

A Study on the Effective Alcohol Education Strategies for the Prevention of Alcohol Problems

Young Sook Lee

(Graduate School of Public Health, Seoul National University)

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I . Introduction

The pattern of public health problems is changing from contagious diseases to chronic diseases such as cardiovascular disease, cancer and diseases caused by accident and stress due to various factors, i.e., the development of medicine and hygiene and the improvement of living standard. All these factors are greatly related to the environment and life style. In particular, drinking is emerged as a big health and social problem which is attributed to stress, pleasure-seeking atmosphere, the complexity of modern society and the improved living standard. Accordingly, this study intended to identify risk factors related to unhealthy drinking behavior and explore the appropriate methods of alcohol education.

II . Drinking as the social and cultural behavior

One's drinking behavior is started in a cultural context. It is

learned by the influence of attitude and value that are shared within one's culture through the contact with other members. One's drinking habit is formed by the expectation of the society, to which one belongs, in one's social environment. Whether the drinking is prohibited or encouraged is influenced by racial background, socio-economic status, religion, age and sex. The study conducted on 5,952 adults in New York showed that the non-Jewish, non-Asian, single, the divorced, high-income people, people aged under 35 were more likely to drink (Research Institute of Alcoholism, 1991). In addition, the suicide rate was high in case of white people while homicide rate was high among black people and the drunk driving, Hispanics. The drinking behavior is greatly affected by one's relationship with parents and colleagues and it is also considered the symbol of transformation process from minors to adulthood. The drinking of adolescents is considered as a rebellious act against the expectation and the authority of adults. It is recognized that the drinking promotes sociability and eases the emotional stress.

According to the recent pattern of drinking in Korea, it is customary to pass glasses of wine round and to force one to drink until he collapses. The person who drinks heavily is considered as a gallant man and praised. There is little tendency to regard alcoholics as a mental disease. (Korea Institute of Health & Social Affairs, 1993).

III. Drinking and Health

Moderate drinking reduces the risk of myocardial infarction, improves the life quality for elderly people and eases the stress. But excessive drinking has negative effect on mortality, morbidity, society and economy. A study showed that 50% of accidents, suicides and homicides, 43% of traffic accidents and 50% of automobile accidents were related to drinking (Susan P Baker, 1977). It is reported that 50% of inmates were under the influence of alcohol at the time of committing crime. According to the study conducted in Philadelphia, U.S, the victims as well as offenders were under the influence of alcohol in 46% of homicide cases, 75.1% of homicide cases occurred in bars and restaurants and especially homicide cases by knife (58.6%), violent quarrel (67.9%) were related to the drinking (Richard A Goodman, 1986). The mortality caused by alcohol is estimated to be 150,000 cases annually in U.S. There is a significant correlation between the drinking and the hospitalization. In particular, the morbidity of cirrhosis of the liver increases in proportion to the short-term drinking rate. The degree of drinking and the weight of unborn child have a high correlation even in case of moderate drinking. The infants who were born from the mothers who had been drinking one ounce per day were 160g short in body weight. 34% of pregnant women who had drunk over 3 glasses of alcohol a day experienced spontaneous abortions. In case of women, there was a high possibility of giving birth to premature babies among women who drank over 10 glasses of wine a week. (Ben G Armstrong, 1992; Marian C Marbury, 1983). Drinking

alcohol has associations with gastroenteric disorders, neurotic disease, various emotional problems, sexual crimes, child abuse and domestic violence. In U.S, 6% of mortality were directly caused by alcohol while 57.5% of mortality in case of males and 32.2% of mortality in case of females were indirectly related to alcohol. The life expectancy of people whose deaths were related to alcohol was 55.6 whereas that of people whose deaths were unrelated to alcohol was 70.1. This finding indicates that social cost and years of life lost by early death are enormous, the exact estimate of which can be made by multiplying the reported figures by 6-8 times due to the under-reporting and confounding variables. (Raymond D Nashold, 1981).

