Middle-aged same-sex attracted women and the social practice of drinking

Sarah MacLean[a&b]* Michael Savic [c&d] Amy Pennay[a] Robyn Dwyer[a] Oliver
Stanesby[a] and Claire Wilkinson[a]

[a] *Centre for Alcohol Policy Research, La Trobe University, Bundoora, Australia*;

[b]*Department of Community and Clinical Allied Health*, *La Trobe University, Bundoora,*

Australia; [c]*Eastern Health Clinical School, Monash University;* [d] *Turning Point,*

Eastern Health, Richmond, Australia

*corresponding author: Sarah MacLean. Email: s.maclean@latrobe.edu.au; ph: +61 3
94791374

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As a group, middle-aged same-sex attracted women (SSAW) appear to consume more alcohol than exclusively-heterosexual women in the same age range, however few studies document their collective drinking practices or identify opportunities to reduce associated harms. Online surveys which included open-ended questions were completed by a self-selected sample of SSAW (N=134) aged 36-51, recruited in Victoria, Australia. We identify 12 sub-elements of SSAW's collective drinking practice using a schema grounded in social practice theory (SPT). Responses are compared for SSAW who consumed alcohol with others at moderate and at heavier levels, based on screening. Heavier drinking respondents were more likely to observe that: alcohol use is normalised for SSAW; they are not pressured to drink; drinking produces pleasurable effects; drinking facilitates management of uncomfortable moods, and that venues welcoming SSAW are saturated with alcohol. In line with SPT, links between sub-elements described by heavier drinkers are explored to identify potential interventions. For example, we recommend an expansion of social opportunities without alcohol that engender affirming affective states for SSAW. Further, many SSAW's commitment to the importance of moderation and rejecting coercion to drink could be used to combat the conviction that drinking is an inevitable response to discrimination experienced by sexual minorities. It was apparent that although they drank with other SSAW, our survey respondents did not share a consistent or altogether unique drinking culture. We suggest that an SPT approach entailing data coding to multiple sub-elements supports the identification of diverse configurations of drinking practice within heterogeneous subpopulations.

Introduction

Despite the best effort of public health practitioners, policies and interventions

implemented to date have not succeeded in preventing substantial rates of harmful use

of alcohol (Babor et al., 2010). One political response has been to call for 'changing our

drinking culture'. Some have argued for a focus on changing alcohol consumption

practices in subsections of the population where harmful alcohol use is concentrated,

rather than efforts to influence everyone (Savic et al., 2016). While targeting

subpopulations shows promise (Savic et al., 2016), it should complement rather than

replace strategies aiming to influence the whole-population (such as reducing alcohol

supply) and individuals (such as treatment).

One subpopulation regularly noted to drink more on average than others of their

age and gender is same sex-attracted women (SSAW), although as we discuss, this

group is so diverse as to comprise multiple collectivities rather than one. A review of

international literature found higher rates of alcohol use (both frequency and volume of

consumption) and related problems among sexual minorities than among heterosexuals.

While men generally drink more than women, differences in drinking patterns and

harms are generally greater between sexual minority and heterosexual women than they

are between the same two groups of men (Hughes et al., 2016). Data from the

Australian state of Victoria show similar patterns (Power, 2017), and this is true for

middle-aged as well as younger SSAW (Nicholas et al., 2015). In Australia, 2010 and

2013 population surveys indicate that Generation X (born from 1965 to 1980)

homosexual and bisexual women were 2.7 times more likely to drink at levels which

placed them at risk of single occasion alcohol-related harm according to Australian

guidelines (National Health and Medical Research Council, 2009) than heterosexual

women in the same age range (Wilkinson et al., 2017). While quantitative research has drawn public health attention to the potential for alcohol-related harm among this group, it provides few clues as to meanings and experiences of alcohol for SSAW or the diversity of their drinking cultures. Furthermore, this literature has tended to ignore the entanglement of drinking in other social practices (Duff, 2017; Meier et al., 2017).

