



### RESEARCH ARTICLE

#### “A DESCRIPTIVE STUDY TO ASSESS THE PREVALENCE OF ALCOHOL DEPENDENCE AMONG ADULTS LIVING IN SELECTED RURAL COMMUNITY AREA OF SHANKARPUR, SAHASPUR, DEHRADUN”

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#### Abstract

**Aim:** A study was done to assess the Prevalence of Alcohol Dependence among Adults Living in selected Rural Community Area of Shankarpur, Sahaspur, Dehradun.

**Design-** Non experimental descriptive research design

**Materials and Method:** The Convenience sampling technique was utilized to select the sample. The sample size of the research study were 100 Adults . To assess the prevalence , standardized tool AUDIT was used . The data analyzed in term of the objectives of the study using descriptive and inferential statistics.

**Results:** The result reveals that the most of the adults were having Low risk of Alcohol Dependence some of the study samples were having High Risk of Alcohol Dependence. While 5% of samples were at Possible Risk of Alcohol Dependence. The major findings represents the most of Alcohol Dependent Adults are in age group of 20-30 yrs greater members of Adults are Hindus (approx 71%) whereas 1% were Christian. The Highest number of Alcohol Dependent population lies under Increasing Risk that is 50%, whereas only 5% lies under possible Risk and rest 21% population lies under high risk and 24% under Lower Risk. The chi square values for socio demographic variables are Age(6.014), Religion(2.875), gender(14.260), Marital Status(14.256), Educational Qualification(33.590), Employment Status(14.616), Income(0.95), Family Type(8.22), Source Of Income(9.108), Health Status(0.76). The study depicts that only gender and Educational Qualification are the only sociodemographic variables that are significant. Also the study reveals that majority of alcohol dependent Adults are Males with 82% and rest 18% are females.

**Conclusion:** The majority of alcohol dependent Adults are Males with 82% and rest 18% are females.

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**Introduction:-**

Alcohol was brewed as early as 7,000 to 6,650 bc in northern china the earliest evidence of wine making was dated at 6,000 to 5,800 bc in Georgia the southern Caucasus beer was likely brewed from Bareilly as early as the 6 century bc 600 to 500 bc in Egypt elder wrote about the golden age of wine making in Rome the second century bc 200 -100 bce when vineyards were planted. Alcohol, sometimes referred to by the chemical name ethanol and it is a psychoactive drug that is the active ingredient in drinks. Ethanol is only a several types of alcohol but it is the only type of alcohol that is found in alcoholic beverages. Drinks include such as beer ,wine and distilled spirits (also known as hard liquor). Alcohol is one of the oldest and most common recreational substances .it caused the characteristics effects of alcohol intoxication (drunkenness) it's other effects include happiness and euphoria , decreased anxiety increased sociability ,sedation ,impairment of cognitive memory motor and sensory function. Alcohol, a well known drink, consume very commonly nowadays a psychoactive substance, having dependence property widely consumed in many cultures for the many centuries. The binge use can result in the social as well as economic consequences apart from them it is also a most common casual factor in more than 200 diseases injuries and other health conditions. Alcohol consumption not only affects physical but mental health also. It can cause unintentional as well as intentional injuries such as road traffic crashes violence and suicide. Alcohol use is quite common in India both in rural and urban areas with prevalence rate as per various studies varying from 23%to 74% in males in general .although its not that common in female but it has been found to be prevalent at the rate of 24% to 48% in females in certain section. The global status report on alcohol and health (2011) presents a comprehensive perspective on the global, regional and country consumption of alcohol, patterns of drinking health consequences and policy responses in member states. In may 2010, the world health assembly (WHA) representing all 193 who member states approved a resolution to endorse the global strategy to reduce the harmful use of alcohol. The harmful use of alcohol results in approximately 2.5 million deaths each year with anet loss of life 2.5 million taking into account the estimated beneficial impact of low level of alcohol use on some disease in some populations groups.

In India approx 25.8% of population above 18 year is alcohol dependent in a track and approx 44.81% are alcohol dependent. In dehradun approx 28.86% are alcohol dependent according to who report of 2018 approx 59.4% of total population of world are alcohol dependent according to national drug survey 2018 43% people consume alcohol all over India. In 2018, approx 28% of unmarried people 33% of divorced slash widows were found to be consumer of alcohol in Uttarakhand in dehradun about 40% of population is alcohol dependent. According to survey in 2017 it's 57% of global population is alcohol dependent in India 37.36% of people are the consumer of alcohol in 2017 in Uttarakhand approx 35.2% of population are alcohol dependent according to the reports in dehradun 40% of population are the consumer of alcohol globally approx 60 to 70% of population was alcohol dependent in 2016 in India approx 30.3% of population consumes alcohols in 2016.

