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Deposited on: 8 September 2014
Alcohol and mental health

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Social Geographies of Rural Mental Health
(ESRC Funded Research Project, Award No.R000 23 8453)

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Findings Paper No.12, 2002

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Alcohol and mental health

*A hell of a lot of drinking that goes on down there [the central belt] ... but you see ... it doesn’t have the same meaning as it does up here.* [Frank, NWS, 26/7/01]

In this paper we tackle the role of alcohol in the story of mental health in the Highlands. Similar to the rest of Britain, alcohol is a key part of the social and cultural landscape of the Highlands. In this paper we illustrate the role and importance of alcohol in Highland communities, and explicitly consider the relationship between alcohol and mental health problems. We begin by the symbolic regional significance of alcohol and turn our attention to how alcohol is an important part of the practice of social relations. We look at issues of alcohol misuse and the social acceptance that surrounds excessive drinking. However, we complicate this picture by highlighting how social norms surrounding alcohol use differ in terms of gender, and finally the boundaries to drinking behaviour are discussed.

The symbolic and practical significance of alcohol in the Highlands

*It’s endemic in society alcohol... It’s not just here, it’s the whole of our society, and the mere fact that it’s regarded by the Treasury as a legitimate target for excise, is legalised, is how seriously alcohol is part of our way of life.* [Ken, SL, 19/9/01]

While Northern and Western European society in general and British society specifically value the regular use of alcohol as a key dimension of socialising, the Highlands of Scotland has a particular reputation for excessive alcohol consumption. Indeed, the Highlands is recognised throughout the world for the production and consumption of ‘uisge beatha’ or the ‘water of life’, as whisky is known in the Gaelic language. While whisky production in the Highlands is an important economic process, being a source of employment in many areas throughout the region, and a main source of employment in more remote communities, it is the social and cultural dimensions to drinking that we are most interested in here. Whilst it seems stereotypical to discuss alcohol and the Highlands, there is a real sense that for our interviewees this relationship matters in everyday community life and more particularly in their discussion of rural mental health issues. Firstly, let us note that many symbolically associate the Highlands with alcoholic drinking, conceiving it as ‘part of the way of life’:

*Alcohol I think always will be an acceptable part of Highland life.* [Miriam, ER, 13/11/01]

*How many folk up here don’t go to the pub? Very few. How many folk up here don’t drink? Very few. Because it’s just part of the way of life of the Highland community.* [Glenn, SL, 6/9/01].

More narrowly, interviewees speak of the centrality of alcohol in the practice of social activities of Highland communities, focusing on the lack of alternative activities or community facilities in rural areas.
Frank suggests: ‘socialising up here automatically means drinking’ [NWS, 26/7/01]; and ‘drink is ... virtually the only social activity is drinking, know what I mean?’ [Jack, ER, 16/11/01]; and Geraldine comments that; ‘I think a lot of folk get into drink because there is nothing else to do’ [SL, 18/9/01]. For Sarah, the harsh physical climate, coupled with the lack of alternative social activities in rural areas, enhances the importance of the alcohol in the community:

All I know is that I think there is so little to do in the winter time particularly, that a lot of people just go down to the pubs and they don’t seem to have a life beyond that ... whereas in the city you might go out to the theatre and you might go out to a musical thing or something. [ER, 12/11/01]

It’s a social thing, but ... There’s nothing else on the west coast except for ... of course if you go out regularly you’re drinking all the time. [Connor, NWS, 16/7/01]

For some, the centrality of alcohol to social life in the Highlands is simply a function of the lack of other activities. However for others, they further discuss how alcohol has an important symbolic function within Highland life, bound up with cultures of working, hospitality and shared ideas about reciprocity. Within the private space of the home, alcohol takes on symbolic role in welcoming guests, as Ralph and Sally recount:

I don’t know about the young people but certainly with the older people, if you came to my door, I wouldn’t say would you like a cup of tea? I’d say, have a wee dram. You wouldn’t get that in Dundee. You’d get a cup of tea and like it. [Sally, SL, 20/8/01]

Everyone drank in Uig, it’s just, from house to house there is drink. If you went to see a neighbour the first thing you got in there was a glass of whisky. If you didn’t drink it that was, took it to be. [Ralph, SL, 18/9/01]

As Ralph notes, one cannot refuse the offering of alcohol, since to do so would be taken as a slight. We return to the ramifications for individuals who do not drink later in this section. Alcohol not only plays a role in hospitality, but in other everyday practices of living and working in Highland communities:

Everything [meaning all social life] revolves around the pub or a party ... People think that you can get a job done by handing over a half-bottle of whisky ... [Nigel, NWS, 11/7/01]

I think Highlanders, especially islanders, they regard working hard ... maybe that is why they do turn to alcohol ... It’s a tranquilliser you administer yourself. [Paul, SL, 10/5/01]

These comments suggest several things. Firstly, that the realities of the hard working conditions of the Highland landscape go hand-in-hand with drinking, in that drink operates as a self-administered reward. Secondly, that others reward employees or neighbours who help out with various activities with alcohol. The notion that certain types of dangerous work is particularly associated with alcohol also emerges in interviews:
It’s the first place that I’ve ever come across, where and this is going back years, and I can’t remember exactly when but it was a £100 carry out in the pub. So this was twenty-odd years ago, and none of that would have been left over by Saturday morning. It would all be finished that night, maybe three or four o’clock in the morning, but it would all be finished .... At that time the fishermen were back in at weekends, and with huge wages compared to everybody else. And that was it, it was just spent on alcohol. [Darren, NSW, 18/07/01]