Qualitative studies of SSAW's drinking paint a more complex picture. Researchers have highlighted the utility of alcohol for women coping with stress and anxiety that results from discrimination and family members' negative responses to their sexuality. Alcohol also plays a role in establishing connections with others, and in producing lesbian, bisexual and queer identities (Condit et al., 2011; McNair et al., 2016). Recently, Emslie and colleagues (2017) demonstrated the central role of drink choice in communicating gender and sexuality for Scottish same-sex attracted and transgender people. Nevertheless, some gaps remain. Drinking patterns in general populations evolve as people age, with reductions in alcohol consumption in response to life changes such as having children (Emslie et al., 2015). The literature provides minimal guidance on points of intervention to reduce harmful drinking patterns among specific groups of SSAW such as those who have reached middle-age. Further, we know of no previous studies which focus solely on drinking practices which occur when SSAW socialise together as we do here.

In this paper we analyse survey data collected with a sample (n=134) of Generation X (aged 36 to 51 at time of recruitment) SSAW in Victoria, Australia. We use social practice theory (SPT) which, as we outline below, provides a useful tool for public health research in that it accentuates how practices such as alcohol use are structured by factors beyond intentional individual behaviour. We identify elements of drinking practice for SSAW, comparing responses from those women who drink

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collectively at moderate levels, with others who drink more heavily in the company of other SSAW. This enables us to recommend interventions which might support heavier drinkers to adopt more moderate consumption practices.

Social practice theory

Researchers (particularly those who are quantitatively orientated) have been critiqued for treating drinking alcohol as a singular practice, and not as a part of a range of diverse and interlinked activities. Further, some researchers have overlooked the extent to which such practices are embedded in social and cultural life (Kelly and Russo, 2017; Meier et al., 2017). Practice theory encompasses a broad church of scholars who attempt to bridge the gap between individual and structural analyses of the social world, framing individuals as *carriers* of practices rather than as entities making wholly autonomous decisions about their actions (ie. Bourdieu, 1977; Reckwitz, 2002). SPT is a specific approach within the broad field of practice theory research. It is increasingly used to understand drinking and drug use as patterned activities that arise, spread and transform within particular contexts (see, for example, Keane et al., 2017; Kelly and Russo, 2017; Meier et al., 2017; Supski et al., 2016).

In formulating SPT, Elizabeth Shove and colleagues propose that any practice is sustained though three types of 'elements' (Blue et al., 2016; Shove et al., 2012). These are: 'materials' (objects, consumer goods and infrastructures), 'competence' (skills, practical know-how) and 'meaning' (social and symbolic significance, including embodied understandings of the situation). So, for example, SPT would suggest that drinking at a lesbian bar requires a venue, glasses and alcoholic drinks (materials), knowing how to order alcohol (competence) and awareness that the bar welcomes lesbians (meaning).

A further important premise is that social practices never exist on their own but connect with others as 'bundles' (Blue et al., 2016). For example, drinking at clubs connects with the social practices of dancing and initiating sexual encounters, each of these reinforcing and sustaining the others, and each potentially altered by changes to proximate practices. Moreover, social practices are not evenly distributed across the population, but rather cohere within specific social groups where the resources they require (i.e. individuals who take up the practice) can be found. This provides an explanation of variation in drinking across different cultural or subpopulation groups.

Shove et al. (2012) argue that SPT explains both the maintenance of social practices, as well as how they change when their constitutive elements, or the relationships between these elements, are adjusted. It follows then that interventions that alter either individual elements *or* configurations of elements may be used to disrupt harmful practices.

