



# A study to assess the prevalence of alcohol intake among young adult (18-40years) residing in Solan HP

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## Abstract

Alcohol intake is major problem in world. Many studies show that light to moderate alcohol intake is not associated with adiposity gain while heavy drinking is more consistently related to weight gain. This study is done to assess the prevalence of alcohol intake among young adults (18-40 year) residing in selected villages of oachaghat in year2021. A total of 30 subjects were including in the study. In present study the convenient sampling technique was used to select the sample. The data are collected through face to face interview or assessment questionnaire regarding alcohol intake. The finding of the study reveals that 40% of people on assessed for alcohol intake who belong to rural one which is about 30% & mostly people are graduated about 40% & belong to joint family 70%. Individual who frequently drink moderate amount f alcohol may enjoy a healthier life style in general that may protect them from weight gain. In conclusion, it is reasonable to say alcohol intake may be a risk factor for obesity in some individuals

## Introduction

Alcohol abuse has become a major cause of morbidity and mortality all over the world and India being a developing country, alcohol use has been considered a major public health problem. According to a WHO 2002, alcohol ranks 5<sup>th</sup> has a risk factor globally for avoidable disease measured by disability adjusted life year (DAILY). Heavy alcohol consumption reduces life expectancy of a person by 18-40 years, moreover effecting productivity in developed and developing nation. A recent study high-lighted that in India health loss from alcohol will keep on escalating unless necessary efficient intervention and policy are implemented to reduced its intake.

As alcohol consumption in India as increased in recent decade, it is necessary to now the prevalence of alcohol consumption among the type of consumers so as to launch well plan nation- wide programme for the prevention and control of this cataclysmic social pathology.

## STATEMENT OF THE PROBLEM

A study to assess the prevalence of alcohol intake among young adult (18-40years) residing in selected villages of Oachghat Solan HP in year 2021.

### Objective:

- To assess the prevalence of alcohol intake in selected village of Oachghat.
- To associate the finding of study with socio demographic variables (e.g. age, education, occupation, marital status type of family, history of alcohol intake in family.)

### REVIEW OF LITERATURE:

- **Sarah W** conducted study on effect of alcohol consumption on the adolescent brain. A systematic review of MRI and Fmri study of alcohol youth. A large proportion of adolescents drink alcohol, with many engaging in high risk patterns of consumption, including being drinking. All studies were screened against a strict set of criteria designed to constrain the impact of confounding factors such as co-occurring psychiatric conditions. 21 studies (10MRI and 11 Fmri) met the criteria for inclusion. A synthesis of the MRI studies suggested that over all, AU youth showed regional differences in brain structure as compared with non – AU youth with smaller grey matter volumes and lower white matter integrity in relevant brain area. Alcohol consumption during adolescent was associated with significant differences in structure and function in the developing human brain. Future longitudinal and large – scale studies are critical to replicate the existing finding, and to provide a more comprehensive and conclusive picture of the effect of alcohol consumption on the developing brain.
- **Silver k** conducted study on alcohol use among adults in Uganda: findings from the countrywide non –communicable diseases risk factor cross –sectional survey. There are limited data on levels of alcohol use in most sub-Saharan African countries. We analyzed data from Uganda’s non –communicable diseases risk factor survey conducted in 2014, to identify alcohol use prevalence and associated factors. Of the 3,956 participants, 1,062 (26.8%) were current alcohol users, including 314(7.9%) low end, 246(6.2%) medium end, and 502(12.7%) high end users. A total of 386(9.8%) were classified as having an alcohol- use – related disorder male participants were more likely to be medium – to high-end alcohol users compared to females ; adjusted odds ratio = 2.34 [95% confidence interval (CI)= 1.88-2.91]. Participants aged 30- 49years and those aged 50-69years were more likely to be medium – to high –end alcohol users, compared to those aged 18-29years,AOR=1.49 (95% CI= 1.52-2.84), respectively. The level of alcohol use among adults in Uganda is high, and 9.8% of the adult population has an alcohol –use- related disorder.
- **Robert j** suggested the effects of alcohol on Neuropsychological performance. Adolescence is a period in which cognition and brain undergo dramatic parallel development. Whereas chronic use of alcohol is known to cause cognitive impairments in adult, far less known about the effect of these substance of abuse on adolescent cognition, including possible interaction with developmental processes. Neuropsychological performance, alcohol use, were assessed in 48 adolescent (ages 12-18), recruited in 3 groups: a healthy control group (HC, n = 15), a group diagnosed with substance abuse or dependence (SUD, n = 19), and a group with a family history positive for alcohol use disorder but no personal substance use disorder (FHP, n = 14). More drinks per drinking day predicted poorer performance on Attention and Executive Functional composites, and more frequent use of alcohol intake use was associated with poorer memory performance. These analyses suggest that heavy alcohol use in adolescence leads to reduction in attention and executive functioning and use exerts an