That certain kinds of employment, like fishing, are associated with performances of ‘hard’ masculinity also helps to explain the association of work and drink, and we consider gendered dimensions to drinking more fully below. It is clear from these comments that alcohol provides a means of release from difficult jobs carried out in harsh environments and, as Maureen suggests, ‘up here I think the drinking is a form of escapism’ [NSW, 26/7/01]. When work is finished, the weekend is the time to drink to excess: ‘It is quite acceptable, it is quite acceptable to go in a Friday night and get drunk, Saturday, Sunday, and then go into work Monday with a hangover. That’s acceptable up here’ [Susan, SL, 20/9/01]; and ‘[u]sually the biggest problem on Skye is the drink, they don’t turn up for work on a Monday it’s usually the drink’ [Patrick, SL, 20/8/01]:

I’ve known people who work themselves until the weekend and then go and blow it all on drink, so you could say that’s ill people, but they’re classed as just hard workers. [Sarah, ER, 12/11/01]

The olden style of east coast - west coast, Nigg work ... the local fishermen would be in doing his usual drinking as well, the local crofter would be in, in his Saturday night spree. So when you are in the Highlands, drinking is expected. [Robin, ER, 07/11/01]

While work and alcohol are hence associated by some, others also point to the importance of climate and environment in making a regional community of drinkers:

I’ve seen alcohol destroy people's lives ... the winters are the worst - especially if you're not working ... then you can just get into a routine of just going to the pub ... [Rowland, NWS, 5/7/01]

People living in northern climates, apparently the further north you go the alcohol related incidents is a lot higher, Iceland and places like that - I think it’s more acceptable the further north you go, the climate is different, it’s something to do. [Alex, INV, 11/5/01]

So a discourse emerges of harsh Highland lives, characterised by few social activities and hard work for which the release and reward is alcoholic drinking. In just a few of the comments above, oblique references are made to people being ill, or medicating themselves with alcohol, and these are references to which we will return in due course.

The centrality of alcohol in highland communities is further evinced through community responses to those who do not drink. Drinking of alcohol is so central in Highland rural life that several interviewees note the pressure to conform to this strong culture of consumption: ‘People don’t like it if you don’t drink, it’s the sociable thing
to do...’ [Gill, SL, 5/9/01]; ‘If you didn’t do it [drink to excess] you were some sort of a freak’ [Frank, NWS, 26/7/01]; and ‘… it’s less stigma in drinking than there is in not drinking’ [Alness group meeting, ER, 23/11/01]:

I do not fit in here [in the local community] because I am not an alcoholic or a pisshead ... basically ... Everybody around here drinks themselves stupid and I don’t drink at all, that’s what makes me different to everybody around here... I had one woman in the village apologising to me because her husband doesn’t like me ’cos I don’t drink ... It’s not her problem, it’s his problem, it’s not mine neither. If he doesn’t like me ’cos I don’t drink, it’s his problem. [Nigel, NWS, 11/7/01]

The drinking of alcohol as a passport to successful social relationships is arguably a feature of many places in the Western world, but in small rural Highland communities, where regular consumption trends are easily noticed and monitored, it may be more difficult to ‘fit in’ if the drinking culture is rejected. As we go on to show in the following section, excessive alcohol consumption is a feature of Highland life; and for those who previously engaged in such activity but do not do so now, the consequences of giving up such a lifestyle can result in derision and exclusion from the group:

Like see when you take a drink and then you stop taking a drink and a lot of the friends I had in [village] they don’t want to know you ... You meet them in the street and they go the other way. Just ’cos I wasn’t drinking they thought ‘oh he’s gone queer’ you know. I was just wondering what the hell was going on, you don’t feel good, you feel, you just wonder if you did something. [Ralph, SL, 18/9/01]

Excess drinking and cultural acceptance

That is a cultural thing, it must be, you know, the culture of drink is just acceptable amongst the people. [Natasha, NWS, 17/7/01]

The routine consumption of alcohol is accepted widely across the Highlands, but the extent to which alcohol is mis-used and how ‘mis-use’ is understood, discussed and reacted to by the wider community are complex issues. For many of our interviewees, the excessive use of alcohol is perceived to be a normal part of everyday life in the Highlands, something that is more or less acceptable throughout many communities. However, for others, it is more a case that there exists a regional acceptance of alcohol mis-use: ‘I think drink problems is something they accept, people accept it. People accept that people have a drink problem’ [Mark, INV, 23/5/01]; ‘I think they just accept it if you have a drink problem, it is just the norm’ [Geraldine, SL, 18/9/01]; while Nigel makes the sarcastic comment ‘Oh, it’s easy to fit in with the local community, just go to the pub and piss it up ... ’ [NWS, 11/7/01]. Interviewees provide numerous examples of excessive alcohol use, highlighting through stories the demise of individuals through excessive alcohol consumption and noting the ‘normality’ of such events:

Seamus: Yeah. I have people who come in here and buy four bottles of vodka a day.
Interviewer: That’s not light drinking, is it?
Seamus: Oh, no. Eighteen months ago we had a guy who just drank himself to death. Sat in a chair and drank himself to death. And he was on five or six bottles a day. [Seamus, NWS, 9/7/01]

She was serving old locals and getting them pissed out of their faces so they couldn’t stand up …. [Ruth, NWS, 11/7/01]

Well I mean if you see somebody walking down the street pissed you are more likely to go, that’s him pissed again, whereas if you see somebody walking down the street with a dour face expression that would kill you, you would more likely say ‘something wrong’ from that point of view. [Collete, SL, 19/9/01]

While frowned upon by some members of the community, excessive alcohol consumption also appears to give some individuals a license to behave in ways which would ordinarily be out of bounds: ‘Anything done or said in drink up here is forgivable. Anything. It totally amazes me’ [Natasha, NWS, 17/7/01]; ‘it’s much more acceptable to act abnormally through alcohol than to act abnormally through something else I suppose’ [Ken, SL, 19/9/01]. Given our comments about cultures of resilience and repression throughout the Highlands (see our findings paper on Highlands, economy, culture and mental health problems), alcohol use plays some role in acting as a ‘vent’ for community members, allowing the expression of emotions and behaviours ordinarily taboo within communities. As such, it can act as a cover for mental health difficulties (see also below).

