

## ALCOHOL DRINKING IN RURAL WOMEN: A SOCIOLOGICAL STUDY

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### **Abstract**

*Alcohol abuse is a serious public health concern. Alcohol consumption is more harmful for women than for men. Its use can cause breast cancer, heart attack, liver and many reproductive problems in women. Consuming alcohol during pregnancy has a bad effect on the child. The level of alcohol consumption among women varies in India. In this study we are trying to analyze the impact of alcohol on the health and relationship with their family of women. 5 case studies have been done through the purposive sampling and 2 villages have been selected from district Meerut. Data was collected by using interviews and deep observation. The results show that Women, who consume alcohol has not a good physical and mental health. They all are very sick to see. One thing is clearly seen that they are not considered respected women in the society, and they also accept this. That's why some women consume the alcohol secretly from their families.*

### **Key Words:**

*Alcohol, Women, Health, Social Relationships, Social Impact*

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## **Introduction**

Alcohol Consumption is a leading cause of global disease burden and health loss. Alcohol use has been linked to 60 acute and chronic disease conditions, especially cancers, liver cirrhosis and cardiovascular diseases such as evaluated blood pressure, coronary heart disease, ischemic stroke and hemorrhagic stroke. Alcohol has been and remains the drug most commonly used by women of reproductive age. Over the past 30 years, young women, worldwide have been consuming more alcohol and with increasingly frequent patterns of risky behavior, such as “binges dirking”. Alcohol consumption is the world’s third largest risk factor for disease and disability, in middle-income countries, it is the greatest Risk”(WHO 2011). Alcoholism is a current major concern in developing and underdeveloped countries. This has now become a global issue in health and social problems(WHO 2011). India is generally regarded as a traditional ‘dry’ or ‘abstaining’ culture. However, it has one of the largest alcohol beverage industries in the world. India is the dominant producer of alcohol in the South. East Asia region (65%) and contributes to about 7% of the table of alcoholic beverages imparted into the region.

Alcohol’s real impact is on the social and family dynamics that underlie its community’s domestic violence and exacerbation of poverty have made alcohol abuse the single most important problem for women in India. With one in three people in India falling below the poverty line. In this study we are trying to explore the social and health-related impact of alcohol on women.

The adverse effects of alcohol consumption have been widely documented. The observed relationship between alcohol consumption and disease is often non-linear with low to moderate alcohol consumption being protective and heavy alcohol consumption being harmful.

India leads the way in terms of alcohol consumption. It is the second largest consumer of spirits after China. According to the results of a large-scale survey conducted across India in 2021. Most adults in India between the ages of 45 to 59 consume alcohol. Despite the minimum drinking age varying in some states of the country the number of teenagers is an alarming 8.3%. Many people struggle to control their drinking at some point in their lives. According to the 2022 NSDUH, 16.4% of adults ages 18 and above met the criteria for an alcohol use disorder (AUD) in the past years. Around 14 million people in India are dependent on alcohol and need help. According to the National Family Health Survey (NFHS), 29.2% of men, & 1.2% of women consume alcohol in India.

According to the W.H.O. (2014), the total percapitaconsumption of alcohol by people over 15 years of age is 6.2 liters of pure alcohol per year, which is

approximately 13.5 grams of pure alcohol per day. Alcohol use is very common in India, both in provincial and urban areas, with various studies reporting prevalence rates ranging from 23% to 74% among men and although less common among women. It has been found to be as widespread as 24% to 48% in some regions and communities. (National Health Portal, 2015).

The most recent survey report published in early 2019 by The National Drug Dependence Treatment Centre, AIIMS, New Delhi states that 15% of the Indian population uses alcohol, and the male-female ratio is 17:1. According to the National Family Health Survey (NFHS-5) 2019-2020, only 1% of women in entire India consume alcohol. While looking at the state level, it is 26% in Arunachal Pradesh, 16.3% in Sikkam, 7.3% in Assam, 6.8% in Jharkhand, 5% in Andaman Nicobar, 5% in Chattisgarh, 0.3% in Uttar Pradesh and the Lowest is 0.21% in Karnataka. The highest percentage of men drinking alcohol was found in Goa, (59%), followed by Arunachal Pradesh and Telangana (50%) while It is the lowest in Lakshadweep (1%).

