

A Quasi Experimental Study to Assess the Effectiveness of Structured Teaching Programme on The Level of Knowledge Regarding Alcohol Dependence Among Adolescents in A Selected Village at Tirupur (Dt)

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Abstract—Background: Alcohol dependence is a growing public health problem, particularly among adolescents, leading to physical, psychological, and social consequences. Lack of awareness about the harmful effects of alcohol predisposes young individuals to early initiation and dependency. Structured Teaching Programmes (STP) are effective educational interventions to improve knowledge and promote healthy behaviors. **Objectives:** To assess the effectiveness of a Structured Teaching Programme on the level of knowledge regarding alcohol dependence among adolescents in a selected village at Tirupur District. **Methodology:** A quasi-experimental study design with a one group pre-test and post-test approach was adopted. The study was conducted among adolescents selected through purposive sampling. A structured questionnaire was used to assess baseline knowledge regarding alcohol dependence. After administering the Structured Teaching Programme, a post-test was conducted after 7 days using the same tool. Data were analyzed using descriptive and inferential statistics. **Results:** The findings revealed that the mean post-test knowledge score of adolescents was significantly higher than the mean pre-test score. The calculated 't' value indicated a statistically significant difference at $p < 0.05$, proving the effectiveness of the Structured Teaching Programme. **Conclusion:** The study concluded that the Structured Teaching Programme was highly effective in improving the knowledge of adolescents regarding alcohol dependence. Health education interventions at the community level can play a crucial role in preventing substance abuse and promoting healthy lifestyles among adolescents.

Index Terms—Quasi-experimental study, Effectiveness, Structured Teaching Programme, Alcohol dependence, Knowledge, Adolescents.

I. INTRODUCTION:

Alcohol has a long history of use and misuse throughout recorded human history. Biblical, Egyptian and Babylonian sources record history of abuse and dependence on alcohol. In some ancient cultures alcohol was worshiped and in others its dependence was condemned. Excessive alcohol misuse and drunkenness were recognized as causing problems thousands of years ago. However, the defining of habitual drunkenness as it was then known as and its adverse consequences were not well established medically until the 18th century.

Alcohol, tobacco and other substances abuse is a drastic social problem in India. Around 25% of the current users are dependent users. Dependent users as a proportion of current users were 17% for alcohol, 26% for cannabis and 22% were opiates. In India, the prevalence of drug abuse, which is generally low in early adolescence, aged 12 & 13 rises – steeply in the late teenage and is highest during the early 20's.

According to current concepts, alcoholism is considered a disease and alcohol a “disease agent” which causes acute and chronic intoxication, cirrhosis of liver, toxic psychosis, gastritis, pancreatitis, cardio-myopathy, peripheral neuropathy and gastro intestinal cancers. In addition to that it is a leading cause of suicide, automobile accidents, injuries and deaths due to violence. The health problems for which alcohol is responsible are only part of the total social damage which includes family disorganization, crime and loss of productivity.

II. OBJECTIVES OF THE STUDY

1. To assess the pre-test and post-test level of knowledge regarding alcohol dependence among adolescents in both experimental and control groups.
2. To evaluate the effectiveness of the Structured Teaching Programme on the level of knowledge regarding alcohol dependence among adolescents in the experimental group.
3. To determine the association between the post-test level of knowledge regarding alcohol dependence among adolescents and their selected demographic variables.

Hypotheses

H1: There will be a significant difference between the pre-test and post-test level of knowledge regarding alcohol dependence among adolescents in the experimental group.

H2: There will be a significant difference in the post-test level of knowledge regarding alcohol dependence among adolescents between the experimental and control groups.

H3: There will be a significant association between the post-test level of knowledge regarding alcohol dependence among adolescents and their selected demographic variables.

III. MATERIALS AND METHODS

Research Design

A quasi-experimental research design with non-equivalent control group pre-test and post-test was adopted to evaluate the effectiveness of the Structured Teaching Programme (STP) on knowledge regarding alcohol dependence.

Setting of the Study

The study was conducted in a selected village at Tirupur District, Tamil Nadu, chosen for its accessibility and the prevalence of adolescents in the community.