The consequences of excessive consumption of alcohol are far reaching, with our interviewees suggesting that alcohol consumption is linked to domestic violence: ‘I grew up [with alcohol] in the house, my father is heavy drinker, seen the violence, you know?’ [Ralph, SL, 18/9/01]; ‘it’s been so much part of the way of life up here, I guess for so long and it’s dreadful, … it’s caused an awful lot of problems’ [Lisa, NWS, 11/7/01]. And Gareth (NWS, 2/7/01] remarks:

And you don’t know what goes on behind closed doors – but I believe that a lot of women get beat up and stuff – which is kept quiet you know.

Eve [INV, 30/5/01] also notes that ‘they were protected by their families and allowed to carry on … Families definitely cover up for alcohol over there [islands]’. Links between alcohol misuse and domestic violence are by no means isolated to the Highlands, but the fact that our interviewees believe that violence does take place, but that it remains hidden from view, suggests that our arguments about cultures of silence pervading the Highlands may not be limited to mental health.

As many interviewees point out, excessive drinkers are rarely labelled as alcoholics, rather being euphemistically referred to as ‘heavy drinkers’. The way in which the community understands those with alcohol problems is telling in this respect: ‘You don’t have a drink problem you just like a dram’ [Susan, SL, 20/9/01]; ‘Drink is an understood, ‘just having his dram’’ [Gordon, INV, 14/5/01]; ‘Because you’re known in the community, you’re known as a heavy drinker, you’re not known as an alcoholic. Oh so and so’s a real heavy drinker. You know yourself from Glasgow that somebody’s a heavy drinker he’s an alche [alcoholic]. But you don’t get that here’ [Glenn, SL, 6/9/01]. There is a confusing and contradictory discourse about excessive drinking, labelling and Highland culture. This is signified in the following quotation,
where the need to visit the Highland drinking rehabilitation centre in Inverness is related as a heroic activity, despite the fact that entering such institutions requires the label of alcoholism to be ascribed by formal services:

* I know loads of people who went to spend two or three weeks there [Dunain House] often ... you know they’d go there ... come back ... spend a couple of months not taking an booze an’ then hit the booze again and then they’d be back there ... that’s how they lived their lives ... they would come out of there and they’d come to the pub with you and they’d sit there with a glass of lemonade and they’d be like some sort of celebrity because they’d spent a couple of weeks in the spindryer, it was very odd [laughs]. [Frank, NWS, 26/7/01]

The ‘spindryer’ refers to Dunain House (on the same site as the old Craig Dunain asylum) where those with alcohol problems have been sent periodically to dry out. Frank notes that ‘you weren’t considered a heavy drinker unless you had spent a week or two in the spindryer’ [Frank, NWS, 26/7/01]. Frank suggests however that not all of the community would accept such behaviour: ‘the sensible part of the community who would look at it as a mental health institution ... you see and then be frowning on them [the heavy drinkers] ’ [Frank, NWS, 26/7/01]. The (non)acceptance of alcohol mis-use amongst members of the community is determined not only by the individual’s broad beliefs about alcohol consumption, but, as we explore in the next section, but also by the gender of the person consuming alcohol.

Gender and alcohol

In this section we explore the relationship between gender and alcohol. We argue that for men excessive alcohol consumption is an intrinsic part of a wider regional culture of masculinity and, in contrast to women’s drinking practices, is thus ‘normalised’ within the wider community. This we argue has implications for the role of alcohol in social relations between men and women, shaping views of excessive alcohol use by men and women, with clear impacts on the relationship between alcohol and mental health.

As we have argued, alcohol is intimately bound up in the sociability of highland rural communities, a point clarified and taken forward by Ken:

* There is probably a shyness within the Highland Scot that is broken by the use of alcohol, the reasons behind that I just couldn’t say. There is an enjoyment of life, that you don’t get in the town so much, an enjoyment of the music, culture, the ceilidh culture, talking to your neighbours and that very often, particularly in men, involves having a dram. [Ken, SL, 19/9/01: our emphasis]

Ken’s observes that alcohol is intimately bound up with people’s experiences and interactions with the wider community, particularly that of men with other men. This is apparent in the ways that work and play so often involve alcohol consumption, particularly excessive alcohol consumption. For Chloe, this performance of masculinity is tied into a perceived northern European cultural norm of drinking to excess, where to hold one's drink is the sign of a ‘real’ man:
I think there is a difference, there is something... In the north, northern and Nordic countries the drink culture has always been different from the more southern types. There is something heroic about the chap who takes his drink and can hold his drink... there’s some, almost admiration about it. [Chloe, SL, 21/8/01]

Excessive drinking then is an event to be shared with other men, as Frank recounts:

... up here there’s a post-mortem about it ... it’s part of the thing ... and the bigger the bender the better it was ...in [village] where I used to live ... on a Sunday morning there’d be a congregations outside the hotel waiting to get in at 11am and they would get in and start again and the whole time would be taken up discussing who had the biggest bender the night before. [Frank, NWS, 26/7/01]

