

Alcohol and Intimate Partner Relationships: Research Study



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EXECUTIVE SUMMARY:

INTRODUCTION:

What is the purpose of the report

The report looks at the experiences and needs of adults who are affected by the drinking of an intimate partner. It focuses on the tensions, harms and negative effects this drinking can have on a relationship, as well as the support available and the barriers to engaging with, and accessing, these services. It builds on established research into alcohol and intimate partner violence, in order to expand on the issues surrounding relationships and alcohol.

The report has a number of key recommendations, targeted at:

- Government and policy makers; to improve the lives of those affected by the drinking of an intimate partner by enacting policy change.
- Commissioners, service providers and healthcare professionals; to ensure the services and support delivered is effective.
- Researchers and academics; to build on the findings from this report and achieve a wider understanding of the experiences of different groups of partners.

METHODOLOGY:

- Eight semi-structured interviews with people who have lived experience of being affected by a partner's alcohol use.
- An online survey which was answered by 107 people who self-identified as having been affected by an intimate partner's drinking (currently or historically).

- Semi-structured interviews with professionals, which included three family support workers and one research lead in an organisation aimed at improving relationships.
- A targeted social media campaign was used to reach audiences who were not already engaged with sector services. As a result, participants were made up of a mixture of those who had accessed support and were engaged with services and those who had not.
- Despite targeted outreach, the limited diversity in participants' gender, ethnicity and sexuality is a limitation of this research project. For example, 91% of respondents identified as female.

KEY FINDINGS:

The report's key findings can be broken down into three main categories:

1. Alcohol use and reasons for drinking.
2. The impact on individuals and relationships.
3. Barriers to support.

Alcohol use and reasons for drinking:

The interviews and survey highlighted that partners do not have to be drinking regularly or become dependent on alcohol for the participants to have felt or feel affected by their drinking. Some participants reported that their partners drank daily whilst others reported the drinking was less frequent but would always be to excess.

The main reasons cited by respondents and interviewees for their partner's drinking were life stage changes e.g. retirement or divorce, using alcohol to cope with poor mental health or stress, or the normalisation of heavy drinking in social, sporting or professional settings. Others reported no clear reason other than habitually drinking an increasing amount.

The impact on individuals and relationships:

The majority of survey respondents reported conflict or tension related to their partner's alcohol use (92%). 57% said that their partner's drinking caused arguments or tension a lot of the time, and 35% said it caused tension sometimes.

The day-to-day implications cited were:

- Financial, e.g. having to take on more work to support their partner.
- An increase in childcare and household responsibilities.
- Having to avoid events where alcohol consumption could become an issue.

The emotional implications cited were:

- Experiencing verbal or physical abuse.
- Feeling scared for themselves or their family members.
- Feeling constantly worried.
- Increased feelings of isolation and loneliness; 84% of survey respondents reported a negative effect on their mental health as a result of their partner's drinking.

The most commonly cited negative effect of partner drinking on a relationship by participants was the breakdown of trust. This was reported to have contributed to feelings of isolation, anxiety and poor mental health. Many respondents and interviewees reported that this lack of trust remained even during non-drinking periods.

Barriers to support:

Over 40% of survey respondents had not accessed any support at all, either because it was not available or because they did not know it existed. The most common reason for not accessing support was because either they did not know where to find support for themselves (38%), or did not know that they needed it (30%). All interviewees had not recognised they needed support for themselves until long after they had recognised that their partner needed support for their drinking. This demonstrates the need for family support to be more readily available and accessible for those affected by a partner's drinking.

GP services were found to be the most common first point of contact when seeking help and support.

RECOMMENDATIONS:

Recommendations for local support services:

1. That local support services are visible and available to those affected by their partner's drinking.
2. That professionals in non-alcohol treatment services are upskilled to recognise those struggling with their partner's alcohol use.
3. That support options for partners are varied – one size does not fit all.

Recommendations for Government Policy:

1. That the Government should extend the Reducing Parental Conflict Programme to focus on drinking.
2. That the Government takes measures to reduce the centrality of alcohol in society.
3. That the Government consider the efficacy of a public awareness-raising campaign on how alcohol can affect relationships.

Recommendations for further research:

1. Understanding the effects of problematic drinking in LGBTQ+ relationships.
2. Exploring the barriers faced by people drinking in ethnically diverse relationships.
3. Further exploration of gendered trends around drinking in relationships and access to support.
4. Understanding the extent that those impacted by their partner's drinking turn to alcohol themselves as a coping mechanism.

ACKNOWLEDGEMENTS:

This a publication by the Alcohol and Families Alliance (AFA). The AFA would like to convey its thanks to Megan Williams of Adfam who authored this report and led the research study behind it.

Further input and support was provided by colleagues at Adfam, Alcohol Change UK and the Institute of Alcohol Studies along with other members of the AFA's Steering Group. The Alcohol and Families Alliance (AFA) is an alliance of organisations which seeks to improve policy and practice reduce the harms experienced by families as a result of alcohol.

alcoholandfamiliesalliance.org

We would like to thank all of the participants who shared their experiences either through 1:1 interviews or by completing the online survey, and the professionals who took part in interviews.

We hope and believe that this report is an accurate reflection of their views and opinions.



INTRODUCTION:

This research study aims to understand the experiences and needs of adults who are affected by the dependent or non-dependent alcohol consumption of their intimate partner.* Rather than solely focusing on the effects of either dependent or non-dependent drinking on a relationship, this study looked at any intimate partner relationship within which the behaviour associated with one partner drinking alcohol is concerning the other partner and having an effect on them/ the relationship. Whilst the correlation between alcohol and intimate partner violence is well established in the literature (though causation is disputed), this research sought to understand other harms, effects or tensions associated when alcohol is prevalent within an intimate partner relationship. In addition, it looked at the level of awareness and engagement with support options from both parties when these tensions and issues arise.

This study carried out eight semi-structured interviews with partners who have lived experience of being affected by a partner's alcohol use. Furthermore, a survey was undertaken which was answered by 107 people who self-identified as having been affected by an intimate partner's drinking (currently or historically). This study also carried out semi-structured interviews with professionals, which included three family support workers and one research lead in an organisation aimed at improving relationships. These interviews aimed to gain an understanding of the support available for those affected by their partner's drinking,

how people present in these services, and barriers to them accessing these services.

Chapter 1 gives a brief overview of the background and existing literature on alcohol. It looks at the way alcohol features in relationships, conflict and tension within relations, and an overview of relevant UK policy on alcohol and relationships. The methodologies undertaken in this study are presented in more detail in chapter 2. The findings from both the interviews and survey are presented and analysed in chapter 3. Recommendations and conclusions for policy, practice and further research are included in chapter 4. The recommendations are targeted at:

- Government and policy makers; to improve the lives of those affected by the drinking of an intimate partner by enacting policy change.
- Commissioners, service providers and healthcare professionals; to ensure the services and support delivered is effective.
- Researchers and academics; to build on the findings from this report and achieve a wider understanding of the experiences of different groups of partners.

**"Intimate partner" refers to both current and former spouses and dating partners, who may or may not be living together, or may or may not have children together.*

CHAPTER ONE:

A brief overview of literature and relevant policy on alcohol and relationships

Alcohol and intimate partner abuse:

It is well established that alcohol consumption, especially at harmful and hazardous levels, is linked to intimate partner abuse (World Health Organisation 2012). Two thirds of domestic incidents known to the police in the UK were found to involve at least one individual concerned being under the influence of alcohol (Home Office 2016). Nearly a quarter of women affected by someone else's substance use report having experienced physical violence or abuse as a result (Adfam/YouGov, 2019).

The nature of the link between alcohol consumption and intimate partner abuse is complex, and whether alcohol plays a causal, contributory, or other role in intimate partner abuse remains debated in the literature.

Despite this debate, under no circumstances should alcohol ever be used as an excuse for violence. Various theoretical models and empirical evidence exploring these links are presented in more detail in Jones et. al 2019.

These are also summarised in appendix 1. Explanations for the link between drinking alcohol and perpetrating intimate partner abuse are multiplex. Jones et. al (2019) argues that 'considering the interplay between broader contextual and environmental influences, and relationship and individual characteristics may be useful in linking theoretical explanations and models of the relationship between alcohol use and intimate partner abuse'.



Alcohol and couple conflict below the threshold of intimate partner abuse:

There is less literature exploring the links between alcohol and couple conflict/ tension in relationships. Most studies that do look at alcohol and its relationship to couple conflict do so within the context of serious marital violence. However, limited evidence does suggest that conflict or tension in relationships is a precipitant to drinking (Flanagan et al, 2020). This study aims to address this gap by looking at alcohol use in relationships where couple conflict is experienced below the threshold of intimate partner abuse.

UK policy on domestic abuse and alcohol :

In recent years, more attention and recognition has been given in policy to domestic abuse and the lifelong implications for survivors. The Domestic Abuse Act was passed in 2021, and has already brought about key legislative and funding changes. This included the establishment of the office of an Independent Domestic Abuse Commissioner, who has key powers and functions to lead on the response to domestic abuse, prohibiting perpetrators of abuse from cross-examining their victims in person in the civil and family courts in England and Wales, and placing a duty on local authorities in England to provide support to survivors of domestic abuse and their children in refuges and other safe accommodation (Home Office 2021). Further changes include a legal definition of domestic abuse which recognises children as victims in their own right, and new protections in the family and civil courts for survivors.

There is recognition in policy that alcohol and domestic abuse are linked in some way. The domestic abuse sector called upon the Government to extend the statutory duty beyond refuges to ensure that community

services, including drug and alcohol services, make trained enquires about domestic abuse; however, this was not introduced.

UK policy on couple conflict below the threshold of domestic abuse

In recent years, the Government has developed a policy interest aimed at reducing couple conflict below the threshold of domestic abuse. This policy is targeted at disadvantaged families, with the intended outcome to reduce the negative effects of parental conflict on children. The Department for Work and Pensions (DWP) piloted the provision of expertise and evidence across 12 Local Authorities in England from 2015–2017 to develop strategies to promote the quality of relationships, called the Local Family Offer Trial. This trial led to the development of the Reducing Parental Conflict (RPC) Programme, which was implemented in 2017 as part of the Improving Lives: Helping Workless Families. It aimed to promote improved outcomes for children by developing the evidence base on what works to reduce parental conflict, inform commissioning practice and help local areas integrate support to reduce parental conflict in local services for families. As part of this project, a joint £6 million package of support was delivered, developed with the Department for Health and Social Care and Public Health England (PHE) (now the Office for Health Improvement and Disparities (OHID)), to improve the outcomes of children of alcohol-dependent parents (DWP 2021).

Whilst the role of alcohol within both couple and parental conflict has been recognised in policy, particularly with regards to couple conflict, policy has tended to focus on dependent drinkers, rather than the role of alcohol more generally in conflict and tension within relationships. This research study aims to address this gap, by focusing on the interplay between alcohol and couple

conflict, below the threshold of domestic abuse.

