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Research paper

Alcohol use and happiness among retired Finns living in Spain compared to those in Finland



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ABSTRACT

Background: Many retired people spend part of their winters in southern Europe. Little is known about their lifestyle or psychological well-being.

Aim: We investigated alcohol use and feelings of happiness among retired Finns living in Spain compared to those in Finland.

Methods: A questionnaire was answered by people 65–75 years in Espoo, Finland ($n = 562$) and in Andalusia, Spain ($n = 261$). The questionnaire enquired about demographics, psychological well-being and use of alcohol. We used the American Geriatrics Society definition for at-risk alcohol consumption. **Results:** The Finns living in Spain had a better education, higher income, better self-rated health and more often lived with a partner than their counterparts in Espoo. Of females in Spain, 89% used alcohol and 16% were at-risk users, whereas the respective figures in Espoo were 71% ($P < 0.001$) and 6% ($P < 0.001$). A larger percentage of females in Spain (97%) felt happy compared to those in Espoo (88%) ($P < 0.001$). These differences were not found among men. In logistic regression analysis adjusted for age, income, place of residence, self-rated health and marital status, moderate alcohol consumption was associated with happiness among females (OR 3.35, 95% CI 1.65 to 6.80) whereas at-risk consumption did not. Among males, alcohol use was not associated with happiness. Low income and poor self-rated health were inversely associated with at-risk drinking.

Conclusions: A larger proportion of Finnish females aged 65–75 living in Spain use alcohol and are at-risk drinkers compared to those in Finland. Moderate use of alcohol is associated with better psychological well-being among them.

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1. Introduction

Of Finns aged 65 or older, more than half of females and three-quarters of males use alcohol [1–4]. Recent decades have seen increased alcohol use among retired people [5]. Research into this issue has mainly highlighted the negative impacts of alcohol use among these people [6,7], although certain possible health-promoting effects have also been suggested [8–11]. However, people with increasing age are sensitive to the effects of alcohol, disease and multiple use of drugs [1,12]. Alcohol use in particular may put people living with frailty at risk for falls and fractures [1].

Andalusia in southern Spain has been a very popular location for retired people to spend their retirement. Its largest group of foreign residents is from England [13]. Close to 25,000 Finns are

estimated to be living in Andalusia as well. These foreigners constitute large socially and economically active communities in southern Spain, and have a great impact on the Spanish economy [14]. As elsewhere in the world, foreign residents tend to be socially connected with each other, which enable them to maintain their own cultures and habits [15]. Many societies, restaurants, clubs, churches, courses and hobbies are available for retirees in Spain. A “healthy migrant hypothesis” suggests that migrants are usually healthier than those who stay, but also controversial results have been published [16]. However, those who decide to move face a number of challenges, and need to be quite flexible psychologically to succeed. Spanish alcohol culture is very different from the traditional Finnish manner, which is more binge-oriented and features less wine drinking [15]. In Spain, people mostly use wine when having meals, as in Finland, wine drinking is not so common as use of stronger spirits. Binge drinking is more common in Finland compared to Spain, where being cocked is regarded inappropriate.

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All over the world, retired people are choosing to live in sunnier climates [13–15,17]. Also cheaper living costs may be a reason for moving to Spain [15]. However, their lifestyles, alcohol use and psychological well-being have received little attention in research. We investigated alcohol use, psychological well-being and associated factors among Finns aged 65–75 years in Andalusia, Spain, in comparison with those in Espoo, Finland.

2. Participants and methods

A structured and validated questionnaire with identical items [18,19] was delivered to residents 65 years of age or older in Espoo (2007) and Andalusia (2011). Espoo is a mid-sized, relatively affluent city in the Helsinki metropolitan area. The questionnaire was delivered by mail in Espoo. In Andalusia (the Costa del Sol area including Benalmadena, Fuengirola, Malaga, Marbella and Torremolinos), the questionnaire was delivered by hand, due to the possible unreliability of the postal service, and only to persons residing in Spain at least two months a year. A total of 500 questionnaires were delivered in Andalusia through Finnish churches, Christmas sales, pubs, concerts, lectures, Spanish-language study groups and doctor's offices, as well as in buses and on the street. The participants were informed of the two inclusion criteria (age 65 or over, residence in Spain at least two months per year) before receiving the questionnaire. The questionnaires were returned to closed postal boxes in places where Finns tend to gather. The boxes were emptied weekly by one of the researchers (MMR). The response rate was 62% in Spain. The Espoo sample comprised 2100 persons whose names were chosen at random from the population registry [3]. The response rate was 71.6% in Espoo. We focused on people aged 65–75 years because they use more alcohol and are more prone to be at-risk drinkers [4]. Members of this age group are also more likely to live for periods of time abroad, whereas those with disabilities often return to their native country.

