The tenth annual workshop of the International Research Group on Gender and Alcohol (IRGGA) was held on June 1 and 2, 2002, in Paris, France, at the A.S.I.E.M. Building, 6 rue Albert de Lapparent. The IRGGA workshop preceded the annual symposium of the Kettil Bruun Society for Social and Epidemiological Research on Alcohol, June 3 – 7. The workshop was attended by 54 persons representing 26 countries. The workshop agenda and the updated membership list are attached to this report.

A major focus of the 2002 IRGGA workshop was the group’s multi-national comparative study, GENACIS (Gender, Alcohol, and Culture: An International Study). A separate but related meeting was held on May 31 for IRGGA members involved in the European Union component of GENACIS, directed by Kim Bloomfield of the Free University, Berlin, and University of Southern Denmark. Minutes of the May 31 EU meeting have been circulated to meeting participants by Kim Bloomfield and EU project coordinator Stephanie Kramer. Following adjournment of the IRGGA workshop on June 2, Isidore Obot coordinated a planning and training meeting for representatives of the first group of developing countries that will conduct GENACIS surveys funded by WHO (Argentina, Kazakhstan, Nigeria, and Sri Lanka). An additional IRGGA workshop on qualitative research methods in the GENACIS project was held on June 7 and 8, coordinated by Jacqueline Wiseman, Moira Plant, and Karen Trocki. A separate report of that workshop will be circulated on IRGGA’s list serve IRGGANET by the workshop coordinators.

**Overview and Major Components of GENACIS**

Robin Room presented an overview of the GENACIS project, with major components of the project described by Kim Bloomfield (EU component), Isidore Obot (WHO-funded developing countries), and Richard Wilsnack (countries not eligible for support by the EU or by WHO). GENACIS (Gender, Alcohol, and Culture: An International Study) is a multi-national study designed by IRGGA members over a period of several years, that is now collecting new survey data in multiple countries, using a standardized questionnaire. At the time of the workshop, 29 countries had completed, were conducting, or were planning to conduct surveys as part of GENACIS. Some surveys are being conducted specifically for GENACIS, and some surveys designed for other purposes (e.g., national health or alcohol use surveys) have agreed to include sets of GENACIS questions.

The GENACIS questionnaire developed by IRGGA contains questions about drinking behavior, drinking contexts, and drinking consequences, including alcohol dependence questions from the Alcohol Use Disorders Identification Test (AUDIT). In addition to detailed measures of alcohol consumption, the GENACIS questionnaire asks about
various life domains that may affect or be affected by alcohol use, including social networks and social support, social roles (employment, marriage, parenthood), intimate relationships and sexuality, experiences of violence and victimization, physical and emotional health, use of prescribed and illicit drugs, and excessive or compulsive behavior such as eating or gambling. Two versions of the questionnaire have been developed: a core questionnaire consisting of the questions judged most critical for inclusion in all GENACIS surveys, and an expanded core questionnaire containing additional, more in-depth questions in all major variable domains. In addition to these individual-level variables, GENACIS will also evaluate the effects of several societal-level characteristics, including gender inequality (using indicators such as female and male education, employment, income, and political participation), and differences between “wet” and “dry” drinking cultures. Centralized analysis of GENACIS data (at the Swiss Institute for the Prevention of Alcohol and Drug Problems) will be designed through collaboration of survey directors and other project partners interested in specific research questions. It is anticipated that data analysis will continue for several years, examining cross-national similarities and differences in women’s and men’s drinking patterns and drinking-related problems, and in the individual- and societal-level predictors of gender-specific drinking patterns and drinking problems.

A grant from the European Union, directed by Kim Bloomfield, supports coordination and centralized analysis of data from GENACIS surveys in 13 EU member states and associated states. The EU component, funded from January 2002 through December 2004, has specified dates for completing various tasks. Data analyses are organized in “workpackages” that correspond to specific domains of GENACIS variables, including drinking patterns and drinking contexts, alcohol-related problems, alcohol and violence, and societal-level analyses of social inequality and wet vs. dry drinking culture as predictors of alcohol consumption and alcohol-related problems.