The mortality rate of liver diseases, of which alcohol is a main risk factor, is 24.1/100,000 pers (Japan 13.9, U.S 1.4, England 1.4), and the mortality rate caused by drunk driving is 39.7 (Japan 13.0, U.S 21.4, England 10.5). Dependency in alcohol and life-time morbidity rate caused by excessive drinking of Korea are higher than those of other countries. The hospitalization rate and the rate of diseases requiring out-patient treatment are also higher as compared with other countries (Korea Institute of Health & Social Affairs, 1993).

IV. Present Status of Drinking Problems

The amount of alcohol consumption is a good indicator showing the degree of alcohol problems. The greater the alcohol consumption is, the higher the rates of morbidity and mortality caused by alcohol are. There had been a remarkable increase in alcohol consumption worldwide for the period of 1960-1980. The alcohol consumption had been increased 15% worldwide for the period of 1970-1980 while there had been 20.1-24.4% increase in Europe, North America, Asia for the same period. The alcohol consumption increases in proportion to the improvement of economy. The economic depression or the

increased income has a significant correlation with the alcohol consumption. As the income increases, the consumption of beer or wine or alcohol consumption of middle and upper class increases. On the other hand, there is a tendency that the consumption of low-quality alcohol, alcohol problem and alcoholism increases during economic depression (WHO,1980). The drinking population of Korea is 77% in case of males and 24%, in case of females. The number of male heavy drinkers who drink 2-4 times a week is 15 times as many as that of female heavy drinkers. The percentage of heavy drinker is high in the people in their late 50s, county area rather than city area, people with the educational level of below primary school and low living standard and single-person household. The percentage of moderate drinkers is high as people are younger and unmarried. The drinking rate of people who perceive themselves unhealthy is lower than that of people who perceive themselves healthy. However, the heavy drinking rate is much higher among those who are actually not healthy. The percentage of people who tried to stop or practice temperance among heavy drinkers is very low. In case of males, 65% of drinkers who drinks 2-4 times a week and 62% of drinkers who drinks everyday have never tried to stop drinking or practice temperance. In case of females, 79% of drinkers who drinks over 2 times a week have never tried to stop drinking or practice temperance (Korea Institute of Health & Social Affairs, 1993) (Ref. Table)

Table

Frequency of Drinking	Males(%)	Females(%)
Non-drinking	25.4	77.4
>1/ month	10.6	12.2
2-4/month	26.9	7.6
2-4/week	24.8	2.1
everyday	12.2	0.6

Source) Korea Institute of Health & Social Affairs, National Survey on Health Behavior and Awareness, 1992.

The results of the study on the drinking rate of high school students showed that 58.35% of the students drank. The percentage of students who drank more than 10 times a month was 96.6% while the habitual drinkers was 5.3%, It was noted that drug abuse, smoking and sexual misconduct were more prevalent among drinking students (Jae Soon You, 1992).

V. Prevention & Education

1. Alcohol Education of Mass Media

The alcohol education conducted by mass media cannot change one's behavior directly but it can contribute change social environment which hightens the effectiveness of behavior change strategies. The advertisement on alcohol, next to the pressure of peer group, increases the consumption of adolescents and provides the justification for the drinking. The alcohol education, which consolidates the existing attitude and social norm, can be more effective when it is conducted with other legal measures at the same time. The delivery of message goes through two step flow process of influencing the public through the opinion leaders who have a powerful influence on creating public opinions. It is required that the drinking should not be portrayed as attractive behavior or proper conduct that are in an agreement with social norm and expectation. The hazard of the drinking should be exactly communicated. The drawbacks of alcohol education conducted by mass media are it's over-dependency on fear message and information and a lack of messages appropriate for specific groups (WHO, 1980). Televisions, which have now found their way into almost all homes, are the most powerful media for mass communication in Korea. The drinking scene should be reduced in TV dramas. The scenes, advertisements and dialogues that instill permissive and positive attitude toward drinking into people's mind should be restricted through the Broadcasting Ethics Commission. The

alcohol education conducted by televisions should be strengthened. The intensive campaign should be carried out using various methods of publicity like Designated Drivers(A person remains sober and is designated as a driver in case that several people get together for drinking).