We used items from Alcohol use disorders identification test (AUDIT) to explore participants' drinking habits [20]. We defined at-risk drinking according to the American Geriatrics Society guidelines for alcohol use in older people:

- consuming >7 drinks weekly;
- >5 drinks on a typical drinking day or 3;
- >3 drinks several times per week [21].

We defined moderate drinking as alcohol use at least once a month and not reaching the at-risk limit, and those who used less than one drink in a month, were defined as non-users. In both countries, a standard alcohol drink (0.33 mL beer or cider, 12 cL wine or 4 cL strong spirit) consists of 12 grams of alcohol.

Demographic information (age, gender, marital status, education, self-reported income) was requested. Self-rated health was inquired about with the question: "How do you consider your health at the moment?", with the options being:

- very healthy;
- somewhat healthy;
- somewhat unhealthy;
- very unhealthy.

The responses were coded as healthy (1–2) and unhealthy (3–4). Happiness was inquired about with the question "How happy or unhappy do you feel at the moment?", with the options being:

- very happy;
- somewhat happy;

- somewhat unhappy;
- very unhappy;
- cannot say.

The responses were coded as feeling happy (1–2) and not feeling happy (3–4). According to recent author manuscript of *Lancet*, psychological well-being among retired people, including feelings of happiness, may have even a protective role in health maintenance [22]. Our study question is widely used and validated [23]. Both studies were approved by the ethics committee of the University Central Hospital of Helsinki.

3. Data analysis

The data are presented as means with standard deviations (SD) or as counts with percentages. The comparisons between the groups were made by *t*-test, Wilcoxon rank-sum test, Chi-squared test or Fisher test, when appropriate. In the case of violation of the assumptions (e.g. non-normality), a bootstrap-type test was used. Logistic regression models were used to produce adjusted odds ratios or percentages. A Stata 13.1, StataCorp LP (College Station, TX, USA) statistical package was used for the analyses.

4. Results

Altogether 562 individuals in Espoo responded, whereas the respective figure in Spain was 261. Mean age for both samples was 70 years. Living with a partner was more common in Spain than in Espoo. Those living in Spain were more educated, and reported their income to be higher, than those in Espoo. A larger percentage of females in Spain had good self-rated health (93% vs. 85%, $P < 0.02$) and felt happy (97% vs. 88%, $P < 0.001$) compared to those in Espoo. Alcohol use in general (at least one drink per month) was common among retired Finns in both Espoo and Spain. A larger percentage of females used alcohol in Spain than in Espoo (89% vs. 71%, $P < 0.001$). Such was not found among males (85% vs. 80%, $P = 0.37$). The results also showed a larger percentage of female at-risk drinkers in Spain than in Finland (16.1% vs. 5.5%, $P < 0.001$), whereas among men there was no significant difference (30.3% vs. 26.6%, $P = 0.49$) (Table 1.).

Fig. 1 shows the adjusted percentages of at-risk drinkers among females and males in Spain and Espoo. Among females, the logistic regression analysis associated living in Spain with at-risk drinking: OR 3.05 (95% CI: 1.58 to 5.88; $P < 0.001$) (adjusted for age, marital status, income and self-rated health). Among males, living in Spain was not associated with at-risk drinking: OR 1.21 (95% CI 0.70 to 2.06; $P = 0.50$) (adjusted for age, marital status, income and self-rated health).

Fig. 2 shows the adjusted percentages for feeling happy among females and males in Spain and Espoo. Among females, the logistic regression analysis associated living in Spain with feeling happy: OR = 3.27 (95%CI 1.20 to 8.95; $P < 0.001$) (adjusted for age, marital status, income and self-rated health). Among males, living in Spain was not associated with feeling happy: OR 1.05 (95%CI 0.30 to 3.66; $P = 0.94$) (adjusted for age, marital status, income and self-rated health).

We performed a multivariate logistic regression analysis entering all variables simultaneously. In this model moderate use of alcohol predicted feeling happy among females (OR 3.35, 95% CI 1.65 to 6.80; $P = 0.001$) as did living in Spain (OR 3.04, 95% CI 1.09 to 8.48, $P = 0.034$). There was an inverse association between poor self-rated health (OR 0.20, 95% CI 0.93 to 0.43; $P \leq 0.001$) and feelings of happiness, whereas age, marital status and income did not show an association. Among males, moderate use of alcohol (OR 0.89, 95% CI 0.25 to 3.18; $P = 0.86$) was not associated with

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