guilt.

As a result, many young people lack opportunities for observing, first-hand, moderate drinking practices of responsible adults and, thus, lack crucial knowledge regarding how alcohol affects people in real time. Furthermore, adults’ treatment of alcohol and alcohol use as something that should be hidden is mimicked by younger people, as they perceive that

their use of alcohol is or would be disapproved of. Given little or no opportunity to learn about or experiment with alcohol in safe, supervised environments, young people often learn about drinking by consuming illicitly obtained liquor in secret with their peers. All of the young adults in my study had their first drinking experience well before they reached legal drinking age. First drinking experiences generally occurred between the ages of 13 and 15. Importantly, none of these young adults had their first drinking experience with their parents or other trusted adults. Their lack of direct observational knowledge about moderate drinking regularly resulted in extreme intoxication during first drinking experiences. At the same time, the perceived need to hide their drinking from parents or other adults resulted in their drinking taking place in potentially dangerous places, like empty parking lots or sports fields. In these ways, overly conservative treatment of alcohol can actually increase the risks associated with drinking among young people.

It is important to point out that claims that regional patterns of alcohol consumption have been influenced by Protestantism do not imply that the people who engage in those drinking patterns are necessarily members of a Protestant religion. There is no implication about personal religion whatsoever. Rather, it is a recognition that historical influences such as, in this case, religion, shape cultural norms and can continue to influence behaviours and societal expectations and beliefs even when separated from their original basis in religious ideology.

Popular Culture Influences

The existence in our society of conservative values about alcohol is complicated by the fact that we live in a culture that produces popular culture media, which glorifies and romanticizes excessive alcohol use and intoxication. Anderson et al. (2009) carried out a

meta-analysis of longitudinal studies on the effect of alcohol advertising and media exposure on the drinking habits of young people cross-culturally. This study shows that exposure to such media is associated with increased likelihood that adolescents will begin drinking, and with increased amount of alcohol consumed among those adolescents who already drink (229). Though popular culture messages about alcohol and alcohol use are conveyed through numerous forms of media, I focus here primarily on music and music videos since songs about alcohol and drinking play such a prominent role in the extreme drinking subculture. I also briefly discuss depictions of excessive alcohol consumption in popular Hollywood movies.

The crunk subgenre of pop and rap music places a tremendous amount of focus and importance on consuming intoxicants. Artists regularly release highly successful drinking anthems; songs which encourage and are designed to be listened to during episodes of heavy drinking. *Crunk* is a slang word with origins in rap culture of the Southern United States. It is a mash-up of the words *chronic*—a slang word for marijuana—and *drunk*. The term *crunk* most literally refers to a state of intoxication that is achieved by smoking marijuana and drinking alcohol together; however, in common parlance it is often used to refer to a state of extreme drunkenness that is achieved through the use of alcohol alone. Crunk is a very popular genre of music among members of the extreme drinking community with whom I worked. This music is regularly played in the drinking establishments where I conducted my observations and it was not uncommon to see young adults enthusiastically singing along to the lyrics while rapidly consuming alcohol.

A recent example of a crunk genre drinking anthem is Chanel West Coast's 2013 rap song "Alcoholic." This song and the accompanying video portray drinking to a state of

extreme intoxication as an enviable means of rebelliousness and an assertion of strength, independence, sexiness and confidence. The video opens with the song's repeated refrain of "every time I drink, I drink like an alcoholic" (West Coast 2013). Meanwhile the rap artist, Chanel, stands in an aisle of a liquor store, gleefully filling a shopping cart with cases of beer and large bottles of distilled liquor. Throughout the video, Chanel is depicted taking large gulps of gin and vodka directly from bottles. She drinks while she showers, drives her car, lounges beside a pool and goes swimming. Chanel spends a considerable portion of the video dressed in revealing clothing, displaying her body in a highly sexualized manner.

Interestingly, and contrary to many other music videos that focus on the social aspects of drinking, in this video Chanel is usually the only person in the frame. This directorial choice is likely meant to highlight Chanel's independence and lack of care for what others may think of her behaviour, an attitude that is promoted among the extreme drinking community. Chanel drives this point home in the song's lyrics when she raps "my attitude is 'fuck it' ...ain't got a care in the world / middle finger up" (West Coast 2013). The video closes with a heretofore unseen secondary female character discovering Chanel, who has apparently drunk herself to unconsciousness, asleep on the floor of a motel room. The secondary female character laughs and takes a picture of the unconscious rapper with her cellphone. It is implied that the photo will be shared on social media. This sequence reinforces the attitude that extreme drunkenness is something that is fun and funny, rather than dangerous and a cause for concern.

Also of note is male electronic duo LMFAO's 2009 song "Shots," which features a prominent crunk rapper, 'Lil Jon. This music video hits on almost every major positive stereotype of extreme drinking that popular culture perpetuates. It shows that drinking and

drunkenness is cool, wins friends, creates a fun environment and results in positive sexual encounters. This song quite explicitly encourages drinking for the express purpose of becoming very intoxicated. As the title suggests, the song is a celebration of the practice of drinking shots of alcohol; that is, quickly drinking one or two ounces of strong alcohol from a small glass, usually in a single gulp, and then repeating the process until intoxication is achieved. The purpose of this practice is to consume a lot of alcohol in a short period of time, in order to get as drunk as possible as quickly as possible. Shots are taken rapidly in order to speed the process of becoming intoxicated and also to minimize the discomfort of drinking undiluted, highly potent distilled alcohol.

The music video for “Shots” opens with a rather boring and bored-looking group of people lounging around a hotel pool. The artists come rushing onto the scene with a large group of partiers—primarily beautiful women clad in string bikinis—and declare “If you [sic] not drunk ladies and gentlemen, get ready to get fucked up! Let’s do it!” (LMFAO 2009). The artists and their party companions proceed to drink and dance wildly, while feeding alcohol from shot glasses to the people at the pool. Once they begin consuming alcohol, these “boring” people transform into fun and energetic companions for the partiers. All the while, the chorus of the song is chanted by LMFAO, ‘Lil Jon and their party companions;

Shots shots shots shots shots shots!
Shots shots shots shots shots!
Shots shots shots shots shots!
Everybody! (LMFAO 2009)

The connection between alcohol consumption and sexual liaisons is made explicit when LMFAO sings;

The ladies love us when we pour shots.
They need an excuse to suck our cocks.
We came to get crunk,
How 'bout you?
Bottoms up!
Let's go round two! (LMFAO 2009)

These lyrics are sung while the members of LMFAO dance with two bikini clad women to whom they feed alcohol from a bottle. The women then kneel down and proceed to simulate fellatio on the two men. This song also invites extreme drinkers to be part of a special social group, in which sober people are not welcome and are treated with hostility, as LMFAO sings;

If you ain't getting drunk, get the fuck out the club
If you ain't taking shots, get the fuck out the club
If you ain't come to party, get the fuck out the club
Now where my alcoholics?
Let me see ya hands up! (LMFAO 2009)

The message of the song "Shots" and the accompanying video is quite clear; soberness is boring and uncool and when one is lacking in entertainment (or coolness), rapid consumption of alcohol and the resultant intoxication can create a fantasy-like party atmosphere full of fun and sensual experiences.

These are just two of countless songs that focus on extreme intoxication as a highly enjoyable pursuit that comes with many social and personal perks. These songs and their visual counterparts, the music videos, also function to normalize outcomes of extreme intoxication that would normally be considered negative. They do this in two main ways. First, the characters in these music videos who experience negative outcome—as for example Chanel West Coast, who passes out on the ground—are successful, wealthy recording artists who are usually styled in such a way that they appear beautiful and sexy or handsome and masculine, even while they are engaging in outrageous drunken behaviour. They may be

behaving badly, but they look good while they do it and they have plenty of money and admirers in spite of it. Secondly, these artists turn their bad behaviour into a joke. Untoward drunken behaviour, including getting into trouble with the law, losing consciousness and having sexual encounters with strangers, is frequently depicted in music and music videos as fun and funny. As a musical group that routinely sings about and depicts extreme drunkenness in a jovial manner, it is notable that the name “LMFAO” is an acronym that stands for “laughing my fucking ass off.”

Of course crunk is not the only genre of music that glorifies extreme alcohol consumption, nor is music the only form of media that romanticizes drunkenness. In movies, comedic depictions of negative outcomes of alcohol consumption are widespread. The wildly popular movies “The Hangover” (Phillips 2009) and “The Hangover 2” (Phillips 2011) follow a group of four fictional men as they deal with the consequences of a night of heavy drinking and untoward behaviour. In “The Hangover,” one of the main characters asks his friend “why can’t we remember a goddamn thing from last night?” to which his friend responds, “because obviously we had a great fucking time” (Phillips 2009). Hilarity ensues as they piece together what took place and attempt to fix the various problems they have created for themselves. Of course, despite engaging in behaviour that would, in the real world, result in serious criminal charges and social ostracism, all ends well for the men involved. “Knocked up” (Apatow 2007) is a film about a man and a woman who get extremely intoxicated and meet at a bar. The two have a one-night-stand that results in the woman accidentally becoming pregnant. The film follows a humorous story arc in which the two former strangers learn to love each other and, as would be expected for a Hollywood romantic comedy, they live happily ever after together with their child. What all of the media

that I discuss here have in common is that they emphasize the positive outcomes of excessive alcohol consumption and downplay the importance or severity of negative outcomes.

Discussion

Thus, our society sends very conflicting messages to young adults. Pop-culture tells them to binge; that getting drunk is fun, glamorous, sexy, cool and indicative of entrance into the adult world. It also tells them that negative outcomes of alcohol consumption are not really all that negative but, instead, are amusing. Meanwhile, our laws and social rules, based in a Protestant ethos of abstemiousness, tell young adults to avoid alcohol; that alcohol use and intoxication is shameful, wrong and dangerous. In this context, some young adults fail to control their alcohol consumption and often overshoot their desired level of intoxication, simply because they have not had moderate drinking behaviour modeled for them on any regular basis.

While drinking guidelines are certainly available to children, adolescents and young adults, they are limited in that, they don't take into account all of the various contextual factors that affect the ultimate feeling of intoxication that an individual will achieve. In fact, it is not realistic to expect that any set-in-stone drinking guidelines will be able to appropriately address all of the infinite variations of drinking situations in which people may find themselves. In order to successfully control drinking outcomes, drinkers need nuanced understandings of the spectrum of levels of intoxication that can result from alcohol consumption, the ways that manifold variations in context can alter the effects of alcohol, the kinds of behaviours that are expected at various levels of intoxication and the ways that all of this can be managed. It is my belief that these understandings are achieved primarily in two

ways; first, by observing others' alcohol related behaviours and the consequences of those behaviours, and second, through personal experiences with consuming alcohol.

My research suggests that young extreme drinkers are learning about alcohol chiefly through observations of their peers' behaviours, consumption of popular culture media and their own trial-and-error experimentation with alcohol. The separation between the worlds of moderate alcohol consumption among adults and heavy alcohol consumption among young people extends beyond adolescence and into young adulthood. Some participants in my study, despite being legal drinking age, continue to hide from their parents and older adults the fact that they drink alcohol *at all* because they feel that drinking in front of such people is disrespectful and awkward.