Population

The target population consisted of adolescents aged 13–19 years residing in the selected village.

Sample and Sampling Technique

A total of 60 adolescents were selected for the study (30 in the experimental group and 30 in the control group) using purposive sampling technique.

Inclusion Criteria:

- Adolescents who are within the age group of 13–19 years.
- Those who are available during the period of data collection.
- Those who can read and understand Tamil or English.
- Those who are willing to participate in the study.

Exclusion Criteria:

- Adolescents who have already attended any formal teaching programme on alcohol dependence.
- Adolescents with a known history of psychiatric illness or substance abuse.

Tool for Data Collection:

- A structured knowledge questionnaire was prepared to assess the level of knowledge regarding alcohol dependence. The tool consisted of two sections:
- Section A: Demographic variables such as age, gender, education, family income, type of family, parental occupation, and history of alcohol use in family.
- Section B: Knowledge questions regarding definition, causes, signs and symptoms, complications, prevention, and management of alcohol dependence.

Intervention:

- Pre-test: Both experimental and control groups were assessed using the structured knowledge questionnaire.
- Structured Teaching Programme (STP): The experimental group received a well-prepared teaching session (duration: 45–60 minutes) with charts, posters, and discussion covering concepts related to alcohol dependence.
- Post-test: Conducted on the 7th day using the same questionnaire for both groups to assess the gain in knowledge.

Validity and Reliability:

- The tool was validated by experts in the fields of psychiatry, nursing, and community health.
- Reliability was tested using the split-half method and found to be statistically reliable.

Data Collection Procedure:

After obtaining formal permission from the village authorities and informed consent from the participants, the pre-test was administered. The STP was given only to the experimental group, and after 7 days, a post-test was conducted for both groups.

- Plan for Data Analysis: Data were analyzed using both descriptive and inferential statistics:
- Descriptive statistics: Mean, standard deviation, frequency, and percentage distribution.
- Inferential statistics: Paired 't' test to compare pre-test and post-test knowledge scores within the experimental group; independent 't' test to compare post-test scores between experimental and control groups; chi-square test to find association between knowledge and selected demographic variables.

Ethical Considerations

Approval:

Formal approval was obtained from the Institutional Ethical Committee prior to the commencement of the study.

Permission:

Necessary permission was secured from the village authorities to conduct the study in the selected community.

Informed Consent:

Written informed consent was obtained from the adolescents and, where applicable, assent from parents/guardians for participants under 18 years of age.

Confidentiality:

The privacy and confidentiality of all participants were strictly maintained. Personal identifiers were not used in the data collection tool or reporting of results.

Voluntary

Participation: Participation was entirely voluntary. The adolescents were informed of their right to withdraw from the study at any stage without any penalty.

Non-Maleficence:

The Structured Teaching Programme was designed purely for educational purposes and posed no physical or psychological harm to the participants.

Beneficence: The intervention was expected to benefit participants by improving their knowledge about alcohol dependence and promoting healthy behaviors.

IV. RESULTS & DISCUSSION:

PLAN FOR DATA ANALYSIS

The data collected were edited, tabulated, analyzed, and interpreted, a finding obtained were presented in the form of tables, and diagrams under the following sections

SECTION – I

Data on demographic variables of alcohol dependence among adolescents in experimental group, and control group.

SECTION – I

Data on effectiveness of structured teaching programme the level of knowledge regarding experimental group and control group.

SECTION – III

Data on effectiveness of structured teaching program on alcohol dependence among the adolescents in control group and experimental group with the use of unpaired test

SECTION –IV

Data on the association between the posttest knowledge with the selected demographic variables of adolescents in experimental group were analyzed using chi- square test.