Policy has focused on couple conflict between parents, which is extremely important; however, this research study begins to build the evidence base around how varying levels of alcohol consumption affects intimate partner relationships more broadly.



CHAPTER TWO:

Overview of methodology

This mixed methods study had two components, with research ethics approval secured from Adfam.

Semi-structured interviews:

The nature of the link between alcohol consumption and intimate partner abuse is complex, and whether alcohol plays a causal, contributory, or other role in intimate partner abuse remains debated in the literature.

Semi-structured interviews (online and telephone) were carried out to explore the research topic in depth. There were a total of 12 interviewees, including 8 people with current or historic lived experience of being affected by a partner's alcohol use and 4 professionals from a range of services that

work with people affected by a partner's alcohol use. This included 3 family support workers and 1 researcher who develops toolkits and resources for an organisation that provides relationship support to couples. The participants were recruited by online and social media adverts. These were shared within the AFA's member organisations' networks (including on social media, mailing lists, newsletters, website, at supporter services), and through a targeted outreach plan on social media to audiences who were not already engaged with sector services (for example to community groups, faith groups, sports teams).

This was to ensure that the group of participants who were interviewed were made up of a mixture of those who had



accessed support and were engaged with services, and those who had not, in order to get a well-rounded view of access and barriers to support. This was also to try and reach a demographically diverse range of participants.

Figure 1 shows the tiles used to recruit interview participants. These were deliberately non-specific, in order to engage people who did not necessarily consider their partner to be an “alcoholic” or dependent on alcohol, as the purpose of this research project is to get a general understanding of how intimate partner relationships can be affected by alcohol, rather than focusing on “high” level harms associated with alcohol featuring in relationships. Put simply, this study is concerned with the negative effects drinking has on a relationship or partner, not the prevalence, or quantity of drinking.

Figure 1: Tiles used to recruit participants:

Are you affected by your partner or ex partner's drinking?



We want to hear from you

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Does your partner's drinking negatively affect you



or your relationship?

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The family support workers were identified by members of the AFA. Family lawyers and relationship counsellors were also approached to take part in the research, but due to work commitments were not able to follow through with interviews. This is a limitation of the research, as the findings could have been enhanced by having a cross-sector perspective on relationships and alcohol. That being said, the interview with a research lead from a relationships charity provided rich insight into alcohol, conflict and tension within relationships through an alternative lens to the drug and alcohol family support sector.

The data obtained from all interviews was analysed using reflexive theme analysis (Bruan and Clarke 2012).

Summary of interviewee demographics:

8 partners:

All people with lived experience of being affected by a partner's alcohol use. Seven were female; one was male. Age ranged from mid 20s to late 70s. All were white British and all identified as heterosexual, despite targeted outreach to non-white and LGBTQ+ communities.

3 Family support workers:

Two working in England (North and South East) within a range of age groups, one working in Scotland within the 18–25-year-olds age group. Two females, one male. All three working for third sector drug and alcohol family support providers.

1 relationship research lead:

Female working as a researcher and product developer for a third sector relationship support provider.

Online survey:

An online survey was carried out, with a mixture of open ended and closed questions, designed to collect supplementary findings once key themes were identified from the interviews. The survey also aimed to reach a broader demographic of participants, particularly people of non-white British ethnicity, males, and those not in heterosexual relationships.

The survey was answered by 107 people who considered themselves to have been negatively affected by their partner's alcohol use. Similarly to the interview recruitment, it was important that the survey did not specify to what amount their partner was drinking.

Figure 2: Recruitment copy for the survey.

Are you, or have you previously been, affected by a partner/ex's drinking?

Please help us to learn more about your experience by filling out the following survey on alcohol and relationships.

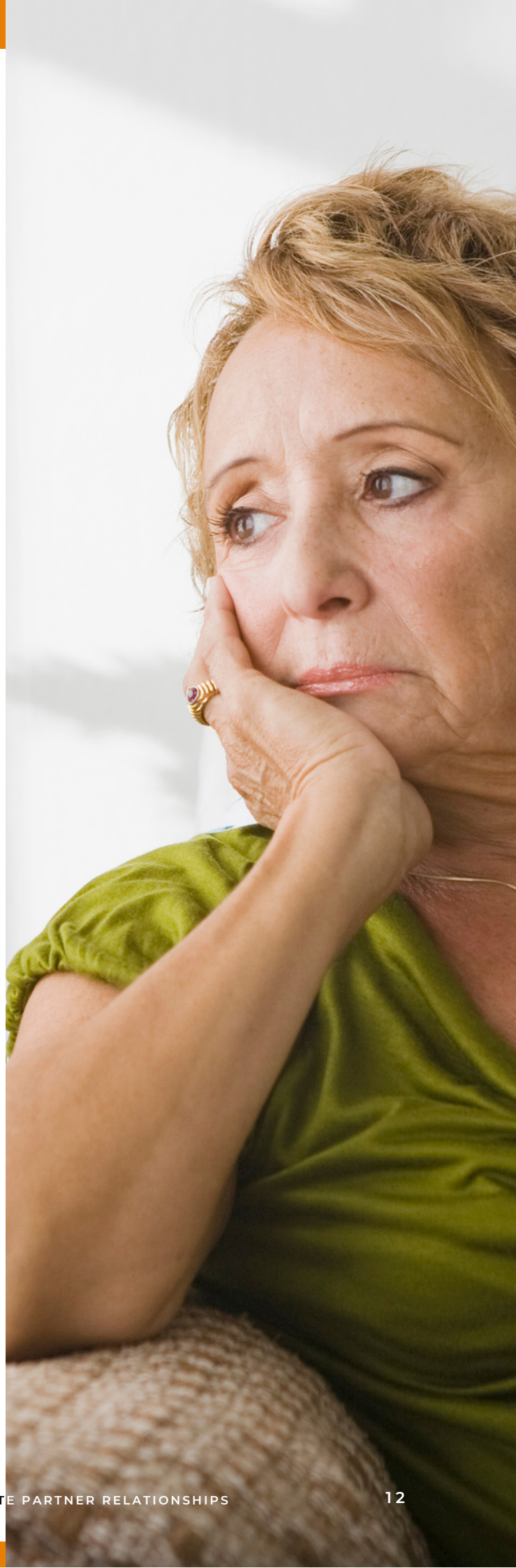
*What do we mean when we say 'affected by' a partner/ ex's drinking?**

- *You are currently, or have previously been, negatively impacted by the alcohol consumption of a partner/ ex partner.*
- The negative effects of their drinking may be current or historic.*
- Your partner does not necessarily have to drink frequently, excessively or be dependent on alcohol for you to be negatively affected by their drinking.*

Summary of survey respondent demographics

- The majority of respondents identified as female (91%), 6% identified as male, 1% as non-binary and 2% prefer not to say/ other.
- The majority of respondents identified as heterosexual (93%), 3% as bisexual and 2% as gay or lesbian and 2% prefer not to say/ other.
- The majority of respondents described their ethnicity as white (92%), 4% as mixed ethnicity, 2% as Asian/ Asian British and 1% as Black/ African/ Caribbean/ Black British.
- 62% of survey respondents were answering in relation to a current relationship and 38% in relation to a previous relationship.

Despite targeted outreach, the limited diversity in participants' gender, ethnicity and sexuality is a limitation of this research project. A recommendation for future research in this area is to focus specifically on the experiences of male, transgender or non-binary partners, non-white ethnic groups and those in LGBTQ+ relationships. The conclusions and recommendations drawn from this research project can frame future research, but are not representative of a diverse population.



CHAPTER THREE:

Findings

The research findings from both the interviews and online survey are presented and analysed simultaneously, according to key themes. The term 'participant' is used to refer to both interviewees and survey respondents who have been affected by a current or previous partner's drinking. The term 'partner' is used to refer to the partner who has/ is drinking in a way that impacts the participant. The term 'Professional Expert Witness (PEW)' is used to describe the family support workers or relationship research lead.

Participants were recruited on the basis of being affected by their partner's drinking, and all interviewees and 96% of survey participants answered that they were worried about their partner's drinking.

Please note, these findings are from the perspective of the participant or

professionals, so may present their own perceptions of the nature of their partner's drinking, rather than the exact reality of the drinking partner. This is intentional, as this research project is concerned with how partner drinking is affecting participants.

A summary of key findings is presented at the end of this chapter.



3.1 The nature of partner drinking

The nature and longevity of the partner's drinking

There was a variety in the nature and longevity of partner drinking across participants. Some participants reported that their partner had been drinking in a way that concerned them for the entire length of the relationship, and others said it had started gradually and become an issue at a later stage. Some others reported that, upon reflection, their partner probably had a problem with alcohol during most of their relationship, but it had taken the participant a while to recognise and notice.

"I sort of reconnected with my husband, we'd known each other at school, um and we met, or reconnected on a night out. So we were both drinking at the time, and so I was trying to think about when I kind of realised that alcohol was a problem. And it is hard to pinpoint an exact time..."

Interviewee 2

"I would say it hasn't got any worse or better, it's just, you know, there's been three specific times that he's just drunk so much and it's just made me really sort of mad. I dunno, cos he's injured himself or just been a liability. So I wouldn't say it's gotten worse which is sort of frustrating, well it's somewhat frustrating because I'm sort of like, is it going to happen again in a year, and if it doesn't happen that regularly I am like well you know, why do I get so mad about it."

Interviewee 5

Some interviewees reported that their partners drink daily and are dependent on alcohol, whilst others reported that they drink less frequently but when they do it is in excess and can be a cause for concern.

"Situations where, I mean, we don't drink

much at all everyday, it will just be occasions where he gets a bit carried away. Yeah...You know it's not like a habit like he doesn't get drunk everyday."

Interviewee 5

A handful of partners had passed away due to health or mental health issues related to their drinking.

"She was suffering from liver disease, badly, and uh...after various in and out trips to the local hospital, she was then referred to the local hospice, where... she died in March."

Interviewee 3

The "causes/reasons" cited for the partner's drinking

Participants cited a diverse range of 'reasons' or 'triggers' for their partner's drinking, including life stage changes e.g. retirement or divorce, using alcohol to cope with poor mental health or stress, normalised heavy drinking in social, sporting or professional settings, or no clear reason other than habitually drinking an increasing amount.

Many participants said that heavy drinking occurred around special occasions, sports events, work drinks and other social occasions, and that this often escalated into drinking sessions that lasted a few days.

"Social settings - I can't even go to the restaurant with him without wondering if he'll drink too much because he mostly does if so. If we go to a party, it's something that always has to be considered."

Survey respondent

"It will be like social events that there is a lot of hype over, so on the three specific times. It was a big deal two weekends ago, there was a big social occasion, and before that

was Notting Hill Carnival, so big sort of events that are hyped up. He sort of gets over excited."

Interviewee 5

"... there's a big drinking culture in the army, you cannot get away from that, and it's been hugely influential, I feel, in the development of his problem, because it was just always there, whenever there's a function. I don't know how to explain it other than there is a big drinking culture in the army."