Hiding alcohol consumption from trusted adults not only results in consumption taking place in potentially risky settings, it also contributes to a situation where young people feel a rush to get as much drinking in as they can whenever they have the opportunity. Most of the young adults in my study worked full-time jobs. Many worked more than full-time, often picking up double shifts or working on their days off in order to make ends meet. These young adults did not feel that they had a lot of time to themselves. A combination of work obligations, family obligations and desire to hide their alcohol consumption from parents and other older adults, results in young adults' perception that opportunities to consume alcohol are very limited, primarily to Friday and Saturday nights. My research suggests that this creates a situation in which young adults drink more and drink faster when they "finally" get the opportunity to do so and this contributes significantly to negative drinking outcomes.

My discussion here demonstrates the ways in which various cultural factors converge to encourage extreme drinking among young adults. Strategies designed to prevent or reduce

alcohol related harms among extreme drinkers should be designed with these cultural and contextual factors in mind. In the following chapter, I discuss several studies that assess the effectiveness of various alcohol related harm prevention and reduction strategies.

Chapter 8: Effectiveness of Harm Prevention and Reduction Strategies

In this chapter I present data from several studies and meta-analyses investigating the effectiveness of programs designed to prevent or reduce alcohol use and alcohol related harms. The studies presented here investigate harm prevention and reduction strategies targeted toward school-aged youth (Agabio et al. 2015; Champion et al. 2013; Conrod et al. 2006; Paglia and Room 1999; Paschall et al. 2009), and the general population (Anderson et al. 2009; Campbell et al. 2009; Elder et al. 2010; Hahn et al. 2010; Jones-Webb et al. 2014; Lavoie 2010; Middleton et al. 2010). Harm prevention strategies are designed to postpone or prevent the onset of problematic drinking behaviours or to stop the advancement of risky drinking once it has already begun (Paglia and Room 1999:14). Harm reduction strategies are measures designed to decrease potential harms to drinkers and community members when drinkers are already engaged in risky drinking behaviours (International Harm Reduction Association 2002). Throughout this chapter, I summarize some of the suggestions that researchers have made for the creation and implementation of more effective harm prevention and reduction programs.

I chose to review epidemiological and psychological studies published over approximately a fifteen year period (1999-2015). I selected these studies because they assess a large number and a wide range of harm prevention and reduction strategies and provide quantifiable assessments of strategy effectiveness based on alcohol sales and hospital admissions. These studies provide the data required to make general conclusions about which strategies are effective and which strategies are not.

School-Based and Adolescent-Targeted Alcohol Harm Prevention and Reduction Programs

Most of the harm prevention and reduction programs that participants in my study recalled being exposed to took place during their years in high school and occurred in a classroom environment as part of their curriculum. Participants reported that these interventions did not have any significant effect on their drinking behaviour in the short- or long-term. For these reasons, although the participants in this study are beyond high school age, I consider studies that investigate the effectiveness of school-based harm prevention and reduction programs in addition to those that target the general population.

Paglia and Room (1999) present a review of studies evaluating the effectiveness of programs and interventions designed to prevent substance use problems among youth. Substances included in their review of the literature are tobacco, alcohol, marijuana and other illicit drugs (3). The authors comment on the paucity of studies evaluating drug use and abuse prevention, noting the difficulties in conducting these studies, as they must necessarily occur in naturalistic settings. At the time, the majority of evaluative studies had been carried out between 1984 and 1999 in the United States because of the abundance of funding for such studies that was available over the course of those years. This funding stemmed from both the “war on drugs” and the “war on tobacco” (Paglia and Room 1999:4). While this focus on the United States may pose a problem for cross-cultural considerations, it is beneficial for my study since, as Paglia and Room note, patterns of drug and alcohol use are similar in the US and Canada. As such, the data reviewed in their paper is highly relevant for Canadians (4-5).

While their review showed that no single strategy implemented on its own had any significant effect in decreasing substance use, Paglia and Room (1999) cite evaluative studies

of two comprehensive community programs that showed some promise—a study of the 5-year Midwestern Prevention Program (MPP) (Pentz 1986; Pentz et al. 1989), and a study of Project Northland (Perry et al. 1993). These comprehensive community programs involved numerous groups in the community—including families, schools, employers, religious groups and mass media—in a coordinated effort to disseminate information, alter policy and enforce restrictions (Paglia and Room 1999:25). The relative success of these programs, as evidenced by lower rates of use of alcohol and other drugs, suggests that coordinated, multi-pronged approaches may be effective for decreasing substance use and abuse (27).

In light of the findings of their meta-analysis, Paglia and Room make several recommendations for the development and implementation of programs for substance-related harm reduction and prevention (1999:40-42). Foremost among these recommendations is that the goal of any drug or alcohol prevention program aimed at youth should be to reduce harm. Whether this means decreasing or stopping substance use, or simply changing the contexts of use so that users are safer, the ultimate measure of success should be the minimization of physical harm. They note that, although the school-based prevention programs reviewed show few significant or long-lasting effects, these programs may still be useful for providing youth with general knowledge about the biological and psychological effects of alcohol and other substances. Additionally, they suggest that the classroom may be an ideal setting for engaging in discussion about the pragmatic, ethical and intellectual issues raised by substance use. Paglia and Room also assert the importance of matching educational materials to target audiences by taking into account the differences between young adults who already use alcohol or other drugs and those who have not yet begun experimenting. Furthermore, each program's messages should be assessed for compatibility with alcohol and drug use

messages targeted toward adults (Paglia and Room 1999:40), presumably because discrepancies may be seen by young people as grounds for suspicion regarding the veracity of the messages.

A recent psychological study of Canadian high school students explored the efficacy of school-based interventions targeted at adolescents who exhibit personality factors that are considered to put them at high-risk for developing problematic drinking behaviours (Conrad et al. 2006). The personality factors identified as high-risk include sensation-seeking, anxiety-sensitivity and hopelessness. Participants were randomly assigned either to a control group or to a group that received interventions specifically targeting their high-risk personality factors (550). These interventions consisted of two 90-minute sessions provided by a therapist over the course of two weeks. These sessions focused on psychoeducation, behavioural coping skills training and training in cognitive coping skills (555). Analysis of data gathered post-intervention and at a four month follow-up indicates that participants in the intervention group had lower rates of drinking and binge drinking and fewer problem drinking symptoms in comparison to the control group (550).

While these results are encouraging, it is important to note a self-selection bias may exist because researchers only included students who showed interest in participating in the study and who were able to obtain parental consent. Only 30 per cent of students who met primary eligibility met these two criteria and participated in the study (Conrad et al. 2006:552). It is also worth noting that attitudes and behaviours may have changed after the four month follow-up and therefore, the results of this study cannot be assumed to apply in the long-term.

Paschall et al. (2009) conducted a multi-national study exploring the relationship between alcohol use among adolescents aged 15-17 years and alcohol control policies. Spain, Canada, Australia, New Zealand and the United States were among the 26 countries included in the study (1849). Statistical analysis shows that stricter controls on alcohol availability had an inverse relationship to adolescents' previous 30-day alcohol use; that is, the more difficult it was to obtain alcohol in a country, the less alcohol adolescents drank in the 30 days prior to their completion of survey questions (1853). The study also shows that stricter control on alcohol advertising is related to less alcohol consumption among adolescents. However, the authors note that the relationships observed may be due to the intermediate factor of adult alcohol consumption; that stricter alcohol policies may result in adults drinking less, normalizing moderate drinking and thereby influencing adolescents to consume less alcohol. They also suggest that there may be larger cultural or socio-economic factors not taken into account in the study that also influence adolescent drinking behaviours (1853).

A meta-analysis of school-based drug and alcohol use prevention programs delivered using computers or the internet suggests such technology-based strategies may be effective in reducing alcohol and drug use among youth (Champion et al. 2013). The researchers' criteria for assessing the effectiveness of drug and alcohol use prevention programs are measures of drug and alcohol use immediately following the prevention programs and at later follow-ups (116). The programs included in this analysis were delivered to all students regardless of their drug or alcohol use status at the time that the programs took place. The majority of the programs reviewed focused on teaching students skills for coping with social influences—such as peer pressure, family and media—that may encourage them to use drugs or alcohol (117). Of the seven programs ultimately included in the analysis, six showed a significant

reduction in alcohol or drug use among participants after the programs were delivered. The greatest effect observed is an increase in knowledge related to drugs and alcohol and this effect continues at follow-ups occurring six and 12 months post-intervention (120). The authors note the results of these programs appear considerably more positive than those of programs delivered in more traditional ways (120, 121). As such, they conclude that alcohol and drug use prevention programs delivered using computers and the internet show promise for achieving desired outcomes (121).

A recent globally-inclusive review of studies assessing the effectiveness of school-based programs intended to prevent alcohol use and change attitudes toward alcohol shows much the same results as Paglia and Room's (1999) review. It demonstrates that school-based programs are ineffective overall (Agabio et al. 2015). Globally, less than half (43.4 per cent) of the programs showed "some evidence of effectiveness" (102). The researchers identify one European program, the "Unplugged Program," that shows significant promise (106, 108-109). Unplugged: European Union Drug Abuse Prevention, developed by the European Drug Addiction Prevention Centre (EU-Dap), is a school-based program that targets youth aged 12-14 and their parents. The program provides information about a variety of drugs, focusing on alcohol, marijuana and tobacco. It emphasizes knowledge, attitudes, interpersonal skills and intrapersonal skills (Agabio et al. 2015:106; EU-Dap 2015). The Unplugged Program was the most effective of all interventions included in the analysis as demonstrated by decreased use of alcohol and drugs, changes in attitudes toward drug and alcohol use and increased knowledge about drugs and alcohol (Agabio et al. 2015:108-110).

Considerations

Paglia and Room argue that large social movements and changes in popular attitudes have, in the past, had the power to alter patterns of drug and alcohol use. As such, they suggest that programs designed to prevent problems with drug and alcohol use among young adults should look for opportunities to attach their programs to major social movements with which their messages may be compatible (1999:40). In a similar vein, while they note that legal and regulatory approaches to limiting youth access to and consumption of drugs and alcohol have had some success, it must be acknowledged that these approaches are unlikely to succeed if their rational basis conflicts with broader cultural attitudes. The authors note that regulatory approaches depend upon support of the general population and maintaining this support may require serious efforts at public persuasion (Paglia and Room 1999:41)

Although meta-analyses show that most school-based alcohol harm prevention and reduction strategies are not effective (Agabio et al. 2015; Paglia and Room 1999), some specific strategies, such as targeted interventions for adolescents with personality factors that put them at risk (Conrod et al. 2006), interventions provided with the use of computers and the internet (Champion et al. 2013), and EU-Dap's Unplugged Program (2015; Agabio et al. 2015:108-110) show promising results. In particular, strategies that focus on life skills for dealing with various influences and pressures that may affect alcohol use are more effective than those that rely on moralistic messages or focus solely on provision of information (Agabio et al. 2015; Paglia and Room 1999).

As noted above, the young adults in my study did not indicate that school-based alcohol education programs affected their drinking behaviour. A major problem, according to these young adults, is that the information provided to them was based on scare-tactics and

was suggestive that abstinence is preferable to any alcohol consumption. These young adults recalled feeling rather incredulous about many of the claims that their educators made about the dangers of alcohol consumption. They also felt that the recommendations for safe drinking were conservative to the point of being unrealistic.