SECTION I: DATA ON DEMOGRAPHIC VARIABLES OFALCOHOL DEPENDENCEAMONG ADOLESCENTS IN EXPERIMENTAL GROUP AND CONTROL GROUP

TABLE – 1 FREQUENCY, PERCENTAGE OF ADOLESCENTS TO DEMOGRAPHIC VARIABLES IN EXPERIMENTAL AND CONTROL GROUP

S. NO	DEMOGRAPHIC VARIABLES	EXPERIMENTA L GROUP		CONTROL GROUP	
		F	%	F	%
1	Age in Years				
	a) 15 to 16 years	9	30%	4	13%
	b) 16 to 17 Years	7	23%	3	10%
	c) 17 to 18 Years	8	27%	13	43%
	d) 18 to 19 Years	6	20%	10	33%
2	Gender				
	a) Male	17	57%	14	47%
	b) Female	13	43%	16	53%
	c) Transgender	0	0%	0	0%
3	Religion				
	a) Hindu	15	50%	10	33%
	b) Muslims	5	17%	12	40%
	c) Christian	10	33%	8	27%
	d) others	0	0%	0	0%
4	Educational Status				
	a) Illiterate	3	10%	2	7%
	b) Primary Education	6	20%	5	17%
	c) Secondary Education	7	23%	10	33%
	d) Higher Secondary Education	6	20%	8	27%
	e) Degree holders	8	27%	5	17%
5	Number of children in the family				
	a) one Children	14	47%	12	40%
	b) Two Children's	12	40%	16	53%
	c) More than Two children's	4	13%	2	7%
6	Bread winner of the family				
	a) father	13	43%	9	30%
	b) mother	8	27%	7	23%
	c) Both	9	30%	14	47%
	d) Others	0	0%	0	0%
7	Type of the				

	family				
	a) Nuclear Family	19	63%	11	37%
	b) Joint Family	8	27%	17	57%
	c) Extended Family	3	10%	2	7%
8	Occupation of the Family				
	a) Unemployed	9	30%	4	10%
	b) Self Employed	10	33%	7	33%
	c) Daily Wages	5	17%	12	20%
	d) Private Employee	6	20%	7	37%
9	Family monthly Income				
	a) Rs. < 5000	7	23%	4	13%
	b) Rs. 5000 to 10000	14	47%	7	23%
	c) Rs. 10000 to 15000	3	10%	12	40%
	d) Above Rs. 15000	6	20%	7	23%
10	Number of Alcoholics in the family				
	a) One Member	19	63%	9	30%
	b) Two Members				
		5	17%	14	47%
	c) More than Two Members	6	20%	7	23%
11	Duration of the Alcoholism in the family members				
	a) < 2 Years	7	23%	13	43%
	b) 2 to 5 Years	13	43%	5	17%
	c) 5 to 10 Years	6	20%	7	23%
	d) < 10 Years	4	13%	5	17%
12	Number of friends with alcoholism				
	a) None	10	33%	11	37%
	b) 1	8	27%	7	23%
	c) 2	8	27%	5	17%
	c) > 2	4	13%	7	23%
13	Hobbies				
	Reading Books	8	27%	4	13%

	(or) Newspaper				
	b) Watching T V				
		9	30%	7	23%
	c) Chatting with friends	7	23%	11	37%
	d) Playing	4	13%	8	27%
	e) others	2	7%	0	0%
14	Dietary Pattern				
	a) Vegetarian	11	37%	2	7%
	b) Non-Vegetarian	8	27%	9	30%
	d) Mixed	11	37%	19	63%

TABLE: 2 MEAN, RANGE, STANDARD DEVIATION, MEAN PERCENTAGE, MEAN DIFFERENCE, 'T' VALUE TO PRE-TEST AND POST TEST LEVEL OF KNOWLEDGE SCORE OF CONTROL GROUP AND EXPERIMENTAL GROUP.

Group	Mean		SD		Mean %		Range	Mean difference	't' value
	Pre test	Post test	Pre test	Post test	Pre test	Post test			
Experimental group	19.01	29.61	6.26	2.59	17.61	52.6	18.40	16.34	14.96
Control group	9.2	11.2	4.96	3.46	15.21	36.26	15.39		P<0.05
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Table-2 Shows the mean, range, standard deviation, mean percentage, mean difference, 't' value to pre-test and post-test level of knowledge score of control group and experimental group.

In Pre-test in experimental group, the obtained over all mean score was 19.01, standard deviation was 6.26, mean percentage was 17.61 and in control group the obtained over all mean score was 9.2, standard deviation was 4.96, and mean percentage was 15.21.