Interviewee 2

One PEW agreed that social situations and sporting events can be triggers for heaving drinking episodes.

I think it can be [a trigger for a heavy drinking episode], you know, especially with alcohol, it can be families, house parties, birthdays, football matches..."

PEW interviewee 1

Many participants said that their partner used alcohol to cope with stress and emotions. This ranged from stress due to work, family or relationship matters, historic trauma, financial matters and general day-to-day anxiety.

"His drinking is random but he says it is to relieve the stress he feels."

Survey respondent

"My partner uses alcohol to manage his emotions. This causes many of our issues to be unresolved. He has used alcohol since he was 17 to manage his emotions, therefore has no communication skills that can resolve our fallouts... which are mainly due to his drinking/lack of connection."

Survey respondent

"I think money is a big tension, especially if they have spent the money on alcohol. That can cause massive amounts of tension, especially if they have spent the money and

there's no money for bills."

PEW interviewee 1

Others said they did not think it was an emotional release, but simply due to excitement and normalisation of drinking in social settings:

"No [he does not drink] not at all [to manage his emotions]. I think the underlying emotion is just excitement and a lack of self-control."

Interviewee 5

Participants also said that changes in life stages contributed to periods of heavier drinking. Stress associated with children leaving home, retirement and having children were the most commonly cited, but this also included stress when moving house or career changes.

"My husband's drinking has got worse since the birth of our son (only child, 15 months old)."

Interviewee 5

"It was around 2000 that it just deteriorated. At this time, our children had left home, our youngest had just left home, and changes in our situation occurred. She'd retired, I retired a couple of years later, and I could see that you know, she was drinking inappropriately and that just got worse and worse. Um... until it became... absolutely horrendous."

Interviewee 3

"... so we were together for 20 years, had a child, he stayed at home and I went back to work, so he did the childcare. And its possible from then on that the power balance shifted when perhaps it shouldn't because I was earning the money, I was going out doing dynamic things. So, I don't think that helped really."

Interviewee 4

Changes in life stages also contributed to

participants being less tolerant of their partners drinking, and/or becoming more aware of it. Many participants said they changed their own drinking habits as they moved away from their teenage years or 20s, but their partners continued to drink heavily and that this caused tension, feeling that their partner was “irresponsible” or “too dependent” on alcohol.

Participants who reported this were women, in relation to their male partners; however, as over 95% of research participants were female, no gendered trends can be identified here. This area should be explored in further research.

“So we were both drinking at the time, and so I was trying to think about when I kind of realised that alcohol was a problem. And it is hard to pinpoint an exact time, because when we were younger, obviously drinking was something that all, we all did, all my friends did, it was part of the acceptable I suppose, it’s socially acceptable for young people.”

Interviewee 2

“Yeah I mean, definitely before our baby, I would occasionally drink. But the same as my partner it would be more sporadic. Since the baby I have said that’s really irresponsible and I am not very happy with it.”

Interviewee 5

Some participants could not identify a particular underlying cause, or a ‘trigger’ but said that alcohol had just been a persistent feature of their partner’s life and they had gradually become dependent on it.

The participants’ understanding/ perceptions of their partner’s drinking

The way that participants perceived their partner’s drinking was multifaceted. There was a constant juxtaposition in the way in

which they understood their partner’s drinking, from it being a lifestyle choice or behaviour which they could ascribe blame to, or an illness/ addiction that had taken hold of them. Many felt a mixture of emotions, being ashamed and embarrassed by their partner’s behaviour but simultaneously feeling sorry for them.

“The strange thing is he can do Dry January easily and reverts back to the person he was when I met him and fell in love. His drinking is a choice which makes it feel all the more cruel.”

Survey respondent

“I find it embarrassing that he has no self-control. It makes me respect him less.”

Survey respondent

“I guess it was seen as a lack of commitment on his part, [not being able to stop drinking], but I know he just couldn’t stop and was afraid to stop, and that is why he wouldn’t attend the appointments. I can see that in hindsight but in the moment, I was extremely upset and angry he wasn’t trying, but I think it was more than that.”

Interviewee 1

Many participants said that they were originally in denial that their partner had a problem, as they wished it was not true. In some cases, this denial was made ever stronger by their partner or partner’s friends reassuring them it wasn’t a serious issue, or normalising the behaviour.

“I was really upset by it, but everybody just saw it as a bit funny so it became a bit of a joke. So then you feel I can’t really make too big a deal about that, and you think oh maybe I’m being, I’m being silly... also I think if I’m honest, there was a degree to which I joined him in the denial. I knew it was an issue, but you know it’s not that bad. If that makes sense, like I minimised it, I

acknowledged it but minimised it."

Interviewee 2

There was an overwhelming sense of protection and loyalty in the way in which interviewees talked about their partners, even those who had separated as a result of their drinking. This came across in the interviews, when participants stressed that despite their drinking or behaviour, their partner "wasn't a bad person". Many participants understood the effects that intergenerational alcohol misuse or trauma had had on their partner, and this often led to alcohol misuse.

"Damaged product of 3+ generations of a very damaged family"

Survey respondent

Participants in general do not feel that their partners fit the stereotypical view of an "alcoholic" or "heavy drinker", even those who reported that their partner was intoxicated frequently. However, all participants did feel that their partner's drinking was problematic enough to take part in this research project, which demonstrates that the way in which society characterises problem drinking needs to shift. The effects of this upon participants seeking support is explored in section 3.3.

3.2 The implications of partner drinking

Day-to-day 'practical implications on the participant

Participants indicated that there were many practical implications of being in a relationship or living with a partner who is drinking in a way that causes concern (see Figure X). This ranged from taking on more housework and childcare responsibilities, taking practical steps to try and stop their partner drinking or reduce the associated harms like hiding their partner's car keys,

blocking their bank cards, covering up or hiding the evidence of their partner's drinking from their friends or other family members, avoiding social scenarios or events where they knew their partner would engage in drinking. The implications of supporting their partner were often described as "life changing".

"I was stuck living with him during lockdown 2020 and felt overwhelmed with the burden of it all. I felt like his carer, making sure he ate, doing things that he couldn't do etc because of his drinking and living with constant worry."

Survey participant

"I tried to confiscate his debit cards."

Interviewee 1

Interviewees reported that these implications became normalised and that they often felt like a "carer".

"I would always hide my partners keys and then I realised that isn't normal behaviour or something I should have to be doing."

Interviewee 6

"It affects every aspect of our life."

Survey respondent

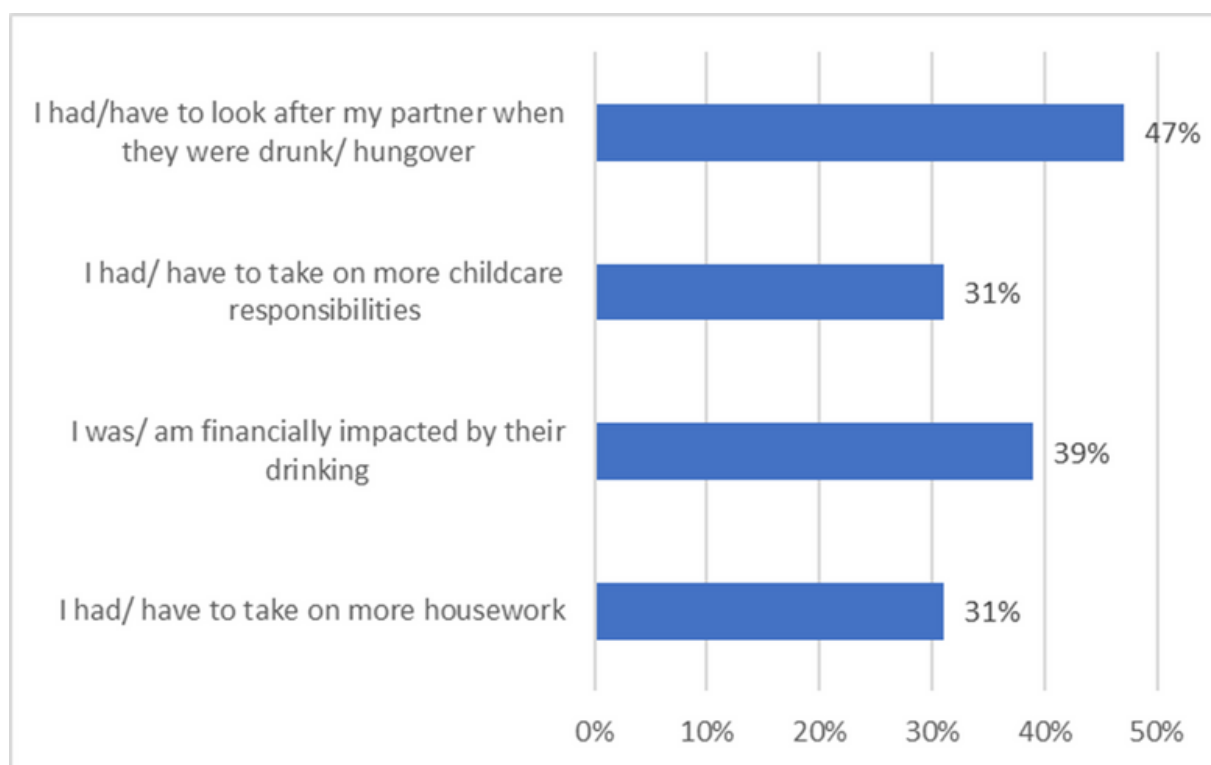


Figure 2: 'In which of the following ways does your partner's drinking affect you?' n=104

Respondents spoke of the financial implications of their partner's drinking habits.

This ranged from partners being concerned about the amount of money their partners spent on alcohol during a period of heavy drinking, to worrying that they may lose their job as a result of their drinking. In some cases, partners had lost their job, which most participants attributed to their unreliable behaviour associated with drinking. This sometimes led to participants having to take on more work to support their relationship. Some participants got into debt or had to re-mortgage their house as a result of becoming the only earner and 39% of survey respondents reported being currently/ historically financially impacted, whilst many were constantly worried it could become an issue in the future.

"It has a financial impact on our relationship. Also his ability to stay in employment."
Survey respondent

"I worry about the effect on our business and financial affairs."
Survey respondent

49% of the survey respondents said that they had children with their drinking partner/ ex. A staggering 82% of these respondents who had children, had to take on more childcare responsibilities as a result of their partner's drinking (31% of the total respondents, as shown in figure X). Survey respondents with children reported that the impact on their children was significant, and that this concerned them. This was true even when partners felt that they had concealed their alcohol use from their children.

"Impact on children is significant."
Survey respondent

"After 35 years since divorce, mine and my children's lives still suffer from my ex-husband's drinking."
Survey respondent

Some participants reported feeling that they had let their children down by exposing them to their partner's drinking.

"Our children are very aware of his behaviour and try to protect me by diverting his attention from me but I know how this has affected them, particularly my daughter, who has had counselling because of this. I feel incredibly ashamed at how they have been affected."

