

ALCOHOLISM AND ITS EFFECT ON FAMILY; A SECONDARY STUDY

Amandeep Singh

Assistant Professor in Sociology

Department of Evening Studies- MDRC

Panjab University

Chandigarh

ABSTRACT

There isn't many research on the relationship between alcoholism and dysfunctional families, and those that do tend to mention it only in passing as one issue among many. In order to comprehend the problem of alcoholism from both a theoretical and sociological standpoint, an attempt has been made to identify the many sociological views now in use and how they relate to the current issue.

KEYWORDS: Alcohol, Alcoholism, family violence.

INTRODUCTION

Alcohol drinking has been a feature of many cultures, and it is viewed differently in many cultures around the world (Mandelbaum, 1965). Mandelbaum (1965) wrote in his book *Alcohol and Culture* that people from all different cultures drink alcohol for a variety of reasons, including social, recreational, and medicinal ones as well as religious ones like 'libations'. Additionally, many cultures around the world use this chemical in different ways and for distinct purposes.

In ancient Indian literature, there is similar proof. the claim is that the beneficial and negative effects of alcohol intake mostly depend on how it is consumed, according to the nearly 2000-year-old Indian text *Charak Samhita*. In the book, it is written, "If a person drinks alcohol in the right manner, in the right quantity, and at the right time. To him, wine is like nourishing food—it fuels his vitality and keeps him in good spirits. However, a person who drinks whatever is available to him, whenever /wherever he has the possibility, this alcohol poisons him (as cited in Saxena, 1999, p.38).

It is simple to find references to drinking norms in works from contemporary. For different genders, age groups, and health statuses, the World Health Organization (WHO) and numerous other research organizations suggest safe drinking patterns. For example, the WHO recommends that young people consume two standard drinks (SDs) per day for females and three standard drinks (SDs) of 30ml per day for males. For spirits of 40% volume and 750 proof, including whiskey, rum, and vodka, the specified arrangement is valid. If we calculate the absolute amount of pure alcohol that the WHO recommends in a single drink using this setup, it only equals 10 gms (WHO .2003). Furthermore, it is advised that each week, a person should abstain

from alcohol on at least two days. Additionally, when drinking, one must observe a one-hour gap between two successive beverages, wholesome, nourishing food, etc. (WHO, 2003; HPA, 2012).

Alcohol use and the human body are directly related (Gururaj et al., 2011). Studies in medicine and psychology suggest that drinking alcohol has impacts on a person's body and psyche, including physical comfort, altered mood, enjoyment, a sense of relief from pain and anxiety, among other things. This increases the likelihood that people will regularly consume alcohol. Numerous studies on alcoholism demonstrate that alcohol addiction affects people and their relationships in a variety of biological, psychological, and social ways.

Alcohol: Beer, wine, spirits, and other alcoholic beverages all contain alcohol as a component. It is a mind-altering substance that is depressant in nature and induces intoxication. Additionally, each person's response to it is unique and depends on their age, gender, body type, as well as the quantity and quality of alcohol they have consumed (Straus, 1950; Mandelbaum, 1965; Robinson, 1976; WHO, 2011).

Alcoholism: Alcoholism is a social disease (Straus, 1950; Fox & Lyon, 1955; Keller, 1962; Robinson, 1976; Bucholz & Robins, 1989; WHO, 2011) or behavioral disorder (Fox & Lyon, 1955) caused by recurrent alcohol consumption that exceeds recommended limits or customary dietary use (Straus, 1950, 1966; Fox & Lyon, 1955; Keller, 1962; Robinson, 1976; Bucholz & Robins, 1989; WHO, 2011).

Roman (2007), Alcohol intake is typically linked to expectations for and accomplishments in roles. In other words, if a person drinks alcohol in accordance with drinking norms and successfully fulfils their familial and societal responsibilities, they may not be suffering from alcoholism. With the use of this definition of alcoholism, we are able to distinguish between typical alcohol consumers and problematic alcohol consumers. Therefore, a person's drinking habits and social interactions with others can be used to determine whether or not they are an alcoholic. Such an understanding of alcohol use brings to light the fact that determining whether a person is an alcoholic requires taking into account more than just their overall consumption of alcohol.

There are many causes of problematic drinking or alcoholism. Numerous elements that contribute to alcoholism have been identified by academics from various fields. According to biologists, the brain, DNA, and other factors play a role in alcohol addiction (Mayfield et al., 2008). They think that a person's chance of becoming addicted to alcohol is increased by a few inherited genetic traits. A common sign of physical dependence is withdrawal discomfort. Psychologists also have personal views about addiction and alcoholism. They contend that people consume alcohol as a means of relieving mental tension. They contend that the main causes of addiction, which then results in alcoholism, are aspects of human psychology, including human thought and various personality traits (Cox, 1988; Kushner et al., 1994; Harden, 1995; Hawkins et al., 1997).