Drinking to excess is important for belonging to the male group: ‘No, they’d just think, oh, it’s one of the boys having a drink’ [Frank, NWS, 26/7/01]; Ruth notes they are ‘just being one of the boys’ [NWS, 11/7/01]; and Paula adds that ‘you’re one of the boys if you are [drinking]’ [NWS, 5/7/01]. The use of terms such as ‘boys’ and ‘lads’ suggests a carefree playfulness, diminished responsibility and immaturity in contrast to the harsh physical and at times social environment in which individuals reside. Cassie reflects on the practices of males in remote rural communities:

So you have a funny interaction there, you have the lad, and these lads can be in their fifties, they have a tear [wild time] out of sight of other people. I suppose technically [many locals reckon] to be a bit wild as a good thing. [Cassie, NWS, 27/7/01]

While Cassie suggests that men drink ‘out of sight’ of others, they also drink in public places which are traditionally ‘male’: the pub and the fank. Cassie summarises the nature of these public spaces where men drink:

They would be called a bit of a ‘heller’ ... They tend to socialise only with men, y’know. They’ll sit all night in a sheep fank drinking ... or they’ll have meetings in sheds. Like in [local village] everyone meets in a car park. They tend to meet outside all the time, outside in the sheds and that ... [Cassie, NWS, 27/7/01]

For men, excessive alcohol consumption is seen as a normal thing to do, giving them an opportunity to ‘blow off some steam’, and to bond with other males.

In contrast, women’s alcohol consumption appears to be a more private, solitary and castigated practice. Alcohol misuse by women is not couched in terms of release, of being part of a wider group, but rather as an abnormal situation, one that suggests that something is wrong with the woman. While excessive drinking is not perceived to be exclusively a male practice, interviewees’ discussion of and responses to women’s (mis)use of alcohol suggests that the community interprets such activities in a much more negative light than for men. Lorraine notes that ‘[t]here’s a lot of women about here that do drink a lot, and they do drink a lot during the week as well’ [NWS, 17/7/01]; ‘And I mean there are some women who are just as bad’ [Natasha, NWS, 17/7/01]. Ken provides a more explicit and detailed account of differences in the ways
in which men’s and women’s use and abuse of alcohol is perceived within the wider community:

They [women] are treated differently somehow from men by the community. They are treated as if there is something more seriously wrong with a woman if she resorts to alcohol, she should be strong enough to look after her family and her house and her man without needing alcohol. It is much more difficult for women to come out and seek help for their problem. [Ken, SL, 19/9/01]

In our findings paper on Social differences we suggest that women in the highlands are supposed to be able to cope with life’s ups and downs in a rather stoical manner. Furthermore, women are supposed to be able to seek assistance for emotional distress. Karen reiterates this position that women’s excessive use of alcohol is tied to ‘not coping’: ‘I see more and more women my age turning to drink for whatever reason, just can’t cope with life and I find that very sad’[ER, 20/11/01]. So, for women, excessive alcohol consumption suggests distress, an inability to cope with the normal run of things.

Differences in the way that alcohol consumption (excessive or otherwise) is understood for men and women are apparent not only in the ways people speak, but also in the places where alcohol consumption takes place. Men’s consumption of alcohol in public spaces, we would argue, suggests an acceptance and legitimacy of such practices. This is not to say that women do not drink in public houses, yet ‘... it never used to be that women were allowed to go into a pub’ [Ken, SL, 19/9/01]. Ken continues, noting that ‘it is more acceptable now and that in a way is good, not sitting in the house lonely, but there still is a lot of women behind closed doors’ [Ken, SL, 19/9/01]. Hence the private domain of the home is deemed the place where women (in)appropriately consume alcohol. The reasons why women may drink in the home can be understood as being wrapped up in their having to perform household responsibilities, such as childcare and maintaining the home, and also because of traditional values surrounding their consumption of alcohol. The home becomes the place in which to drink and socialise: ‘I never went to the pub I would drink in the house’ [Susan, SL, 20/9/01]; ‘You know, sometimes it’s in the house, you know. Sometimes they’ll go out’ [Lorraine, NWS, 17/7/01]:

Interviewer: Is that cos women don't drink?
Louise: They do drink – they just er – it's not often they go to a pub to do it.
[Louise, NWS, 5/7/01]

The extent to which public houses are primarily male spaces is highlighted in the following research diary extract:

I enter the bar (it’s about 12pm). Joseph is sitting at the bar with a couple of other men. A joke is made (at my expense but I don't catch it) … Back in the Cabin (some of the men) ask how I got on at the bar, they seem a little put out that I said everyone was perfectly charming (earlier they had offered to go with me, I assured them that I had walked into bars on my own before- this provoked some shock in them). [Skye research diary extract, SL, 6/9/01]
The low tolerance of women’s excessive use of alcohol is apparent not only through the places where alcohol consumption takes place and the cultural values surrounding alcohol consumption, but in how the community responds to women’s excessive drinking. As we discuss later, the community has a low tolerance for those who it labels as ‘alcoholics’, although the process by which an individual becomes so labelled is complex. The label alcoholic appears to be more readily applied to women than to men, suggesting the acceptability of men’s excessive alcohol consumption. Deborah provides an example of this labelling in action, noting the repercussions for her relations with the wider community:

*Then I went through a wee, well I wasn’t a very good alcoholic, within about a few weeks I managed to get myself labelled alcoholic, and then I was dumped into Craig Dunain again ... I’ll never forget the time I went in as a supposed alcoholic. When I came home it was dreadful. Everybody was peering round their curtains, but nobody would come near me. If I went out on my own, I always, every Saturday afternoon, would go to the wee shop over the hill, which happened to be a licensed grocer as well. But I went there every Saturday for my main Saturday shopping. God I wasn’t five minutes in the shop when my brother ... came to offer me a lift home, you know. Not allowing you to think they’re you’re keeper you know. That kind of thing. ‘If I want a bloody drink, they’re not going to stop me’. [Deborah, NWS, 23/7/01]*

For Deborah, the label alcoholic was acquired quickly (three weeks). Her time in Craig Dunain was not a marker of heroism as suggested earlier by Frank, but rather a stigmatising and traumatic experience, the consequences of which spiralled out into her relations with the wider community. Deborah’s experience also points to the way in which alcohol is used by those with mental health problems in coping and hiding their health problems, a process which is informed and influenced by gender, as we explore in the next section.

From this brief section it can be argued that alcohol consumption is gendered in a number of ways to do with the acceptability of alcohol consumption, particularly excessive alcohol consumption, and where alcohol is consumed. As we go on to show in the next section regarding understandings of how alcohol relates to mental health problems, it appears that, while alcohol may prove a ‘useful’ coping mechanism utilised by both men and women, the efficacy of alcohol as a cover for both sexes is very much dependent upon the differing attitudes towards male and female alcohol (mis)use.

**Gender, alcohol and mental health**

Given our argument on the variable acceptance on alcohol (mis)use for men and women, questions arise as to how this affects the dynamic between alcohol and mental health. The relative acceptability of men drinking excessively provides a cover and a prop for men who are experiencing mental health problems. This point is augmented by female interviewees’ belief that the acceptance of alcohol misuse over mental health problems is gendered:

*I think possibly for men, you know. Alcohol is more acceptable. [Maria, INV, 21/5/01]*
Interviewer: Do you think it’s more acceptable to be an alcoholic here than it is to have a mental health problem?
Jessica: Well, with the men probably, but not with the women, I wouldn’t say so. [Jessica, NSW, 18/7/01]

Natasha reflects that men will resort to alcohol as a prop and cover for mental health problems:

_I think in the male population, I think very much so. But I don’t think that that’s probably, I mean I don’t really know the statistics, but I don’t know if men who live in cities would go. I’ll not pretend that they’ll necessarily use alcohol as a prop, but whether they would go for help ... but yes, I do, I do think they do. I don’t know if ... but my husband has a drink problem. And I often think that, you know, I’ll swap sides with him, and I’ll think, you know, he’s suffering a bit. But he would never, I mean, maybe you don’t know what men, well, I think it’s alright me saying you know what men are like, but not all men are all like that. Whereas I think it was very brave of Stephen, his golfing pal, to sort of go and get medication for his depression instead of turning to alcohol. But again men are very ... I think up here probably, probably I think, that’s what they do, turn to drink._ [Natasha, NWS, 17/7/01]

Natasha’s discussion draws out a number of themes pertinent to our overall argument around mental health in the Highlands. She notes that men in particular would use alcohol as a cover. Given the role of alcohol in defining masculinity, as argued earlier, it therefore follows that refuge in alcohol could be a legitimate response, one that would not raise suspicion within the wider community. Natasha’s own hesitant musings about her husband’s mental health state are perhaps indicative of the way in which a ‘culture of silence’ works within families as well as within the broader community (see our findings papers on both Highlands, economy, culture and mental health problems and Exclusionary social relations and practices). Following on, she expresses how brave a male friend is in seeking formal help rather than reaching for the local solution of alcohol, suggesting that local men would not ordinarily admit to needing help. While Natasha suggests that men in particular use alcohol as a way of coping with emotional distress, alcohol can also act on occasion as a cover, a release and a coping mechanism for the problems of life facing Highland women, such as loneliness – ‘And I ended up taking more drink during the week my husband is away, because I was lonely. And no-one to speak to at that time’ [Stephanie, NWS, 17/7/01] – and, of course, mental health problems (see below). In other words, men and women use alcohol in much the same way and for basically similar reasons, yet the responses of the community to such actions can differ.

**Alcohol and mental health problems**

_I would think alcoholism is just untreated depression in a way, isn’t it?_ [Deborah, NWS, 23/7/01]

_Like alcoholism and depression, you can link the two, you drink. When you are depressed you drink and you go in this circle. I was getting fits of depression and I would have a drink, and the next day I would be so depressed I would have another drink, but I didn’t get drunk, drunk ... but I didn’t realise how many depressed days I was starting to have and then I_
Deborah’s and Susan’s statements throw into relief the complex and dynamic nature of the relationship between alcohol and mental health. Two questions arise when we begin to think through this relationship. First, what is the nature of the relationship? Second, thinking through the importance of places, why does this particular type of relationship arise in the Highlands? A number of our interviewees reflect upon the effect that alcohol misuse has on mental health: ‘I didn’t get depressed because I drank, if you see what I mean’ [Alex, INV, 11/5/01]. However, for many interviewees like Alex, alcohol performs a dual role of hiding mental health problems from the wider community and alleviating – albeit for a short time – emotional and psychological distress, allowing individuals to cope with their health problems and everyday life. Often, interviewee’s accounts of their use of alcohol illustrate the ways in which both of these elements are present. As excessive alcohol use sometimes results in strange speech, ideas, body movements and emotional outbursts, the regular use of this substance can effectively help to hide mental health problems:

*It’s like I had a marijuana problem and, yeah, I had an alcohol problem, and I was using these two to cover the mental health problem.* [Alness group meeting, ER, 23/11/01]

*I know from personal experience, for me it was a cover. It was to black it out. When I was still drinking, it [depression] was still there and you’d get another drink, top up and keep topping up, need to black everything oot. More a cover than anything else for mental health.* [Cameron, SL, 25/9/01]

Ralph’s dependence on alcohol, and even on the very label of alcoholic, belies the very real mental health problems that were then facing him: ‘They [the community] probably think it is just the drinking, they [the community] think he just goes out and gets drunk but there is more to it’ [Ralph, SL, 18/9/01]. However, as we have shown, the ability of alcohol to work as an effective cover for people is very much dependent on their gender, and, indeed, we would suggest that it is much more effective in this respect, and acceptable, for men than for women.