It seems, however, that some changes have taken place in the approach to alcohol education in elementary, middle and high school. One of the currently recommended programs for grades four through nine, entitled “Making Decisions,” is designed to provide information and teach children and adolescents skills to deal with pressures and influences that affect drug and alcohol use and to help young people make better decisions (Alcohol and Drug Education Services; referred to here after as ADES 2008). This program makes a point of avoiding the use of scare-tactics, shame or guilt to discourage drug and alcohol abuse:

Research shows that drug education efforts that employ scare tactics, moralistic messages and other didactic approaches produce little, if any, positive effects. A more sound strategy for prevention adopts an informative, interactive and holistic approach. Making Decisions was developed on this basis. (ADES 2008)

It is encouraging to see that the philosophy of alcohol education and harm prevention programs evolve as research reveals what is and is not effective. It is a hopeful sign that these programs will continue to change as more information on their effectiveness becomes available.

General Population Studies

Systematic reviews of alcohol control policies in the general population reveal that increasing taxes on alcohol (Elder et al. 2010), limiting alcohol outlet density (Campbell et al. 2009), restricting days of alcohol sales (Middleton et al. 2010), and restricting hours of alcohol sales (Hahn et al. 2010) are all effective means of decreasing alcohol consumption. Effectiveness

of harm prevention strategies is measured in the aforementioned studies by alcohol purchases. Effectiveness of harm reduction strategies is determined by hospital admissions and late-night single-car accidents.

A 2009 meta-analysis evaluates the effectiveness and cost-effectiveness of a wide range of policies and programs designed to reduce alcohol related harm. The analysis shows that school-based education does not reduce harms related to alcohol consumption (Anderson 2009:2234). Overall, strategies aimed at reducing alcohol related harms through provision of information and education alone are found to be largely ineffective (2237). For people who already exhibit some problems with alcohol use, intervention and brief advice (IBA) about safe alcohol consumption was found to be the most effective treatment. The authors explain:

Extensive evidence from systematic reviews and meta-analyses from a range of health-care settings in different countries has shown the effectiveness of early identification and brief advice for people with hazardous and harmful alcohol use but who are not severely dependent. Furthermore, evidence suggests that more intensive brief interventions are no more effective than are less intensive interventions. (Anderson et al. 2009:2237)

The Anderson et al. (2009) study also suggests that increasing the cost of and limiting access to alcohol are effective and cost-effective methods of reducing alcohol related harm (2234), while acknowledging that heavy drinkers may simply resort to drinking cheaper versions of their preferred beverages (2239). The authors also note a positive correlation between exposure to alcohol advertising and drinking related harm. Their findings suggest that limiting alcohol advertisement can decrease this harm (2238).

Lavoie (2010) discusses the use of Identification and Brief Advice (IBA) for the reduction of alcohol related harm in the United Kingdom. Health care providers are encouraged to administer screening tools—or questionnaires—to patients in order to identify

those who are engaged in risky drinking practices. These screening tools are intended to be implemented in a number of settings; for example, when patients present at hospitals or clinics with alcohol related health concerns or when patients register with new family care physicians. Once individuals who are drinking above low-risk guidelines are identified, health care providers offer brief advice regarding how and why drinkers can change their behaviour. Health care providers also forward problematic drinkers on to specialists as required (608). The UK Department of Health measures the effectiveness of this intervention on alcohol related harms by monitoring admissions to hospital for problems associated with alcohol use (609). By this measure, the IBA approach has proven to be highly effective for reducing risk and harm associated with alcohol (610).

In the past, some community action programs were shown to reduce alcohol and drug use among youth (Pentz 1986; Pentz et al. 1989; Perry et al. 1993). However a study of community action programs targeting broader populations in 20 Australian communities showed little promise (Shakeshaft et al. 2014). The study entailed the implementation of 13 interventions in the communities. These interventions included media campaigns, workplace policies and practices training, school-based intervention, general practitioner training in alcohol screening and brief intervention (SBI), community pharmacy-based alcohol SBI, web-based SBI, Aboriginal community SBI and hospital and emergency room SBI (2-5). SBI in this context is roughly the equivalent of the IBA described above (Lavoie 2010). The interventions were in place in the experimental communities from 2005 to 2009. Outcomes were assessed primarily through data on alcohol related crime, car accidents and inpatient admissions to hospital. Secondary outcomes were assessed based on surveys completed by community members before and after the interventions (1). These surveys measured self-

reported long-term risky drinking, short-term high risk drinking, short-term risky drinking, weekly consumption, hazardous and harmful alcohol use and experience of alcohol related harm (4-6). The study shows no statistically significant difference between experimental and control communities on any measures of effectiveness other than self-reported weekly alcohol consumption and alcohol related verbal abuse (9-12). Thus, this study suggests that community action programs are ineffective for the reduction of alcohol consumption and alcohol related harms (1).

Jones-Webb et al. (2014) explore the ways that implementation of alcohol use policies and awareness campaigns affect the outcomes of such programs. The study was carried out in three US cities—Seattle, Santa Ana and Washington, D.C.—where policies to restrict the sale of malt liquor and certain single-serving alcoholic beverages were in place (328-329). The researchers interviewed neighbourhood groups, city officials, local police, Alcohol Beverage Control (ABC) board members and enforcement control personnel, alcohol retailers, advocacy and service organizations and alcohol industry representatives in each city (328). Interviews were designed to identify key issues in the efficacy of implementation of the alcohol sale restrictions. Educating key stakeholders is identified as an important aspect of implementation. Alcohol retailers and servers need to know how to enact the policies and the general public needs to understand the goals of the policies and the problems that these policies are meant to improve (330-331). The researchers also found that regular, sustained enforcement is necessary for policies to remain in effect since retailers have a tendency to violate policies when regular checks are not in place. They suggest that making enforcement efforts highly visible to the public can deter retailers from violating policies (332). Evaluating the effectiveness of alcohol control policies is also important

because positive evaluations can encourage public and political support for the policies (332-333). Finally, sustaining the policy over time, or “institutionalization,” is necessary and policy developers must be prepared to deal with problems as they arise and adjust the policies to changing circumstances (333). This study suggests that the failure of certain harm prevention and harm reduction programs may have less to do with the program design and more to do with poor implementation and follow-up. The study indicates that increased attention to policy implementation can decrease alcohol related harms (334).

Considerations

Reports on the effectiveness of programs for the reduction of alcohol consumption and alcohol related harms in the general population are conflicting. Although some studies suggest that identification and brief advice (IBA) is an effective means of reducing alcohol consumption and alcohol related harms (Anderson et al. 2009:2237; Lavoie 2010), a study examining a similar intervention strategy—alcohol screening and brief intervention (SBI)—did not show significant effects on drinking behaviours and outcomes (Shakeshaft et al. 2014). Measurement of the effectiveness of such programs is complicated by the fact that differences in program implementation, rather than differences in the programs themselves, may affect measured outcomes (Jones-Webb et al. 2014). It does seem clear that interventions that limit whole-community access to alcohol—through legal restrictions constraining the sale of alcohol or increasing the cost of alcoholic beverages—are effective in decreasing alcohol consumption and alcohol related harms (Campbell et al. 2009; Elder et al. 2010; Hahn et al. 2010; Middleton et al. 2010).

Discussion

As the above review demonstrates, many current harm prevention strategies are ineffective. A goal of this study is to provide information that may be used to inform more effective, targeted alcohol related harm prevention and reduction strategies. Pursuant to this objective, I engaged in explicit conversations with certain of my participants regarding the effect that school-based interventions, television commercials, billboards or other printed advertisements, public service announcements, class material or any other media presenting information on the prevention of alcohol use or alcohol related harms had on their drinking behaviour. None of the participants in this study reported that their drinking behaviours were influenced by such strategies. With the exception of limited hours of alcohol sales, my research data strongly suggest that current harm prevention and harm reduction strategies do not discourage these extreme drinkers from consuming alcohol, do not decrease the frequency or amount that they drink and do not alter the ways in which they drink.

The people I interviewed are well aware of the negative outcomes that alcohol consumption may entail—as they or their companions often experienced them—but they do not generally view these negative outcomes as reasons to stop engaging in extreme drinking behaviour. Thus, harm-prevention strategies that aim to warn of negative consequences are usually not teaching these young adults anything they don't already know, and are not likely to change their behaviour. In chapter five, I briefly discussed extreme drinkers' desires to avoid the negative outcomes associated with alcohol consumption and the apparent contradiction that their continued engagement in extreme drinking behaviours presents. Their dismissal of information presented by education-focused harm-prevention strategies adds to this contradiction and presents a complex issue that deserves consideration and discussion. In

the following chapter, I analyze some of the themes that recurred in my interviews and in doing so present a thesis regarding how and why young adults are able to rationalize continued extreme drinking behaviours despite knowledge of and experience with serious negative outcomes.

Chapter 9: Explaining Extreme Drinking Behaviours

In previous chapters, I presented data indicating that young adults who engage in extreme drinking continue to do so despite knowledge of and experience with negative consequences. I also suggested that current harm prevention and reduction strategies that focus on warning young adults about the negative outcomes of extreme drinking are unlikely to impact the drinking behaviours of extreme drinkers. Popular conceptions of the type of alcohol consumption that extreme drinkers engage in regale its causes to common-sense notions of peer-pressure, immaturity and thrill-seeking. This default to common knowledge often leaves the motivations and social context of the extreme drinking that young people engage in unexamined. Here, I offer explanations regarding why extreme drinkers persist in their drinking despite potential or actual negative outcomes. I do so by presenting two prominent themes that occurred in my interviews. First, I highlight the importance of extreme drinking in the lives of the people that I interviewed and, explain why, for many extreme drinkers, the positive outcomes of alcohol consumption outweigh the negative ones. Next, I discuss the use of “black humour” as a particular cultural phenomenon that allows extreme drinkers to downplay and dismiss the seriousness of negative consequences associated with alcohol consumption.

Functions of Alcohol Consumption

In chapter five, I discuss some of the functions that alcohol consumption serves for young adults who engage in extreme drinking. It is a social lubricant, a stress and anxiety reliever, an escape from life problems, a means of entertainment and an essential component of the courting process. My research shows that young adults do not simply drink because alcohol

serves these purposes for them but also because they do not believe that there is anything else available to them that can serve these purposes as efficiently or as easily as alcohol does.

My observations of and experiences with extreme drinkers indicate that the use of alcohol as a social lubricant is a self-perpetuating phenomenon in a number of ways. First, it decreases the need for the kinds of behaviours that, for non-drinkers, are often used when socializing. Polite conversation, exchange of pleasantries and general “getting-to-know-you” talk is not often expected from or by extreme drinkers when they are drinking in settings other than small gatherings in private residences or in small groups at pubs. Rather than shared sustained verbal interaction, shared alcohol consumption and concomitant experience of intoxication become the basis of bonding for many extreme drinkers. Alcohol consumption allows extreme drinkers to “skip over” several of the initial steps of becoming acquainted with new people or “breaking the ice” at the beginning of social interactions. The knowledge of shared intoxication creates a connection that would otherwise need to be created through verbal communication.

I suggest that, as extreme drinkers become more accustomed to using alcohol as the basis for creating social connections, they miss out on chances to practice other types of skills for socializing; particularly conversing and bonding while sober. As they miss out on opportunities to develop skills for socializing in sober settings, the idea of socializing without alcohol becomes less appealing. For many extreme drinkers, this process carries on throughout their adolescence and young adulthood. All of the participants in this study began drinking when they were relatively young—between 13 and 15 years of age—and their social lives had generally revolved around alcohol consumption since then. It seems the result of extended avoidance of sober social situations is that the idea of socializing sober with peers

evokes anxiety. Over time, extreme drinkers end up feeling as though alcohol consumption and intoxication is required for enjoyable social occasions to take place. The majority of people I interviewed—nine of eleven interviewees—openly acknowledged their reluctance to socialize with peers while sober. I don't suggest that extreme drinkers are incapable of socializing when not intoxicated but rather that they strongly prefer not to and actively avoid doing so. Furthermore, their involvement with a subculture that uses alcohol as the key facilitator and focus of socializing means that they are seldom required to engage in sober social activities with their peers. In short, I suggest that avoidance begets anxiety and anxiety begets avoidance. The ease with which a member of the extreme drinking subculture can avoid socializing while sober facilitates the perpetuation of this cycle.