We use an analytic method grounded in SPT to explore points of similarity across SSAW's drinking practices and identify those which are commonly described by heavier drinkers. Social practice theory practitioners insist on the interacting effects of material, competence and meaning elements in producing human activities such as drinking. Thus SPT encourages public health researchers to avoid constituting these activities as unitary practices governed by the individuals who enact them. It alerts us to possibilities for interventions that target factors beyond individual behaviour, including settings, resources, meanings and drinking know-how.

Method

This paper draws on data obtained from a larger study of drinking cultures among subpopulations of drinkers in the Australian state of Victoria (Wilkinson et al., 2017).

Ethical approval to conduct the project was obtained from the Human Research Ethics Committee of La Trobe University (HEC16-075).

An advertisement was posted on Facebook during October 2016 to users whose profile and activity information matched targeting terms for SSAW. Respondents accessed the online survey via an anonymous URL, after agreeing that they consented to participate, identified as a SSAW, were born between 1965 and 1980, drank with other SSAW 'at least occasionally', and lived in Victoria. The survey included both fixed-response questions and open-ended questions (with no maximum character limit) about participants' alcohol use, as well as socio-demographic characteristics. Only the eleven open-ended questions concerning drinking and risky drinking where other SSAW were present are analysed here. The data fit an SPT approach as the survey was informed by a framework for research and intervention concerning alcohol use which encourages researchers to ask about four domains where alcohol practices are enacted – including setting and subculture - which themselves entail material, meaning and competence elements (VicHealth, 2016).

Following Australian guidelines on single occasion drinking (National Health and Medical Research Council, 2009) we classified respondents as 'heavier' drinkers if they gave an answer that was greater than four to the question: 'On a day that you have an alcoholic drink with same-sex attracted women who you know, how many standard drinks would you usually have?' In Australia, a standard drink contains 10 grams of alcohol and we provided a short guide to calculating standard drinks in common alcohol beverage servings. Of the 135 participants, 49 indicated that they usually drank more than four standard drinks, 85 usually drank four or fewer, and one gave an answer that could not be interpreted with sufficient certainty to include her response in this analysis.

Most respondents in the sample were employed, with only five unemployed. They were generally well-educated. Only seven did not complete school and more than half (80 women) held a university degree. Respondents came from across Victoria, with 31 living in rural or regional areas, 36 living in outer-Melbourne suburbs and the remaining 67 from inner-suburbs. Quotes from respondents have been minimally edited for clarity. Capitalisation or asterisks used by respondents to denote emphasis are retained. Against each quote we provide a reference number for the respondent and identify each as a usual moderate drinker (UMD) or usual heavier drinker (UHD) when consuming alcohol with other SSAW.

Using NVivo 11, SM coded responses to all the open-text questions using a framework based on the main elements of SPT (e.g meaning, material and competencies). Practices can be identified broadly or in very fine detail (Shove, et al., 2012), and our identification of 12 sub-elements was designed to code as many responses as possible while avoiding categories that were too generic. Sub-elements were inductively derived after an initial coding of 20 responses. The coding framework was discussed with co-authors and subsequently applied to the remaining responses by SM, with ongoing debate as to our interpretations of the data in each. Considering the coded data, we then calculated the percentage (rounded to full numbers) of UMD and UHD who referred to each sub-element, to identify those sub-elements more commonly mentioned by UHD compared to UMD (shown in Figure 1 below). We were interested in prominent elements in UHD accounts that strongly differentiated these drinkers from more moderate, less risky drinkers. To this end, we used a cut-off of UHD mentioning the sub-element at least twice as frequently as UMD. We used this comparison rather than simply looking at which sub-elements were most prominent in UHD's accounts to identify how heavier drinking practices within the social worlds of

collective drinking by SSAW might be prompted to become more like those of less risky drinkers. Finally, we looked for configurations of sub-elements within UHD individuals' responses to our questions. In the sections below we have italicised each sub-element to show where they are discussed; later in the paper we show how linkages between sub-elements allow us to identify configurations between them.