**Objectives Of The Study:-**

1. To assess the prevalence of alcohol dependence.
2. To find the association of prevalence of alcohol dependence with their selected socio-demographic variables

**Materials And Method:-****Design and sampling**

The research was conducted using Non-experimental descriptive study design among adults residing in rural areas of Dehradun, Uttarakhand . The target and accessible population were male and female adults aged between 20 to 60 years residing in rural area of Dehradun. The subjects were recruited using convenience sampling technique from all the adults of Sahaspur, Dehradun to achieve the sample size of 100. The informed consent was obtained from the participants after which the samples were subjected to interview session on alcohol intake practices.

**Inclusion criteria**

The study includes people who are:

1. Depend on Alcohol
2. Age Group: 20-60 yrs
3. Willing to participate in the Study
4. Understand Hindi as well as English
5. Present at the Time of Data Collection

**Exclusion criteria****People who are –**

1. Not willing to participate
2. Unable to response appropriately due to any physical, mental illness or social disturbance

**Data Collection Instrument**

The method used for data collection was standardized questionnaire to assess the prevalence of alcohol dependence among the people living in selected rural community area at Sahaspur, Dehradun, Uttarakhand.

**The tools are developed into**

**Tool 1** - Socio demographic variables (Age, Gender, Religion, Family Type, Educational Qualification, Marital Status, Income, Source, Occupation, Health Status)

**Tool 2**- Standardized tool that consists of 10 questions **AUDIT** questionnaire.

**Data collection process**

A formal permission was obtained from the principal of Doon Institute of Medical Sciences, Sahaspur, Dehradun for conducting research project in the month of November 2022. 100 samples were selected from Shankarpur, Sahaspur Dehradun respectively. From the date of 14<sup>th</sup> of November 2022 to 16<sup>th</sup> of November 2022 data was collected from the adults of Shankarpur, Sahaspur, Dehradun via interview method. The average time of conducting interview was 15-20 mins.

**Data Analysis–**

The data was analyzed in term of objectives of study using descriptive of statistics and inferential statistics.

**Results:-**

S.No.	Socio-demographic variable	Sample Characteristics	Frequency	Percentage
1.	Age	20-30	34	34%
		30-40	33	33%
		40-50	22	22%
		50 & above	11	11%
2.	Religion	Hindu	71	71%
		Muslim	20	20%
		Christian	1	1%
		Others	8	8%
3.	Gender	Male	82	82%
		Female	18	18%
4.	Marital status	Married	57	57%
		Unmarried	34	34%
		Separated	5	5%
		Divorced	4	4%
5	Educational qualification	No formal ualification	22	22%
		Primary education	28	28%
		Secondary education	29	29%
		Higher education	21	21%
6.	Employment status	Self employed	40	40%
		Employed	23	23%
		Daily wagers	12	12%
		Unemployed	25	25%
7.	Income	10,000 -20.000	55	55%
		20,000 -30,000	33	33%
		30,000 - 40,000	10	10%
		40,000 & above	2	2%

8.	Family type	Single parent	11	11%
		Nuclear	45	45%
		Joint family	41	41%
		Extended family	3	3%
9.	Source of Consumption	At parties	11	11%
		Through friends	28	28%
		From liquor shops	50	50%
		Others	1	1%
10	Health status	Healthy	69	69%
		Chronic illness	18	18%
		Mental illness	2	2%
		Physical deformity	11	11%

**Table 4.1:-** Showing The Frequency Distribution Of Demographic Variables.

#### Age –

It shows that most of alcohol dependent adult are in the age group of 20-30 year old .i.e.34(34%) & 33 (33%) falls in the age group of 30-40 yrs. Whereas 22 (22% were in the age group of 40-50 yrs and only 11(11%) were in 50 or above.

#### Religion

The religion depicts that 71 (71%) adults were hindu, 20 (20%) were Muslim 8 (8% were in others and only 1(1%) were Christian.

#### Gender

About the gender variable majority of participants were 82(82%) males and the rest 18(18%) were females.

#### Marital status

The most 57(57%) were unmarried, 34 (34%) were married, 5(5%) were divorced whereas only 4 (4%) were separated.

#### Educational qualification

The population of 29 (29%) adults were having secondary education,28(28%) were having primary education, 22(22%) were having no formal education andonly 21 (21%) were having higher education.

#### Employment status

The employment status variable represent that most of dependent adult i.e.40 (40%) were self employed,25(25%) were unemployed,23(23%) were employed and rest of 12(12%) were daily wagers.

#### Income

In accord to the income 55% of the population falls under the 10,000- 20,000 rupees income criteria, 33% falls under the 20,000-30,000 income criteria, 10% in the 30,000-40,000 income criteria and the rest of 2% falls under the 40,000 and above income criteria.