HISTORICAL CONTEXT OF DRINKING

The Arabic word "al-kuhul," which means "the kohl," is where the word "alcohol" originates. To protect the eyes, kohl was first prepared as a powder that later became a liquid (WHO, 2003). Despite the relatively recent origins of the term, alcohol itself is a historical, cultural, and societal artifact (Mandelbaum, 1965).

Alcohol remained a pride to drink in addition to a problem to mankind, depending upon its cultural acceptance and pattern of use among unique groups (Straus, 1950; Mandelbaum, 1965; McGovern, 2009). Even though it is very hard to trace the exact term of alcohol invention, however, specific studies show some tentative intervals of alcohol use. As a long way as large-scale manufacturing is concerned, fifteenth century in the history of mankind is the period which has made possible excess manufacturing of alcohol (WHO, 2003). In a while, social and technological modifications which includes industrialization and distillation method have made viable this massive scale production within the form of spirits includes whisky, rum, gin and many others, compared to manufacturing of especially small quantities of fermented wines at earlier instances. This has made alcohol an item of exchange with largest use within the western societies.

As far as Indian society is involved, Chopra & Chopra (1965) and Saxena (1999) determined that the history of alcoholic drinks dates lower back to the length of the Indus Valley Civilization and the Vedic duration round 2000 B.C. Alcohol was used within the shape of soma or somras and sura. Soma was consumed through social elite or upper magnificence people and became credited with high-quality traits, whereas, sura was consumed through lower magnificence to get alleviation from their bodily hardships (Saxena, 1999; WHO, 2003).

However, alcohol availability and usage increased gradually in India during the British era. With a focus on taxation and revenue, the British Rulers established distilleries in India in 1862. The varieties of alcoholic beverages consumed, drinking habits, and societal attitudes about alcohol consumption in India have all changed.

Many independence activists spoke out against the country's growing alcoholism under the British era. Later, as a result of their efforts, the Indian Constitution was amended to include specific provisions in the shape of Article 47 directive principles of state policy. However, implementation of this policy principle has been weak in most states of India. The policy of total ban has been consistently followed in the state of Gujarat since 1960 and for a short time in some other states such as Haryana, Andhra Pradesh and Nagaland and recently in the Indian state of Bihar.

In the case of Punjab, it has been used by people in various festivals, occasions and ceremonies. In general, Punjab people would drink alcohol on special occasions, especially as hosts. In the past it was mainly prepared at home and mostly drunk by the male members only in the presence and supervision of other family members (Deb, 1977; Lal & Singh, 1978). In short, it was culturally acceptable as an occasional phenomenon and therefore had rare negative consequences for the individual, family, and society at large (Lal & Singh, 1978). In Punjab, people with certain cultural limitations have been drinking home-brewed alcohol for a long time. Alcohol consumption has changed a lot in Punjab due to the Green Revolution (Kaur, 2000) and more importantly due to government policies as alcohol remains the main source of income.

THEORETICAL PERSPECTIVES

Alcohol consumption has been analyzed and discussed by different researchers from different perspectives. Perspectives in biology largely understand this problem as a medical disease and believe that it is caused by an individual's genetic makeup. Biological perspectives state that certain inherited genetic traits put a person at a higher risk of developing alcohol dependence. In addition to genetic factors, the body's physiological response is also considered to be a major factor in alcohol consumption. From this perspective, alcohol can temporarily increase dopamine, which makes a person feel good. A person can then consume alcohol over and over again to get the same feeling. Frequent heavy drinking seems to impair normal brain function and brain chemistry, eventually a person begins to act like a deviant. In other words, addiction controls the individual mind to such an extent that the individual is unable to get out of this mess.

However, the above perspectives do not take much into account the social environment, social conditions, or social situations that are otherwise considered important by sociologists. Sociological and anthropological perspectives fill these gaps and examine the social and cultural conditions of alcohol consumption, alcohol addiction, alcoholism and its consequences. These perspectives believe that social conditions, social pressures, human behavior, etc. play a more important role in explaining the phenomenon of alcoholism than human psychology and human genes.