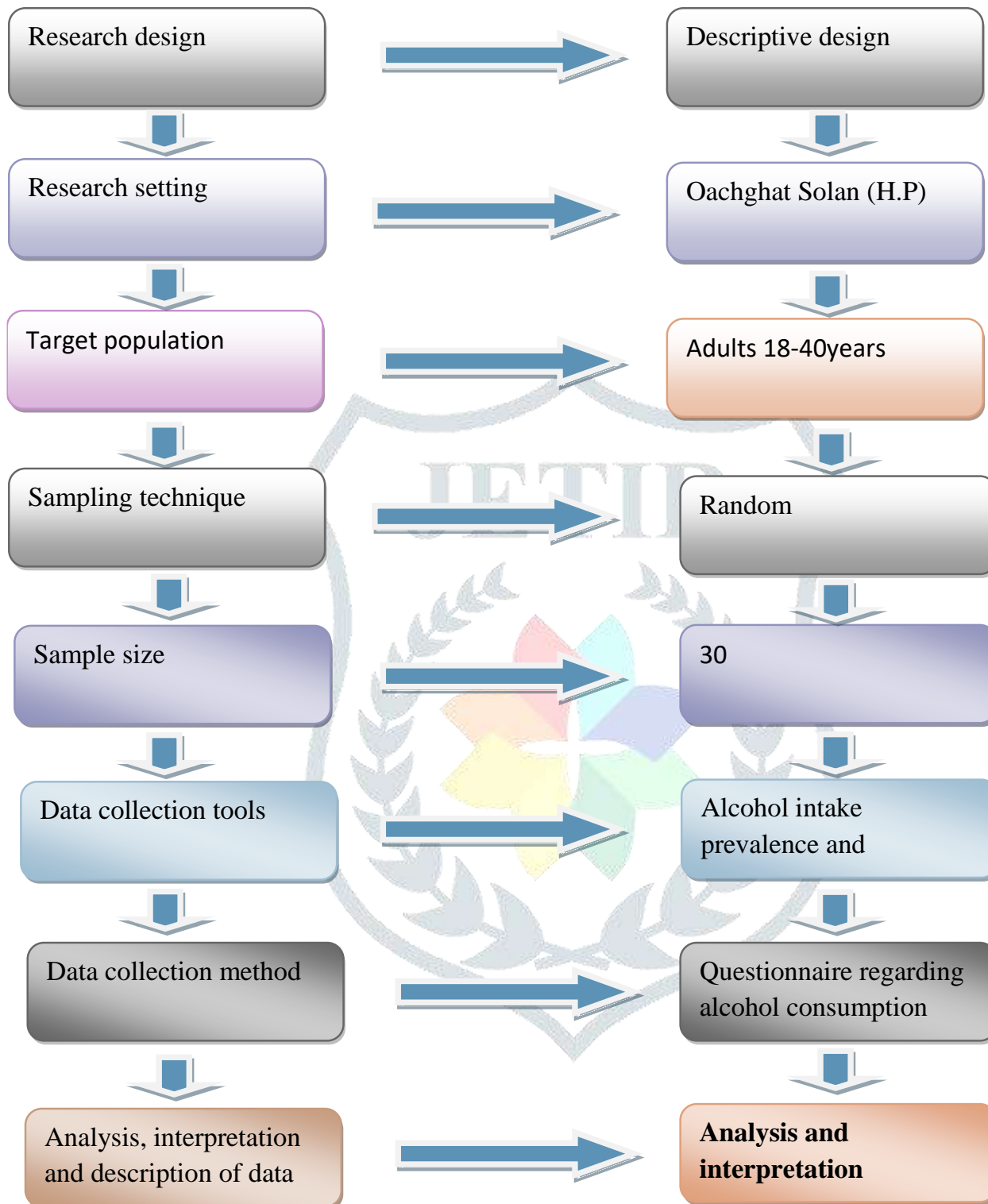
independent deleterious effect on memory. At the same time, premorbid deficits associated with family history of AUD appeared to be specific to Visuospatial Ability.