In Post test in experimental group, the obtained over all mean score was 29.61, standard deviation was 2.59, mean percentage was 52.6 and in control group the obtained over all mean score was 11.2, standard deviation was 3.46, mean percentage was 36.26. The obtained post-test mean score in experimental group score was higher than the control group score.

It was inferred that the mean post test score of experimental groups was level the mean post test score of control group.

SECTION III: DATA ON EFFECTIVENESS OF STRUCTURED TEACHING PROGRAMME REGARDING ALCOHOL DEPENDENCE AMONG ADOLESCENTS IN EXPERIMENTAL GROUP.

TABLE: 3 MEAN, RANGE, STANDARD DEVIATION (SD), MEAN PERCENTAGE, MEAN DIFFERENCE, 't' VALUE IN PRE TEST AND POST TEST LEVEL OF KNOWLEDGE REGARDING ALCOHOL DEPENDENCE AMONG ADOLESCENTS IN EXPERIMENTAL GROUP.

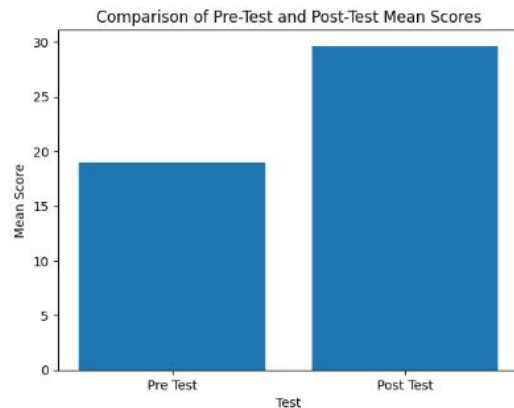
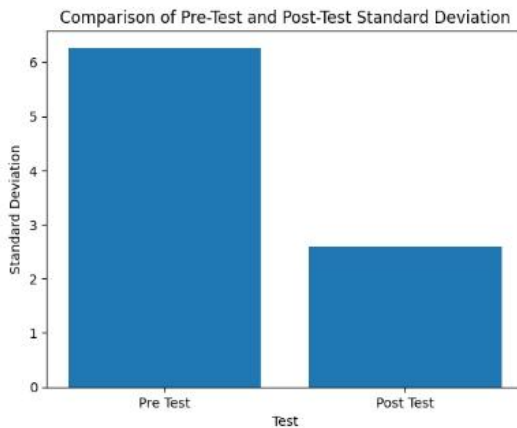
Level of knowledge	Mean	SD	Mean %	Range	Mean difference	't' value
Pre test	19.01	6.26	17.61	18.40	34.99	14.49
Post test	29.61	2.59	52.6	15.39		P<0.05 S

Table-3: shows mean, range, standard deviation (SD), mean percentage, mean difference, 't' value of pre-test and post-test level of knowledge regarding alcohol dependence among adolescents in

experimental group.

The obtained overall pre-test mean score was 19.01, standard deviations SD was 6.26; and mean percentage was 17.61 and the overall Post test mean

score was 29.62, standard deviation was 2.59, and the mean percentage was 52.6. The mean difference was 34.99. The obtained 't' value was 14.49 which was significant at $p < 0.05$. It was inferred that post-test knowledge score was increased after the structured teaching programme in experimental group, it was found to be effective.



SECTION –IV

Data on the association between the post-test knowledge with the selected demographic variables of adolescents in experimental group were analyzed using chi- square test.

Demographic Variable	POST – TEST LEVEL OF KNOWLEDGE			Chi square Value
	Inadequate Knowledge	Moderately adequate knowledge	Adequate knowledge	
Age in Years				x ² =1.09 NS
a) 15 to 16 years		2	6	
b) 16 to 17 Years		3	6	
c) 17 to 18 Years		2	4	
d) 18 to 19 Years		3	4	
Gender				x ² =0.96 NS
a) Male		5	10	
b) Female		6	9	
c) Transgender		0	0	
Religion				x ² =3.42 NS
a) Hindu		8	7	
b) Muslims		2	3	
c) Christian		5	5	
d) others				
Educational Status				x ² =1.34 NS
a) Illiterate		3	0	
b) Primary Education		3	4	
c) Secondary Education		3	3	
d) Higher Secondary Education		3	5	
e) Degree holders		3	3	
Number of children in the				x ² =0.05 NS