The present study is an attempt to understand the problem of alcoholism from a sociological perspective and therefore an attempt has been made to identify the existing perspectives in the field of sociology and their relation to the current problem. The brief discussion of how these sociological perspectives view this issue is discussed as follows;

Structuralist Perspective

Structuralism largely holds the notion that the structure of society produces general laws that govern the individual in society. Structuralism assumed that people's actions and thoughts are highly constrained and determined by underlying structures (Baert, 1998). Durkheim was the first scholar to make this argument in his theory of social facts. He said social facts are external, limiting and general in nature. By externality he

means that social facts come before the individual. For example, a person does not in itself define the duties that he has to fulfill. These duties are prescribed in the existing norms of society. By the restrictive nature of social facts, he meant that they have a coercive and coercive force through which they exercise control over individuals. In simple words, social problems, conditions, etc. always motivates the individual to use available avenues, either substances or religion, to overcome these problems and worries. It is also explained from this perspective that society is regarded as an entity sui generis and is therefore subject to its own laws. More precisely, the explanation of one social fact can be seen in another social fact (Baert, 1998). Similarly, we can view alcoholism as a social fact, and its explanation and solutions can be sought in other social facts such as religion, media, and family circumstances. In other words, we can say that one social fact explains another social fact.

Functionalist Perspective

Functionalism tries to explain every given social institution via how it keeps and organizes the wider society (Collins, 1997). Furthermore, functionalism examines how parts and wholes interact, explaining how pieces function within bigger systems. The reasons why the family is an institution for society can be found in the purposes that it fulfils. The requirement for effectively socialized children in society explains the conventional family structure, in which the husband provides for the family's needs while the woman looks after the home and children (Collins, 1997). All social structures, or at least the major ones, are said to contribute to the integration and adaptation of the system in which they work, according to functionalism (Zeitlin, 1996). In addition, Durkheim explains that every social phenomenon, such as religion, division of work, and suicide, serves to uphold social stability in society. Accordingly, some academics believe that drinking alcohol has several societal benefits. It enables those engaged in laborious work to go past their physical discomfort and fatigue. According to this viewpoint, alcohol is a social beverage that serves as a potent unifier, enabling people to sit down together and share their happy and sad times.

Marxian Perspective

The Marxian viewpoint primarily approaches the problem of alcoholism, drug addiction, and substance abuse from the viewpoint of exploitation. It emphasizes that main problems like exploitation and injustice lead to secondary effects like drunkenness. It demonstrates how alcohol has been heavily utilized in society to control the populace as a means of exploitation. They think it is a tool employed by the state and the capitalists to manipulate the populace for their own ends. According to this viewpoint, if people continue to be dependent on alcohol or other addictive substances, they will continue to be satisfied with the temporary psychological or biological comfort these addictions provide and will not be motivated to challenge the social injustices that already exist. It has persisted as a component of masculinity and is frequently employed to establish authority over women in societies like India. The viewpoint further explains that while alcohol itself is not an issue, it does become one when it is employed as a tool to take advantage of others.

Cultural Perspective

The importance of substances and their use in various cultures of society are essentially explained by the cultural perspective. It generally upholds the notion that when a person adheres to culturally acceptable standards about a certain substance, it is deemed relatively safe in the majority of societies around the world where the use of various substances has been discovered to be a common cultural practice (Mandelbaum, 1965). Various times and places have different attitudes toward the use of particular substances, according to cultural norms and values. They specify who is permitted to use a particular substance and under what circumstances. According to this viewpoint, there will be fewer negative effects of alcohol consumption where it is a component of cultural or social activity that is governed by norms and values. Therefore, society should instill moral principles that condemn the lifestyle of the addict and morally castigate anyone who indulges in excessive drug usage. According to the cultural perspective, alcohol-related damages are substantially lower and the alcoholism problem is limited in areas where alcohol consumption is culturally acceptable by the community. Therefore, if a culture or group accepts alcohol on a cultural level, it also suggests drinking conventions, which greatly reduces the likelihood of negative drinking-related impacts.

Structural-Functionalist Perspective

The viewpoint aims to examine the purposes of alcohol use as well as its unintended repercussions, such as alcoholism, which is built into the fundamental institution of the family. The structural-functionalist perspective emphasizes that social circumstances or the social environment are external and beyond an individual's control, making it more to blame for addiction than the alcoholic himself. As a result, it is over and above the individual. It emphasizes the significance of outside forces in driving someone to drink. It also emphasizes how institutional crises lead to dysfunctions that cause additional societal issues.

