

A Study to Assess the Knowledge on Bad Effect of Alcohol Consumption Among Adult People Residing in All Dadh Village

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Abstract—Alcohol consumption is a major public health issue that adversely affects the individual, family, and society. It has been associated with multiple physical, psychological, and social problems, particularly in rural communities.

Objectives: 1) To assess the knowledge regarding the bad effects of alcohol consumption among adult people residing in All Dadh village. 2) To find out the association between knowledge regarding bad effects of alcohol consumption with their selected demographic variables.

Material and Methods: A descriptive research design was adopted. The study was conducted among 60 adult people residing in All Dadh village using purposive sampling technique. A structured interview schedule in Marathi was administered to collect data. The tool was validated by experts, with a reliability coefficient of 0.82. The data were analyzed using descriptive and inferential statistics such as frequency, percentage, mean, standard deviation, and chi-square test.

Results:

The study findings revealed that majority of the respondents (83.3%) were aware of alcohol, and 85% considered it harmful. About 76.7% reported its bad effects on children, and 73.3% were aware of psychological effects, while most respondents identified the liver as the most affected organ. Only 33.3% had attended any health awareness session. A significant association was found between knowledge scores and selected demographic variables such as education, gender, age, and income ($p < 0.05$).

Conclusion:

The study concluded that although the majority of respondents had awareness regarding the bad effects of alcohol consumption, gaps still existed in knowledge about psychological, social, and economic consequences. Hence, community-based health education programs

are essential to enhance awareness and prevent alcohol-related problems.

Index Terms—Alcohol consumption, Knowledge, Awareness, Adults, Demographic variables

I. INTRODUCTION

Alcohol consumption is one of the most common social practices observed in many parts of the world, including India. It is considered as a major public health issue because of its wide-ranging adverse effects on the individual, family, and community. Alcohol is a psychoactive substance with dependence-producing properties, and its excessive use leads to a variety of health problems.

According to the World Health Organization, alcohol consumption contributes to more than 3 million deaths each year worldwide, representing 5.3% of all deaths. It is a causal factor in over 200 disease and injury conditions, including liver cirrhosis, cancers, cardiovascular disorders, gastrointestinal problems, and psychological illnesses. Apart from physical health issues, alcohol use is also strongly linked with accidents, domestic violence, poor family relationships, and loss of productivity.

In the Indian context, alcohol consumption has been increasing rapidly. Reports suggest that about one-third of the adult population consumes alcohol in some form. Among them, a significant proportion engages in hazardous drinking patterns. The adverse effects are more severe in rural areas, where educational level is low, awareness is poor, and health care access is limited. Alcohol use not only damages the health of the consumer but also adversely affects

children, families, and the socioeconomic condition of the household.

Particularly, alcohol is known to affect the liver most prominently, but it also has a wide impact on mental health, leading to psychological disturbances, anxiety, depression, and in some cases, suicidal tendencies. Children in families where alcohol is misused often suffer from neglect, poor education, and emotional stress. Thus, alcohol consumption is not just an individual concern but a community problem that needs systematic assessment and intervention.

Considering these issues, there is an urgent need to assess the knowledge and awareness among adults regarding the bad effects of alcohol consumption. Creating awareness in the community can help prevent early initiation, reduce harmful patterns of drinking, and promote healthier lifestyles.

I.1 Statement of the Problem

“A study to assess the knowledge on bad effect of alcohol consumption among adult people residing in All Dadh village.”

I.2 Objectives of the Study

To assess the knowledge regarding the bad effects of alcohol consumption among adult people residing in All Dadh village.

To find out the association between knowledge regarding bad effects of alcohol consumption with their selected demographic variables.

Hypotheses

H₀ (Null Hypothesis): There will be no significant association between knowledge scores regarding bad effects of alcohol consumption and selected demographic variables.

H₁ (Research Hypothesis): There will be a significant association between knowledge scores regarding bad effects of alcohol consumption and selected demographic variables.

II. MATERIALS AND METHODS

Research Design: For the present study, a descriptive research design was adopted to assess the knowledge regarding the bad effects of alcohol consumption among adults residing in All Dadh village.

Setting of the Study: The study was conducted in All Dadh village, where adults fulfilling the inclusion criteria were selected for participation.

Sample: The samples were adult people residing in All Dadh village who met the inclusion criteria. The sample size for the study was 60 adults.

Sampling Technique: A non-probability purposive sampling technique was used to select the study participants.

Tools of Data Collection: The tool consisted of two parts –

Part I: Socio-demographic variables of adults including age, gender, education, occupation, religion, income, marital status, and type of family.

Part II: A structured interview schedule consisting of 20 multiple-choice questions prepared in the Marathi language to assess knowledge regarding the bad effects of alcohol consumption. Each correct response was given a score of 1.

Reliability: The reliability of the tool was assessed by using the test–retest method. The reliability coefficient obtained was 0.82, indicating that the tool was highly reliable.

Pilot Study: A pilot study was conducted on a small group of adults to test the feasibility, reliability, and practicability of the tool. Based on the findings, necessary modifications were made before the final data collection.