family				
a) one Children		4	10	
b) Two Children's		2	10	
c) More than Two children's		2	2	
Bread winner of the family				$\chi^2=1.26$ NS
a) father		3	10	
b) mother		3	5	
c) Both		4	5	
d) Others		0	0	
Type of the family				
a) Nuclear Family		4	15	$\chi^2=1.56$
b) Joint Family		2	6	NS
c) Extended		1	2	
Family				
Occupation of the Family				$\chi^2=1.34$ NS
a) Unemployed		4	5	
b) Self Employed		5	5	
c) Daily Wages		3	2	
d) Private Employee		2	4	
Family Income				$\chi^2=2.44$ NS
a) Rs. < 5000		2	5	
b) Rs. 5000 to 10000		4	10	
		2	1	
c) Rs. 10000 to 15000				
d) Above Rs. 15000		2	4	
Number of Alcoholics in the family				$\chi^2=1.002$ NS
a) One Member				
b) Two Members		4	15	
c) More than Two Members		1	4	
		1	5	
Duration of the Alcoholism in the family members				$\chi^2=1.87$ NS
a) < 2 Years		2	5	
b) 2 to 5 Years		3	10	
c) 5 to 10 Years		2	4	
d) < 10 Years		0	4	
Number of friends with alcoholism				$\chi^2=3.06$ NS
a) None		2	8	

b) 1		4	4	
c) 2		2	6	
d) > 2		4	0	
Hobbies				x ² =3.96 NS
a) Reading Books (or) Newspaper		2	6	
b) Watching T V		2	7	
c) Chatting with friends		2	4	
d) Playing		2	2	
e) others		2	0	
Dietary Pattern				x ² =1.54NS
a) Vegetarian		3	8	
b) Non-Vegetarian		0	8	
c) Mixed		3	8	

Table: 4. Shows the post-test level of knowledge in experimental group.

It was inferred that there was no significant association between the post-test level of knowledge among adolescents with their selected demographic variables such as age, religion, marital status, educational status, occupation of the family, number of children, types of family, family monthly income, number of alcoholics in the family, duration of the alcoholism in the family, number of friends with alcoholism, hobbies, and dietary pattern in experimental group.

It was inferred that the structured teaching programme was independently effective in improving the level of knowledge regarding alcohol dependence among adolescents.

V. DISCUSSION

The results of the study were discussed according to the objectives of the study.

OBJECTIVE 1: To Assess the Pre-Test and Post-Test Level of Knowledge Regarding Alcohol Dependence among Adolescents in Experimental and Control Group.

In Pre-test in experimental group, the obtained over all mean score was 19.01, standard deviation was 6.26, mean percentage was 17.61 and in control group the obtained over all mean score was 9.2, standard deviation was 4.96, and mean percentage was 15.21.

In Post-test in experimental group, the obtained over all mean score was 29.61, standard deviation was 2.59, mean percentage was 52.6 and in control group the obtained over all mean score was 11.2, standard deviation was 3.46, mean percentage was 36.26. The obtained post-test mean score in experimental group was higher than the control group score.

These findings were supported by Dhital AD et al (2005) a conducted pre-experimental study with pre-test and post-test control group design was carried out in four selected schools with similar settings in Dharan town of Nepal. All the subjects were divided into two groups: experimental and control, each comprising of two subgroups of 50 boys and 50 girls. Structured teaching program consisting of information on human reproductive system was used as a tool of investigation for the experimental group, whereas conventional teaching method was used for the control group. Proper education in this age group is important for prevention of untoward social and health related problems. A total sample of 200 Adolescent school students was included in this study. The mean (+/-SD) pretest score of the experimental group on knowledge of reproductive health was 39.83 (+/- 16.89) and of the control group was 39.47 (+/- 0.08). The same of experimental group after administration of the structured teaching program (84.60 +/- 10.60) and of the control group with conventional teaching method (43.93 +/- 10.08) was statistically significant ($p < 0.001$). The use of structured teaching program is effective in improving knowledge and attitude of the adolescents on reproductive health.