As such, periods of hospitalisation can also be explained through excessive alcohol consumption:

*If you went to hospital just they would just say ‘oh it’s the drink that’s put him away again’ you know? But it wasn’t the drink that was putting me away, just use the drink for a cover up you know ... I use alcohol to cover up all the time you know.* [Ralph, SL, 18/9/01]

Aside from the possibilities of covering up mental health problems, alcohol is used by a number of users as a means of alleviating and coping with symptoms of mental distress. Users are well aware of the depressive effect of alcohol, and are thus making an informed choice about the use of alcohol as a medication: ‘I know it doesn’t work and it’s a depressant, I know all the ins and outs of it’ [Alex, INV, 11/5/01]. The willingness of users to accept the probable deleterious effects of alcohol on their mental state thereby emphasises the distress caused by their health problems, and spotlights their desperation to alleviate such emotional and psychological distress.
Stephanie provides a moving account of her use of alcohol to alleviate symptoms of depression:

> Because I have depression, the drinking, you know, it’s sort of, it was like a vicious circle if you know what I mean. You’d be depressed, but you’d take a couple of drinks to make you happy, but then it would end up making you worse again ... You try and explain to him [her partner] it’s [the alcohol] to dull the pain. And even if it’s only for two hours, it’s two hours ... But because the depression got that bad, I kept going, because maybe another three months later I would still, I’d go and get another bottle of wine, I have to put this pain away, I have to get it out of my head, you know ... And like I said it was like a vicious circle, 'cos it would, you were down the whole time, you know. And then that two hours the drink would pick you up, you know. [Stephanie, NWS, 17/7/01]

Siobhan also provides a graphic account of the consequences of her alcohol use, suggesting that it was perhaps for her a final solution to her mental health problems:

> We had a couple of drinks last night but I didn’t take much, whereas before I would keep on drinking, drinking until I was out cold. I think I was trying to kill myself with the drink, the same as the tablets. [Siobhan, NWS, 5/7/01]

Frank recounts his own use of alcohol:

> I was just out of order and I was seriously, seriously depressed ... my remedy for it was to just tip more and more and more down my neck and that’s a vicious circle because all you want to do when you get up the next day and feel terrible ... the depression is just worse. [Frank, NWS, 26/7/01]

The above examples hint at possible answers to our second question about why there is this particular relationship between mental health and alcohol. We are not suggesting that alcohol is not used as a coping mechanism or indeed as a cover for mental health problems in other locales; rather, we are speculating that the specificity of the social, physical and cultural environment in which our interviewees are located provides a particular context in which this relationship is played out and develops.

Why should interviewees feel that hiding mental health problems under the guise of alcohol mis-use is a sensible local tactic? In our findings papers on both Highland economy, culture and mental health problems and Experiences of mental health problems, we emphasise the cultures of silence and stigma attached to mental health problems. These are reinforced by the overwhelming majority of interviewees believing that alcohol mis-use is more widely accepted than mental health problems:

> I could stand in the middle of the village and say, I’m an alcoholic and I’m now recovering and a lot of people would come up and ask me how I was and pat me on the back. If I was to stand up and say, I’ve got Parkinsons Disease, it would be the same thing, they’d say, you’re doing well. But if I said I was a manic depressive, they would all walk away from me. [Sally, SL, 20/8/01]

> I think alcohol abuse is more accepted because that heavy drinking thing is part of their culture in a way, you know, so that’s totally acceptable to be an
alcoholic. But if you’ve got a problem with depression or schizophrenia or whatever, you’re a freak. [Charmaine, ER, 22/11/01]

As Charmaine suggests, excessive alcohol consumption is a part of Highland culture and as such it is accepted both figuratively and literally as ‘coming with the territory’: ‘drink is so endemic in the Highlands, everybody knows about drink and alcoholics’ [Patrick, SL, 20/8/01]:

But alcohol, there has been a long established problem with alcohol in the Highlands especially the West Highlands … it is so common it is less of a stigma; although it is [still] a stigma, it is less of a stigma than mental illness would be. A lot of problems on Skye are drink induced. It’s certainly not, it’s like ‘och, off on the bottle again’, it is almost [an] endearing quality in some ways being a drunk. You are viewed with less suspicion than say you had a mental problem. It would be easier to be a drinker than to be a manic depressive, say. [Phillip, SL, 9/8/01]

Given what we have argued in other findings papers about the difficulties of disclosing emotional and psychological problems, the relative legitimacy of excessive alcohol use can be argued to act as a convenient cover for mental health problems.