Survey respondent

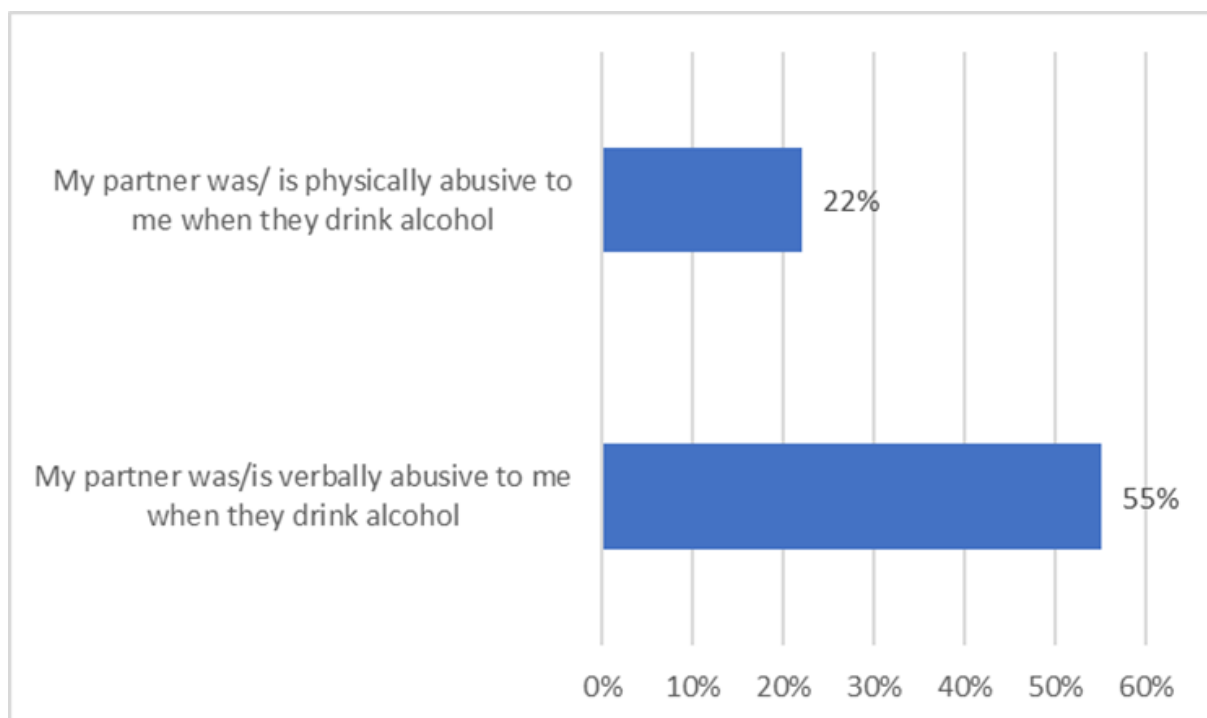
Emotional implications on participants

Participants reported that being in a relationship with someone who is drinking in a concerning way does not only have practical implications on the way in which they live that this took a toll emotionally. 84% of survey respondents reported that their mental health was negatively affected by the situation. Experiences of verbal abuse, loneliness, isolation and stress associated with their partner's drinking were common emotional implications.

a) Experiences of verbal and physical abuse

Participants reported mixed experiences of verbal and physical abuse related to their partner's alcohol use. 55% of survey respondents reported verbal abuse, in comparison to 22% reporting physical abuse. This echoes existing literature which suggests that alcohol use and domestic abuse are correlated. However, physical and verbal abuse were less commonly reported by interviewees. They who were more concerned about their partner endangering themselves whilst being intoxicated. Many interviewees reported their partners withdrawing or making no sense when under the influence of alcohol, rather than becoming verbally abusive towards them.

Many participants still felt scared for themselves or family members as a result of their partner's drinking and associated behaviours. Although many did not report physical abuse, there was often an underlying fear that their partner may become violent or verbally aggressive as their behaviour was often unpredictable when drunk. This fear of the unknown



n= 107 Figure 3: 'In which of the following ways does your partner's drinking affect you?'

contributed to general feelings of anxiety and worry.

"My mental health was suffering and I was scared of my husband's behaviour. He raised a hand to me – didn't hit me...but I thought he could/would."

Survey respondent

b) Pervasive worry and stress, often leading to anxiety and depression

Participants reported that feelings of worry and stress surrounding their partner's drinking were pervasive and not limited to drinking episodes. This was true of participants with partners who drank at varying frequencies.

"It's this thing about alcohol being insidious, it filters into every area of your life. There isn't one aspect of our relationship that hasn't been impacted by it. And also, other people in the house, because even when he's sober, we've still got the memories of what he said, or how he behaved when he's drunk even if he can't remember them."

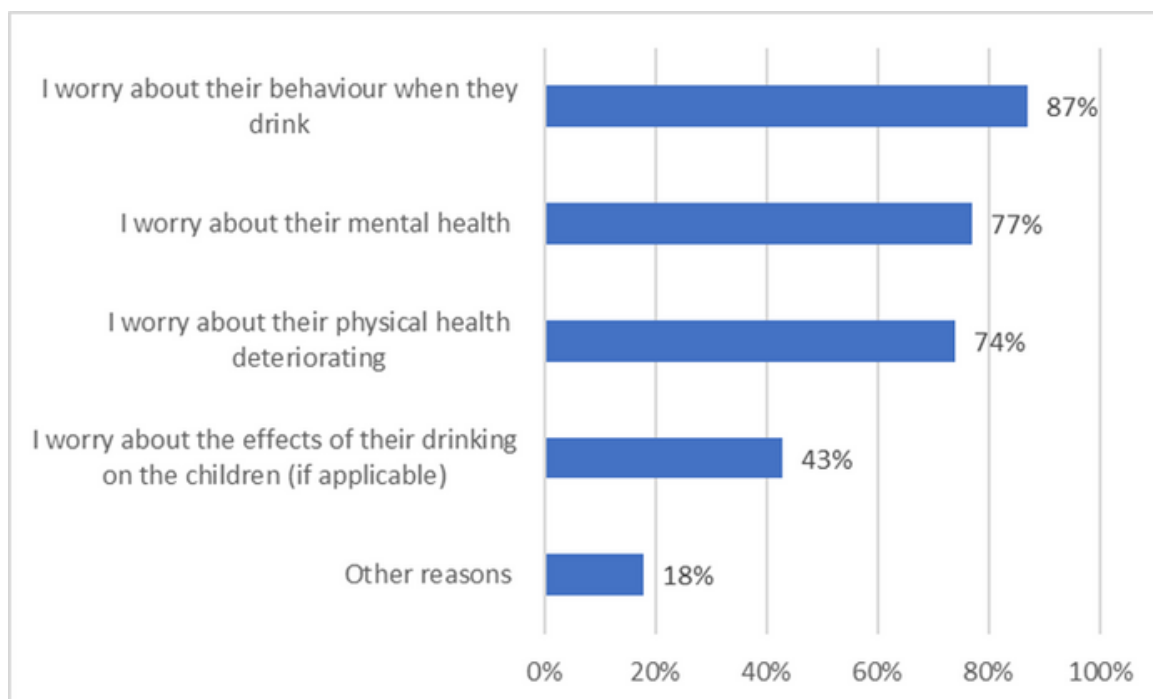
Interviewee 2

Participants spoke of the stress associated with constantly being available to try to protect their partner, themselves and the community from harms associated with drinking episodes. Often protecting their partner came at the expense of looking after themselves. Many were hesitant to seek help from the police when things became violent or dangerous as they were fearful of getting their partner into trouble.

[Referring to her drink driving] "A huge dilemma, how do you manage that situation ... when you know they're lethal. Huge stress. So, I'm managing that, I'm managing picking her up from the park when she's drunk, and just trying to cope with it."

Interviewee 3

Survey respondents were asked why their partner's drinking worried them, in an attempt to better understand the nuances of why they were concerned about their partner's drinking. A large majority responded that they are worried about their partner's behaviour when they drink, worried about their mental health, and worried about their physical health deteriorating. This echoed the worries that interviewees raised.



n= 107 Figure 4 'Why do you/ did you worry about your partner's drinking?'

The pervasive stress and worry felt by participants, and the lack of time they have to look after their own practical and emotional needs, often leads to them experiencing their own mental health problems, with anxiety and depression being most commonly cited. Some interviewees had presented at their GPs as a result of feeling this way, and a few reported being on medication for their mental health condition. This then compounded the stress of the situation, as their poor mental health often led to more tension within their relationship; more financial issues, as participants' work life was affected; and more isolation, as they were not as able to socialise with family and friends.

"I neglected my own health, his drinking caused me to have obsessive thoughts. He wasn't reliable, he wasn't truthful, he wasn't dependable and my self-esteem was greatly affected. I was a nervous wreck, yo-yoing from crying constantly to bouts of sheer anger."

Survey respondent

"Stress, depression, anxiety, affecting my work and our relationship"

Survey respondent

c) Loneliness and isolation

Many participants experience feelings of loneliness and isolation due to their situation, feeling that their emotional needs are not met by their partner.

"I felt very lonely."

Survey respondent

Many are isolated by their experience and cannot turn to family or friends for help. This was for a number of reasons, including fear of being judged by family and friends as being an unsupportive partner, fear of being blamed as the cause of their

partner's drinking, fear of reputational damage of their partner, fear of reputational damage of their relationship, and/ or pressure from their partner not to tell anyone about their drinking.

"I was struggling mentally and didn't have a strong family or friends' network to talk to."

Survey respondent

The relationship research lead commented that when it comes to talking about alcohol and relationships, there is a double stigma at play. Talking about issues within your intimate partner relationship can be taboo in British culture and people feel pressure for their relationships to appear perfect.

Many participants said that the situation had a negative effect on their other relationships with family and friends. For many participants, this then became a negative cycle of feeling more isolated and more stressed which then led to further relationship breakdown or conflict and tension.

"I worry about our relationships with friends and extended family."

Survey respondent

Effects on the relationship

a) Breakdown of trust

Contributing to feelings of isolation and anxiety felt by participants was a breakdown of trust in the relationship. This was the most commonly cited negative effect of partner drinking on a relationship by participants. Partners commonly lie about the amount of alcohol they have consumed, where they have been and under-emphasise the impact it is having on their responsibilities and finances.

"The biggest impact is the impact it has on your connection and on the quality of the

relationship you have with one another. And the lies that he tells that are associated with his drinking, erode the trust, they just erode the trust."

Survey respondent

Two of the interviewees spoke of having a family history of alcohol abuse, and found their partner's heavy alcohol use triggering. This contributed to a breakdown of trust as they felt let down by their partner who was aware of the problems alcohol had caused previously in their family but continued to drink anyway. Both interviewees were aware that their family history may make them less tolerant of their partner's drinking and led them to be more concerned than if they had not previously been affected by someone else's alcohol use; however, they still felt betrayed by their partner's lack of sensitivity around the issue.