Interactionist Perspective

This viewpoint largely describes how meanings that result from people's daily interactions with one another form society and how they are shaped by it. Thinkers like George Herbert Mead, Howard S. Becker, Erving Goffman, Alfred Schutz, etc. are prominent representatives of the perspective. Among these theorists, Becker's theories are prevalent and have been adopted by numerous academics. In essence, Becker discusses abnormal conduct as mostly the result of interpersonal interactions. He contends that certain social groupings foster deviant conduct by formulating particular rules, the breach of which is considered deviance, and later applying those norms to specific individuals and identifying them as outsiders. Researchers in the field of addiction study alcoholism using labelling theory. They clarify that no behaviour is abnormal by nature unless society classifies it as such. Alcoholism is not a natural occurrence; rather, it is a product of social norms and individual responses to those norms, which in turn create particular sorts of social situations.

According to sociological theory, Paul M. Roman (2007), if someone's drinking is considered to be abnormal by another person, that individual is likely an alcoholic. Slurred speech, an inability to walk straight, uncontrollable laughter, hooting, hostility, fighting, and poor judgement after drinking are further indicators of deviant drinking. Alcoholics, also known as critical drinkers, are people who cannot control their use of alcohol and engage in binge drinking, which involves consuming large amounts of alcoholic beverages all at once or throughout the day, and whose actions have a significant negative impact on others (Fox & Lyon, 1955; Jackson, 1956; Benegal, 2000; Johnson, 2000; Roman, 2007; WHO, 2014). Even if an alcoholic may go without drinking for a day or even longer, they inevitably relapse. The more these people need to stop drinking, the harder it is for them to do so (Robinson, 1976). The concepts of several academics were combined to create this definition.

Alcohol as a Part of Culture

Varied scientific disciplines have had different views on alcohol. The social sciences, such as sociology, anthropology, etc., are concerned with the social and cultural aspects of human life, much to how medical science examines the relationship between alcohol and the human body. According to the literature, numerous social scientists and research organisations have discussed the cultural significance of alcohol in various global cultures. According to Straus (1950), Mandelbaum (1965), and WHO (2011), alcohol drinking has been a part of practically all human societies since the dawn of time. Studies have also attempted to determine where alcohol drinking began. According to Saxena (1999), alcohol first appeared in India approximately 2000 BC.

Peer Group Pressure

According to numerous studies (Ghulam et al., 1996; Singh et al., 2000; Roman, 2007; Gururaj et al., 2011; Suman, 2011), drinking is a significant source of social interaction and enjoyment in life. It is associated with socio-cultural lifestyle. The reference group that has the most powerful influence on a person's life is always their peers. A person is under enormous pressure to adopt the habits or standards of a certain peer group out of a desire to belong to that group. In their study in Madhya Pradesh, Ghulam et al. (1996) discovered that 93% of users began drinking under the influence of their social group. According to Smedley (2017), drinking at the workplace is a requirement for maintaining excellent working relationships with coworkers or making the boss pleased. In his research, he discovered a connection between social drinking with coworkers and life success. Accordingly, by examining the aforementioned studies, it can be concluded that peer networks have an impact on a person's behaviour, which ultimately encourages them to drink in their social and professional lives.

Alcoholism and its impact on family

Family is an important social institution where a person begins his or her existence, develops social skills, and spends the majority of his or her time (Goode, 1961; Gelles, 1972). According to structural theory, family systems can occasionally cause such much stress and annoyance that alcoholism can result (Gelles, 1972). According to Suman (2011), the familial environment might occasionally become the primary contributor to alcoholism. She also noted in her research that 30.8% of addicts blamed their addiction on their unhappy home life. According to Gururaj et al. (2011), persons with a large family history of drinking are at an increased risk of acquiring alcoholism, and younger generations are more susceptible to addiction than adults are. In addition to this, there are other family-level factors that influence young people and adults to become addicted, such as poverty, aggression, conflicts, and bad parenting. Alcohol is used by people to escape life's realities. As a result, some familial conditions lead a person to drink in order to cope with stress, tension, and challenges in their daily lives. Drinking is becoming a common cultural, lifestyle, and recreational activity, which has led to an increase in alcohol-related incidents in society (Gururaj et al., 2011). Numerous studies have shown varied societal consequences of alcoholism at various degrees. Three categories can be used to categorize it: on an individual level (private life, job impacts, etc.); on a family level (domestic violence, effects on children, financial affairs, condition of women, role shifting, split in social relations, disrupted family life, divorce, etc.); and on a cultural level (criminal acts, physical and sexual abuse, road accidents, etc.).