- **Brian G Williams** suggested association between alcohol use and risk of tuberculosis. It has not been established to but extent this association is confounded by social and other factor related to alcohol use. The objective of this study was to systematically review the available evidence on the association between alcohol use and the risk of tuberculosis. The pooled relative risk across all studies that used an exposure cut – off level set at 40 g alcohol per day or above, or defined exposure as clinical diagnosis of an alcohol use disorder, was 3.50 (95% CI: 2.01 -5.93). After exclusion of small studies, because of suspected publication bias, the pooled relative risk was 2.94(95% CI: 1.89-4.59). The risk of active tuberculosis is substantially elevated in people who drink more than 40 g alcohol per day and have an alcohol use disorder. This may be due to both increased risk of infection related to specific social mixing patterns associated with alcohol use, as well as influence on the immune system of alcohol it Self and of alcohol related condition.
- **Lesley A.** suggested association between Parkinson’s disease and life style exposures such as smoking alcohol consumption and coffee have been the focus of research for several decades, with varying and often conflicting results. These paper reviews the key features of observational studies investigating the relationship between alcohol drinking and PD risk, to determine potential sources of variability between the results. Relevant literature from 2000-2014 was systematically retrieved using three databases. Primary research articles were included if they reported a measure of association between quantity and frequency of alcohol intake and adjusted at least for the potential confounding factors of smoking and age. Sixteen articles were identified. The seven cases – control studies were more likely to report a weak protective association by level of alcohol consumption compared to the studies with prospective designs. To studies reported the relationship between heavy (harmful to the health) drinking and PD. There was weeks evidence that association varied by type of alcoholic beverage. The week association between alcohol drinking and PD risk was found in studies at greater risk of selection recall bias.
- **Smith LA.** suggested the study on Social norms information for alcohol misuse in university and college students. Drinking is influenced by youth perceptions of how their peers drink. These perceptions are often incorrect overestimating peer drinking norms. If inaccurate perception can be corrected, young people may drink less. To determine whether social norms interventions reduce alcohol-related negative consequence, alcohol misuse or alcohol consumption when compared with a control (ranging from assessment only no intervention to other education or psychosocial intervention) among university and college students. The following electronic databases were Searched up to July 2015: the Cochrane central Register of Controlled Trials (CENTRAL) (The Cochrane Library), MEDLINE, EMBASE, and Allied. A total of 70 studies (44,958 participants) were included in the review, and 63 studies (42784 participants) in the meta-analysis. The results of this review indicate that no substantive meaningful benefits are associated with social norms interventions for prevention of alcohol misuse among college/ university students. Moreover, the significant effects are not consistent for all misuse measures, heterogeneity was a problem in some analysis and bias cannot be discounted as a potential cause of these finding.
- **Thomas M.** conducted the study on Alcohol misuse is a prime social and health problem in the UK. This paper present a critical review of literature on the performance effects in the morning after binge drinking-during the alcohol hangover. Several p0athophysiological changes that both follow and outlast acute intoxication may give rise to alcohol hangover effects. We have identified 27 English language peer reviewed studies that investigate aspects of psychological performance during alcohol hangover following controlled alcohol ingestion. Therefore naturalistic alcohol consumption studies (and laboratory studies that did not employ a placebo) can be considered as being suggestive of hangover effects but should not be interpreted as providing definitive evidence of such effects.