The same argument can be made for the use of alcohol in facilitating romantic and sexual encounters. I cannot overstate the importance of the roles that alcohol consumption and intoxication play in the courting practices of the young adults in this study. For these young adults, extreme drinking usually begins at around the same time that they start experiencing romantic and sexual relationships. Alcohol provides a short-cut for members of this subculture to overcome anxiety related to being intimate with someone who is unfamiliar. Extreme drinkers in this study explicitly stated that they used alcohol to facilitate most, if not all, of their sexual or romantic encounters. I suggest that alcohol consumption and intoxication, when used repeatedly over long periods of time to initiate sexual and romantic relationships, limits opportunities to develop alternate skills for facilitating intimacy. This creates a subculture in which alcohol use is expected during intimate encounters and sober intimate encounters are actively avoided.

As discussed in the chapter five, alcohol also provides relief and escape from stress, anxiety and other life problems. Extreme drinkers in this study learned to use alcohol to cope at a young age and it continues to serve as a coping mechanism for them as they enter adulthood, potentially limiting their ability to develop alternate coping mechanisms. Interviewees reported encountering barriers to accessing mental health services that might provide alternate methods of coping with stress and unhappiness. Results of the interviews I conducted made apparent that untreated mental illness encourages the continuation of extreme drinking behaviours among certain young adults. Furthermore, a sense of hopelessness and inability to change difficult life situations leads young adults to turn to alcohol for relief. Below, I explore several theoretical frameworks for understanding the relationships among larger social forces, young adults' dissatisfaction with life, and the use of alcohol to escape.

Extreme Drinking as Deviant Behaviour: Catharsis, Retreatism and Negative Agency

In this section, I examine extreme drinkers' use of alcohol as a means of escaping and withdrawing from their problems. First, I examine the relevance of Coser's (1956) theory of group bonding and catharsis for understanding extreme drinking behaviours. Next, I discuss the ways in which certain kinds of extreme drinking are consistent with Merton's (1938) theory of deviance and retreatism. I also explore Durkheim's (1951) view that deviance occurs when internal and external pressures for success are unrealistically high considering means for achieving success are limited. Finally, I discuss the defeatist attitudes and behaviours of some extreme drinkers against the framework of Wardlow's (2006) theory of negative agency.

The concept of catharsis has been explored in depth by Coser (1956). He examines the functional aspects of social conflict, particularly focusing on the ways that conflict functions to create, define and bind groups of people together. One way that groups are bound together, Coser argues, is through common rejection of members of other groups or social strata (35, 122-123). Conflict with out-groups reinforces the common interests and common identity of members of the in-group and stabilizes the group structure. Coser makes a distinction between hostility and conflict, noting that not all hostile sentiments result in conflict (38). Furthermore, not all groups always experience only hostility towards out-groups (35). An example of this is the way that members of lower social strata oftentimes wish to emulate the behaviours of members of higher strata, thus creating something that Coser refers to as *resentiment*, a mixture of hostility and attraction (38).

The distinction between hostility and conflict becomes particularly important when the various ways that hostility can be channeled are considered. Coser notes that, in some cases, “conflict behaviour” against the actual object of one’s hostile sentiment is blocked (1956:40). In these situations, hostile sentiments may be redirected to a substitute object or relief from hostile feelings may be attained through simple “tension release.” Societal institutions which allow this tension release, such as entertainment or, for my purposes, the consumption of alcohol, Coser terms “safety-valve” release (40). These institutions allow the cathartic release of hostile sentiments without changing the status quo which created those hostile sentiments in the first place. This is why these safety-valve release institutions are often encouraged by “the powers that be” (44). Coser suggests that the need for safety-valve institutions increases with the level of rigidity of the social structure (45, 156).

According to Coser, safety-valve release institutions are ultimately ineffective for both the individual and the overall group (47, 155). Since the actual source of the tension is not addressed, the “cathartic release” that individuals experience is incomplete and the underlying issues that cause the feelings of hostility remain capable of re-emerging (47). This creates a “ticking time bomb” effect, creating the circumstances for explosive and volatile social conflict to occur in the future. Furthermore, by disallowing the open expression of social conflict, a society creates social stasis and negates the possibility of necessary structural changes in response to changing circumstances (47, 80, 128). Conflict creates stable groups by allowing for adjustment to changed circumstances and reinforcement of already established rules and norms (127-128, 154).

Coser’s theory about social conflict, in-group bonding and catharsis has great explanatory value when applied to the data that I gathered about extreme drinkers. The social conflict faced by these young adults that I worked with is primarily a conflict between the goals and achievements that are socially condoned and expected and actual opportunities for achieving these goals. Our society’s neoliberal ideas espouse the notion that if a person works hard enough and makes the “right” choices, they will be compensated with a rewarding, stable career and financial success. The young adults I worked with were raised to believe that the fail-safe path to success is the achievement of a post-secondary degree, usually from a university. Unfortunately, attaining such a degree was not realistic for many of the people who I interviewed. Acceptance to college or university requires that the applicant has completed specific courses in high school and achieved relatively high grades in them. Several of my interviewees were unable to secure a place at a university or college without first upgrading their high school courses at community colleges. This was a costly,

lengthy and often difficult process. These young adults would attempt to schedule their classes around their full-time minimum wage jobs, since they were unable to attain sufficient student financial aid to allow them to cut back on their hours at work. This meant that they had to divide their attention between their school work and their jobs so that they could pay tuition, rent and living expenses. Interviewee #1 had tried and failed twice to obtain her high school diploma by upgrading at a community college. She attributed both of her failures to her inability to take enough time off from work to focus on her studies. She found these experiences extremely discouraging and felt trapped in a life as a minimum wage worker.

Even when acceptance to a degree program has been achieved, post-secondary education entails the taking on of a huge financial burden; both in tuition fees and lost wages for time that must be spent in class, studying and completing assignments, rather than at a paying job. All of the interviewees who were enrolled in post-secondary degree programs were reliant upon student loans to pay at least a portion of their tuition and living expenses while they attended school. The stress that these young adults felt with regard to accruing a large amount of student debt was exacerbated by their belief that, as the economy struggled to recover from the global economic crash of 2007-2008, they would face a significant struggle entering the job market after graduation. Some participants indicated they were afraid that, when they graduated, they would be unable to find a job in their field and would have to go back to where they started; working a minimum wage job, but this time with thousands of dollars in student debt to pay off. As mentioned in chapter five, Interviewee #9 came to the conclusion that completing her degree would not be worth the financial burden and she dropped out before the end of her program in order to find work.

As a long-time university student and some-time member of the extreme drinking community, I have had innumerable conversations with extreme drinkers about their experiences, beliefs and feelings regarding their educational and economic prospects. Discussion of these issues tends to evoke a number of negative emotions. As I've mentioned before, feelings of helplessness and hopelessness are common. But there is also a sense of anger and hostility toward society at large. Young adults who chose not to attend post-secondary schools generally saw the promise that a fulfilling and financially rewarding career would necessarily follow the obtaining of a university degree as an empty promise. On more than one occasion, I was scoffed at by fellow drinkers when I described my educational pursuits. These people viewed me and anyone else who pursued post-secondary education, as people who had been tricked—lured by false promises—by a society that is hostile to and takes advantage of young adults. One man suggested to me that I will likely be working at Starbucks to pay off my student loan debt when I graduate. Those who attempted to access post-secondary school but failed felt cheated by the system and excluded from opportunities that other people—people with money and time to spare—could easily access. Those who were enrolled in or coming close to completing their degree programs often, though not always, felt like they had done everything that they were supposed to do but would gain nothing from it. What all of these people have in common is the realization that hard work does not necessarily equal success in our society, despite what the generation that brought them up has told them. In short, they feel they have been lied to.

Here is Coser's social conflict. Many young adults harbour feelings of anxiety about and hostility toward the expectations that society places on them, because they feel that these expectations are unreasonable in the current economic climate. These shared feelings create a

sense of camaraderie among young adults who are attempting to enter the work force, working low-paying, low-prestige jobs and finding that their best attempts to escape their situations are thwarted; this is Coser's "in-group." The "out-group" is populated by the older adults who hold positions of social, political and economic power—parents, employers, teachers and career counselors—who perpetuate the idea that hard work leads to success and that a lack of success can be attributed to a failure to work hard. Young adults certainly seem to experience something close to the mixture of hostility and attraction, that Coser calls *resentiment* (1956:38), toward this out-group. They are envious of their money, power and social standing, but hostile towards them for making that money, power and social standing so difficult to access.

Those young adults who engage in extreme drinking in order to escape from the stress of their situation create another level of in-group bonding as they drink and behave in ways that members of the out-group are unlikely to behave; ways that the out-group is generally disapproving of. While it is an act of escape, it is also an act of rebellion that sets this group apart from the older, more powerful adults who are often seen as antagonists in young adults' lives. Young adults' drinking behaviours reinforce their identities as separate from the out-group and create increased feelings of closeness and shared experience with their fellow drinkers. This feeling of closeness, of being part of something, is one of the primary attractions of alcohol consumption for extreme drinkers.

One of the shared experiences that extreme drinkers have while drinking is that of catharsis. Just as Coser's (1956) theory suggests, these young adults are usually unable to express their hostility toward the actual target of that hostility. This may be for fear of social repercussions from powerful adults or because their target is an immaterial entity, like

“society” or “the economy.” That people drink alcohol in order to escape their problems may not seem like a particularly insightful observation. What is more important in this context is why young adults choose to drink alcohol in order to escape their problems instead of doing something else to solve them. Alcohol use is a legal, relatively cheap and easily accessible means of escaping from problems. Though not necessarily condoned by mainstream society, extreme drinking is generally accepted as an *expected* behaviour among certain groups of people (e.g., Dunk 1991:86), primarily young adults. Thus, as long as extreme drinkers engage in their drinking in socially designated places—such as bars, pubs, clubs and in their own homes—and do not let their behaviour intrude in any obvious way upon their professional or academic lives, they usually do not face serious social repercussions. As such, the status quo that causes these young adults distress stays in place, while the alcohol consumption and extreme intoxication acts as a “safety valve release” (Coser 1956:40) for feelings and energy that might otherwise be used to engender social change. While this all sounds quite negative, we must acknowledge that this catharsis is a positive experience for young adults, one that they are reluctant to give up.