The World Health Organization component of GENACIS, coordinated by Maristela Monteiro and Isidore Obot, provides support for GENACIS surveys in developing countries. The first group of countries receiving WHO support consists of Argentina, Kazakhstan, Nigeria, and Sri Lanka. Countries being considered for future support include Moldova, Uganda, and provinces of China and India.

At the time of the IRGGA workshop, additional funding was pending from the U.S. National Institute on Alcohol Abuse and Alcoholism to support worldwide coordination of GENACIS, and to assist countries not eligible for funding from the EU or WHO. This three-year NIAAA grant, to the Wilsnack research group at the University of North Dakota, was funded on August 1, 2002.

**Workshop Sessions**

The remainder of the meeting was organized in workshop sessions, each of which focused on a major domain of GENACIS data collection and data analysis. In order to maximize coordination of the workpackages and the larger GENACIS project, each workshop was co-facilitated by one IRGGA member involved in the EU component and one non-EU IRGGA member. Workshop participants discussed GENACIS survey data
that will be available in their content areas, and priorities for data analyses and
publications in their areas. The following are brief summaries of major topics of
discussion and recommendations for initial data analyses from each workshop group.

Drinking Patterns (Co-chairs: Pia Mäkelä and Tom Greenfield)

Pia Mäkelä summarized three papers proposed in the Friday meeting of the EU
component of the GENACIS project: (1) a descriptive paper on drinking patterns and
gender (to include some or all of the following measures: % abstainers, drinking
frequency [mean, % exceeding a cut-off, beverage-specific frequencies], quantity per
occasion or day [mean, usual quantity, % exceeding cut-off], volume [mean, median],
episodic heavy drinking [if available, mean frequency 5+ drinks, % 5+ drinks at least
monthly]; tables for all respondents and drinkers only; absolute and relative percentage
differences between genders; some multivariate models, including demographic
variables); (2) comparisons of drinking contexts by gender (to include, where available,
drinking with/without meals; at parties and celebrations; at various locations [own home;
friend’s home; bar, pub, or disco; restaurant]; companions [spouse, family member, work
mates, friends, alone]); and (3) relationships between drinking patterns and drinking-
related problems.

The IRGGA workshop participants discussed each of the proposed papers. Because of
the greater heterogeneity of the larger IRGGA group, as compared with the EU subgroup,
participants discussed reasonable ways of grouping countries for data analyses. In the
EU component, all countries in that component (including non-European EU partner
countries such as Brazil and Mexico) will be included in the project report. However,
there is some uncertainty about whether derivative papers would include these non-
European countries. The larger GENACIS project includes not only the EU countries but
also the WHO-funded developing countries and countries supported by the NIAAA
Wilsnack grant (sometimes referred to as “the rest of the world”). What are reasonable
groupings among these countries? What groupings would journal editors and reviewers
consider reasonable?

One possible categorization of countries in the EU component was suggested (based
partly on a classification used in the ECAS collaborative study of adolescents): Northern
Europe (including Finland, Sweden, Norway); Continental Europe (including the UK,
Austria, Netherlands, Germany); Southern Europe (Italy, France); Former Eastern Europe
(Czech Republic, Hungary, Russia); North America (US, Canada); South/Mid America
(Mexico, Brazil).

Other issues discussed in this workshop included (1) the likelihood that the meaning of
abstention will vary by gender, perhaps especially in non-European and non-North
American countries; (2) the need for methodological studies within each country to ask
calibration questions for comparing studies (e.g., if one pre-GENACIS data set has
frequency and another has quantity-frequency, what can be learned from the difference
between the results?); (3) the importance of examining both within-country and between-
countries variation in gender differences in drinking (including the possibility that within-
country gender differences related to geographic, ethnic, and social class heterogeneity may in some cases be as large as some between-country variations; (4) the importance of the time dimension, the historical context of the “snapshot” cross-sectional surveys; and (5) the need for each country to write a country report to provide the historical and other contexts for its survey. The group intends to continue electronic discussion of specific plans for data analysis for the non-EU countries which have GENACIS data, and to present these at the November meeting of GENACIS steering committee members and survey directors in Berlin.