As has been suggested in various findings papers (see especially that on Highland economy, culture and mental health problems), Highland folk are perceived to be resilient people, supposedly able to ‘get on with it’ in spite of the problems which may face them. Alcohol as a coping mechanism may not simply be about coping with mental health problems, then, but also about the need to hide such health problems. The stereotypical image of the ‘hardy Highlander’ and their reliance on alcohol as a coping mechanism is reflected in Cameron’s recollection: ‘They turned round and said, well, you’re a drinker now, it’s just the Highland way of dealing with thing, how to cope. And I still think that to a certain degree’ [Cameron, SL, 25/9/01]:

... but I came from a back ground that ‘big boys don’t cry’, you know you don’t go for help … you sort it out yourself … you got a problem you mend it. [Alness group meeting, ER, 23/11/01]

Personal experiences of using alcohol as a cover and a mechanism for coping with mental health problems led a number of users to comment on the use of alcohol by the wider community to hide and to cope with mental health problems: ‘I’d say a lot of people drink just to hide ill[ness] and that’ [Rebecca, SL, 16/9/01]:

Daniel: There is a lot of people round here that suffer from mental health but they don’t really realise it.
Interviewer: How do you mean?
Daniel: They hide it through drink. A lot of people think they are alcoholic but that is just a cover. A lot of people do suffer from depression round here. They don’t admit it. [Daniel, SL 15/8/01]

... there could be a vicious circle going on up here as lots of people drink to excess and I have to admit I was one of them ... I don’t do it now as much as I did before ... so you see there’s lots of people up here [who] may actually just suffer from depression ... and probably telling themselves they’re depressed because they’re drinking too much ... you know? They just accept
Frank’s own theory on people’s perception of feelings of ‘unwellness’ follows our own thinking that ‘they can’t accept that there might be another cause’. As we have argued in other findings papers, in the Highlands mental health issues are often so stigmatised, so ‘beyond the pale’, and the implications for individuals within the community so far reaching (see our findings paper on Exclusionary social relations and practices) that they cannot admit that mental health problems could be the reason for their distress. Following from this, communities lack the language to speak about mental health problems, and so such problems are articulated through the imaginable and relatively safe confines of alcohol misuse. As Rowland suggests:

*I think ... there is a drink problem – I think a lot of people do quietly have a drink – rather than talk about it – they'll just have a drink and get drunk and that becomes part of a culture then – you go to the pub, y'know ... people are having problems here – but they put a good front on it and don't say anything you know ... .* [Rowland, NWS, 5/7/01: our emphasis]

Maureen and Paul go so far as to liken alcohol to medication for the wider community: ‘I would think that it’s [alcohol] used as a medication ... and it’s an acceptable form of medication’ [Maureen, NWS, 26/7/01]; ‘It’s a tranquilliser you administer yourself’ [Paul, SL, 10/5/01]. However, as we have reasoned throughout this paper and in the following section, the acceptability of alcohol misuse is constrained by a number of factors.

The problems of identifying whether someone is experiencing mental health problems separate from, or as a result of, alcohol misuse is a major issue in the provision of care for individuals. Access to appropriate care may be impeded by the complex relationship between alcohol and mental health:

*My mate, he was diagnosed as an alcoholic before he was diagnosed with depression, but the doctor saw through it, through the alcohol [to] the depressions. He had to be de-toxed before they treated the depression ... .* [Daniel, SL, 15/8/01]

*Because they didnae know exactly what was wrong with me, they just put it all down to alcohol. They didn’t know and even my doctor didn’t realise it until [19]94 that I had a mental health problem.* [Cameron, SL, 25/9/01]

The challenges facing formal services, concentrating on users’ experiences of services, is explored in our findings paper on Formal services.

**Becoming an alcoholic**

Throughout the findings papers we have argued that those with mental health problems are at times deemed to be ‘Other’ in Highland rural communities, but this is not the only way individuals are labelled in communities. Despite the widespread belief amongst interviewees that communities are tolerant and accepting of heavy drinkers – particularly male drinkers – and that it is part of the cultural and social scene of the Highlands, there is evidence that at some point an individual’s drinking
habits become of concern to the community, transforming them from heavy drinkers to alcoholics. The social processes by which a ‘heavy drinker’ becomes labelled an alcoholic are complex, and are likely to vary between places. Many of our interviewees acknowledged that alcoholism is a feature of Highland communities: ‘I would say that in Durness, we probably have quite a large amount of alcoholics’ [Deborah, NWS, 23/7/01]; ‘There does seem to be a lot of alcoholics’ [Connor, NWS, 16/7/01]. Given our argument throughout this paper, it should be apparent that how and when an individual becomes an alcoholic is dependent upon a number of factors, not least their gender and the norms around alcohol consumption in specific places. However, when this transformation does occur and notwithstanding some senses in which alcoholism appears more acceptable than admitting to mental ill-health, a number of interviewees still overwhelmingly perceive the community response to be intolerant: ‘They use some very derogatory terms if someone is an alcoholic, they are really down on them’ [Julia, SL, 17/9/01]; ‘A lot of people, we have a drinker next door and people just hate him, more anger and hatred of alcoholics’ [Nathan, ER, 10/12/01]:

... ‘Oh she’s just a bloody alcoholic her’, you know, you’re sort of condemned, you’re not given any ... I know the medical profession and some people recognise it now as an illness, but the general feeling around here is intolerance, I would say. [Deborah, NWS, 23/7/01]

A woman here, a local drunk, Dolly, I was in the shop with her one day and this woman behind the counter was slagging her to death the state she was in and ‘oh terrible, it’s a bloody disgrace, she should be hung and drawn and quartered’, you know. [Bart, SL, 20/8/01]

For Ralph and Catherine, the label alcoholic resulted in feelings of exclusion:

Oh you just get people turning round and ‘there’s an alchy there, waste of space’. You know what they are talking about, you go into a pub and it’s as if they are trying to push you. [Ralph, SL, 18/9/01]

Because I’ve experienced it myself, people don’t want to know you if you’ve got a drink problem. You can be sitting in the pub in [village] – I’ve realised since I sobered up, wisened up, I’m dry now – I can be sitting in the pub in [village] nowadays and hear the locals saying ‘nothing but a bloody alcoholic, funk drunkard’, not about me but about other people. I realised, although I don’t want to acknowledge [it], that deep down they probably say that about me, at one time or another, when I moved out here for a start. Yes they are all very, very nice, now to my face, but I feel that I probably went through the same ridicule as they put others through at the present. [Catherine, INV, 14/6/01]

Given the lack of public spaces in which the community can come together, ‘expulsion’ from it can result in physical and social isolation, as Ralph and Catherine suggest. Gill notes that those labelled alcoholic are often the subject of ridicule by former friends and acquaintances:

You see on the one hand they want people to drink to be sociable but when they see it taking over someone and they end up this person might become like a fool, they don’t want to know them. I think that is really sad ... . [Gill, SL, 5/9/01]
Similarly, Clare notes that:

> It’s acceptable as long as you know when you’ve had enough. There’s a few
> people who just seem to wander round tapping pennies from people all day
> and it’s quite sad, club all the money together to get their next drink. [INV,
> 14/6/01]

However, given a situation where drinking to excess is maybe not exactly condoned but is basically accepted as part of Highlands culture, the ‘rules’ around excessive alcohol consumption appear to be ever-changing. Pauline suggests that community reactions to alcoholism may in part be determined by the status of the individual and their ties to the wider community, suggesting, as we argue in the previous section, that practices and beliefs around alcohol consumption are highly contingent:

> ... well, there’s another man, I know he’s got a drinking problem ... He’d a
> nasty fall at the steps ... trail of blood to his house, the postman came and
> seen it and he was taken to hospital. Those in the pub who knew he was
> drinking all raised money for him to get new stuff because his house was ...
> , so it depends how you stand in the community. Even though he has a
> drinking problem people have ties, it depends who you are. [Pauline, SL,
> 20/9/01]

A number of users actually feel the reverse of what we described above, then, and that having mental health problems could be more acceptable than being an alcoholic. Their views draw upon the notion that alcoholism is self-inflicted while mental health problems are somehow out of the individual’s control: ‘a drink problem is often seen as something brought upon yourself, so I would say less acceptable than illness’ [Chloe, SL, 21/8/01]; and Catherine agrees, stating that ‘[p]eople don’t have sympathy for alcoholics’ [INV, 14/6/01]:

> If somebody’s actually mentally ill, they’d say, poor thing they’re ill.
> Whereas somebody has got a drink problem, they’d probably say, ‘why
> don’t they control themselves or pull themselves together?’, you know.
> [Eleanor, SL, 20/8/01]

What is apparent from interviewee accounts, as a simple point underlying the complexity and range of viewpoints sketched out here, is that the processes of exclusion and inclusion experienced by those labelled alcoholic have a clear resonance with the experiences of those identified as having mental health problems in Highland communities (see our findings papers on both *Inclusionary social relations and practices* and *Exclusionary social relations and practices*).

**Conclusion**

In this findings paper we have explored the role of alcohol in Highland communities and its relationship to mental health problems. Similar to many societies, alcohol plays an important role in the economic, social and cultural life of Highland communities. Alcohol consumption is in many ways ingrained into the workings of the community, being a medium through which people socialise and strengthen bonds with each other and a means of release whereby normal community rules around speech and behaviour are temporarily suspended, allowing the individual to act without licence. Moreover, excessive alcohol consumption is perceived by our
interviewees to be a more or less accepted part of Highland life. Excessive use of alcohol impacts upon the community in diverse ways, being implicated in domestic violence, alienating those in the community who do not drink to excess, and having an association with mental health problems, to which we return in a moment. Drinking to excess, it is argued, is part of Highland male culture that results in its relative acceptability for men as compared to women. This we have claimed is of particular importance when considering the relationship between alcohol and mental health. Alcohol is used by many of those with mental health problems not only as means of coping with emotional and psychological distress, but also as a cover for such problems. This strategy can be risky, however, since the extent to which alcohol misuse acts as an effective cover for mental health problems is dependent upon the gender of the individual, and also because excessive drinking can result in individuals being labelled an alcoholic. That individuals can go to such lengths to hide their difficulties highlights the stigma accorded to mental health problems in these areas.

For some incomers to the Highlands, excessive drinking is not seen as purely the domain of the Highlander, with interviewees drawing upon a wider culture of alcohol misuse throughout Scotland: ‘in England people will have a couple of drinks but in Scotland there are two extremes where people either do not drink or drink to get drunk’ [Felix, INV, 31/5/01]; ‘But there does seem to be a more drink oriented culture in Scotland than there was in London. I’ve always liked a beer in London, but it never seemed to be as bad as it is in Scotland’[Alex, INV, 11/5/01]. While this point of view is worthy, we would argue that within the Highlands alcohol misuse is intimately bound up with broader historical, social, economic and cultural specificity of the Highlands (which we have discussed at length in our findings papers on both Highlands, economy, culture and mental health problems and Social differences). The consequent story to tell about alcohol and mental health is hence doubtless closely bound up with, and inflected by, this particular geographical ‘staging’ of the relationships involved here (and also with questions of gender). The present paper has sought to open several different windows on this ‘staging’ and on these tangled relationships as they arise within a predominantly rural Highland context.