I have noted that much of the distress that young adults experience and that drives their extreme drinking behaviour is due to their inability to attain the achievements that are expected of them. As such, it is worthwhile to examine their behaviours in light of Robert Merton’s (1938) theory, which posits that deviance arises due to society’s failure to maintain equilibrium between socially sanctioned success-goals and socially condoned means for achieving those goals (674). According to Merton, people who live in a society in which cultural goals and institutionalized means of achieving these goals are emphasized—as the young adults in this study do—will “adapt” in deviant ways if their attitudes toward goals

and means for achieving goals are not positive (674-675). Merton lists a number of different deviant adaptations that may occur, depending on the individual's attitudes towards culture goals and institutionalized means. The least common adaptation, "retreatism," matches up well with the attitudes that I observed among some extreme drinkers. Retreatism occurs when individuals are thoroughly convinced of the desirability of culturally sanctioned goals but realize that they are unable to access the means to achieve such goals. When these individuals perceive the means for achieving success are not available, they reject both the means and goals as unattainable and engage in defeatist and escapist behaviours, such as alcohol abuse (677). While certainly not true for all members of this subculture, Merton's (1938) theory has explanatory value for some, particularly those extreme drinkers who work stressful, low-paying jobs, view post-secondary education as inaccessible or pointless, and see little opportunity for achieving culturally-sanctioned success goals. These young adults feel trapped in their situation and turn to alcohol to escape from problems that they believe they cannot change.

Holly Wardlow's (2006) discussion of "negative agency" in her ethnography of Huli "passenger women" echoes some of the core principles of Coser's (1956) and Merton's (1938) theories and provides another level of understanding for extreme drinkers who reject or express apathy about socially sanctioned goals. Negative agency is described as the refusal to cooperate with others' projects or to carry out one's expected role in society (Wardlow 2006:14-15). Negative agency arises when individuals find their life circumstances to be objectionable but feel that society offers them little or no opportunity to change their situation. Negative agency occurs when individuals believe that they cannot change their role in society and so they withdraw their participation (72-75). Often negative agency is manifest

through self-destructive behaviours (75, 77-78). The concept of negative agency has explanatory value for some of the behaviours of certain extreme drinkers, particularly those who express overt hostility towards socially sanctioned means for achieving success and who disengage with social activities that are expected of them. Examples of these behaviours that I observed included dropping out of school, failing to show up for work, engaging in behaviours at work that were known to result in termination of employment and, when unemployed, choosing to live with family members or friends for free rather than look for employment.

Of course, there are also extreme drinkers who continue to actively engage with society in positive ways and make very real efforts to improve their circumstances through education and work experience. For these drinkers, the theories of Wardlow (2006) and Merton (1938) are not particularly useful. Durkheim suggests that a mismatch between personal expectations for success—as promoted by society—and actual success produces deviance, particularly when pressure to succeed is high (1951:241-246). While the differences between Durkheim and Merton are subtle, with regard to the interplay of goals and methods for achieving goals, they are important. Merton's theory places emphasis on access to means for achieving goals while Durkheim focuses much more on the expectations for success that members of society hold and are held to. This offers a different and more general means of understanding extreme drinking as a “deviant” behavior and method of catharsis. Durkheim's theory offers a useful framework for understanding extreme drinking behaviour among drinkers who have not rejected culturally-sanctioned success goals. These young adults continue to work toward culturally sanctioned goals, driven by internalized pressure and expectations that they must succeed against all odds. Such young adults'

knowledge that their expectations for success may not be met no matter how hard they work creates emotional distress from which escape is sought through alcohol consumption.

The extreme drinkers in my study react in different ways to the pressure to succeed that society places on them and they have varying levels of access to means for achieving these goals. What they have in common is the experience of pressure for attaining culturally sanctioned goals and the knowledge that they are expected to achieve, in very individualistic ways, some measure of financial success. Some accept this expectation, others reject it, but all feel the pressure of it looming over them and alcohol consumption allows them an escape—however fleeting—from the negative emotions that this pressure evokes.

The point is that when we consider the important positive functions that alcohol consumption serves for extreme drinkers and when we understand how and why they may feel that they have little else available to them to serve these positive functions, we may begin to understand why the potential or actual negative outcomes of alcohol consumption are considered an acceptable trade-off. Extreme drinkers take a calculated risk when they drink to get drunk and, in their estimation, the potential positive outcomes outweigh the potential negative ones. Still, the very real negative outcomes that extreme drinkers experience require explanation and justification within the subculture. In the following section, I explain the role black humour plays in facilitating, justifying and perpetuating extreme drinking behaviours among the extreme drinkers who I worked with.

Black Humour

Black humour is a term that has been used in the anthropological literature to refer to the use of humour to describe and make sense of serious or distressing events. A notable example of

this is Donna Goldstein's *Laughter out of Place* (2003). In her ethnography of a shantytown, or *favela*, in Rio de Janeiro, Goldstein explores the ways that people living with poverty, violence, racism and crime cope with their situations using black humour. She explains how black humour is used both as a means of dealing with personal feelings of distress and as a challenge to contemporary power and race relations in Brazil (10-13).

In this study, I define black humour as the purposefully comedic recounting of serious, negative or unpleasant events or emotions. Like many of the most interesting and important anthropological revelations, my participants' use of black humour in their retelling of negative drinking experiences was not anticipated. I did not have any interview questions formulated with the intention of revealing or understanding the phenomenon of black humour. The regularity with which members of this subculture use black humour became apparent to me because one of my interview questions inquiring about negative drinking experiences was met with such a uniform reaction by interviewees. When I asked participants if they had ever had a negative drinking experience they would, almost without fail, be laughing, smirking or chuckling before I even finished asking the question. Then they would laugh and smile as they recounted the unpleasant—oftentimes very serious—events that they had experienced during episodes of extreme drinking. Negative drinking events reported to me during interviews included engaging in various embarrassing behaviours, blacking out, being drugged, taking drugs that drinkers reported that they would not have taken otherwise, drunk driving, getting into a vehicle with a drunk driver, risky sexual encounters, suspecting but not being able to remember if a sexual encounter occurred and suspecting but not being able to remember if a sexual assault occurred.

The following are some of the negative or dangerous drinking experiences that interviewees recounted in a humorous manner.

Most recently I went to a house party at a boy's house who I was seeing [casually dating]. I had never met anyone he lives with, nor did I know anyone other than him there. I showed up wasted. [I] socialized a little bit. Things were fine. Then I got really upset with him when he wouldn't go to sleep with me so I started crying and wrote him a letter that was completely illegible, and then left. He told me about all this the next morning... I try to forget about it, unless it's funny. I have a pretty good sense of humour about myself.

Interviewee #8, female, mid-twenties, Vancouver

I remember one time my friends lied to me about something and then we all ended up partying together that night and I just got way too trashed [drunk] and called them all stupid lying bitches and [said that] I didn't trust them and I smashed a 26 [ounce bottle of liquor] on her floor...just like out of control. [Another time] I walked into my friend's neighbour's house to go to the bathroom and I didn't know [I was in the wrong house] and ...the neighbours opened the door and went inside and they called the cops and everything and the cops showed up...Or like one time...I blacked out and woke up the next morning and I wasn't wearing underwear so I was like "uh oh" that's not good. But it was also at my mom's house so it was like if something happened it was one of her creepy friends in my room after I'd blacked out when I got home [laughing].

Interviewee #6, female, late teens, Vancouver

Um, I think I've only been black out [drunk]...a couple times. Yes. Yes I have. And it was a couple years ago when I was drinking Jagger bombs [shots of liquor combined with an energy drink containing caffeine and other natural stimulants], which is awful for your heart. I was drinking, then I was hanging out with my friends, and then all I remember was lying on the kitchen floor and what's-his-name was trying to pull my pants off and shove an orange into my [underwear]. It was a mandarin orange so it squished everywhere...and uh that's pretty much the last thing I remember and I woke up in a bed. It was funny. It's so funny to me. I don't 100 per cent regret it only because it was a funny thing. A funny thing to remember.

Interviewee #3, male, early twenties, Kelowna

I've gotten in a car with a super drunk driver before and drove all the way to Winfield and he was like fuckin' hammered and that was scary. Um... [I've had] ...random sexual encounters [laughing] like not being able to

judge who's a creeper and who's not... Drugs I guess as well. Like sometimes just really reckless...really reckless behaviour.
Interviewee #2, female, late teens, Kelowna

The next day [after blacking out and walking several kilometers alone to get home] my first thought was that I was going to make it a giant joke. So I called the guy that I was hanging out with and I said, 'hey did you hear about [Interviewee #5]? Yeah he died last night!' And he went into tears over the phone and I was like 'dude it's [me]' ...I just thought I would make a giant joke out of it.
Interviewee #5, male, early twenties, Kelowna

Several interviewees provided justifications for their use of humour to discuss these potentially distressing events. Interviewee #1, a Kelowna woman in her early twenties, explained that she would talk and joke about negative or embarrassing things that happened to her while intoxicated so that she could be in on the joke rather than being the butt of the joke. She suggests that "people can talk about it to your face and not behind your back if you act like you think it's funny." Another interviewee explains:

For me it's funny because you have to be able to laugh at yourself first, right... I could be mad about the situation, which I got myself into which is my own fault or I can, you know, just learn and move on from it. I think it's funny because it's pretty random and ridiculous to happen and the funny thing is... it shouldn't be funny... But it is, you know?
Interviewee #3, male, early twenties, Kelowna

Humour may be used to avoid or pre-empt negative social judgements. Extreme drinkers can decide that the negative events are funny and personally turn them into a joke so that others *cannot* turn *them* into a joke. As such, their use of black humour provides them with a sense of control—although a rather minimal one—over the unpredictable and unpleasant events that sometimes occur when they are intoxicated.

Extreme drinkers not only put a positive spin on getting drunk and doing "stupid things," they also use these humorous stories as a form of social currency and a means of

bonding with other people who engage in extreme drinking. My very first interviewee made this observation when she asked me:

Do you feel like everything socially important, or every social event happens when drinking? Like every story starts with ‘we were out drinking and...’ or ‘we were at the bar and...’

Interviewee #1, female, early twenties, Kelowna.

Another interviewee explains that he does not regret certain embarrassing situations he’s gotten into when drunk because they provide good memories for the group.

I wish it didn’t happen, only because I had gotten drunk; more drunk than I wished...but it’s not necessarily 100 per cent negative, only because [of] the social memories that it made.

Interviewee #3, male, early twenties, Kelowna

My observations, interviews and personal experiences with extreme drinkers indicate that drinking stories play an important role in friendship formation and sustainment among extreme drinkers. A “good” drinking story is almost invariably a humorous one. These drinking stories tend to focus on negative, dangerous or unintended outcomes of drinking, recounted in a humorous tone. Telling drinking stories is an important method of establishing common ground and “getting on the same level” with others who drink in similar ways. Exchanging drinking stories creates a sense of connection and reduces social anxiety through the self-deprecating nature of black humour. In a way, drinking stories extend the social lubricant effect of alcohol beyond the drinking experience to social interactions that occur when sober. Drinking stories also play a role in maintaining and strengthening the bonds in already-existing groups of extreme drinkers. Each new drinking story becomes part of an unwritten subcultural mythology to which all members of the group have access. These stories are recounted regularly and become part of a group narrative about “who we are” and

“what we do.” Each re-telling of a story cements the group’s bonds and reinforces members’ identities as extreme drinkers.

Black humour is also used to downplay the significance or seriousness of the negative events that occur when drinking. As one interviewee explains:

You think that it should be the other way around... like maybe you should be positive in humour... you would usually associate those two but I’m associating negativity with humour and I think it’s because ... it’s to not have to deal with the idea that something is negative and to try to turn it into something that doesn’t actually matter when really it could possibly... matter.