Alcohol-Related Violence (Co-chairs: Karin Helmersson Bergmark and Kate Graham)

In this workshop there was considerable discussion about what violence-related data will be available. Group members tried to identify which countries had included/were planning to include which variables from the violence section of the GENACIS questionnaire. Because many countries have been/will be excluding some, most or even all violence questions (due to their potential sensitivity), workshop participants also looked at items elsewhere in the questionnaire that touch upon violence/aggression.

In the GENACIS questionnaire (expanded core version), most items focus on alcohol-related violence/aggression in close relationships although there are also items on getting in a fight while drinking and experiences of sexual violence. The relevant items in the expanded core questionnaire are Questions 41f, 43g, 56-60, 64a-e, 65-84.

One area to be explored in the analyses is how the relationships between violence/aggression and drinking patterns and drinking problems differ by gender, controlling for age.

Workshop participants anticipated that few data sets will include all of the violence/aggression variables, but that many will include some of them. At the least, it is expected that most countries will have included the consequence “got into a fight while drinking,” and that at least some will have included a question on partner violence in the past year (or past 2 years).

In terms of completed surveys represented by those at the meeting, the UK survey (Moira Plant) and the US survey of women (Arlinda Kristjanson, Sharon and Richard Wilsnack) included all the items relating to violence toward the respondent by the partner; the Japan survey (Shinji Shimizu) used most of the violence items; and the Swedish survey (Karin Bergmark) used some items. Data are also available from Alcohol Research Group surveys in the U.S. (Karen Trocki) on many of the items. In terms of future surveys, the WHO countries will be using the expanded core questionnaire and therefore including all the violence items, and the proposed Canadian survey will also include all the violence items.

It is expected that frequency distributions for the violence items will be heavily skewed; in previous studies in this area, relatively few respondents report experiences of violence. Frequencies can be expected to be below 10% for many countries. Workshop members
felt that they can not plan the data analyses more thoroughly until they know more about
the different surveys, which violence items they have included, and the frequency of
various violence items in the individual surveys.

For the EU component of GENACIS, Karin will send a request to country survey
directors for information on violence-related questions in their surveys. Before the
November meeting of GENACIS steering committee members and survey leaders in
Berlin, it should be clearer what the extent of the available data is and how best to
proceed with the analyses of the violence data.

A number of suggestions were made for those who will be doing GENACIS surveys in
the future.

1. The item on getting into fights when drinking needs to be clarified, at least for
English language surveys, because this can be interpreted as a non-physical fight.
Because this phrase was translated to mean physical fight in some languages, it is
recommended that the question specify physical fight.

2. The UK survey asked about aggression toward children and aggression toward
parents, both of which would seem to be reasonable additions.

3. The ARG surveys and the survey done in Mexico asked about exposure to violence
as a child (and possibly whether the violent person had been drinking) – again a
worthwhile addition as this has been found to be a strong risk factor for alcohol abuse.

4. It was suggested that the addition of an impulsivity scale would be useful because of
the relationships among impulsivity, aggression, and drinking.

5. It was also suggested that it may be useful to ask about Post-Traumatic Stress
reactions following experiences of violence. As one example, the Wilsnack survey of
U.S. women includes such items.

Social Inequality (Co-chairs: Kim Bloomfield and Gerhard Gmel)

Kim Bloomfield showed slides summarizing possible indicators of social inequality. She
suggested using education as the major indicator of socio-economic status. Gerhard Gmel
plans to use the International Scheme of Occupations (ISCO) as well. Florence Kerr-
Corea added that education is quite a good measure of SES for Brazil. Zofía Mielecka-
Kubien recommended scaling of education, on an aggregate level. In further discussion
of how to compare educational levels internationally, Andrée Demers mentioned that
some analyses use years of education, others classify education by quintile. Andrée
believes that if a person has a university degree, no matter what country, that person
drinks in a certain way. She feels that education is perhaps the best indicator of SES.
She recommended that where there are other kinds of indicators as well, one could work
with quintiles and position a respondent jointly on the several indicators.
Zsuzsanna Elekes was less convinced of the correlation between education and income. In Hungary, the Czech Republic, and other Eastern European countries, it is not enough to look at education. Andrée warned that it is easy to get the impression that people of low SES drink more, but one must look at patterns across the whole sample in order to avoid getting a more concentrated sample of drinkers among the poor. Florence mentioned that due to the rapidly growing Pentecostal movement in Brazil, there is a surge in abstinence, affecting all levels of SES.