2. Law & Regulation

The alcohol price raised by the imposition of taxes reduces alcohol consumption as well as morbidity, mortality and accidents caused by alcohol. If the legal age for the permission of drinking is raised, 16% of traffic accident and 19% of injury caused by drinking were reduced. It implies that the alcohol problems can be reduced by controlling the environment conducive to drinking. The accident caused by intoxicated drivers can be reduced by tightening legal measures. The legal control and raising legal standard of drinking have a close association with the accident rate caused by drinking (WHO, 1980). The traffic accidents caused by intoxicated driving in 1992 were 10,319 cases accounting for 4.0% of total cases, which was 23.2% increase as compared with the previous year. The Clause 107, Paragraph 2 of the Road Traffic Law prescribes that a drunk driver shall be sentenced to less than two years' imprisonment and imposed a fine of 300,000 won and the driver's license shall be suspended, depending on the alcohol level (Association for Road Traffic Safety, 1993). The strong punishment like license revocation has a great impact on the reduction of accident rate. However, the informal measure like the social atmosphere that is not permissive of drunk driving is much more effective than strong legal measures. The reason why the drunk driving is prevalent despite the strict regulations concerning the drunk driving is that there is not the strong perceived fear of punitive measures. The function of prevention and education is to raise the perceived fear on the punishment and control. The best way to prevent drunk driving is to raise the fear on legal punishment through campaign, rather than the

imposition of a fine or the number of inspected cars. The creation of social atmosphere that is not generous to and is critical of intoxicated driving, is the most important way to prevent the drunk driving. The control of drunk driving should be strengthened through legal control and the imposition of tax and the social atmosphere that is favorable to drinking should be changed. The informal social measures to curb excessive drinking should be enhanced.

3. Alcohol Education in Schools

Adolescent drinking is considered as a symbol of transformation process from minors to adulthood. Adolescents drink to mix with peers. It is also considered as a rebellious act against the authority of adults. The drinking of adolescents has a correlation with low grade and high non-attendance rate. Adolescents learn the drinking according to the way and degree that the culture of the group, which they have contact with or belong to, allow and share. The attitude of adolescents toward the drinking is greatly influenced by their relationship with peer groups and parents. Accordingly, alcohol education for adolescents should be conducted with the involvement of parents and peer groups and can be effective when it is conducted under the responsibility of the whole community. Alcohol education should help parents understand a motive and behavior of adolescent's drinking and form positive healthy drinking behaviors. The persuasion, rather than disciplinary action, is effective in alcohol education. The objective approach based on practical physiological knowledge is effective in alcohol education. In Korea, the school curriculum for public health is divided into 18 parts under three main areas; health, environment, research, of which alcohol and smoking education constitutes a part. The system of public health teacher has not been established yet. The public health education is conducted in conjunction with other subjects. Even one class a week has not been secured yet for public health education. A teacher who

is equipped with knowledge and experience in alcohol education should conduct the alcohol education. Adolescents should be able to get an understanding and desirable attitude toward alcohol through small group work. It is necessary for adolescents to be able to reject the pressure of peer groups to drink. Messages and informations should be suitable to the need and maturity of adolescents. Alcohol education should be integrated with other educational programs. A teacher should have unprejudiced and objective attitude and let the final decision made by adolescents themselves.

4. Alcohol Education Through Private Organization

As the drinking is closely related to negative emotional problems caused by family discord, depression, unemployment and divorce. The counselling provided through deep personal relationship is the most effective. The private organizations such as A.A (Alcohol Anonymous), Al-anon where alcoholic people get together and share their problem are being operated in U.S. There is a similar organization called Dan Ju Chin Mok in Korea, in which alcoholics get treatments and help each other to solve alcohol problem. The activity of these organizations is helpful and very effective. But they are not being widely operated and have financial and organizational difficulties. The operation of these organizations could be more effective when they are operated in collaboration with other medical institutions.

5. Alcohol Education in Hospitals

The training for primary health care providers who deal with alcoholics at the beginning stage is neglected. There are not sufficient educational programs of medical schools for medical

personnel who treat and provide counselling to alcoholics. The effective standard or indicators by which medical personnel can detect alcoholics and treat at the beginning stage should be developed. The prevention and treatment service for alcoholics should be provided in conjunction with other hospital services. It can be effective for a person who had recovered from alcoholism to be used as a peer educator. The alcohol education in the workplace should be carried out with the involvement of a labor union so that an identity of alcoholics can be kept confidential.