The meaning sub-elements identified in this analysis are: that drinking is normalised for SSAW; that they are not pressured to drink; that SSAW do not regard drinking as risky, and that alcohol should be managed by choice and control. Material sub-elements are that drinking is facilitated by resources of money and opportunity; that it produces pleasurable psychoactive effects; that drinking is a response to structural discrimination or poor service access, and that settings where women meet are saturated with alcohol. Competencies were categorised as management of uncomfortable moods; achieving connection with others; compliance with drinks purchase expectations, and enacting moderation.

Figure 1 about here

Meaning (social and symbolic significance)

Drinking alcohol in social contexts was considered by many survey respondents to be highly *normalised* for SSAW in social settings. This was more commonly mentioned by those who usually drank more than four standard drinks with other SSAW (UHD), than those who did not. While this may reflect a broader Australian culture, drinking offered a recognised way for SSAW not only to signify sociability but also to demonstrate inclusion in a group of other SSAW, as the following quote illustrates:

> Quite often at lesbian or queer nights organised at venues there is an expectation to always have a drink in your hand. (#118 UMD)

Some observed that decisions not to drink occasioned gentle teasing or surprised remarks, reinforcing the normative nature of alcohol consumption:

> Occasionally I won't drink but it's rare as people question why you aren't drinking and make a big deal out of it. (#16 UHD)

Conversely, many women emphasised that they experienced *no pressure* from other SSAW to drink, or that if this occurred they would ignore it, particularly now that they were older: 'I am 44 years old, peer pressure to drink seems ridiculous!' (#48 UHD). Some women expressing this view also regarded alcohol use as normative for SSAW, suggesting that while it was usual to drink, they did not feel that others directly coerced them to do so. A greater proportion of women who usually drank more than four standard drinks in social settings with other SSAW claimed that no one pressured them to drink, perhaps because they were already drinking at a heavier level and thus were already conforming to drinking expectations. In stating that they were not pressured to drink, respondents emphasised the importance of making their own decisions around alcohol:

> Yeah I would feel comfortable to not drink. I'm generally not a person that would feel pressure to do something I didn't want to do. If I felt uncomfortable or felt pressured then I would leave or try to change environments. (#20 UHD)

Although a social practice approach emphasises the patterned and habitual nature of human action, we tend to experience ourselves as agentic. The narrative that one independently chooses to use alcohol or other drugs is frequently mobilised to signify that substance use is neither dependent nor compulsive (Sedgwick, 1992). In rejecting the implication implicit in one of our questions that they might sometimes feel pressured to drink, many participants in our study insisted that drinking was, or at least should be, a *controlled choice* made by individuals rather than driven by need or expectation:

I don't feel like I need to [drink in order to feel part of things and enjoy the occasion], I want to. (#21 UHD)

I don't HAVE to, but I enjoy having a few cocktails, as the rest of the month I have my small children at home, but only really drink socially when out, not at home. (#13 UHD)

While only a few respondents noted that they themselves did *not regard alcohol consumption as risky*, some said that SSAW were less aware of alcohol-related harms than other sections of the population, or even that a proportion of SSAW were sceptical about alcohol-related harms: 'I think they don't realise the risks. From my experience learning that alcohol is a carcinogen has helped in cutting down' (#113 UMD). Some suggested that this was at least in part because SSAW and other minority groups are rarely represented in health campaigns:

[…] In my experience, same-sex attracted women are on average more cynical and jaded about white, heteronormative, cis-normative, able-bodied overrepresentation, and any campaign which addresses this is likely to receive a bit more attention among queer women. (#45 UHD)

Material (objects, consumer goods and infrastructures)

Clearly *resources* (of money and leisure time) enhance one's capacity to drink alcohol. Some respondents identified that SSAW employed in professional occupations drank heavily with their friends. Participants observed that being able to spend money drinking in bars allowed SSAW to reinforce connections with friends or to relax after a stressful day, thus highlighting the intersection between the social practices of professional life and drinking:

We all work in the community sector so I think stressful jobs plays into it. You want to go out after work and have a knock-off to unwind. (#130 UMD)

For some, childrearing practices invite more moderate drinking or socialising outside the home. Women without children were regarded as having greater capacity to drink, in terms of both time and money:

> A lot of my friends are without children and earn higher incomes. We tend to go out and eat and drink for an extended period of time. (#49 UHD)

Pleasurable psychoactive effects are embodied experiences of alcohol consumption and thus are classified here as 'material', although pleasure also has meaning dimensions that are linked with its role in enhancing socialising, as described above. This was another sub-element that those designated as UHD mentioned more frequently than the other women, as in the following quotes: 'It's […] just bloody enjoyable'. (#24 UHD) and 'I… *very much like* [it]' (#6 UHD).

Some women, including a greater proportion of UHD, indicated that the settings where they congregated with other SSAW were *saturated with alcohol* and that this promoted heavy drinking. Linking this notion with the normative meanings of alcohol use, these women also suggested that drinking was embedded in these settings. They repeatedly stated that fewer opportunities for socialising in welcoming locations without alcohol were available to SSAW than they were to other people. The ubiquity of alcohol in settings where SSAW meet made them unattractive to some who drank less heavily:

> The majority of catch-ups revolve around alcohol, either with a meal or without. It's a habit which I'm trying to break. (#93 UMD)

> I have OFTEN left venues because the alcohol consumption has led to a 'meat market' atmosphere with overtones of sleaze, aggression or entitlement. (#117 UMD)

Some women constructed heavy alcohol consumption as a legacy of experiences of *discrimination and unequal rights*; an association also emphasised in other research (see Marsack and Stephenson, 2017). A sense of injustice is well-founded in Australia, where

at the time of this survey same-sex couples were not able to marry. Respondents wrote

about how homophobia and resulting internalised stigma was linked with a raft of

problems including heavy drinking:

> There is still SO MUCH social stigma around homosexuality- I've grown up with it ALL
> MY LIFE. It is better now, but has so much to go. Equality (e.g. Marriage rights), could
> go a long way to reduce it. Society of self-loathing. (#6 UHD)

Participants also spoke of the invisibility of sexual minority groups in health education

and inadequate services for SSAW, as in the following quote from a woman who argued

that this exacerbated heavy alcohol consumption:

> […] The core of the problem, I believe, is the lack of support groups for coming out and
> internalised homophobia (a massive ongoing internal struggle for most). Better support
> would build self-esteem away from venues that involve drinking and make it less
> necessary to binge. Start with origin not consequence!!!! (#17 UHD)

Competence (skills, practical know-how)

As emphasised in a previous Australian study (McNair et al., 2016), SSAW commonly

observed that alcohol enhanced their capacity to *connect with others*, clearly linking this

with the embodied enjoyment and pleasure afforded by alcohol and the normalisation of

alcohol use described above. Rather than using alcohol product choices to demonstrate

sexual orientation (see Emslie et al., 2017), respondents spoke of alcohol consumption as

a means of enhancing affinity, explaining how drinking with other SSAW engendered

heightened affective states:

> I have made the choice to not drink on occasion and I did not really feel as much a part of
> the fun on these occasions. (#21 UHD)

> When I'm with other lesbians [drinking alcohol is] more energetic and raucous than with
> Hetero couples. (#28 UHD)

Alongside using alcohol to produce pleasure and enjoyment as described above,

respondents also frequently wrote about how alcohol was critical in *management of*

uncomfortable mood in social situations. This was more commonly mentioned by UHD. Women described how ill treatment in response to their sexuality had produced ongoing trauma and isolation from family, which made drinking to cope and connect with community even more essential than it is for heterosexuals:

> I don't think 'stigma / discrimination' fully covers "growing up feeling different / shit about yourself". Having to cope with potentially losing your family because of something you can't help. So [risky alcohol use is] a learned coping mechanism because it was necessary - and then your friends are your family, so feeling at odds with them is intolerable even more so than it 'normally' would be. (#23 UHD)

> I honestly think [risky drinking results from] the low grade day to day stress of being a queer woman in this world! And all the stuff that comes with that - loneliness, isolation, feelings of being different, financial instability (now and into the future). To change that is a long time coming!! (#76 UMD)

Others described emotional states that they managed through alcohol use in less pathological terms, while still relating them to sexuality or drinking in settings where SSAW meet:

> We are all a bit shy about our sexuality. We still need alcohol to relax and be honest (#14 UHD)

> I know I drink too much. It's usually from stress or loneliness. When I'm at a club, girls drink a lot. Like binge (#28 UHD).

Respondents were mindful of the rules of reciprocity that are enacted though *purchasing drinks for others*. This was part of the practical know-how of drinking with others. For example, one woman noted that she bought alcohol for others: 'When someone else has already bought one, as is the cultural norm' (#91 UMD). (Interestingly, and we shall return to this later, it is unclear whether she is referring here to an SSAW-specific 'cultural norm' or alluding to an overflow of wider cultural practices into her engagements with other SSAW). Some women indicated that round buying influenced the speed of alcohol consumption: 'if someone initiates it at the beginning and sets the pace' (#19 UHD). For SSAW, buying rounds often occurred in small groups, where fewer

drinks needed to be purchased and consumed to maintain reciprocity. When groups were large they were more likely to purchase their own to minimise over-consumption.

Both heavier- and more moderate-drinking respondents also wrote about the importance of *enacting moderation* when consuming alcohol to avoid becoming unpleasant:

> [I] usually only drink in social situations and not every time. Moderation is the key to having a good time, get legless at home if you really feel the need. (#27 UHD)

The presence of an ethic of care among SSAW was evident across survey responses, for example when women concluded the survey by noting that they hoped their contribution would help others. In activating this ethic of care and to support moderation, woman observed that if someone was behaving unsociably while drunk they would gently intervene: 'One person takes the offender aside for a quiet word' (#49 UMD). Responses to the survey suggested that unpleasant incidents were rare and were handed sensitively and effectively: 'With humour and management by those less drunk' (#121 UMD).

In emphasising the importance of moderation, some respondents rejected the premise of the survey: that risky drinking was more prevalent among SSAW than heterosexuals. They argued that drinking was not about sexuality; that they had aged out of heavy alcohol use, and (accurately) that middle-aged SSAW drink less than some other groups, such as men:

> I have a mix of gay and straight mates and I see patterns of similar behaviour in both. I actually don't see a difference really. If anything my straight friends drink more. And at more of a risky level. Especially the blokes. For acceptance and social lubrication. Most of my female mates - gay or straight- don't need alcohol to feel comfortably socially. But yes, some of them did. When we were younger… (#44 UHD).

Heavy alcohol consumption and interventions for SSAW

Shove et al.'s (2012) approach to practice theory entails a tripartite understanding of how social practices are constructed and maintained, involving meaning, material and competence elements. We have mapped out 12 sub-elements of drinking practice for a sample of SSAW in Victoria, highlighting differences between heavier and more moderate drinkers. To recap, respondents who usually consumed more than four standard drinks when they drank with other SSAW (UHD) were more likely to write about drinking as normalised for SSAW and to say that they enjoyed the effects of alcohol. A greater proportion indicated that they did not feel pressure to drink, perhaps because as relatively heavy consumers they were already drinking at a level deemed appropriate by those who might apply such pressure. They were also more likely to state that the venues where they felt welcomed as SSAW generally served alcohol, and that drinking aided mood management in social contexts.