Richard Wilsnack indicated that many studies in the U.S. (where many women abstain) use a two-step analysis: prediction of drinking versus abstaining, followed by prediction of heavier or problematic drinking among drinkers. Kim confirmed that this type of two-step analysis is planned for the EU studies. However, this would seem to contradict Andrée’s suggestion of using the whole sample. Andrée suggested that Gerhard do a mixed model, finding the probability of being a drinker or not. Gerhard added that the key word is the Heckman model (to find the probability of being a drinker or abstainer and then looking at how variables relate among drinkers). He mentioned that Michael Beenstock at Giora’s institute has done such analyses and that perhaps Giora could consult with him.

Kim discussed problems of displaying results for international comparisons. She also spoke of plans to analyze associations between drinking and various combinations of social roles, and continuing the work that Gerhard and others had done in the previous EU project, using multidimensional scaling, but this time including men in the analyses.

Kim mentioned the possibility of using the gini coefficient as an expression of the degree of concentration of wealth in a country. There was some debate about this. Tom Greenfield cautioned against using the gini index and suggested other indices, including the percentage of the population below the poverty line. Zofia suggested using one more index than gini, such as average income in a country. Gerhard proposed using internal data for the gini coefficient. Andrée suggested looking at the work of Stephanie Roberts, recently published in the American Journal of Sociology. Richard added that the issue is not inequality per se, but whether one lives in a rich or poor neighborhood, i.e., if you are poor and live in a rich neighborhood, you are better off. Ulrike Grittner agreed that the EU social inequality work package will look at what being poor means in a particular region.

Other Societal-Level Predictors (Co-chairs: Richard Wilsnack and Giora Rahav [absent])
Richard outlined three basic possibilities for analysis in this area: (1) gender inequality (testing the hypothesis that gender differences in drinking in a society will be associated with gender inequality, not only in wealth but also in power and autonomy [as reflected, for example, in female education, marriage/divorce laws, political participation]); (2) wet vs. dry drinking cultures; and (3) secondary use of GENACIS survey data to generate societal-level variables. He pointed out that a major task is to agree on which set of indicators to use (for both gender inequality and wet/dry drinking culture), and that some people believe that the wet/dry distinction is no longer valid. Gerhard mentioned the WHO Global Burden of Disease 2000 Study, in which Gerhard, Jhrgen Rehm, and others
developed a drinking patterns questionnaire, distributed it to 60-70 countries, and ranked countries on various parameters. Richard pointed out that it will be important to disentangle affluence and gender equality. Another question is whether there are some ways in which societies low in gender equality are protective for women’s drinking? Gerhard reminded the group that for statistical purposes, it will be necessary to frame all these questions so that they can be answered by data that is available at the aggregate level, such as income.

**Alcohol-Related Problems (Co-chairs: Ronald Knibbe and Isidore Obot)**

Isidore and Ronald explained that in preparation for this workshop they had reviewed the list of questions about alcohol-related problems from the GENACIS expanded core questionnaire. They initially wanted to focus more on “process” than on content. Process questions include (1) How many surveys have used the expanded core questionnaire? (Determine how much comparability there is in questions about alcohol-related problems across surveys before choosing specific items for analysis.); (2) How are the available items interrelated?; and (3) Can alcohol problems be summed, indexes created? Tom Greenfield noted that it will be important to look at distributions of alcohol problems items and see what combinations work best, rather than deciding in advance which problems items will be used.

In terms of content of data analyses, the group agreed that the two minimum goals of initial data analyses were (1) to describe cross-country patterns of gender differences in alcohol-related problems; and (2) to describe associations between drinking patterns and drinking-related problems, across countries and by gender. Robin Room suggested that the second set of analyses could be expanded into analyses of drinking patterns x drinking contexts x drinking-related problems (across countries and by gender).