Interviewee #2, female, late teens, Kelowna

The use of black humour serves to shape the reactions of others to extreme drinking behaviours. There was a sense among participants that if they revealed to others—particularly their drinking partners—the level of distress that some of their negative drinking experiences caused them, people around them would attempt to curtail their drinking. As long as the risky, negative and distressing behaviours and events that occur during sessions of extreme drinking are discussed *only* in a humorous manner, the drinking is unlikely to be seen to be problematic. It is primarily when extreme drinkers express concern about the situations that they get into when drinking that their drinking partners start to think that there may be a problem.

Interviewee #2, a Kelowna woman in her late teens, described an occasion on which she went out to a pub to have drinks with a friend with whom she had seriously discussed her concerns about her drinking behaviours. She explained that this friend—who also engaged in extreme drinking—spent the evening monitoring the number of drinks the interviewee had and intervening in her interactions with men. The interviewee said that her friend was acting “like her mother,” and she expressed resentment toward her friend for it. There is a general

sense that it is best not to talk about negative drinking experiences in anything other than a comedic tone because to discuss them seriously is to run the risk of getting drinking partners worried and having them essentially ruin “the fun” for everyone.

Within this subculture, it is also considered inappropriate to point out that a fellow drinker’s behaviour is dangerous. As one interviewee explains;

I was the Debbie Downer [someone who is out to ruin the other drinkers’ fun] because, if for example I acknowledged that one of my friends [had a real problem with alcohol]... everyone else would be like ‘oh man, like it’s up to them,’ you know? Like they just wanted to pass the buck of responsibility and not actually acknowledge that they had a choice and some stewardship over their social relationships. [It] is so common... the belief that you’ll sober up by doing [cocaine when drunk] and I was very cognitively aware of ... how stupidly dangerous it was. And when I’d try to mention that to people they would just look at me like I was a fucking idiot.

Interviewee #9, female, mid- twenties, Kelowna-Vancouver

Extreme drinkers may feel that they are unable to discuss the negative consequences of alcohol consumption in a serious manner because doing so can alienate them from their group of extreme drinking friends. It is an implicit rule that negative outcomes should be discussed humorously or not at all. Failure to conform to this rule can have negative social repercussions, such as exclusion from future drinking events.

My research suggests that the use of black humour facilitates the perpetuation of extreme drinking behaviours by assuaging drinking partners’ concerns and extreme drinkers’ own fear and guilt about the negative consequences of extreme drinking. What is concerning about this is that, in order to allow for the continuation of extreme drinking behaviours, black humour necessarily glosses over the seriousness of negative drinking events and, in the process, normalizes dangerous situations and behaviours. For example, nine of 11 participants I interviewed reported blacking out from drinking at least once. Most

participants had blacked out several times and a few reported blacking out on a regular basis. A black out—partial or full amnesia of a drinking session—occurs at a blood alcohol content of 3.0-3.9 mg/ml (Martinic and Measham 2008a:3). After consuming this amount of alcohol, a person becomes severely mentally and physically impaired, vomiting is likely and body temperature is lowered. This is dangerously close to the human body's "cut off" point of 4.0mg/ml; the blood alcohol level at which occurs alcohol poisoning, coma and possibly death. Approximately 50 per cent of people who reach a blood alcohol content of 4.0 mg/ml die of alcohol poisoning (Martinic and Measham 2008a:3). Essentially, a blackout is a warning sign that a person may be on the verge of alcohol poisoning.

Despite the incredible danger of the level of intoxication that a blackout entails, few of the participants interviewed expressed concern over the effect that drinking to the point of blacking out had on their health. There was concern about not being able to remember what had happened, or the vulnerability that such a state of intoxication entails, but even this was taken rather lightly by most participants. One participant even indicated that it could be fun to have a friend tell him the next morning about all of the silly things that he did the night before. Like many other negative drinking events, blackouts are seen as routine—although sometimes unpleasant—and, most importantly, they are considered humorous.

Discussion

It is unlikely that warning young people about the possible consequences of extreme intoxication will be an effective harm prevention strategy if these young people already know about and frequently experience negative consequences. Furthermore, extreme drinkers consider many negative consequences to be amusing or at least treat them as though they are.

For the most part, extreme drinkers also believe that negative outcomes are a fair trade-off for the positive outcomes that extreme drinking entails. In the conclusion of this dissertation, I discuss the significance of these findings for harm prevention and harm reduction strategies and make suggestions for the development of more effective means of preventing extreme drinking and decreasing extreme drinking related harms among young adults.

Chapter 10: Conclusions

This study was designed to produce a detailed understanding of the motivations for and contexts of extreme drinking among a subculture of extreme drinkers in Kelowna and Vancouver, BC and to provide data relevant to the development of alcohol related harm prevention and harm reduction strategies. My study reveals that, although extreme drinkers regularly drink considerably more than Low-Risk Drinking Guidelines recommend (CCSA 2013), they do not view their drinking behaviours as remarkable or out of the ordinary. The amount of alcohol that extreme drinkers consume and the level of intoxication that it produces are normalized within the context that they occur. While the drinking and intoxication themselves are generally not viewed as being problematic by those who engage in them, extreme drinkers do experience and acknowledge a variety of negative outcomes associated with their drinking behaviours. My findings suggest that, most of the time, negative outcomes do not stop extreme drinkers from continuing to engage in extreme drinking.

I identified several motivations for extreme drinking among the people with whom I worked. Within this extreme drinking subculture, alcohol plays a crucial role in social encounters as a social lubricant. In its capacity as a social lubricant, it is a central part of courting rituals among young adults and it facilitates romantic and sexual encounters. My study suggests that long-term reliance on alcohol use for the facilitation of social and romantic or sexual encounters may decrease opportunities for developing alternate skills and strategies for navigating the social world and create in young adults a sense of anxiety when faced with the prospect of socializing with peers while sober. This is one way in which extreme drinking perpetuates its self.

Alcohol consumption also serves as a relatively inexpensive and easily accessible means of entertainment. For the group of extreme drinkers that I interviewed in Kelowna, drinking to intoxication is viewed as an extracurricular activity in and of itself and is encouraged by actual or perceived lack of access to alternate entertainment options. I did not observe this among the group of extreme drinkers that I interviewed in Vancouver. Comparisons between the groups must be made carefully, since they are not representative samples. However, I tentatively suggest that the Kelowna group's tendency to turn to alcohol for entertainment may be related to the fact that Kelowna's tourist and retirement economy caters to the interests of older, wealthier individuals, to the detriment of younger adults with fewer financial resources.

Several of the young adults with whom I worked reported engaging in extreme drinking in order to decrease feelings of emotional distress. Some young adults drink when they feel anxious, stressed or depressed. Factors that exacerbate this tendency are actual or perceived barriers to mental health resources and feelings of impotence regarding the life situations that cause distress. A particular cause of distress among this group of young adults is the struggle to secure financially and emotionally rewarding careers. Most of the participants in this study worked low-paying, service sector jobs and were pessimistic about their future employment prospects. Inability to access post-secondary education and financial burdens associated with continuing or completing education once accessed are associated with feelings of hopelessness and helplessness. Most of the participants who were able to access post-secondary education perceived that they would face considerable difficulty entering the workforce after graduation and felt that their degrees were unlikely to be worth the student loan debt that they had accrued in order to pay for them. Alcohol consumption

provides these young adults a means of catharsis (Coser 1956), as it allows them to release pent-up negative emotions, anxieties and hostilities related to their position in society without addressing the actual source of those negative emotions. I argue that this may be seen as a form of retreatism (Merton 1938) or negative agency (Wardlow 2006). Young adults' drinking behaviours can also be understood within the framework of Durkheim's (1951) concept of deviance which suggests that people engage in deviant behaviour when societal pressures and personal expectations for success are not accompanied by actual success.

Extreme drinking takes on a variety of forms and is associated with a variety of behaviours depending on the settings in which it takes place. Drinking sessions at pubs and at small gatherings in private residences tend to be relaxed and focused on conversation with friends. While intoxication is the goal, drinking in these settings is usually more moderate than drinking that takes place at bars, clubs or house parties. My observations suggest that the focus on conversation allows drinkers to better judge their state of intoxication and to stop drinking when they have reached their desired level of drunkenness. Limited access to alcohol at small gatherings and the consumption of food at pubs also appears to mitigate intoxication. Drinking sessions at bars, clubs and house parties are more high-energy and there is less focus on verbal interaction and more emphasis on physical sensation like listening to music, dancing and engaging sexually. Drinking in these settings is more extreme as drinkers tend to focus explicitly on pushing the boundaries of both alcohol consumption and acceptable behaviour. Drinkers in these settings are exposed to more pressures to continue drinking and alcohol is usually more abundant, as compared to pubs and small gatherings.

As Hutton et al. (2013) note, drinking often escalates in a step-wise manner over the course of a night; beginning in relaxed settings with fewer companions engaging in relatively moderate drinking and proceeding to more high-energy settings with larger groups of people engaging in more extreme drinking and associated behaviours. Pre-drinking is the consumption of alcohol, with a small group of friends, that normally takes place in a private residence. The purpose of this drinking is to decrease inhibitions and loosen up in preparation for a larger social gathering later in the night. From pre-drinking, drinkers often move on to pubs, then bars, then clubs. Alternatively, pre-drinking may be followed by attending a house party. Some drinkers attend after-parties at private residences once house parties have ended and bars and clubs have closed. My observations indicate that drinking sessions in bars, clubs and at house parties are associated with more negative outcomes than drinking in pubs or at small gatherings. These negative outcomes include vomiting, blacking out, embarrassing oneself, having unwanted sexual interactions and engaging in or being the victim of violence. Factors that contribute to the risk of such negative outcomes occurring include engaging in pre-drinking before going out, poor enforcement of drinking regulations in licensed establishments, social pressure to continue drinking, overabundance of available alcohol and becoming separated from friends and trusted companions when intoxicated.

My study indicates that certain conflicting cultural attitudes about alcohol and alcohol use encourage the development and continuation of extreme drinking behaviours among adolescents and young adults. The “official” cultural rules about alcohol use that children and adolescents are exposed to are very conservative. Alcohol and alcohol use is hidden from children by laws that prevent them from entering liquor stores and certain licensed establishments—even if accompanied by parents—and restrictions that prevent the

consumption of alcohol in almost all public places. Many parents hide alcohol in liquor cabinets and restrict their alcohol consumption to times when their children are not present. These cultural practices suggest that alcohol use is something to be ashamed of but also gives alcohol a certain “forbidden fruit” mystique. Meanwhile, excessive alcohol use is glamorized in popular culture media, especially in music and music videos. Through these media, alcohol use is associated with sex, popularity, adulthood and rugged independence. While the “official” cultural stance on alcohol hides moderate alcohol consumption from children and adolescents, popular culture creates unrealistic perceptions of appropriate alcohol use and outcomes of that use. This creates a cultural environment in which extreme drinking thrives.

My exploration of motivations for extreme drinking, as summarized above, provides explanation for why young adults continue engaging in extreme drinking despite negative outcomes. This drinking serves many important purposes and the perceived positive outcomes tend to outweigh the perceived negative ones. I identify young adults’ use of black humour to explain and make sense of negative drinking outcomes as a means for the perpetuation of extreme drinking despite unwanted consequences. The treatment of negative outcomes—such as illness, injury or unwanted sexual encounters—as humorous rather than serious, justifies continued engagement in the drinking behaviours that caused these negative outcomes. Tendency to silence or shun drinking companions who attempt to discuss negative outcomes in a serious manner also facilitates the continuation of extreme drinking.