"... because her mum died of severe alcoholism, so it causes tension within her whole family, not just her relationship. That's when I talk to her and say well [your partner] is not your mum. And just because he has three beers watching a football doesn't mean it's going to turn into 20 beers a day. Her partner is very good and does understand, and sometimes it's actually easier if I speak to him, and say, you know, you need to understand, she has experienced a lot of trauma her whole life and this is how it has manifested and maybe you would be better to go to your friends and come to some sort of compromise."

PEW interviewee

This lack of trust remained even during non-drinking periods. Once feelings of distrust around behaviours associated with drinking had arisen, the distrust filtered into the relationship more generally. Many participants felt that the trust could only be rebuilt if their partner was to stop drinking altogether for a long period of time. Many participants dealt with this lack of trust by

partially withdrawing from the relationship and putting in emotional barriers as to not rely on, or be disappointed by their partner.

"You have that frame of reference, and it becomes hard to work out, kind of where the truth is? And this isn't about him necessarily being abusive or nasty or anything like that. It's just kind of, you're in a state of confusion a lot of the time and I think that it's that, when we're talking about the impact on me, that's the thing."

Interviewee 2

b) Lack of intimacy and connection

Participants reported that intellectual and emotional connection, and intimacy, between themselves and their drinking partner is often poor. Many felt that their emotional needs are not met by the drinking partner, due to them being unavailable as they are "caught up in their own chaos" or because participants chose to close down emotionally as a way of coping with their partner's situation. PEW agreed that it was more common to see people putting up emotional boundaries, or dissociating from the relationship, than to see heated arguments and conflict, though this did also happen as a result of partner drinking.

"The effect it had [partner drinking], it soon came to be upper most in my mind, constantly, all the time. So, there was tension and anxiety, and because it's a sort of elephant in the room, I mean you feel like you can't be going on about it all the time, that you quickly get a barrier. You know you're quickly not speaking your mind because if you spoke your mind, you'd be talking about the problem of the alcohol all the time. So, the relationship does sort of deteriorate from there, really."

Interviewee 4

"You know, people have used the term Jekyll and Hyde, but that doesn't really capture it because Jekyll and Hyde are very kind of different characters. But, it's like alcohol brings out his worst character traits, but he's not a completely different person if that makes sense? So, like I say, it's not that he has a drink and suddenly changes character. And I know that may be the experience for some people, but it hasn't been the experience for me. But there are some of those subtle changes that are still significant, and difficult to navigate. And the biggest impact is the impact it has on your connection and on the quality of the relationship you have with one another."

Interviewee 2

The "Jekyll and Hyde" analogy^[1] was used by many participants, who felt like their partner became a different person when they were under the influence of alcohol and found this hard to marry up with the person their partner is when they are sober. This contributed to feelings of confusion and a lack of underlying trust in the relationship.

Other participants, particularly those whose partner drank less frequently but had binge episodes, said that, in general, their relationship was good and they felt that intimacy with their partner had not been affected. However, they still felt an underlying sense that they could be let down by their partner at any moment, contributing to a general lack of trust in the relationship. Some participants reported that feelings of sexual attraction towards their partner were lost or dwindling as they had taken on more of a carer role, or they had lost respect for them due to their actions whilst intoxicated.

c) The drinking partner's perceived awareness of their drinking and its impact on the relationship

Most of the interviewees felt like they could, to some extent, talk to their partner about their alcohol use and the fact that it concerned them. It was much more common for participants to do this when they first realised that their partner had an issue. However, many said that when they did not see a behaviour change, they stopped broaching the topic with their partner as much, as felt that the conversation was pointless or led to unnecessary conflict. Some said they avoided talking about alcohol when their partner was not drinking in excess, because they wanted to enjoy these calmer periods with their partner and not be reminded of the struggles associated with their partner's drinking.

The receptiveness of partners to agree or admit that they were struggling with their alcohol use or using alcohol in a way that impacts their partner was mixed. Many underplayed the amount of alcohol that they consumed and the effects it had on themselves and the participant.

"He would never actually say he was an alcoholic or addicted to alcohol. He would go so far as to say, I have got a bit of an issue or I need to cut down a bit, but he would never admit he was drinking to such a degree. It was 'never that much' when in reality it was one to two litres a day. A bit much is an extra pint on a Friday, not 1-2 litres a day."

Interviewee 1

Some partners admitted they had an issue, but most were not able to change their behaviour, and this frustrated participants.

"He would say the words, but not change the behaviour."

Interviewee 8

1. Jekyll and Hyde refers to someone having a dual personality, one side of which is good and the other evil. The origin of the phrase comes from Robert Louis Stevenson's *The Strange Case of Dr. Jekyll and Mr. Hyde* (1886).

Two of the interviewees whose partners drank alcohol less frequently but occasionally engaged in a multi-day binges said that their partners were less receptive to admitting they may have an issue. The participants felt unacknowledged, and terms like 'gaslighting' were used to describe how they felt not having their concerns taken seriously by their drinking partner.

"He tells me to stop being such a fun sponge, saying he is only having fun with his mates. He just thinks I am always nagging him and that he doesn't have a problem."
Interviewee 7

"He made me feel like I was irrational for worrying and told me that his drinking was normal."
Interviewee 5

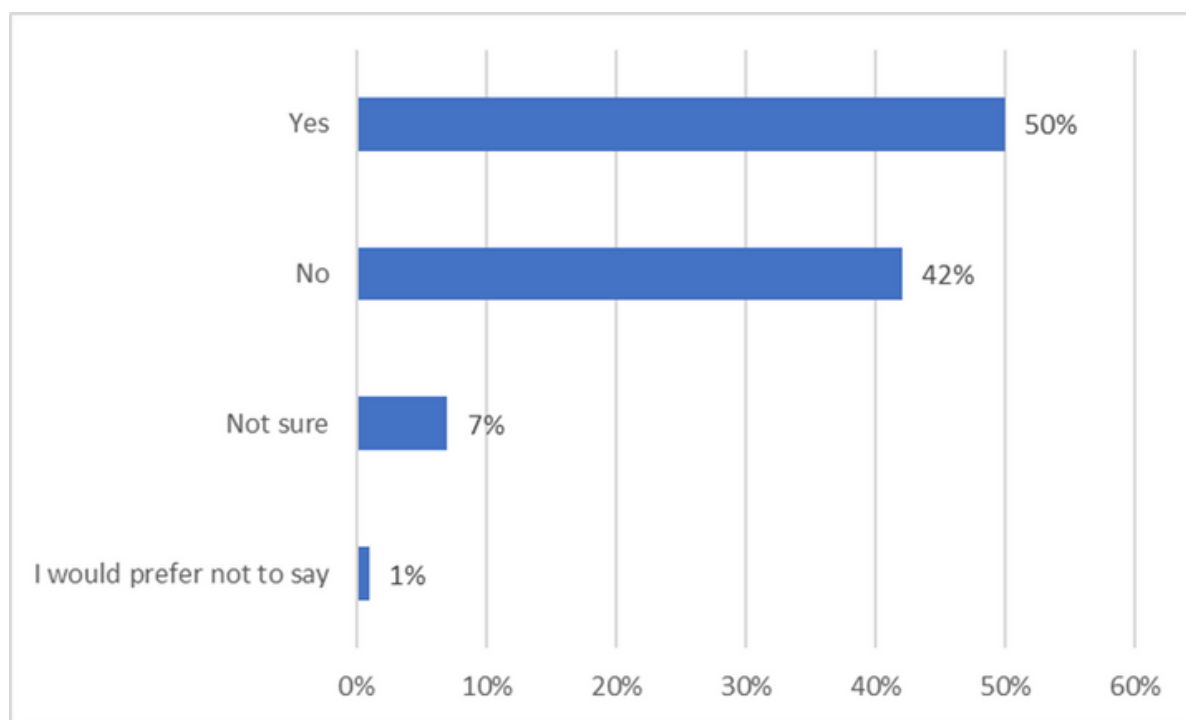
Results from survey respondents were also mixed as to whether participants felt like they could talk to their partners about their drinking and why it concerned them. 42% felt they could not and 50% felt that they could.

d) Conflict and tension in the relationship

Unsurprisingly, all of the practical, emotional and relational impacts mentioned above lead to and create conflict and tension; indeed, almost all survey respondents (92%) reported conflict or tension related to their partner's alcohol use. Over half (57%) said that their partner's drinking caused arguments or tension a lot of the time, and 35% said it caused tension sometimes.

Conflict and tension was explored in more depth with interviewees. Some reported that their partner's drinking caused conflict and tension within the relationship. What was more common, however, was a general state of dissociation or withdrawal from the relationship from both parties. Some participants also felt that it was hard to bring up issues or behaviours that occurred when the partner was drinking during periods of non-drinking. This led to underlying issues that remained unresolved and slowly eroded the relationship.

Conflict/ tensions surrounding the alcohol use tended to ease over time as participants



n=104 Figure 5: 'Can you talk to your partner about their drinking and why it concerns you?'

became more accepting of the reality and put their own coping boundaries in place. Interviewees who had more recently become concerned about a partner's drinking reported higher levels of conflict and tension. Interviewees who had been living through their partner's drinking for a longer period of time had often resigned to a sad state of acceptance, which reduced the amount of conflict and tension that was played out.

"Before, it was source of conflict, it really upset me, that he wasn't able on that occasion to prioritise his children and his family over his desire to drink. I think back then, I saw it much more of a choice he was making. Whereas now, I don't, I wouldn't expect that now because I know I would be disappointed."

Interviewee 5

Instead, they tended to dissociate from the relationship, or implement emotional boundaries in order to prevent themselves feeling let down. This, however, did tend to contribute to feelings of isolation and a lack of intimacy and connection in the relationship. PEW confirmed that this was common.

e) Relationship breakdown

For some participants, eventually leaving the relationship was the only option and 38% of survey respondents reported that they were no longer in a relationship with their partner. Of those respondents who reported their relationship ending, 92% said it ended due to their partner's drinking. This suggests that if partner drinking had been resolved, the relationship may not have come to an end. Many of those who reported leaving their relationship said they did it because the impact on themselves and their children was significant.

"To feel free which will help me to survive

and in turn help our children to thrive."
Survey respondent

"Essentially left to bring up children by myself and shield them from partner's unpleasant and damaging behaviour."

Survey respondent

Three of the eight participants who were interviewed had ended their relationship as a result of their partner's alcohol use and the associated stress. These were all people who were in relationships with people who were reportedly drinking a severe amount of alcohol on a regular basis, who had tried and failed to engage with support multiple times, and whose issues were causing them financial difficulties. All three of these partners had associated health implications due to their drinking, and two of these partners had sadly passed away.

"And sadly, I had to leave my marriage 6 months before he passed away because of the drinking and I just could not live under the same roof as him anymore. Not because I didn't love him or care about him anymore but for my own sake."