Alcoholism and Family Violence

According to Bhatt (1998), the risk of marital violence increased when the spouse was an alcoholic, and the prevalence of family violence was higher in households where drinking was a regular practice. According to Saxena (1999), and Choudhury (2009), almost 50% of deaths resulting from domestic violence were related to alcohol usage. According to Kantor and Straus (1987), alcohol use may not immediately result in violence in the majority of families, but excessive alcohol consumption can disrupt a person's nervous and cognitive systems, which can escalate aggressive behavior, which ultimately becomes one of the key factors for raising the likelihood of abuse. As a result, alcohol abuse has been recognized as a serious threat to family life that frequently results in marital violence, especially among illiterate and lower socioeconomic groups (Kantor & Straus 1987; Chavan et al., 2007; Sahoo, 2009). Furthermore, he claimed that domestic violence harms women's self-esteem and increases their risk of despair, suicide, and addictive behaviors. When their husbands are alcoholic, women see divorce as their only alternative. However, a woman who lives with an abusive husband occasionally fluctuates between the two sides of that person, who is kind when sober and brutal when intoxicated (Gelles, 1972; Nayer et al., 2012).

Families of alcoholics are distinguished from other families by Lederer (1991). He claims that alcoholic families are characterized by inequities, an absence of a standard and acceptable behavior, and corresponding

extremes in behaviour among family members. Additionally, the negative effects of the family are also shown in the alcoholic's family members, friends, neighbors, etc.

Alcoholism and Effects on Children

Since they have never known love, care, control, or affection for themselves, Johnson (2000) and Nayar et al. (2012) noted that in some instances it may even negatively influence their parenting abilities. They also found that younger siblings typically lose interest in their parents and become socially alienated in peer groups as a result of being obliged to start working early for the family's survival. Parental drinking impairs the ability of parents to watch children effectively, which leads to child abuse and neglect. In their study, Nirmala et al. (2000) discovered that families affected by alcohol had greater degrees of co-dependence, poor and inconsistent child-rearing techniques, and the presence of mental health problems including stress, sadness, anxiety, etc. Furthermore, she discovered that children from such households were more likely to experience abuse due to issues like cognitive illnesses, poor academic performance, behavioural problems, difficulties adjusting to their new social environment, and lower coping skills.

Financial Problem

According to Saxena et al. (2003), families with members who drank alcohol frequently spent 14 times as much on alcoholic beverages each month and had high levels of debt. In a similar vein, Malik et al. (2012) discovered that 77.5% of families experienced financial difficulties as a result of alcoholism, with the majority of these families belonging to lower socio-economic groups. According to Benegal et al. (2003), about one-third of an individual's wage was spent on alcohol, and close to 40% of alcohol dependents did not contribute to their family's income. According to several research, alcoholism-related illnesses or fatalities also put additional financial strain on other family members.

Suicides and Mortality

According to Gururaj et al. (2011), drinking alcohol causes financial difficulties, such as debt, which could ultimately result in suicide. Similar findings were made by Gururaj and Isac (2001) and Sahoo (2009), who discovered that the violence and abuse committed by alcoholics frequently cause other family members, including children, to experience feelings of hopelessness, helplessness, and frustration, among other things, which frequently lead to suicidal attempts. According to WHO (2011), problematic alcohol use leads in over 2.5 million deaths annually, or 4% of all fatalities worldwide, and many more illnesses and injuries. Worldwide, 3,20,000 young people (15-29 years old) die each year from drinking too much alcohol, which is 9% of all deaths in that age range. The study also shows that problematic alcohol use is linked to a wide range of major social problems, including family crises including domestic violence, divorce, child maltreatment, rifts in social networks, and many more. As a result, alcohol consumption is extremely expensive for both the abuser and his or her family. Furthermore, compared to non-drinkers, a higher percentage of alcohol users left

their houses. Similarly, it was discovered in certain research that pre-marital, unregulated, and extra-marital sex were frequent among male alcohol drinkers (Schensal et al., 1978).

It is safe to say that these consequences of alcohol use are severe and cannot be disregarded. However, there are numerous studies on families that show how alcohol denigrates the institution of family and is insulting to the alcoholic's family members.

Conclusion

It is obvious that alcohol affects not only an alcoholic's behavior but also the behaviour of those close to him. Treatment for this alcohol addiction issue is therefore essential. In a society, it has been discovered that alcoholism is more common in the lowest socio-economic strata, and most research have focused on the social variables that have contributed to the growth in alcoholism, such as government regulations, peer pressure, family involvement, etc. These studies list marital violence, the dissolution of social bonds, family disarray, and other issues as some of the often-cited societal effects of alcoholism on families. The majority of studies have found that drinking patterns, including type, quantity, timing, duration, frequency, context (alone or with others, with or without food, etc.), and drinking situations, are more problematic in rural areas, towns, and slums, as well as among illiterate people and those from lower socioeconomic strata.

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