Recommendations

The primary purpose of this study is to create an in-depth understanding of a subculture of extreme drinkers. It is my hope that the data presented here can be relevant for the

development of harm prevention and harm reduction programs targeted at this particular subcultural group. The recommendations presented here are not fully developed programs but rather a demonstration of how this kind of research could have practical application. By connecting specific findings to potential interventions, I aim to demonstrate how qualitative anthropological research can be useful for informing harm prevention and harm reduction programs.

Results of my study indicate that current harm prevention and harm reduction strategies generally do not affect the drinking behaviours of the young adults with whom I worked. In the following section, I present my recommendations, based on my review of literature presented in chapter 8, the data collected in this study and my autoethnographic knowledge of the extreme drinking subculture, for both harm prevention and harm reduction strategies. Harm *prevention* strategies are measures intended to prevent or delay onset of risky drinking behaviours or to slow the progression of risky drinking once it has already been initiated (Paglia and Room 1999:14). Harm *reduction* strategies are targeted at people who already engage in risky drinking behaviour, and consist of measures designed to limit the harms to the drinker and the community that may be associated with risky drinking behaviours (International Harm Reduction Association 2002). I will address each of these topics separately.

Harm Reduction

In 2005, *Harm Reduction: A British Columbia Community Guide* (BCCG) was released (British Columbia Ministry of Health 2005, referred to here after as BCMH). It is a document that is designed to support municipalities' efforts to decrease levels of harm caused by drug

and alcohol use in their communities. The guide offers evidence and examples for a harm reduction approach to drug and alcohol abuse (BCMh 2005). Harm reduction is different from harm prevention in that, while harm prevention attempts to reduce or eliminate problematic alcohol consumption, harm reduction is geared towards reducing the problems associated with drug or alcohol use without necessitating the cessation of drug or alcohol use.

As the BCCG explains;

Harm reduction is a pragmatic response that focuses on keeping people safe and minimizing death, disease and injury associated with higher risk behaviour, while recognizing that the behaviour may continue despite the risks. At the conceptual level, harm reduction maintains a value neutral and humanistic view of drug use and the drug user. It focuses on the harms from drug use rather than on the use itself. It does not insist on or object to abstinence and acknowledges the active role of the drug user in harm reduction programs. (BCMh 2005)

In this section, I present recommendations for harm reduction specifically targeting the subcultures of extreme drinkers in Kelowna and Vancouver.

In 1999, Paglia and Room asserted that educational programs are very rarely successful in their attempts to persuade current substance users or abuser to stop their behaviour (33). Indeed, my review of the harm prevention literature demonstrates that educational campaigns are not usually met with success. The young adults I worked with were generally very well informed about alcohol and alcohol use, including the potential negative outcomes of heavy drinking, but their knowledge did not seem to affect their decisions regarding their drinking behaviours. As such, the harm reduction strategies that I suggest here do not focus on providing education about the specific effects that alcohol has on the body, with the exception of two issues. I noted in my interviews that participants lacked understanding of the seriousness of reaching a blackout state of drunkenness.

Blackouts were reported by interviewees as common, relatively unremarkable drinking

events. Blackouts occur at blood alcohol levels at approximately 3.0-3.9 mg/ml and are indicative that alcohol poisoning is imminent (Martinic and Measham 2008a:3). Worryingly, extreme drinkers often continue drinking after reaching a blackout state. This poses potentially serious risks to health and can result in death. Participants with whom I discussed this seemed genuinely surprised, and subsequently somewhat concerned, about the seriousness of blacking out. I suggest that it may be beneficial to implement an educational campaign, targeted at extreme drinkers, detailing the physical health implications of drinking to a blackout state.

My interview results also suggest a lack of knowledge regarding appropriate measures to take when head injuries occur while drinking. Interviewees reported that falling and hitting one's head is not an uncommon occurrence during episodes of extreme drinking. One interviewee in particular reported that bystanders often try to help the injured party by helping them to a couch or bed and putting them to sleep. It is of utmost importance that measures to educate extreme drinkers about the potential seriousness of head injuries are put in place. These educational strategies should stress the necessity of seeking medical assistance for fellow drinkers who sustain head injuries, particularly if there is a period of unconsciousness following impact. Efforts should be made to inform members of this subculture about the dangers of putting someone with a head injury to sleep and to advise as to appropriate actions to take if a concussion or suspected concussion occurs.

My experience with the extreme drinking community suggests that drinkers may avoid seeking medical care in general because they fear reprimand from health care providers, law enforcement officers or parents for their drunkenness, especially if they are underage. Educational campaigns about drinking-related injuries and illness should explicitly

state that drinkers have a right to seek medical care for themselves or their friends without facing serious repercussions for their choice to drink. Parents, health care providers and law enforcement officers should take part in promoting the idea that it is safe and acceptable to seek medical assistance when intoxicated and should acknowledge that dealing with immediate physical danger is more important than moralizing about drinking decisions that may have caused said dangers.

My research shows that members of the extreme drinking subculture are generally unwilling to discuss among themselves, in a serious manner, the negative outcomes of their drinking behaviours for fear of ridicule and exclusion from future drinking events. While they fear ostracism from the extreme drinkers in their social network, they also worry about negative moral judgements from friends and family members who do not engage in extreme drinking. This creates a situation in which extreme drinkers feel that they have no one to talk to about their serious alcohol related concerns. It may be helpful to implement a free and anonymous alcohol counseling hotline, specifically targeting extreme drinkers, that drinkers can call when they have concerns about their drinking and related behaviours or events. Counselors should understand that extreme drinking is different from alcoholism and they should be well-versed in the specific issues that extreme drinkers face. Counselors should be prepared to offer information, advice and resources, and also be willing to listen to and discuss drinkers' concerns in a non-judgmental manner. An educational campaign focused on the risks associated with extreme drinking and the costs that it presents to society at large may be necessary to gain popular support and funding for alcohol counseling hotlines.

Stricter enforcement of laws and restrictions regulating the operations of establishments that are licensed to sell alcohol may decrease alcohol related harms. During

my observations in bars and clubs, I regularly observed servers and bartenders continuing to serve alcohol to people who were clearly severely intoxicated. It was also my impression that the maximum capacity of bars and clubs was often surpassed, especially on weekend nights. I strongly believe that increased monitoring by law enforcement and the BC Liquor Control and Licensing Branch (LCLB) is required in both Kelowna and Vancouver. Better and more comprehensive training for alcohol servers to help them identify people who have had too much to drink and to assist them in developing skills for refusing to serve without creating conflict, may mitigate problems with over-serving. Owners of establishments should create an environment in which servers feel safe refusing to serve intoxicated patrons and can do so without fear of verbal or physical abuse. This may require owners to retain more private security personnel.

Results of my observations and interviews revealed that drinkers who become separated from their friends when intoxicated are considerably more likely to experience negative outcomes, such as unwanted sexual encounters and violent altercations, than those who are able to remain with a group of trusted companions. Separation from friends generally occurs in crowded bars or clubs. Drinkers' primary means of regaining contact with companions is the use of cellphones and when cellphone batteries die, drinkers may be unable to locate their friends and unable to call for help if they find themselves in a dangerous situation. Installing cellphone charging stations in bars and clubs or free public phones for local calls may alleviate these problems. Another approach to this problem is the creation of clearly marked, designated "meeting places" in bars and clubs. I suggest the implementation of such spaces in bars and clubs could significantly reduce risks associated with becoming separated from companions.

As noted in my discussion of drinking settings, the extreme drinkers in my study are more likely to drive drunk when they are drinking in suburban areas. They do so for a number of reasons. While drinkers are discouraged from bringing their vehicles to drinking locations in urban centres where parking is limited and often very expensive, parking in suburban areas is usually free and plentiful. As such, the drinkers I worked with are more likely to drive their vehicles to drinking events in a suburban locations and thus to have access to them when it is time for them to go home. Public transit in suburban areas is often limited, especially late at night, and this influences drinkers' choices to drive home after drinking. Taxi services are usually more difficult to access in suburban areas. While taxis park immediately outside bars and clubs and wait for customers, drinkers in suburban areas have to call and wait for taxis to arrive. This frustrates drinkers who are anxious to get home and it sometimes factors into their decision to drive their vehicle home when they are intoxicated. Increasing public transit in suburban areas on weekend nights may mitigate this problem. Among the people I worked with, the perceived likelihood of being pulled over while driving drunk is a major factor in post-drinking transportation decisions. Generally, these extreme drinkers believe that they are unlikely to be pulled over while driving in suburban areas. As such, law enforcement officers may want to focus on implementing more traffic stops in suburban areas on holidays in weekends.

Harm Prevention

My study strongly suggests that in order to prevent extreme drinking behaviours from occurring, the larger cultural factors that affect such behaviours need to be addressed. This may mean a shift in cultural attitudes regarding alcohol and alcohol use, particularly the

perceived appropriateness of exposing children and adolescents to moderate alcohol consumption. This will also involve addressing some topics that may not seem directly related to alcohol use, like sexuality, mental health, social skills and issues associated with the transition out of school and into the work force.

Paglia and Room (1999) note that programs that focus on age-appropriate behaviours and emphasize strict adherence to laws regarding legal drinking age may not only be ineffective but are likely to backfire. Such programs emphasize the fact that alcohol consumption is a symbol of adulthood and, as such, may make alcohol appear even more attractive to young people who wish to claim an adult identity (Paglia and Room 1999:8). The association of alcohol with an adult identity might make it especially appealing to young adults who face difficulties transitioning into full adulthood; as, for example, the young adults in my study who were unable secure gainful employment and financial independence. Emphasis on the relationship between alcohol and adulthood gives alcohol a certain mystique and this mystique is only increased by popular media that glamourizes and sexualizes alcohol use. While it may seem counter-intuitive, cross-cultural studies show that countries with more relaxed attitudes toward alcohol use may have fewer problems with alcohol abuse (Cottino 1995; Gamella 1995; Nahoum-Grappe 2008; 1995). Studies on alcohol use in the Mediterranean area of Europe suggest that introducing children and adolescents to alcohol when they are young and modeling responsible drinking for them may assist them in developing more moderate drinking patterns (Chrzan 2013:39-41; Heath 2000; Nahoum-Grappe 2008; 1995).

I suggest that parents should be provided with information regarding the potential benefits of modeling responsible drinking for their children. Education campaigns should

target adults who are reluctant to expose their adolescents and children to alcohol and should emphasize that hiding alcohol and alcohol use denies young people important opportunities for learning about safe and responsible alcohol consumption. Parents who drink should be encouraged to drink moderately in front of their children rather than attempting to hide their drinking altogether. Teaching children and adolescents that alcohol can be appreciated for its flavour and its quality as a foodstuff rather than solely for its intoxicating effects may encourage young people to approach alcohol with more restraint. Allowing adolescents to experiment with alcohol in safe settings under the supervision of trusted adults can provide them with useful knowledge about the ways that alcohol affects their mind and body. Trusted adults with alcohol experience can provide important feedback to young people regarding the effects that alcohol has on their behaviour. In such settings, young people can develop skills for assessing their level of intoxication and knowing their safe limits. Parents and trusted adults can also provide useful lessons to young people by knowing their own limits and modeling socially acceptable methods of refusing alcoholic beverages when their limit has been reached.

Participants in this study reported that they began using alcohol as a social lubricant when they were in their early teens and continued to rely on it to facilitate social interactions throughout their mid and late teens and early adulthood. As such, I suggest that programs focusing on the development of skills for relaxing and socializing without alcohol could significantly decrease young people's desire to drink. Similarly, encouraging the development of skills for the initiation and development of romantic relationships without the use of alcohol may mitigate problematic drinking behaviours among young adults. This would likely involve fostering understandings of gender and gender roles as well as

awareness of one's own and others' sexuality. Future research should focus on identifying effective programs for developing such skills among children and adolescents.