Interviewee 1

These three participants had the common experience of feeling like they could do nothing more to help their partner. They felt as though they needed to leave the relationship in order to put themselves first and take control of their lives. Two of the three participants remained in contact with their partner and still maintained a caring role to a certain degree, although they were formally separated. One participant cut ties completely, as they felt this was the only way to regain some control over their own life. This participant was a lot younger than the other two (in her 30s as opposed to over-65). All felt an overwhelming sense of responsibility towards their partner, even once the relationship had ended. Both participants whose partners had

subsequently passed away, were still deeply affected by the situation, despite being in new relationships.

Other participants felt that ending the relationship was not an option for them. For some, this was because they were worried their partner would not cope without them. For others, it was because they felt that, aside from the drinking, their partner did have many positive qualities and they did not wish to end the relationship. This added a general sense of confusion and stress to many participants, as it was hard to combine both versions of their partner into one reality.

"I could tell you all about the kind of unacceptable behaviour and undesirable qualities he has when he's drinking ... but you know, he helps around the house, he has so many good qualities, that's why I don't just leave... it's like to do that would be to ignore all of the positives that he brings to the relationship."

Interviewee 5

3.3 Experiences of, and barriers to, seeking support

Support services can play a vital role in supporting those affected by their partner's drinking; helping them to improve their own wellbeing, giving them skills and knowledge in how to manage the situation with their partner, and putting them into contact with other people with similar experiences. Over half (53%) of survey respondents indicated that they had sought support for themselves, and it is important to understand why and how people accessed that support, their experiences of it, and the reasons why those that didn't access support.

Reasons for seeking support

Most participants cited mental health implications or reaching a crisis point as the reason for seeking support.

"Because I had a mental breakdown"

Survey respondent

"Life was falling apart, despair, dysfunctional environment, cultural shame and stigma and community chastisement"

Survey respondent

"I was physically and mentally unwell. I was sad and unable to fully function. His drinking became progressively worse; so did my emotional, physical and mental health."

Survey respondent

For many, there were specific incidents that led to them realising external support was needed:

"Physical injury caused by ex-husband when he was drunk."

Survey respondent

Many tried to cope on their own or by turning to family and friends, before realising that they needed professional support:

"I just couldn't cope with the verbal abuse from my husband and it was causing me anxiety and depression. This in turn triggered more abuse from my drunk husband as he felt annoyed by my 'distancing' from him to protect my fragile mental health. It was a viscous circle. I needed mental health support from outside of my friendship circle to speak freely without fear of judgement."

Survey respondent

Whilst many participants indicated that they had sought support for themselves, there was a sense that the situation with their



Figure 7: A word cloud of the most common reasons cited for participants seeking support.

partner had reached a particularly challenging point before they accessed that support. The issue of partners not realising that they needed support was raised with interviewees, and all concluded that they didn't see that they needed support for themselves in their own right until long after they had recognised that their partner needed support for their drinking. This demonstrates the need for more awareness of the support that is available for those affected by a partner's drinking, not just those struggling with drinking themselves.

The family support worker PEW said that people generally self-referred into their service when they had reached crisis point, or were referred in after an incident involving another service, for example the police.

The relationship research lead noted that she commonly saw couples self-referring for support in their relationship, and the fact that one was struggling with alcohol was picked up later down the line.

Experiences of support

The type of support that participants had accessed was varied, and their experiences were mixed. Of survey respondents, GPs, counselling services and peer support groups were the most commonly accessed. However, over 40% of respondents had not accessed any support at all, either because

it was not available or because they did not know it existed.

Survey respondents also noted that they had received support from an ethnic minority specialist recovery organisation, private Facebook groups and employee assistance programmes through work.

For many interviewees, the GP was the first service they engaged with, but most found them largely unhelpful. They also experienced stigma from GP services and a lack of understanding of the role of a partner and the effects drinking can have on a relationship.

"So that is not a choice, it is a mental illness with a physical manifestation, but no one ever saw it like that. They saw it as this man likes drinking two litres of vodka a day, what a bum. Oh, you're an idiot for staying with him, get on your way. That was the kind of attitude with doctors and everybody."

Interviewee 1

"I found the doctor to be not very sympathetic, a) to his addiction and him, and b) also to me – I had severe mental health issues as a result of living there and trying to deal with that, trying to earn a living, all that stuff on my own pretty much. The doctor would sign me off for a week and then send

me back to work, but that just doesn't cut into anything whatsoever."

Interviewee 1

Participants found that because they were in a relationship with someone who was drinking problematically, rather than, for example, a parent of someone who is affected, they experienced a particular kind of stigma from services. They often felt that they were being judged for choosing to remain in the relationship.

Those who had accessed support had waited until they were at a crisis point and not coping. Many wished they had accessed support earlier, but said they were not ready then.

"Theoretically you say well yes [I wish I had accessed support earlier], but you've got to be ready. You've got to have reached a certain point for it to be any good."

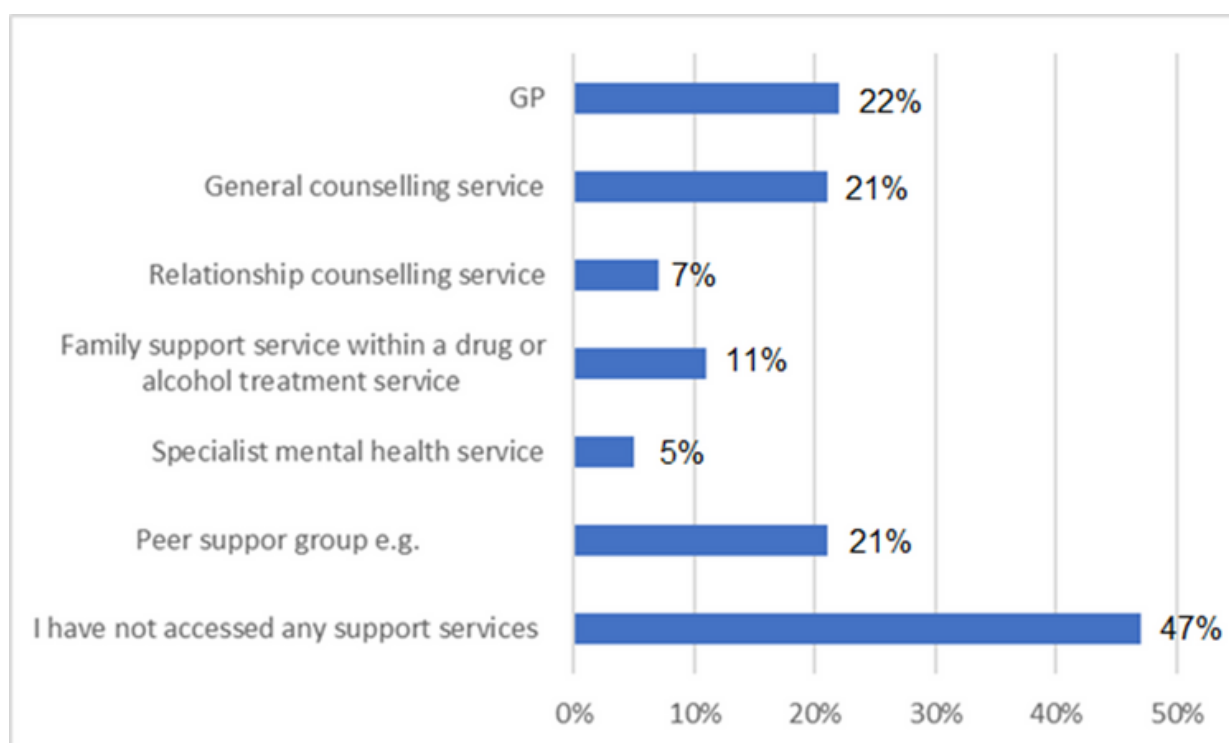
Experiences of support were very mixed and

demonstrate the need for a variety of different support styles and options, at varying parts of the affected other's 'journey'. Some participants had very positive experiences of peer support groups and found talking to others in a similar situation very beneficial. A few had become very active members of their peer support groups, which they found had given them a 'new purpose' in life.

"First thing I found was, everyone there, even though everyone's situation was completely different, everyone there, gets it. They've experienced the individual situations, the emotional rollercoaster, the chaos, that you've gone through, so they can relate totally to you."

Interviewee 4

Other participants were very clear they did not want their lives to be defined by the issues. Some found certain types of peer support "too religious" or "too cliquey" and preferred the privacy of one-on-one



n=100 Figure: 8 'Have you accessed support for yourself from any of these services because of the effects of your partner's drinking?

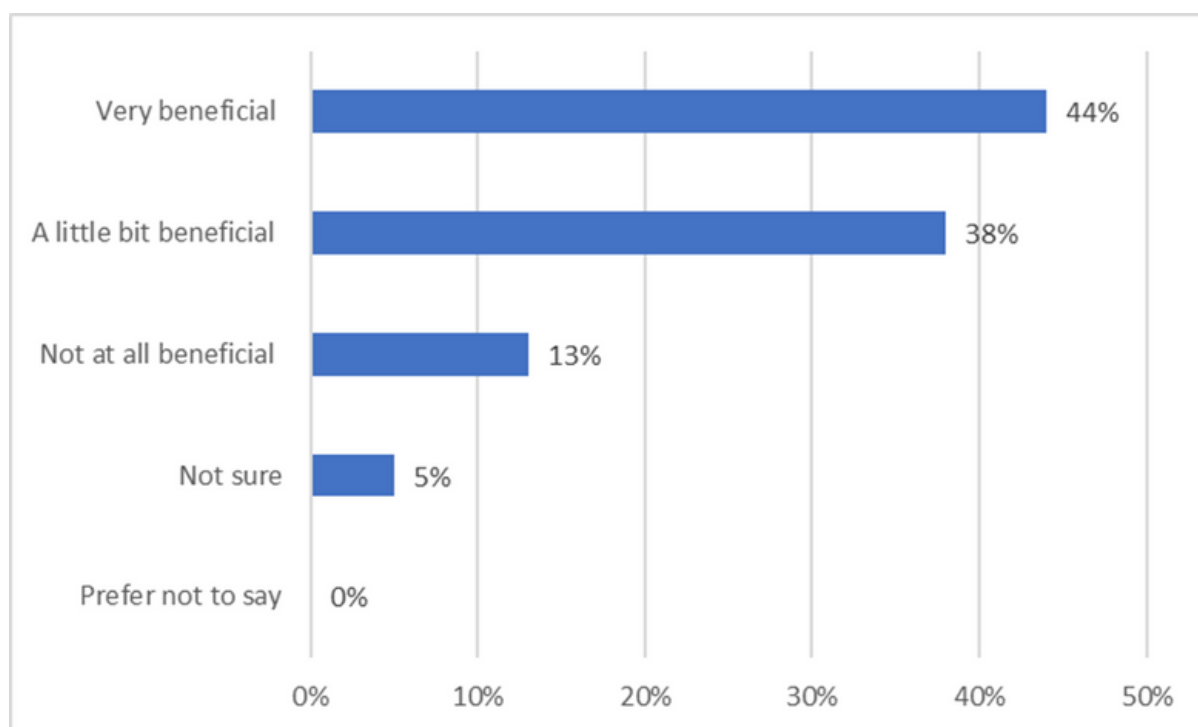
support. Many found a mixture of group and individual support preferential.