The group discussed whether health problems should be analyzed separately from other drinking-related problems, with general agreement that this should be done. There was further discussion of other ways of conceptualizing drinking-related problems in other ways, including social or interpersonal problems vs. problems more reflective of potential alcohol dependence.

Other issues considered in this workshop included (1) the challenges of understanding the various “meanings” of drinking in different GENACIS countries (and the importance of having the greatest possible comparability of questions/translations in order to understand these meanings); (2) ways of estimating reporting biases (i.e., do some countries underreport drinking more than others?), and the value of examining other data sets in attempting to answer this question; (3) methodological issues, including optimal questionnaire length for various modes of administration (e.g., telephone vs. face-to-face interviews); and (4) analyses of positive consequences of drinking, for which at least a few GENACIS items are available.

With regard to the next steps in planning data analyses, Ronald indicated that he will conduct a further review of alcohol problems items in existing EU/GENACIS data sets.
At the November meeting in Berlin he will propose basic work plans for the EU project, which can then be expanded and elaborated by the larger IRGGA/GENACIS membership.

Intimacy, Relationships, and Sexual Violence (Co-chairs: Marja Holmila and Louise Nadeau)

Louise summarized the current availability of GENACIS data on intimacy, relationships, and sexual violence. The Wilsnack survey in the U.S. has included all GENACIS (expanded core) questions in this area. Except for specific questions that may be judged too sensitive in individual countries, the developing countries supported by WHO will include all the expanded core questions. Surveys in Sweden and Finland and the proposed Canadian national survey also have substantial number of GENACIS questions. So there is a starting point for transcultural analyses of these topics.

The group discussed a number of possible analyses. These included (1) descriptive transcultural comparisons on all major variables; (2) testing hypotheses related to (a) assortative mating (that people tend to choose partners with drinking patterns similar to theirs), (b) harmonization of drinking patterns in longer term relationships (increasing similarity in partners’ drinking patterns over time), and (c) correlates of discrepancies between husband’s and wife’s drinking; (3) effects of the source of regulation of drinking (as in Holmila’s work —the impact of who is controlling drinking [self or other], and gendered patterns of control [e.g., men’s control of other men’s drinking vs. women’s control of their husbands’ drinking]); (4) variations in drinking patterns, drinking-related problems, and their correlates by sexual identity/orientation (although it is still unclear how many countries will find that the sexual orientation questions are too sensitive to include); (5) relationship status and life-cycle stage as related to drinking patterns (e.g., persons who are single, widowed, or in common-law relationships); (6) associations between religion and drinking behavior; and (7) effects of women’s drinking on aggression and violence by their partners.

Health and Life Style (Co-chairs: Moira Plant and Andrée Demers)

Moira and Andrée discussed the UK and Canada surveys and found they are very different with regard to coverage of lifestyle questions. Other topics of discussion included (1) mode of administration differences (e.g., interviews in the respondents’ homes in the UK and U.S. surveys vs. telephone or mail surveys); (2) variations in the number of lifestyle questions included; and (3) some uncertainty about whether items on menopause were included in the GENACIS questionnaires. This domain is probably the most heterogeneous of all GENACIS content areas, and the area most in need of further development by interested GENACIS partners.

Data Coordination and Sampling Issues

On Sunday, June 2, Gerhard Gmel presented an overview of sampling and data coordination issues for the GENACIS project. Gerhard will serve as Data Management Supervisor for both the EU and the larger IRGGA components of GENACIS. He will oversee data editing and centralized data analysis at his institution, the Swiss Institute for
the Prevention of Alcohol and Drug Problems in Lausanne.

Gerhard began by listing materials that he will send to each GENACIS partner: (1) a country survey questionnaire (requesting information about methodological characteristics of each survey); (2) a country-specific codebook; (3) a country-specific appendix in which partners will list other variables that were included in their country’s data set but were not in the GENACIS core or expanded core questionnaires; and (4) an excel file in which partners will indicate which variables in their data set are equivalent to each question in the core and expanded core questionnaires. He will need an ID number for each respondent in a country data set.