Data Collection Procedure: The data collection was carried out after obtaining necessary permissions from concerned authorities. The purpose and nature of the study were explained to the participants, and written informed consent was obtained. Data were collected through face-to-face interviews using the structured tool in the local language (Marathi). The period of data collection extended over a few weeks.

Ethical Consideration: Ethical approval was obtained from the Institutional Ethical Committee of SSEVP College of Nursing, Pravara Institute of Medical Sciences, Loni. Written informed consent was taken from all participants, ensuring confidentiality and voluntary participation.

III. RESULTS

The data collected from 60 adult participants residing in All Dadh village were analyzed and findings are presented under three main sections. First, the demographic distribution of respondents is described. Second, the level of knowledge regarding bad effects of alcohol consumption is presented. Finally, the

association of knowledge scores with selected demographic variables is analyzed.

Section I: Distribution on Demographic Variables of Adults In the present study, adults were distributed according to their socio-demographic variables. Majority of the respondents were from the age group of 31–40 years, followed by 21–30 years, while fewer belonged to the older age group. More participants were male as compared to female. With regard to education, the majority had studied up to secondary school, some had higher secondary education, and only a few were graduates or illiterate. Considering occupation, most were engaged in farming and daily wage work, whereas the remaining were in service or self-employed. In terms of income, a large number belonged to the lower income group, followed by middle income, while only a small proportion were in the high-income group. Most of the respondents were married and were living in nuclear families, whereas a smaller group belonged to joint families.

Points: Age: Majority 31–40 years, followed by 21–30 years; few above 50 years. Gender: More males than females. Education: Majority secondary educated; few graduates/illiterates. Occupation: Mostly farmers and daily wage workers. Income: Majority in low-income group. Marital Status: Mostly married. Family Type: Majority in nuclear families.

Section II: Knowledge Regarding Bad Effects of Alcohol Consumption

The study findings showed that most of the respondents had awareness about alcohol and its harmful effects. A majority (83.3%) of the adults were aware of alcohol as a substance, and 85% considered it harmful. More than three-fourths (76.7%) reported that alcohol has harmful effects on children, and 73.3% were aware of psychological consequences of alcohol consumption. Liver was most frequently identified as the organ affected by alcohol use. However, only one-third (33.3%) of the respondents had attended any health awareness programme related to alcohol. These findings indicated that while general knowledge about the physical effects of alcohol was good, gaps remained in the areas of psychological, social, and economic impacts.

Points: 83.3% aware of alcohol., 85% considered alcohol harmful., 76.7% reported effects on children., 73.3% aware of psychological effects., Majority

identified liver as most affected organ., Only 33.3% attended any health awareness programme.

Section III: Association Between Knowledge and Selected Demographic Variables The analysis further revealed that knowledge regarding bad effects of alcohol consumption was significantly associated with certain socio-demographic variables. Respondents with higher education, younger age groups, higher income, and females showed better knowledge levels compared to their counterparts. Statistical analysis confirmed that the association between knowledge and selected demographic variables was significant ($p < 0.05$).

Points: Significant association found between knowledge and: Education, Age, Gender, Income

IV. DISCUSSION

Knowledge Regarding Bad Effects of Alcohol Consumption Among Adults This current study revealed that a majority of the respondents were aware of alcohol and considered it harmful. The findings showed that 83.3% of adults knew about alcohol, 85% considered it harmful, 76.7% reported its bad effects on children, and 73.3% recognized its psychological effects. The majority also identified the liver as the most affected organ. However, only 33.3% of the respondents had attended any health awareness programme related to alcohol consumption. This concludes that while general knowledge regarding alcohol was present, there were gaps in understanding the psychological, social, and economic impacts of alcohol consumption. This study was supported by previous research studies which revealed that awareness of alcohol's harmful effects was high in terms of physical health, especially liver problems, but knowledge regarding psychological and social effects was comparatively low. These studies also highlighted the need for structured community awareness programmes to address these gaps in knowledge.

Association Between Knowledge and Selected Demographic Variables The study findings concluded that there was a significant association between knowledge scores and selected demographic variables such as education, gender, age, and income ($p < 0.05$). Respondents with higher education, younger age, females, and higher income groups showed better awareness compared to their

counterparts. The study findings were supported by earlier rural community-based studies, where significant association was found between knowledge of alcohol's harmful effects and demographic characteristics such as age, gender, and educational level. These results confirm that socio-demographic background strongly influences knowledge about alcohol consumption.

V. CONCLUSION

The study was conducted to assess the knowledge on bad effects of alcohol consumption among adult people residing in All Dadh village. The findings showed that a majority of the respondents were aware of alcohol and considered it harmful. However, there were gaps in knowledge regarding the psychological, social, and economic impacts of alcohol consumption. The study also revealed a significant association between knowledge scores and selected demographic variables such as education, age, gender, and income. This concludes that although awareness exists, there is a need for community-based educational programmes to enhance knowledge and prevent alcohol-related problems.

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