Some of the family support workers said that they saw trends in the type of support people preferred depending on the affluency of the area. People from more affluent areas tended to be more private and often preferred discreet online support. They also noted that people from more affluent areas who are struggling are harder to reach in the first instance.

"There are fewer self-referrals because there is more stigma in [the more affluent area]. Even being seen with you; in [the less affluent area], they are like skipping along the road with you, holding your arm, whereas in the [more affluent area] its very hidden, and that's where COVID made it difficult because I couldn't go round to their houses. They don't want to be in a café, it was very difficult. They maybe have more IT so more

happy and comfortable doing Zoom, whereas in [the less affluent area] they want to physically see you and speak to you." PEW interviewee 1

Figure 9 shows that the majority of those accessing support did find it beneficial, with 82% of survey respondents reporting that they found the support a little, or very beneficial.



n=56 Figure 9: How beneficial do you/ did you find this support?

Barriers to seeking support

The most common reason for survey participants not accessing support was because either they did not know where to find support for themselves (38%) or did not know that they needed it (30%). This suggests that support needs to be more readily available and accessible for those who feel affected by their partner's alcohol use. 21% felt they did not need support for themselves, though by answering the survey have identified themselves as being negatively affected. Many of these people sought other coping mechanisms which are explored in the next section.

Many of the interviewees spoke of not feeling as though they fit the profile of someone who should be affected by a partner's alcohol use. Several did not feel that their partner's alcohol use was severe enough to warrant them needing support in their own right. Many said they would not feel comfortable going to a drug or alcohol service as their partner was "not an alcoholic".

"I think there's so many misconceptions about alcohol misuse and there are stereotypes out there that and don't get me wrong some of them are people who misuse alcohol who are aggressive and violent and you know, abusive, but not everybody that misuses alcohol is like that. I think they're really unhelpful stereotypes because you feel like if you then ask for help, or seek support for it, that people are going to jump to conclusions that, you know, you're being physically, or verbally abused on a regular basis and that hasn't been my reality."
Interviewee 2

Professionals, like this family support worker, spoke of the importance of outreach work being built into the service, in order to attract those who need support.

"We did a lot of work when we first started the project, went out and did team meetings got really involved with the local community policy officers. I went in and presented to headteachers, pastoral support, went round all the community centres, spoke at lots of different local groups, like mothers and toddlers ... groups for young parents and there was quite a lot of people there who had partners who were worried."

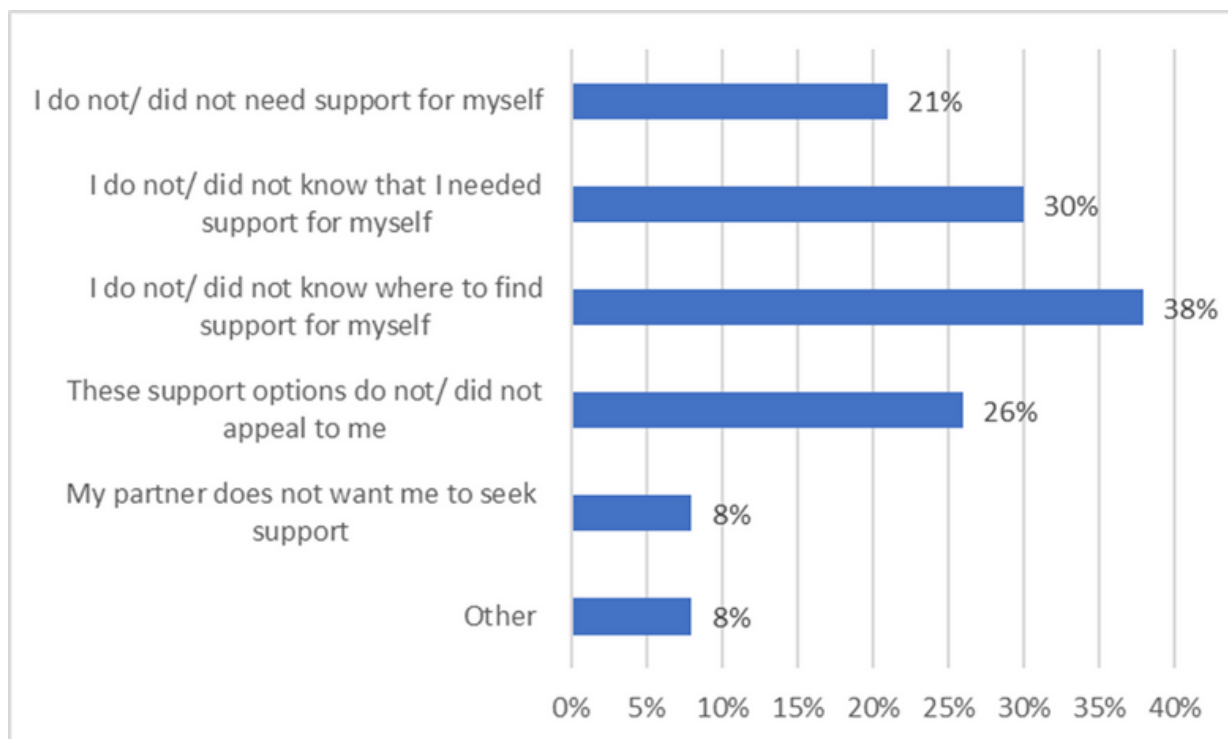
PEW interviewee

They also highlighted that often people in a relationship with someone drinking at higher risk levels can have low confidence and self-esteem. This means they are less likely to seek support for themselves, indicating that outreach work is even more important.

"I think that's because a lot of the time, people using drugs and alcohol pick vulnerable people to be with, who wouldn't speak out and seek out support. And that's one of the things that we do find that the people at home are quite vulnerable and they don't feel confident enough in themselves to go out and seek support. So, it's taken maybe quite a significant incident to get support, like the police being called."
PEW interviewee

Professionals also said that often the person using alcohol may dissuade their partner from seeking support, as they do not recognise they have a problem.

"I think the issue can be that the partners misusing alcohol don't want them to access the services or support. They don't want to admit they've got a problem, it's under control so why would you want to get support ... It's like 'I don't have a problem so why would you need support.'"
PEW interviewee



n=47 Figure: 10 'What is the reason you did you not access support from any of these services?'

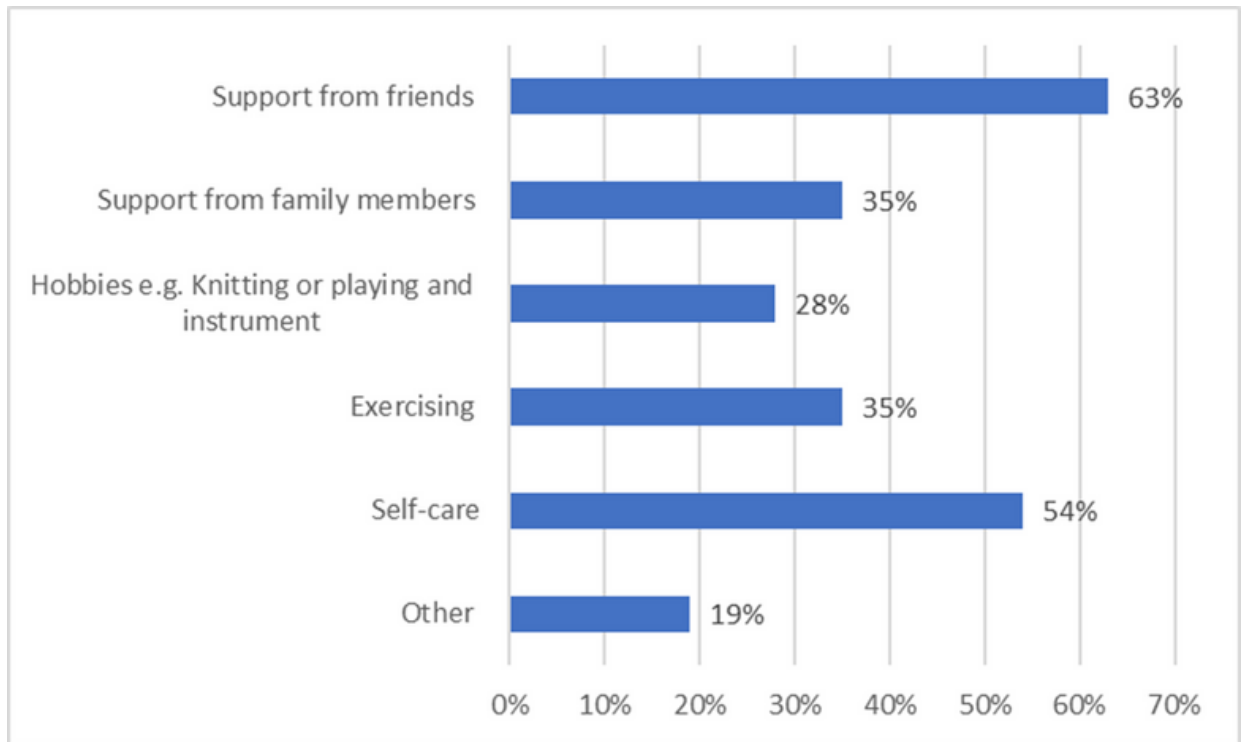
As all interviewee participants were white British, this study did not explore cultural barriers to services in significant depth. However, this is an important issue that was raised by professionals, and should be addressed in future research.

survey respondents said that they did drink in order to cope with the effects. This is a significant amount which should be explored in further research.