- **Jennifer M.** Conducted the study on influence of social media on alcohol use in adolescents and young adult. Participation in online social media Web sites (Facebook and Twitter) has skyrocketed recent years and created a new environment in which adolescent and young adult may be exposed to and influenced by alcohol- related content. Thus, young people are exposed to and display pro- alcohol messages and images through online portrayals of drinking on personal pages as well as unregulated alcohol marketing on social media site that may reach underage people. Such online displays of alcohol behavior have been correlated with offline alcohol behavior and risky drinking. Researchers are beginning to assess the potential of social media sites in identifying high risk drinkers through online display patterns as well as delivering prevention messages and intervention.
- **Dawson DA.** conducted the study on stress and drinking: modifying effects of gender and vulnerability. To assess the relationship between number and types of past – year stressful experiences and alcohol consumption, with a focus on how gender, poverty and psychological vulnerability moderate this association. Data from 26946 US past – year drinkers 18 years of age and over, interviewed in the 2001-2002 National Epidemiologic Survey on Alcohol and Related Conditions (NESARC), were used to construct multivariate linear regression models predicting six measures of drinking pattern and volume. There was a consistent positive relationship between number of past – year stressors experienced and all measures of heavy drinking. Frequency of heavy (5+ drinks for men; 4 + drinks for women) drinking increased by 24% with each additional stressor reported by men and by 13% with each additional stressor reported by women. Stress does not so much lead individuals to drink more often as to substitute larger quantities of alcohol on the days when they do drink. Treatment and brief interventions aimed at problem drinkers might benefit from addressing the issue of tension alleviation and the development of alternative coping mechanisms.
- **Boynton MH.** conducted the study on a Meditational model of Racial Discrimination and Alcohol – Related Problem among African American College Students. The goal of the current study was to extend previously found links between lifetime discrimination, alcohol use, and alcohol problem as well as to elucidate the effective mechanisms underlying these associations, as moderated by gender. A multiple – group structural equation model was computed using survey data collected from 619 students from a historically Black college/university. The final model provided excellent fit to the data, explaining 6% of the variance in alcohol consumption and 37% of the variance in alcohol problems. The result suggest that, for African Americans whose drinking leads to drinking-related problem, discrimination and poor affective self – regulation are highly relevant and predictive factors, especially for men.

# Research Methodology



## Development & Description of tool:

### Section A

It consists of demographic variables such as name, age, place religion, occupation, education, marital status, type of family, no. of family members, monthly income, food habit.

### Section B

Structured Questionnaire has been developed to assess the knowledge and prevalence rate of alcohol intake.

Table :1

| SRNO | CHARACTERISTICS | SOCIO-DEMOGRAPPHIC  | PERCENTAGE (%)                             |
|------|-----------------|---|--|
| 1    | AGE             | 18-23yrs<br>24-29yrs<br>30-35yrs<br>36-40yrs                  | 1(3.34%)<br>11(36.6%)<br>6(20%)<br>12(40%) |
| 2    | AREA            | Rural   | 30(100%)                                   |
| 3    | RELIGION        | Hindu<br>Buddhist   | 29(96.6%)<br>1(1.34%)                      |
| 4    | OCCUPATION      | Self-employee<br>Govt.- employee<br>Private-employee<br>Other | 16(53.3%)<br>5(16.6%)<br>7(23%)<br>2(6.67) |
| 5    | EDUCATION       | 10 <sup>th</sup><br>+2<br>Graduation                          | 8(26.67%)<br>10(33.3%)<br>12(40%)          |
| 6    | MARITAL STATUS  | YES<br>NO   | 24(80%)<br>6(20%)                          |
| 7    | TYPE OFFAMILY   | Nuclear<br>Joint  | 8(26.67%)<br>22(73.3%)                     |

|    |                      |                                      |   |
|----|----------------------|--------------------------------------|---|
| 8  | No .Of FAMILY MEMBER | 3<br>3above<br>5<br>5above           | 9(30%)<br>8(26.67%)<br>7(23%)<br>6(20%)   |
| 9  | MONTHLY INCOME       | 5,000<br>10,000<br>15,000<br>>20,000 | 2(6.67%)<br>9(30%)<br>6(20%)<br>13(43.3%) |
| 10 | EATING HABIT         | Veg.<br>Non-veg.<br>Eggetarin        | 12(40%)<br>6(20%)<br>12(40%)              |