VI. Conclusion

Alcohol problems can be characterized by their multiple causative factors including social, cultural and psychological factors. Despite the fact that the drinking problem is closely related to our daily living and the hazard of excessive drinking is enormous, the appropriate alcohol education is not being conducted. There are a little opportunities to receive the appropriate alcohol education. Alcohol education should be planned and conducted on the basis of deep understanding on the underlying cultural and psychological factors of drinking behavior. The in-depth study on social and psychological factors that provoke the excessive drinking is needed. Alcohol problems can be solved through four tasks including treatment, rehabilitation, education and campaign and research. The institution that is specialized in these four tasks is needed. The alcohol education should not be limited to mere delivery of knowledges. It requires a multilateral approach involving students, parents, the government, private organizations and mass media.

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음주문제 예방을 위한 효과적인 보건교육방안에 관한 연구

이 영 숙

(서울대학교 보건대학원)

본 연구의 목적은 알코올 문제의 현황을 파악하고 효과적인 음주교육 방안을 모색하기 위한 것이다. 사회문화적 행위로서의 음주행동의 특징을 파악하고 음주로 인한 위해가 우리에게 미치는 영향을 파악하기 위한 것이다. 음주행동은 한 사람이 속한 사회의 문화와 관습이 허용하는 범위에 따라 그 사회가 공유하는 음주에 대한 태도나 가치의 영향을 받아 학습을 통해 습득하게 된다. 음주는 사망률, 이환율, 유산율, 범죄율 등에 막대한 영향을 끼치고 있으며 이로 인한 사회적 비용과 생명손실은 엄청난 것이다. 매스미디어를 통한 음주교육은 다른 법적 제재와 병행될 때 효과적이다. 음주연령이나 세금부과 등을 통해 음주행위를 통제하는 것이 가능하다. 음주교육의 주기능은 법령과 처벌에 대한 두려움(perceived fear)를 높이는 것이다. 음주행위에 관용적인 사회 분위기를 변화시키는 것이 법령이나 처벌보다 더 효과적이다. 과도한 음주행위에 대한 비판적인 사회적 분위기와 같은 비공식적인 사회적인 제재가 음주문제의 예방에 더욱 중요하다. 청소년의 음주행위는 부모와 동료집단과의 관계에 의해 크게 영향을 받기 때문에 부모와 동료집단의 참여하에 객관적인 태도를 통해 자율적인 결정을 할 수 있도록 유도해야 한다. 음주교육에 대해 지식과 경험을 갖춘 교사가 교육을 실시하여야 하며 소그룹 활동을 통해 음주문제에 대한 이해와 바람직한 태도를 습득하게 하고 동료집단의 압력을 거부할 수 있는 능력을 키우는 것이 필요하다. 교사는 편견이 없는 객관적인 태도를 갖추어야 하고 최종적 결정은 지식에 근거하여 청소년이 하도록 하여야 한다. 음주는 가정불화, 좌절감, 실업, 이혼 등의 부정적 감정과 연관되어 있으며 깊은 인간관계를 통한 상담이 효과적이다. 단주친목과 같은 자발적인 민간단체는 알코올 문제를 가진 사람들이 서로 모여 친목하는 가운데 도움과 치료를 받을 수 있다는 점에서 매우 효과적이다. 이러한 단체의 활용이 더욱 확대되어야 한다. 병원에서의 음주교육은 노조의 참여하에 전문적인 의료인들에 의해 이루어져야 한다. 이전에 알코올중독에서 회복된 사람을 동료교육자(peer educator)로 활용하는 것도 효율적인 교육방법중의 하나이다. 의과대학의 교과과정에 음주교육에 대한 내용을 더욱 확대하여야 한다. 음주교육은 음주라는 행위의 저변에 깔린 문화적 심리적 요인에 대한 깊은 이해를 토대로 계획되고 실시되어야 한다. 음주교육은 지역사회 전체의 참여를 통해 부모, 학생, 정부, 민간단체, 매스미디어의 공동참여를 통한 다각적인 접근이 요구된다.