#### Family type

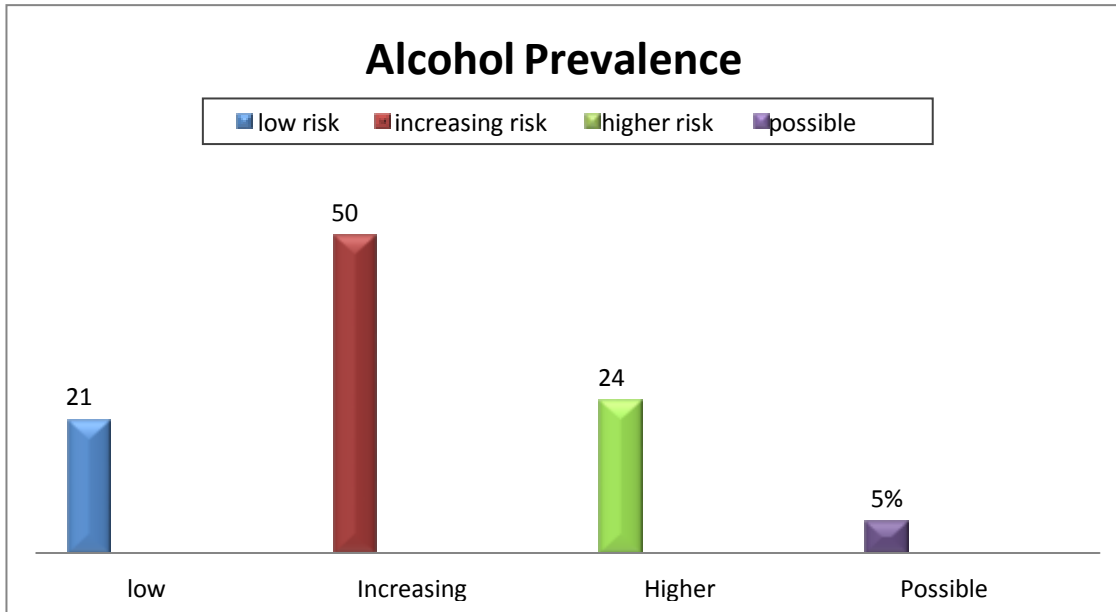
According to the family types of the population 45% consist of the nuclear family ,41% consist of the joint families, 11 consist of single parents and the 3% of the population consist of extended families.

#### Source of consumption

According to the source of consumption of alcohol in the population 50% get the alcohol from the liquor shops,23% get through the friends,11% get at the parties and the rest 1% from others

### Health status

According to the health status of the population 69% is healthy, 18% of the population falls under the section of chronic illness, 11% is in the physical deformity section and the 2% of the population falls in the mental health section.



**Fig 1:-** Prevalence of alcohol dependence risk.

**Fig 1.** depicts that that highest number of alcohol dependent population lies under the increasing risk i.e. 50(50%). The 2<sup>nd</sup> highest number of population lies under the higher risk 24(24%). The population under the low risk is 21(21%) and only 5(5%) lies under possible dependence.

Association of Prevalence of Alcohol Dependence with their selected Socio-demographic variables.

Among all the Socio demographic variables only Gender and Education Qualification has been found Significant, Other Socio-demographic variables (Age, Religion, Family Income, Marital Status, Employment Status, Family type, Health status and Source of Consumption) were found not Significant with the Prevalence of alcoholism among adults.

### Discussion:-

**Anil Bindu Sukumaran, Divijavijithjeesha (2020)**, a cross-sectional study conducted among adults in nellanad panchaya, a rural area in thiruvananthapuram district, during 2017-18. This study includes both male and female of age less than 20 years and permanent residents of the study area. Sampling technique used was cluster sampling. 64 clusters were identified with 25 participants in each cluster, and assist was to determine the prevalence of alcohol consumption and associated level of harms. According to this study ever use person is one who had reportedly used alcohol at least once in his / her life time. A never use person is who had not used alcohol even once in his or her life. ex-user if the person had not used alcohol for the past 3 months among the ever user. According to assist a score of 0-10 is regarded as lower risk and required health education score of 11-26 as moderate risk and required counseling score 27+. The data were analyzed by using SPSS frequency and percentages were calculated for categorical variable. Chi-square test is used as the test of significance p value <0.005 was taken as significant.

### Limitations

1. The study was conducted with 100 no. of samples due to shortage of time for data collection and hence generalization of the findings were limited.
2. The sample were selected from adults only and hence limiting the generalization.
3. The sample were selected from rural areas only and hence limiting the generalization.

**Recommendation:-**

1. A similar study can be done on large group of community for long period.
2. The study can be replicated in various settings with large sample size to facilitate generalization of results.
3. The study can be done in both rural and urban communities.
4. In future alcohol effect program should be conducted in both communities for adults.
5. Poster and pamphlet should be distributed regarding alcohol adverse effect.

**Conclusion:-**

Based on the findings of the study conducted states that the most of the adult were having low risk of alcohol dependence. Some of the study samples were having higher risk alcohol dependence while 5% of samples were having possible risk of alcohol dependence. And the majority of alcohol dependent Adults are Males with 82% and rest 18% are females.

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