### **Objective of the Study**

This study has been done under the objective mentioned below:-

- To understand the impact of alcohol consumption of women on social relationships and health.

### **Review of Literature**

KaruppusamyBalasubramani et. al (2021 : 1-10) concluded that India has three major alcohol hot spots (i) North-East states (ii) Eastern Peninsular states formed by Chhattisgarh, Odisha, Jharkhand and Telangana and (iii) Southern states of Tamil Nadu and Kerala. Except for religion and social category, other socio-economic factors have a low to modular effect on alcohol consumption.

Carla S. Meurk et. al (2014 : 1-9) found out that women generally described drinking small amounts of alcohol during pregnancy as being a low-risk activity and talked about the importance of alcohol to their social lives as a reason for continuing to drink or finding abstinence a burden, sensitization to the Judgments of others was not widespread women predominantly assessed the risk of their drinking in terms of the kinds of alcoholic beverages consumed rather than alcohol content.

Liat Hen - Herbst et. al (2021 : 1-7) described that a concerning percentage of pregnant women in Israel acknowledge drinking alcohol near and after conception. Although most participants reported discontinuing use after realizing they were pregnant a worrying percentage continued consumption with little knowledge of the dangers.

Ann-Charlotte Mardby et. al (2017 : 1-7) explored that almost 16% of women residents in Europe consumed alcohol during pregnancy with large cross-country

variations. Education and smoking prior to pregnancy could not fully explain the difference between the European countries.

Beishamayum Deben Singh et. al (2018 : 1362-1368) found out in their study that Andro village is commercially producing alcohol for their livelihood. Alcohol is not prohibited in this village. Most of the youth in this village consume alcohol. Personal and family problems are the main reasons to start consuming alcohol.

Xi-Jian-Dai et al. (2022 : 1-11) signified the generalized additive model showed an increased risk of COVID-19 with a greater number of alcohol consumption. Alcohol drinker status, frequency, amount, and subtypes of alcoholic beverages were not associated with COVID-19-associated mortality.

Linda M O’Kuffe et. al (2015 : 1-11) concluded that alcohol use during pregnancy is prevalent and socially pervasive in the UK. Ireland, Newzealand and Australia. Ne policy and interventions are required to reduce alcohol prevalence both prior to and during pregnancy.

Carolin Kilian et. al (2021 : 1-12) explored that alcohol consumption appears to have declined during the first months of the Covid-19 pandemic in Europe. Both reduced availability of alcohol and increased distress may have affected consumption, although the former seems to have had a greater impact in terms of immediate effects. Joao M. Castaldelli et. al (2021 : 37-42) found out that tracking individual alcohol consumption and releasing real-time data at different levels (state, country, International) are needed to better assess the effects of increased alcohol consumption during the pandemic.

Jagadeesan S. and Pranav Patel (2021 : 2070-207) concluded that alcohol dependence/addiction tends to have both adverse health and socio-economic corollary, evading the vital resources away from basic necessities such as nutrition/ food, shelter, clothing and schooling of the offsprings. It also affects the welfare of other household members, especially the children and women dependent on the domiciliary head for the preceding.

### **Research Methodology**

In this study we selected 05 cases of rural areas of District Meerut. Data was collected by interview. Purposive sampling has been used to conduct this study. The deep observation was used in this study. Two cases are from village Bhadoli, three cases are from village Fatehpur have been selected. Two Alcoholic cases belong to higher caste families and the other 3 females belong to lower caste.

### **Case Study**

Five case studies have been mentioned below-

**Case-1:** Jagvati Devi, a 50-year-old woman from the Gujjar caste. She lost her husband over 15 years ago. She owns 22 bighas of land. With her children uninterested in farming or studies, she turned to selling raw liquor for survival, earning ₹ 800–₹ 1000 daily. Over time, she also became addicted to alcohol, initially consuming it during festivals but eventually relying on it daily for energy. Although she doesn't see alcohol as inherently bad, she hides her consumption due to societal judgment. Her story highlights how alcohol use can begin as a coping mechanism and turn into dependence, especially among marginalized women, while still being viewed as a social stigma.