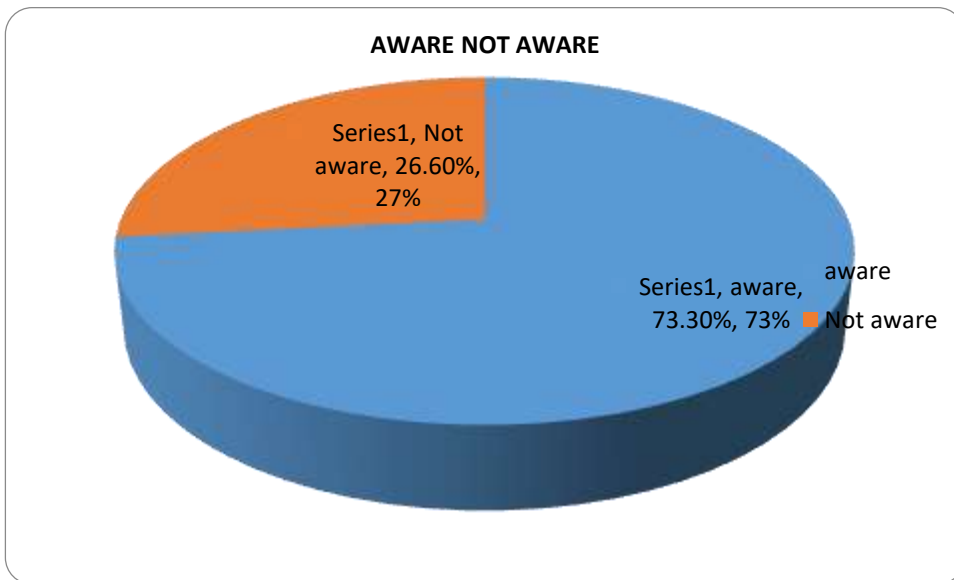
**Table 1** Represent the social demographic profile of 30 young adult. Most of the young adult sample i.e 1(3.33%) are related to age group of 18-23year, 11(36.6%) are related to age group of 24- 29year, 6(20%) are related to age group of 30-35year, 12(40%) are related to age group of 36-40year, 30(100%) belongs to rural area, 29(96.6%) belongs to Hindu religion, 1(1.33%) belongs to buddhist, 16(53.3%) are self – employee, 5(16.6%) are govt. job, 7(23%) are private job, 2(6.67%) are other, 8(26.67%) belongs to high school, 10(33.3%) belongs to secondary, 12(40%) belongs to graduation and above, 24(80%) are married, 6(20%) are unmarried, 8(26.67%) belongs to nuclear family, 22(73.3%) are belongs to joint family, 2(6.67%) having 5,000 monthly income, 9(30%) having 10,000 and above monthly income, 6(20%) having 15,000 monthly income , 13(43.3%) having above 20,000 monthly income, 12(40%) are vegetarian, 6(20%) are non-vegetarian, 12(40%) eggetarian

Table :2

**Assessment of prevalence rate of alcohol intake:**

| Sr. no | QUESTIONS   | Aware |                | Not aware |                |
|--------|---|-------|----------------|-----------|----------------|
|        |   | Frq.  | Percentage (%) | Frq.      | Percentage (%) |
| 1      | What is alcohol   | 8     | 26.6%          | 22        | 73.3%          |
| 2      | What was reason for alcohol intake.                         | 20    | 66.6%          | 10        | 33.3%          |
| 3      | How often do you drink                                      | 22    | 73.3%          | 8         | 26.6%          |
| 4      | How do feel after alcohol Intke                             | 15    | 50%            | 15        | 50%            |
| 5      | What are the complication of alcohol intake                 | 18    | 60%            | 12        | 40%            |
| 6      | Do you know which organ affected consumption of alcohol     | 18    | 60%            | 12        | 40%            |
| 7      | What is the consequences of teenage drinking                | 19    | 63.3%          | 11        | 36.6%          |
| 8      | What are the side effect of Alcohol intake on personal life | 22    | 73.3%          | 8         | 26.6%          |
| 9      | Amount of money spend on liquor in one month                | 29    | 96.6%          | 1         | 3.33%          |
| 10     | Long term of alcohol Disturbs                               | 23    | 76.6%          | 7         | 23.3%          |
| 11     | Withdrawal symptoms occur in individual                     | 10    | 33.3%          | 20        | 66.6%          |





**Fig.:** Shows that 73.3% people are aware about alcohol intake and 26.6% people are not aware about alcohol intake.

## DISCUSSION

Alcohol intake is defined as the drink up to 3-5 glasses of alcohol in a day. The primary aim of study is to assess the prevalence of alcohol intake in a community people of the oachghat Solan. This chapter deal with discussion of findings a study. In order to achieve the objective researcher design was. This setting was chosen because of convenience of the researcher opportunity in oachghat Solan to come contact with community people. The study was conducted at village oachghat Solan (H.P). Total population selected from 18-40 years of age group people the population in this age group selected was 30 peoples. Tools includes demographic variables & questionnaire. Tool along with scoring key was prepared after extensive literature review & expert advice.

## Summary, Nursing implications, Recommendation of the study and conclusion:

### Summary

A study to assess the prevalence of alcohol intake among adult (18-40 years) residing in selected village of oachghat in year 2018.

The objectives of the study were as follows:

- To assess the prevalence of alcohol intake in selected village of oachghat.
- To associate the finding of study with socio-demographic variables (e.g. age, education, occupation, marital status, type of family, history of alcohol intake in family).

### Hypothesis

$H_0$ : There is not significant prevalence rate of alcohol intake in young adults.