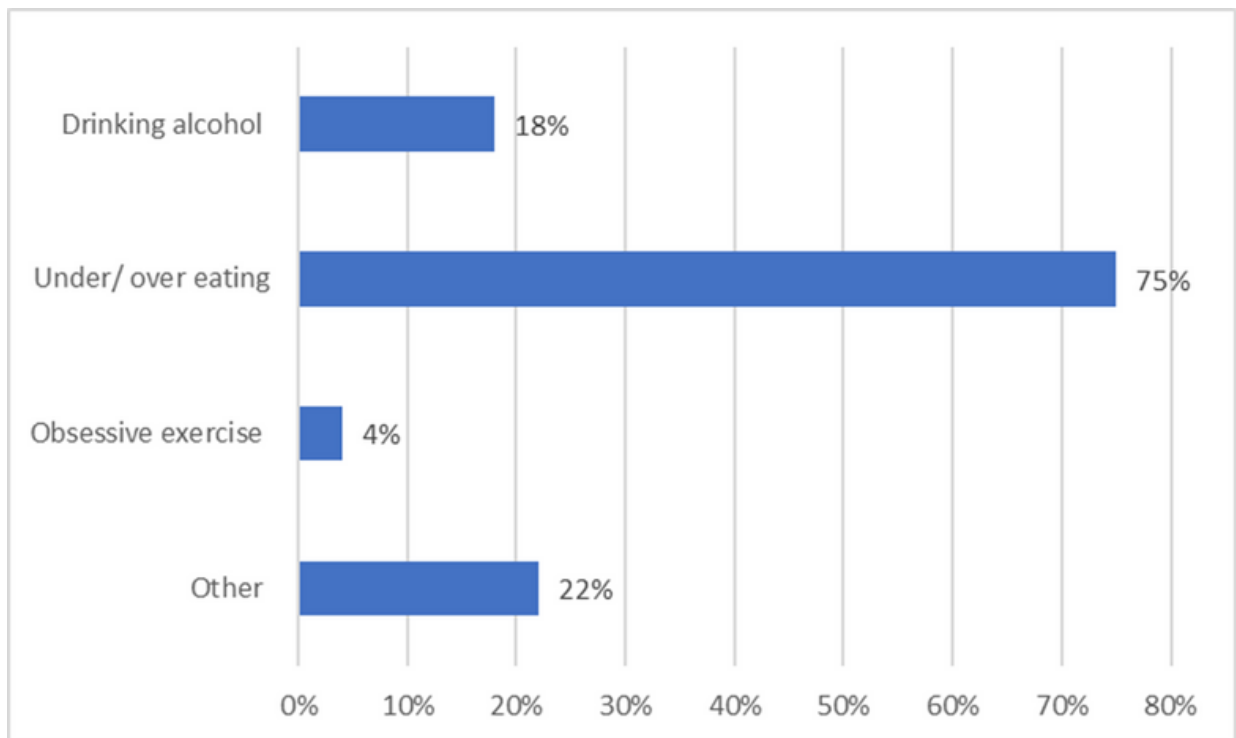
Other coping strategies

Yoga, mindfulness, exercise and creative therapies were cited as popular ways of coping or as an escape for participants. This again highlights the importance of varied support options for people.

Binge eating was the most commonly cited unhealthy coping strategy, and this was confirmed by PEWs. None of the interviewees said they turned to alcohol as a result of stress – if anything their partner's alcohol use actually deterred many of them from consuming alcohol. However, 18% of



n=96 Figure 11: 'Do you use any other coping mechanisms to deal with the effects of your partner's drinking?'



n=65 Figure 12: 'Do you use any other coping mechanisms that you consider to be unhealthy?'

CHAPTER FOUR:

Recommendations:

RECOMMENDATIONS FOR LOCAL SUPPORT SERVICES

1. That local support services are visible and available to those affected by their partner's drinking

An overwhelming finding was that those who are negatively affected by their partner's drinking often do not know that they themselves are in need of or eligible for support in their own right. When they do finally seek support, this is usually when a crisis point has been reached. Support services need to ensure that they are visible to partners affected in this way and actively reaching these people before a crisis develops.

Support provision should be made available for people who are partners of non-dependent drinkers, but are still affected by

their alcohol use. Many did not feel that they could access support as their partner's drinking was not serious enough.

2. That professionals in non-alcohol treatment services are upskilled to recognise those struggling with their partner's alcohol use

Many participants reported seeing their GP as a first point of contact but did not feel that they understood the extent to which they could be affected by their partner's drinking. Worse, some felt judged for staying in a relationship with a partner who is drinking problematically. The government should develop training and resources, particularly for non-substance use sector services, such as GPs and relationship

counsellors, to recognise the impact of alcohol on families and in particular where alcohol is featuring in a partner relationship. This will give professionals the necessary skills and knowledge to help sensitively and signpost to specialist services.

Some people prefer to access support through relationship counselling services, mental health services or employee assistance programmes, and the wider availability of training of resources for these practitioners will ensure they are aware of the effects of partner drinking and can intervene early.

3. That support options for partners are varied – one size does not fit all

Local authority commissioners should note that support for families affected by substance use, including those affected by their partner's drinking, needs to be varied. Many find peer support groups extremely beneficial, but these do not suit everyone and some prefer the privacy of one-to-one support. Some prefer to access support in person, whereas others prefer online support or to use an app.

Furthermore, the government should provide sufficient funding so that a variety of support options can be made available, and to put an end the postcode lottery so that support for those affected by a loved one's drinking is consistent across the country.

RECOMMENDATIONS FOR GOVERNMENT POLICY

1. That the Government should extend the Reducing Parental Conflict Programme to focus on drinking

The Government has presented compelling evidence around the impact of conflict between parents on children and mental

health and long-term life chances.

The use of alcohol as a coping mechanism amongst parents during Changes in life stages, such as retirement, parenthood, children leaving home or changing jobs can be a major trigger of more conflict between partners and drinking within a relationship. More awareness of this in policy, and greater availability of mental health support to support these life changes may provide further help for people using alcohol as a coping mechanism.

2. That the Government takes measures to reduce the centrality of alcohol in society

As mentioned, many participants in this study alluded to the feeling that alcohol was everywhere and how heavy drinking in social, sporting or professional settings was normalised. Population-based prevention policies tackling the affordability, promotion and availability of alcohol are the best ways to reduce overall alcohol consumption and thus harm, and also to move away from an environment where everything is so focused on alcohol. This study therefore supports the Alcohol and Health Alliance (AHA)'s calls to:

- Introduce restrictions on alcohol advertising in the media, including restrictions on sponsorships and activities targeting young people.
- Protect children from exposure to alcohol advertising.
- End alcohol sponsorship of professional sport.
- Ensure marketing regulations are entirely independent of the industry and supported with full legal powers.

3. That the Government consider the efficacy of a public awareness-raising campaign on how alcohol can affect relationships

There needs to be more awareness amongst the general public that their partner does not have to be dependent on alcohol or considered an 'alcoholic' for them to be affected by their partner's behaviours around drinking. Binge drinking is normalised by UK society, and alcohol features in social, professional and sporting settings. This means that individuals who are affected by their partner's drinking often do not feel as though they can speak out or seek support, or even recognise that they may need to.

An effective public awareness raising campaign that normalises partners having conversations around heavy drinking and binge drinking would help ensure that the effects of these behaviours are not downplayed or normalised. Workplaces, sports industries and entertainment venues need to recognise their responsibilities and take steps to encourage responsible drinking in society. Stigma was also a huge barrier to people accessing support. A public awareness campaign that normalises the conversation about the implications of drinking on relationships will help address this.

Recommendations for further research

1. Understanding the effects of problematic drinking in LGBTQ+ relationships

Nearly all participants in this research study were in heterosexual relationships. Further research should be done to understand the effects of alcohol on couple conflict in LGBTQ+ relationships, and their experiences accessing support services.

2. Exploring the barriers faced by people drinking in ethnically diverse relationships

This research study was limited in the ethnic diversity of participants. A small proportion of participants were non white, and one respondent reported the positive outcomes of accessing a culturally specific service.

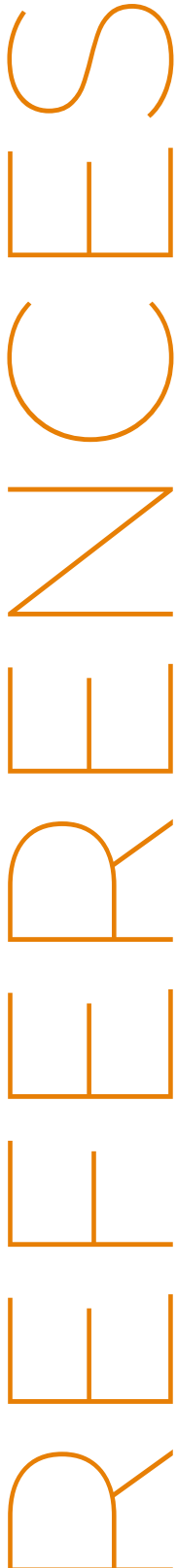
More research should be done to explore the challenges and barriers faced by those in ethnically diverse relationships where alcohol features.

3. Further exploration of gendered trends around drinking in relationships and access to support

Gendered trends around drinking in relationships and access to support should be explored in more detail. This includes whether women are more likely to be affected by a male partner's drinking, and whether men's drinking is likely to be more problematic and impact on relationships. As the majority of participants in this study were female, it is not possible to draw that conclusion here.

4. Understanding the extent that those impacted by their partner's drinking turn to alcohol themselves as a coping mechanism

The scale of the people affected by their partner's drinking turning to alcohol themselves as a means of coping with the negative effects of this problem should be explored in further detail. In this study almost one in five (18%) survey respondents indicated that they had turned to alcohol as a coping mechanism. This could be expanded to more broadly include the drinking of other family members negatively affected by their loved one's drinking, also an under-researched area.



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ACKNOWLEDGEMENTS

We would like to thank the members of the Alcohol and Families Alliance (AFA) steering group for their assistance with this report.

Further input and support was provided by colleagues at Adfam, Alcohol Change UK and the Institute of Alcohol Studies

We would like to thank all of the participants who shared their experiences and the professionals who took part in interviews.

If you are affected by any of the issues captured in this report, please see the support organisations listed below.

Alcohol

Alcohol Change UK

A leading UK alcohol charity with online information, guidance and facts to help people with their drinking.
alcoholchange.org.uk

Drinkline

Advice to those worried about their own, or a loved one's, alcohol use. Contact their free helpline on 0300 123 1110 (weekdays 9am – 8pm, weekends 11am – 4pm).

If you live in Wales, you can also contact the DAN 24/7 free helpline on 0808 808 2234, or text DAN to: 81066.

Families

Adfam

National charity for families affected by alcohol and drugs, with online information and guidance available.
adfam.org.uk

Al Anon

Support groups to anyone who is, or has been, affected by someone else's drinking and a free telephone helpline on 0800 0086 811.
al-anonuk.org.uk

DrugFAM

Support to families affected by and bereaved through drugs and alcohol. Free helpline from 9am-9pm, 7 days a week on 0300 888 3853.
drugfam.org.uk

National Association of Children of Alcoholics (NACOA)

Charity providing information, advice and support to anyone affected by a parent's drinking. Free helpline on 0800 358 3456
nacoa.org.uk

Scottish Families affected by Alcohol and Drugs (SFAD)

Charity that supports anyone concerned about someone else's alcohol or drug use in Scotland. Helpline open 9am - 11pm on weekdays on 08080 10 10 11
sfad.org.uk

Relationships

One Plus One

Relationship research and innovation charity, including online relationship support.
oneplusone.org.uk

Relate

A charity offering advice and support for all types of relationship.
relate.org.uk

Domestic Abuse

National Domestic Violence

Helpline

0808 2000 247
24 hour helpline operated by Women's Aid and Refuge.

Galop

0800 99 5428
National helpline for LGBTQ+ people experiencing domestic violence.

Men's Advice Line

0808 801 0327
The Men's Advice Line is a confidential helpline for all men experiencing domestic violence by a current or ex-partner.

Samaritans

If you are looking for urgent support please contact the Samaritans, who are available 24/7 on 116 123 or
jo@samaritans.org.



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