

## RESEARCH NOTE

## Generating Awareness Regarding Alcoholism in Rural Area of Agra District

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### ABSTRACT

*The present study identified the categories of popular alcoholic drinkers and thereafter created awareness among rural men regarding ill effects of excessive alcohol consumption on health. Agra district was selected as the locale of the study. Hundred twenty men were selected by multistage random sampling technique. A self-prepared schedule was used for collecting the base line and post intervention data to assess the awareness of men on the area of intervention. Comparison of baseline and post intervention scores was done using 't' test. The results revealed a significant increase in awareness of men from base line to post intervention stage ( $t=2.80$ ).*

**Key words:** *Alcoholic drinkers; Excessive alcohol consumption;*

**A**lcohol consumption is prevalent worldwide its intake can be harmful when taken in excess. Studies show that it can result in millions of deaths. In 2016, alcohol abuse resulted in 3 million deaths (5.3% of all deaths). Mortality resulting from alcohol consumption is higher than that caused by diseases such as tuberculosis, HIV/AIDS and diabetes. Among men in 2016, an estimated 2.3 million deaths were attributed to the consumption of alcohol. The per capita alcohol consumption in India increased two folds between 2005 and 2016. More than 3 million people died as a result of alcohol abuse in 2016. More than three quarters of those reported dead were men. The report highlighted that 51.1 men per 100,000 population and 27.1 women per 100,000 population suffered from liver cirrhosis. Cancers associated with alcohol abuse resulted in 181 men per 100,000 population and 126.4 women per 100,000 population, according to the WHO (2018).

Problem of alcohol abuse is a serious matter and is likely to grow in the coming times as it is also associated with enhancement of status in society. It may begin with the onset of stress or in an attempt to fulfil social requirements. However generally the person may lose self-control of quantity of intake resulting in the state of alcohol abuse.

There is need to conduct research along with educating the people so that suitable preventive measures and life style changes can be adopted (Bhullar, et.al, 2013). In this regard the present study was undertaken with the following objectives:

- To study the categories of alcoholic drinkers among rural subjects of Agra district
- To determine the awareness about ill effects of excessive alcohol consumption among rural men.
- To plan and conduct an intervention program on selected samples, regarding ill effects of excessive alcohol consumption.
- To assess the effectiveness of intervention program.

### METHODOLOGY

The study was conducted on 120 men of Agra district. The sample was selected by multistage random sampling technique. The selected men were in the age range of 28 years to 58 years. A self-made schedule was prepared to assess the awareness of men regarding the ill effects of excessive alcohol consumption. The tool had two sections, the first section was aimed to assess the categories of alcoholic drinkers among subjects and second section was related to awareness of subjects regarding the effects of excessive alcohol consumption.

Items that revealed awareness were scored as 1 where as those items which revealed unawareness were scored 0. A subject could score a minimum score of 0 and maximum of 18. The reliability of the tool was 82 per cent and validity was 93 per cent.

Educative tool was prepared for creating awareness among rural men regarding ill effect of excessive alcohol consumption.

Analyses of the self-prepared schedule revealed lack of awareness in the subjects regarding ill effects of excessive alcohol consumption. Hence education was imparted through the prepared schedule for this purpose. The investigator fixed up date, time and venue with the subjects for this purpose. Total numbers of three sessions were held for one twenty men. Each session was held for a group of forty men. In each session knowledge was imparted regarding ill effects of excessive alcohol consumption.

**RESULTS AND DISCUSSION**

Table 1 shows the popular alcoholic drinks consumed by rural men of the selected area. In selected rural area three type of alcoholic drinks were consumed. First is *kachchi sharaab* which is made by available food product (Sugar cane, rice, wheat etc.) at home. Second one is *desi sharaab* which is made by local available food products but not made at home and had therefore to be purchased. Third one is *Anragi sharaab* this is a standardized alcohol which is made by standardised process this too has to be purchased.

**Table 1. Categories of popular alcoholic drinkers consumed (N =120)**

Alcoholic drinks consumed	No.	%
Kachchi sharaab	12	10.00
Desi sharaab	9	7.5
Anragesharaab	3	2.5
Kachchi and Desi sharaab both	28	23.33
Desi and Anragi sharaab both	13	10.83
Anrage and Kachchi sharaab both	14	11.66
All alcohol drinkers -Kachchi, Desi and Anragi	41	34.16

From the Table 1, it becomes evident that most subjects were consuming all three categories of alcoholic drinks. Similar results were reported by *Antai, et al (2014)*. Perhaps the consumption of the category of drink depended on availability or the money in hand. Kachchi and Desi sharaab drinking subject were found to be 23.33 per cent. Only 2.5 per cent men were those

**Table 2. Awareness regarding health risks of excessive alcohol consumption**

Health risks	Base Line		Post Intervention	
	No.	%	No.	%
Shrinking vein of brain	07	5.83	19	15.83
Heart damage	18	15.00	41	34.16
Liver damage	24	20.00	52	43.33
Chronic pancreatitis	05	4.16	24	20.00
Frequent diarrhoea	11	9.16	51	42.50
Infertility	08	6.66	65	54.16
Mal nutrition	04	3.33	41	34.16
Diabetic complications	06	5.00	36	30.00
Behaviour changes	07	5.83	44	36.66
Throat cancer	14	11.66	67	55.83
Mouth cancer	11	9.16	60	50.00
Lung infections	10	8.33	79	65.83
Fatigue	16	13.33	36	30.00
Stomach distress	03	2.50	29	24.16
Osteoporosis	02	1.66	22	18.33
Muscle cramps	00	00.00	18	15.00
Loss of immunity power	14	11.66	38	31.66
Poor vision	17	14.16	48	40.00

who consumed only anragi sharaab. Perhaps the reason for this could be that anragi sharab is more expensive as compared to other types of alcohol. Similar result was found by *Kumar, et al (2018)*.

As evident from the Table 2 the awareness of health risk of excessive alcohol consumption was very low. At post intervention level there was a major increase in the awareness regarding all health problem related to excessive alcoholic drinking. Among the areas of major gains were those related to diarrhoea, infertility, mal nutrition, throat and mouth cancer and lung infections. It is surprising that even though the health risks are well advertised little attention is paid to them. Another aspect that could be responsible for low awareness is that generally even when the risk are known one tends to feel that he will not be effected by it. In a similar study conducted by *Janssen, 2013* the awareness of the subjects regarding risk of lever damage due to alcohol consumption was increased by intervention.

**Table 3. Effect of intervention on awareness of men**

Stages of Intervention	Awareness		Statistical value	
	Mean	S.D	t	P
Pre Intervention	12.90	3.66	2.80	0.01 sig.
Post Intervention	15.25	4.86		

Thus the present intervention played a very important role to create awareness among men regarding health risks of excessive alcohol consumption.

Table 3 shows the difference in awareness score at pre and post intervention stages among rural men regarding ill effect of excessive alcohol consumption. The obtained t value (2.80) shows a significant gain in awareness of subjects. Thus the intervention was successful for increasing the awareness of target sample.

## CONCLUSION

In the present study awareness of men regarding health risks of excessive alcohol consumption was low. At post intervention level there was a major increase in the awareness regarding all health problem related to excessive alcoholic drinking. Among the areas of major gains were those related to diarrhoea, infertility, mal nutrition, throat and mouth cancer and lung infections. The intervention program was successful at improving the awareness.

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