$H_1$ : There is significant prevalence rate of alcohol intake in young adults.

**Assumptions** There may be less prevalence of alcohol intake among young adults.

### Limitations of the study

- Sample size is small to generalize findings.

- Area was limited for the sample selection.

#### **Delimitations of the study:**

- Selected young adults were taken for the study is delimited to alcoholic young adults.

## **Nursing Implications of the Study**

### **Nursing education**

- The sample group should be counseled and educated regarding side effect of alcohol intake.
- Parents/relatives should be provided information regarding risk of alcohol intake.
- Strict action should be taken by government against this illegal practice of selling alcohol without permission.

### **Nursing practice:**

- Nurse should be skilled in identifying, explaining and verifying the problems faced by the abusers.
- In community, student nurse must have knowledge and skills to provide knowledge regarding the demerits of alcohol intake.

### **Nursing administration**

- The role of nursing administration is very important. They can organise health education program regarding prevention of alcohol consumption.
- Nursing administration at hospital and community level should evaluate the effectiveness of structured teaching program regarding prevention of alcohol consumption.

### **Nursing research**

- Research finding and result of study should published disseminated through proper channel to enhance the knowledge of consumer regarding prevention of alcohol consumption.
- The study finding can be kept as the base line data and further research can be conducted at different setting.

## **Recommendation of the study**

- This study will help the nurse educator in selected areas of oachghat to provide information regarding alcohol consumption, &effect of alcohol intake.
- The similar study can be replicated among other area.

## **Limitation of study**

- Sample size is small generalize findings.
- Area was limited for group selection

## Conclusion

Alcohol use remains a major public health and safety problem in the country, creating serious personal, social, and economic consequences for adolescents, their families, community, the Nation as a whole. An emerging body of research on the effect of underage alcohol use on human maturation adds new urgency to the decades' long effort by the public and of alcohol misuse and dependence in late adolescence are intertwined with developmental process. Therefore, the prevention and reduction of underage drinking must be addressed within a private sectors to prevent and reduce underage drinking .Pervasive drinking by youth and the emergence developmental framework, which takes into account the dynamic processes of human maturation, the influence of social system within and adult environment.

## REFERENCES

- 1) World Health Organization (2000). International Guide for monitoring Alcohol consumption and related harm. Department of mental health and substance dependence, WHO/MSD/MSB/00.4.
- 2) American Medical Association. The minimum legal drinking age : facts and fallacies(Research and facts about youth and alcohol). [www.ama-assn.org/ama/pub/print/article/3566-3640](http://www.ama-assn.org/ama/pub/print/article/3566-3640). Html
- 3) .Lesley A. Alcohol drinking and risk of parkinson's disease: A case –control study in Japan. BMC Neurol.2010;10:1-9.
- 4) Silver k. Alcohol consumption and risk of coronary heart disease among Chinese men. International Journals Cardiol. 2009; 135:78-85.
- 5) Smith LA. Neuropsychological correlates of alcoholic hangover, South African Journal of science , 1999. Vol. 95 (145-147)
- 6) Boynton MH. A mediational model of racial discrimination and alcohol – related problems among African American college students. Journal of studies on alcohol and drugs. 2014;75(2):228-234.
- 7) Jennifer M. Importance of reducing youth exposure to alcohol advertising. Archives of Pediatric & Adolescent Medicine. 2006;160(1):100-102.
- 8) Dawson DA. The link between family history and early onset alcoholism: Earlier initiation of drinking or more rapid development of dependence? Journal of studies on alcohol. 2000;61(5):637-646.
- 9) Sarah W. A Randomised controlled trial of general practitioner intervention in patients with excessive alcohol consumption. BMJ 1988;297: 663-8
- 10) Thomas M. Neurocognitive functioning of adolescents: effects of protracted alcohol use. Alcohol clin Exp Res. 2000; 24:164-174
- 11) Brian G Williams. Association of tuberculosis with alcoholism. Southern Medical Journal. 1976,69: 133.
- 12) Robert J. Interaction between the functional polymorphisms of the alcohol- metabolism genes in protection against alcoholism, American Journal of Human Genetics, 1999,vol. 65 (pg. 795-807).
- 13) Marmot MG Alcohol consumption and sickness absence : from the Whitehall II study. Addiction 1993;88:369.
- 14) Baraona E, (1998) Alcohol and lipids. In: The consequences of alcoholism. Galanter M. ed. Plenum Press, New York.