Several young adults in this study reported engaging in extreme drinking in order to relieve symptoms of mental illnesses, such as anxiety and depression. These participants reported experiencing difficulty accessing care for their mental health issues. Thus, removing real or perceived boundaries to accessing mental health care may decrease risky drinking behaviours among specific extreme drinkers who self-medicate with alcohol. Although results of studies investigating the usefulness of Intervention and Brief Advice (IAB) are mixed (Lavoie 2010; Shakeshaft et al. 2014), such programs may be helpful for a certain subset of extreme drinkers who are open to treatment for mental health issues but feel that they lack access to care or are unable to navigate the health care system.

My study shows that desires to escape distress related to difficulty transitioning from secondary school into post-secondary school or the work force often serve as motivations for extreme drinking. Distress is particularly pronounced when young adults feel that they have been misled or poorly informed with regard to the steps that they need to take in order to secure a rewarding career and successful future. The desire to use alcohol as an escape is especially strong when young adults feel hopeless and helpless in their situation. I suggest that programs focusing on practical and emotional issues associated with transitioning from school and into the work force or on to further education should be implemented in both secondary and post-secondary institutions. Rather than targeting students who are already feeling anxiety about their transition, these programs should extend to entire student populations, since many young adults do not anticipate the difficulties that they will have in their transition from school to the work force until they are already facing them.

My study suggests that preventing extreme drinking among young adults will primarily involve a shift in cultural attitudes toward alcohol and a changing of general understandings of the reasons that young people drink to get drunk. Achieving changes in attitudes and understandings is likely to require the devotion of a significant amount of time and resources to raising awareness among the general population, rather than targeting extreme drinkers in particular. As such, the strategies that I suggest here are unlikely to influence extreme drinking behaviours in the short-term. In spite of this, I strongly believe that a sustained effort to change the way that we, as a culture, view and treat alcohol, along with a focus on aiding social integration of young adults as they transition from childhood to adulthood, can greatly decrease the amount of extreme drinking that young adults engage in in the future.

Limitations of the Study

This study focuses on a specific group of extreme drinkers who are members of a particular subculture of extreme drinking that exists in Kelowna and Vancouver, BC. As such, the data presented here is location- and subculture-specific. This study was also age-specific. It was open to participants aged 19 to 29 but the extreme drinkers who ended up participating in the study were aged 19 to 26. As such, extrapolation of the data and conclusions presented here to other groups of extreme drinkers in other locations should not be made without first investigating their relevance to other situations.

My status as an insider ethnographer—in terms of my membership in the culture and subculture of study—was beneficial in many ways and it allowed me access and insight into aspects of the subculture that an outsider would not have. However, it is also one of the

major limitations of the study. Keeping in mind that no researcher can be completely objective, it is important that I address the ways that my insider status may have coloured my perception and interpretation of the data. In particular, it is possible that my interviews were not as probative as they could have been, since I may have assumed prior knowledge of certain issues that an outsider research would not. I noted this problem after conducting my pilot study and attempted to correct for it in my primary study by engaging in more probing and asking for more clarification from interviewees, even if I thought that I already understood what they were saying. Though I believe that the corrections I made after my pilot study mitigated this problem significantly, it is still possible that I failed to probe in certain cases because of prior assumptions that I held about extreme drinkers.

It is also worth noting the difficulty I faced while writing about some of the embarrassing, personal, dangerous and illegal behaviours that extreme drinkers engage in. I was initially reluctant to describe some of these aspects of the extreme drinking subculture for fear of appearing judgmental or puritanical. I felt apprehensive about including certain topics because I was concerned that portraying members of the extreme drinking subculture in a negative light could be viewed as a form of betrayal. Though I discussed this issue with my PhD supervisor and ultimately wrote about the behaviours that I had wanted to exclude, readers of this dissertation should keep in mind that it was written by someone who is personally familiar with extreme drinking, sympathetic to the people who engage in it and concerned about their physical and emotional safety. This may have influenced the way that I presented some of the more problematic behaviours that extreme drinkers engage in.

Future Directions

Continued qualitative research investigating location-specific motivations for and contexts of extreme drinking among young adults will be crucial for informing harm prevention and harm reduction strategies. If any of the suggestions for harm prevention or harm reduction strategies that I suggest above are adapted and implemented, they should be regularly monitored by qualitative and quantitative researchers to evaluate their effectiveness. As Jones-Webb et al. (2014) note, such monitoring is necessary not only for assessments of effectiveness but also to identify and resolve potential problems with programs, as they become apparent over time (333).

I gathered a tremendous amount of data throughout the course of my research. As such, I had to select specific topics to focus on and discuss in this dissertation. There are several issues my research revealed that are deserving of further investigation and discussion. The use of black humour to discuss, make sense of and justify negative outcomes of extreme drinking appears to play a major role in the perpetuation of extreme drinking behaviours among young adults. Future researchers should investigate ways that harm prevention and harm reduction strategies can counteract the perpetuation of destructive behaviours that black humour allows. Young adults' reliance on alcohol for the facilitation of sexual and romantic encounters is another issue that deserves further investigation. Future research should focus on the role that alcohol plays in the courtship rituals of young adults and explore issues of consent associated with the consumption of alcohol before sexual encounters. Parents' attitudes toward alcohol and alcohol use should be investigated. Specifically, researchers should explore parents' willingness to introduce moderate drinking into their homes and to allow their adolescent children to experiment with alcohol in safe settings with trusted adults.

This is likely to be lucrative for informing harm prevention strategies that focus on cultural attitudes toward alcohol.

As I note in this study, the extreme drinkers I worked with regularly consume media that glamorizes excessive alcohol consumption and extreme intoxication. Qualitative research investigating extreme drinkers' perceptions of such media—and if and how this media affects their drinking behaviours—may be lucrative for informing harm reduction strategies. In particular, such research could lead to the development of media literacy programs designed to counteract the problematic messages of media that encourages and romanticizes heavy alcohol consumption.

Although there has been an increased focus on the drinking behaviours of youth and young adults—for example, Martinic and Measham's (2008) collection—this is an area that demands continued focus, as the social problems related to young people's drinking habits continue to weigh on society (Martinic and Measham 2008a:1; Health Canada 2010). Above all, anthropologically oriented alcohol studies in the future need to be interdisciplinary and collaborative, combining both qualitative and quantitative analysis (Heath 1987:111; Kleinman 1987:448; Room 1984). Quantitative research is, without a doubt, important. But without the explanation and context that qualitative inquiry provides, it can only take us so far. With this perspective, and anthropology's affinity for interdisciplinarity, anthropologists should be making important new contributions to the field of alcohol studies in the years to come.

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Appendices

Appendix A: Semi-Structured Interview Schedule

Name (ID)

Age

Gender

Occupation

City of residence

Living arrangements (alone, with a parent, with a partner or roommate, etc.)

Drinking Patterns

- 1.) How often do you drink alcohol & when (on what occasions)?
- 2.) About how much do you drink when you “go out drinking” & what do you drink?
- 3.) Who do you usually drink alcohol with (and do they drink as well? The same amount?)
- 4.) In what kinds of settings/places do you like to drink alcohol?

Motivations for Drinking

- 1.) What are some of the reasons that you drink alcohol?
- 2.) Are there particular events that cause you to want to drink?
- 3.) How do you feel about life problems (ex. work, school, relationships) when you are intoxicated as opposed to sober?
- 4.) [If it is indicated that alcohol is used to deal with negative life events/emotions] How do you think that you might otherwise deal with these events if alcohol was not an option?

Drinking Experiences

- 1.) Tell me about your first experience drinking alcohol.
- 2.) Describe how you feel when you are intoxicated (physically, emotionally, etc.).
- 3.) Please describe what a good drinking experience would be (Martinic and Measham 2008)
- 4.) What kind of positive outcomes (if any) do you experience when you drink alcohol; or what do you like about drinking (Martinic and Measham 2008)?
- 5.) What kind of negative outcomes (if any) do you experience when you drink alcohol; or what do you not like about drinking?
- 6.) Have you ever “blacked out” from drinking? If so, can you tell me about it?
- 7.) Have you even done something that you have regretted while you were intoxicated? If so, how did you deal with it?
- 8.) What is your experience like when you drink, but do not drink a lot (Martinic and Measham 2008)?
- 9.) What is it like being at a party or other social gathering where others are drinking/intoxicated but you are not?

Perception of the Influence of Drinking on Social Interactions

- 1.) Do you think that your interactions with people are different when you are intoxicated? If so, how?
- 2.) Do you think that people should be held responsible for the things that they do when they are intoxicated? To what extent? Why?
- 3.) How (if at all) do you think that your day to day behaviour would differ if you did not drink alcohol/if alcohol was not available to drink (e.g., it was illegal)?

- 4.) Would you consider your drinking behaviours to be “deviant” or normal in the context in which they occur (explain)?
- 5.) Do you think that others consider your drinking behaviours “deviant” or normal in the context in which they occur? (who? In what way?)

Political Interests and Involvement

- 1.) What kinds of opportunities do you think are available to you in the society in which we live (e.g., economic opportunities, employment opportunities, educational opportunities, political opportunities)?
- 2.) Do you think that society condones certain goals and encourages certain people to have certain kinds of goals? If so, what kinds of goals do you think would be considered socially “correct” or “proper” for someone like you to have?
- 3.) Do you think that these goals are attainable? Why or why not?
- 4.) Do you vote (how many times have you voted, etc.)?
- 5.) Are there any political issues that are particularly important to you (e.g., things that you would like to see happen/change in society)?
- 6.) Have you done anything in order to try to make these things happen/change?
- 7.) Are you involved in anything else politically (e.g., in a political party, participation at rallies or demonstrations, signing petitions, writing to MPs)?

Other Issues

- 1.) Have any education programs (for example, classes at school, guest speakers, television shows or documentaries, public service announcements, billboards, warnings or packages, etc.) influenced your drinking patterns, past or present? If so, can you explain what it was and how it influenced you?

- 2.) Describe your current employment situation and employment history (e.g., type of job, wages, hours worked, days/time of shifts).
- 3.) How do you feel about your current/past jobs? Did you enjoy them?
- 4.) Describe your current educational status and any plans for education or training that you have.
- 5.) What are your aspirations and plans for the future? Where do you see yourself in 10 years? 20 years?
- 6.) What do you think your drinking patterns will be like in 10 years? 20 years?

Appendix B: Structured Observation Schedule

- Describe the setting: lighting, decor, sounds, music, seating arrangements, location of bars, dance floor, etc.
- Structure of groups (men, women, approx. age)
- Appearance (clothing, etc.)
- How are people within groups interacting?
- Do people interact with others from other groups?
- Describe the pace of drinking
- Number of drinks (ordering one at a time? more?)
- General demeanor: Celebratory? Rowdy? Etc.
- Does this demeanor change as more alcohol is consumed?
- Do people in different areas of the bar/club/pub appear to be drinking in different ways (e.g., those on the dance floor as opposed to those sitting at a table)
- Take note of use of cell phones. How do they add to and or interfere with social interactions.
- Take note of use of cameras. How do people pose for pictures? Do people change their demeanor when a picture is being taken?
- Describe the nature of social interactions (e.g., topics of conversation).