On their own, each of these sub-elements is a potential target in efforts to support UHD to shift towards more moderate drinking. For example, the identification of the significance of resources of money and opportunity in middle-aged SSAW's drinking suggests that interventions might be targeted at heavy drinking professional women and those without children. Further, in designing health education it would be wise to avoid suggesting that SSAW are peer-pressured to drink as this does not accord with many heavier drinkers' perceptions. But we are also concerned here to understand implications of how sub-elements are configured or linked in the consumption practices of UHD, as we explore in the following two examples.

Alcohol saturation in the settings where SSAW socialise was often discussed by UHD women who noted that drinking was enjoyable, part of the competency of connecting and highly normalised. As one woman said, alcohol was central to the

affective capacity of queer spaces to generate a sense of communality with other SSAW. Her quote below highlights how the sub-elements of connection with others, pleasure and enjoyment, and discrimination, are linked.

> So often, growing up (I wasn't 'out' till I was 25) I felt so out of place in pubs / nightclubs etc... So now when I'm together with my friends in a queer space there's a real sense of celebrating not being 'other' in that space... drinking to celebrate for want of a better word rather than drink to numb […] to survive a hetero event (#23 UHD).

A central tenet of SPT is that practices are inter-related and that they compete for resources and carriers (Shove et al., 2012). One means of intervening in heavy drinking is to encourage the uptake of a proximate practice involving less-risky alcohol use. Some respondents recommended the development not just of alcohol free events, but of events which offer a sense of meaning, excitement or shared purpose for SSAW such as rallies or sports. This may serve to interrupt some SSAW's reliance on alcohol to produce a powerful sense of inclusion and enjoyment:

> Alcohol free queer events are also a great idea (e.g. facilitating and advertising alcohol free book clubs, roller derby, social justice rallies). This would be particularly effective for those who want to reduce drinking but don't feel they have the opportunity in a social setting (#45 UHD)

Our second example concerns a nexus between normalisation, experiences of discrimination, and using alcohol as a mechanism for mood management, evident in the quote below:

> I truly believe [risky drinking] is caused by a combination of participation in gay culture and drinking being a core acceptable behaviour, but that's a result of the second related issue of it being a habit that starts early on to cope with stress of being in [the] closet and coming out. What would really work is the greater community being supportive of the LGTBI community… (#49 UHD)

Without denying that experiences of trauma and exclusion can add to the appeal of drinking heavily (McNair et al., 2016), this interplay may be more complex than it

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appears. Recent research indicates that higher levels of drinking among lesbians, gays and bisexuals were not in fact associated with poorer resilience or wellbeing scores (Power, 2017). The author speculates that drinking provides opportunities for social engagement that improve wellbeing. This underlines the futility of expecting people to reduce drinking if other social practices whereby they may manage mood states and generate a sense of connection are unavailable. However, it also suggests that an imperative to use alcohol in managing impacts of minority stress may be part of a narrative which itself structures and supports the practice of heavy drinking for SSAW. One mechanism to interrupt the normativity of heavy alcohol use might be to exploit SSAW's valorisation of control and moderation, evident in our research and elsewhere (Drabble and Trocki, 2014). The existing social practice of gentle intervention when friends drink above a moderate level or behave badly when drunk (which seems to be part of an ethic of care among many SSAW) could be encouraged, alongside challenging the trope that discrimination and drinking are immutably bound together.

Conclusion – social practice theory and drinking cultures in heterogeneous subpopulations

This paper reinforces the conclusions of previous research, identifying similar issues among a middle-aged cohort as in research involving SSAW from other age groups: that SSAW drink for complex and varied reasons including connecting with others, normalisation of drinking and alcohol availability at venues where they typically socialise; and that alcohol aids in managing negative feelings arising from discrimination. The study reinforces the need for appropriately targeted education and services, opportunities to socialise without alcohol and addressing discrimination (Condit et al., 2011; Emslie et al., 2017; Hughes, 2011; Hughes et al., 2016; McNair et al., 2016).