**Case-2:** Sheetal, a 30-year-old woman from the Gujjar community, has been living separately from her husband, who works in Muzaffarnagar and is involved with another woman. Though married for 10 years with an 8-year-old son, she receives no financial or emotional support from him. Dependent on her in-laws and maternal family, Sheetal's economic condition is poor. Educated up to 12th grade and unemployed, she began consuming alcohol about six years ago to cope with emotional distress and depression caused by her husband's neglect. She finds temporary relief and energy through drinking, though she hides her addiction due to societal stigma. Despite wanting to quit, her emotional pain often leads her back to alcohol.

The above case shows that the consumption of alcohol is emerging not only in men but also in women to work their sorrows. But the society still looks down on women who consume alcohol and such women do not get respect in the society, so consumption of alcohol is a social evil even in today's era of women.

**Case-3:** Shakuntala Devi, a 65-year-old woman from a Scheduled Caste background, works as a laborer and lives in poverty despite owning 3 bighas of land. Widowed five years ago, she lives with her youngest son while her other children live separately. Shakuntala and her family—especially her sons—consume alcohol heavily, a habit she picked up years ago while drinking with her late husband. For her, alcohol relieves physical exhaustion and helps her continue working, though she is physically weak. Unlike others, she drinks openly, but society—and even her own family—judges and disrespects her because of it. Her children don't care for her properly, and her past injury was ignored by her sons. Her story highlights how rural women who consume alcohol openly are often stigmatized and lose respect, even within their own families.

**Case-4:** Rita Devi, a 50-year-old woman from the Gujjar caste, lives with her husband. Though they once had 14 bighas, they've sold 5 due to financial instability. Neither is interested in farming, and they spend most of their earnings—from land contracts and the husband's tractor work—on alcohol, smoking, and

guttka. Initially drinking for entertainment, both are now addicted and cannot function without it. Rita even drinks publicly with her husband and his male friends, including during the lockdown. Their alcohol abuse has aged and weakened them visibly, and their behavior has led to social isolation. Despite both drinking, Rita is judged more harshly by society, highlighting the gender-based stigma rural women face for alcohol consumption.

**Case-5:** Saroj, a 50-year-old Gujjar woman, lives in a financially struggling family with her husband and two unmarried children. The main income source of the family is farming. Despite owning 12 bighas of land, the family shows little interest in farming and this is the main cause of poverty in the family. About five years ago, her husband began selling raw liquor from their home, during which Saroj secretly started drinking out of curiosity. She has also been smoking hookah for over two decades. She admits that alcohol made her feel more energetic. Saroj hides her past drinking from her family and believes alcohol consumption lowers a woman's social respect, reflecting internalized societal norms. Her case shows that not all alcohol use leads to addiction, but stigma remains strong for women drinkers in rural society.

### **Result & Discussion**

On the basis of the data we find some valuable findings which explain the position of alcoholic women and their status in society. There are as follows:- One case shows that consumption of alcohol starts from entertainment and comes out in the form of dependences. Even today it lowers the prestige of those women in the society who consume it. It is a social evil even today.

Another one case shows that the consumption of alcohol is emerging not only in men but also in women to work their sorrows. But the society still looks down on women who consume alcohol and such women do not get respect in the society, so consumption of alcohol is a social evil even in today's era of women.

One case follows from the above that women should consume alcohol openly. Even then the society does not give respect to such women. Rural women who drink alcohol do not get respect even in their families. Even his children do not look after her. Even today, rural women who consume alcohol are not considered respected women in the Indian society.

And another one case shows that along with the husband, the wife also drinks alcohol openly, but Rita is considered bad more than the husband. That is, the consumption of alcohol is considered very bad for women in our society. Our society does not look at such women with respect.

On the behalf of taking to Saroj, she said that after consuming alcohol, her weak body becomes agile, and her mood also gets better. Saroj does not have any serious

illness but she is very weak to see. To date Saroj has not told her husband and children that she is also consumer of alcohol. We found in this study that limited alcohol consumption can reduce alcohol-related risks, although they cannot be eliminated.

### **Conclusion**

As per data, alcohol has several impacts on health. The regular consumption of alcohol leads to the death of an individual but this data also revealed that the limited consumption of alcohol is not too much harmful to health. Along with this, Alcohol is a social evil. The consumption of alcohol by women is considered taboo and very bad against the man in the Indian society. To be the alcoholic of a man or woman in any family is the main cause of unstructured housing, physical- and mental abuse and the poverty.

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