Gerhard gave examples of variable coding (gender, age) and explained that everything will be organized around the GENACIS expanded core questionnaire. Using education as an example, he showed how recoding variables with systematic variable naming will be done. Codes will indicate which variables are exactly equivalent to expanded core variables, and which variables deviate in some way from the corresponding core variable. Original variable coding will be documented in the country-specific codebook with all sub-questions used to construct that variable. As an example, different countries may have used different response categories for frequency of alcohol consumption, and these response categories will be documented. Gerhard presented examples of algorithms for converting the frequency categories into a summary variable, e.g., annual frequencies. He then asked (rhetorically) whether only questions from the expanded core should be used or should additional questions regarding drinking also be included? He gave examples of different measures of consumption that might be available (e.g., heavy episodic drinking variables based on 5+, 6+, or other thresholds of drinks per occasion). Gerhard believes that such variables should be kept in the data file for possible future use.

Gerhard raised a question about indicator variables from specific countries for calculating volume of alcohol consumption. He wants partners to send both single variables and the indicator variables with their algorithms. He will then change the algorithms accordingly to make them uniform with other data sets. Thus he will use the country-specific algorithms for volume but will adjust the components to make them comparable.

Codebooks for Switzerland and Germany will be put on the GENACIS website as models for other country codebooks.

Gerhard summarized the most important steps that need to be taken within the next few months. (1) All documents will be sent out by the end of June by Gerhard and Ulrike (including the sampling questionnaire, codebook, excel file, and manual). (2) EU partners should return the requested data and documentation by September 1 (including the translated questionnaire, excel file completed, sampling questionnaire answered, and survey data). (3) Although there is not a fixed deadline, non-EU members should send their data to Gerhard as soon as possible.

**Final Meeting, Tuesday, June 4**

A short meeting of IRGGA members was held Tuesday afternoon, June 4. Sharon
Wilsnack and Kim Bloomfield responded to questions from individual members about specific aspects of their surveys and logistics of participation in GENACIS. Zofia Mielecka-Kubien made the important point that some IRGGA members will not have their own GENACIS surveys but can still make substantial contributions to the overall GENACIS project. For example, they can provide consultation on statistical methods and can make theoretical and methodological contributions as members of work groups analyzing data and publishing in specific domains.

At the Tuesday meeting IRGGA members also discussed the GENACIS participation agreement which had been presented at the 2001 workshop in Toronto and subsequently revised by the GENACIS steering committee at its March 2002 meeting. Members felt that all major concerns raised in Toronto had been satisfactorily addressed, and the group approved the participation agreement as revised (see attachment). The group also approved the guidelines for translation of the GENACIS questionnaire prepared by Louise Nadeau and revised slightly by Isidore Obot and Ronald Knibbe. The group suggested adding examples for several recommendations in the guidelines. This will be done and the final translation guidelines will be distributed to all members via IRGGANET. Sharon Wilsnack thanked Louise, Isidore, and Ronald for their work on this important task.

**Workshop Reports and Future Directions**

Ronald Knibbe facilitated a final session at which the co-chairs of each workshop session summarized their group’s discussions and recommendations for data analyses. Kim Bloomfield requested that the co-chairs send a short written summary of their workshop session that can be included in the IRGGA workshop report.

The next meeting of the GENACIS project will be held in Berlin November 17-20, 2002. Countries involved in the EU component of GENACIS have funding for travel to the November meeting. Some funding will be available from the University of North Dakota NIAAAA grant for travel for survey directors not eligible for EU or WHO support. The purpose of the mid-year meeting in Berlin is to move the EU agenda forward with respect to EU-specific deadlines, and to continue developing the non-EU components of GENACIS. The GENACIS steering committee will meet with leaders of the workshop/workpackage groups at lunch on Tuesday, November 19, to discuss EU contractual obligations and encourage active leadership by the workpackage leaders.

The 11th annual IRGGA workshop will be held in Krakow, Poland, preceding the 2003 KBS Symposium. Information concerning that workshop will be distributed to all IRGGA members via IRGGANET.

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IRGGA workshop minutes prepared by Kim Bloomfield, Stephanie Kramer, and Sharon Wilsnack.