Our study is unique in its focus on drinking that occurs collectively with other SSAW. We have emphasised how different factors mutually reinforce harmful drinking patterns for SSAW using SPT. This allows us to consider how settings and structures interact with patterned individual meanings and actions. We highlight how opportunities to generate pleasurable feelings of inclusion without reliance on alcohol should be available to SSAW (rather than simply alcohol-free events), and suggest that women's insistence on the importance of moderation and individual choice to drink could be used to disrupt the idea that drinking is an inevitable response to the discrimination and resultant stress experienced by sexual minorities.

Inevitably this study has limitations. As Facebook users may choose whether they ignore or engage with the advertisements, the analysis reported in this paper is conducted on a self-selected convenience sample for which a traditional response rate cannot be calculated. Although our survey was structured to investigate different domains of drinking practice, like other researchers we found that our data did not neatly map onto SPT's analytic categories of material, meaning and competence (Ally et al., 2016). The questions we asked survey respondents influenced the answers we received – for example a question about round buying generated many responses to this specific issue, potentially over-emphasising its importance to respondents. Relatedly, face-to-face methods such as interviews or focus groups would have produced more detailed data than our online approach. SPT itself attracts criticism, notably that in centralising human activity it neither accounts sufficiently for the effects of material forces, nor points to interventions beyond changing human conduct. As Fraser (2017, 113) observes: 'How much further [practice approaches] go in situating humans more radically within events alongside other agencies such as those of material objects would seem to vary'. This problem is exacerbated when, as in our study, data comprise individual accounts of one's own

drinking. Hence we have been mindful of the need to identify responses to drinking that operate materially or structurally; for example at the level of discourse. It is hardly surprising that a complex social practice such as drinking does not fit tidily into Shove et al.'s (2012) tripartite system. Indeed, some of the sub-elements described here (particularly those that relate to mood management and pleasure) could be classified under more than one element, albeit we believe, without altering the conclusions we draw.

In concluding, it is apparent that while SSAW share identification as female and sexual orientation towards other women, they are far from homogenous as a group. SSAW can be found among all ethnicities and social classes, and have diverse interests and affiliations (Gates, 2014). Identities such as motherhood and professional status may be more germane than sexual orientation. SSAW may also belong to diverse subcultures; lipstick lesbians, butch, bisexual, pan, queer, and many more (Galupo et al., 2017). Although heavy drinking may be more common among SSAW than their heterosexual peers, many consume moderately or not at all. Diversity among SSAW is evident in the responses we received to our survey. Some women felt pressured to drink; others did not. Some were concerned that SSAW drank too much; others objected strenuously to the implication that SSAW have a particular problem with alcohol or rejected the notion that drinking was influenced by sexual orientation.

Drinking practices that occur within subpopulation groups such as SSAW are not bounded and fixed, but are constantly mutating as part of a 'multiplicity of "drinking cultures" at different scales (macro and micro) [that are] configured in different circumstances' (Savic et al., 2016, p. 280). Some of the elements that support higher consumption apparent among UHD SSAW in our study seemed nuanced for SSAW; others (for example, reciprocal drinks purchase) are more clearly part of a wider set of cultural drinking practices (see here Drabble & Trocki, 2014).

We focused on middle-aged SSAW in this study because they were identified in survey data as a group where heavy drinking occurs disproportionately. Yet it is apparent that although they drink with other SSAW, our survey respondents did not share a consistent, bounded or altogether unique drinking culture. We suggest that a practice theory approach entailing data coding to multiple sub-elements provides a method to explore drinking within a subpopulation that does not start from the shaky assumption that this is the case. Indeed this method supports the identification of numerous configurations of drinking practice (and thus potential points for intervention) within a heterogeneous group, which may or may not map onto other identities such as those described above. For future research, designing questions around SPT's practice elements and involving greater numbers of participants would enable identification of more fine-grained patterns of drinking practice within complex subpopulations such as SSAW.

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