OBJECTIVE 2: To Assess the Effectiveness of Structured Teaching Program on The Level of Knowledge Regarding Alcohol Dependence Among Adolescents in Experiment Group.

The obtained overall pre-test mean score was 19.01, standard deviation (SD) was 6.26, and mean percentage was 17.61 and the overall Post-test mean score was 29.62, standard deviation was 2.59, and the mean percentage was 52.6. The mean difference was 34.99. The obtained t' value was 14.49 which was significant at $p < 0.05$. It was inferred that post-test knowledge score was increased after the structured teaching programme in experimental group, and it was found to be effective.

These findings were supported by G. Hussein Rassoo labetal (2007) conducted a quasi-experimental study to assess the educational interventions and evaluation programs in alcohol and drug with undergraduate nursing students ($n=110$) in U.K. A visual analogue scale was used to measure intervention confidence skills before and after the educational programme. The findings showed an improvement in the level of intervention confidence skills of under graduate nursing students.

OBJECTIVE: 3 To Find the Association Between Post- Test Level of Knowledge Regarding Alcohol Dependence Among Adolescents with Their Selected Demographic Variables.

It was inferred that there was no significant association between the post-test level of knowledge and selected demographic data such as age, religion, marital status, educational status, occupation, and number of children, type of family, family income, and dietary pattern and hobbies in experimental group.

It was inferred that the structured teaching programme was independently effective in improving the level of knowledge regarding alcohol dependence among adolescents.

These findings were supported by vaibhav jani, etal (2014) conducted a pre-experimental design, and non-probability convenient sampling technique was used, from 60 adolescents at Vadodara district. The data was analysed using descriptive and inferential statistics. The result conducted that from the entire variable only one variable that is domicile

significantly associated with pre-test knowledge score hence the hypothesis was partially accepted for these variables.

VI. IMPLICATIONS

The findings of the study have the following implications in nursing.

IMPLICATION IN NURSING EDUCATION

- 1.The nurse educators have the response to update the knowledge, attitude and practice of nursing students on knowledge and awareness about alcohol dependence.
- 2.The finding of the study can serve as guideline for the nurse educators for planning and conducting educational programme for student nurses regarding alcohol dependence.
- 3.The nursing students should be made aware about their role in health promotion and disease prevention with relation to alcoholism with relation to alcoholism.
- 4.The students should be motivated to make up innovational approaches to provide health education in different settings such as community hospital.

IMPLICATION IN NURSING PRACTICE

- 1.Structured teaching program helps to improve the clinical staff's knowledge level on alcohol dependence.
- 2.Structured teaching method can be used as a one method of teaching in clinical nursing.
- 3.It can be used in various school and community, psychiatric ward to give health education to the adolescents.
- 4.It can be used in illiterate adolescents also; it helps to easy understanding the topics; it can use in mass group and community.

IMPLICATION IN NURSING ADMINISTRATION

It helps the nursing administration to manage with mass group to conduct awareness programme to community and public. It helps the nurse to learn how they can manage about the problem if arise, organize the programme planning and planning for budget.

IMPLICATION IN NURSING RESEARCH

It helps the student nurse to get an idea to do research

in effectiveness of various methods of awareness regarding alcohol dependence. It gives an idea to do research on alcohol dependence.

LIMITATIONS

- Structured teaching procedure was time consuming.
- Sample size was less to make any generalization.
- Limited to only adolescents.

PERSONAL EXPERIENCE

- 1.The investigator has gained lot of new information and experience in many ways starting from the searching of research problem till the submission of the report.
- 2.Apart from the struggle and tension, now I got an idea about research work.
- 3.Investigator got unlimited literature review.

VII. RECOMMENDATIONS

1.A similar study can be conducted in a large group of adolescents in community. The study can be replicated in different setting to strengthen the finding. A similar study can be conducted with a larger sample size to enhance the generalizability of the findings. A true experimental design with a control group can be used to obtain more accurate and reliable results. The study can be conducted in urban as well as rural areas to compare the level of knowledge among adolescents. A long-term follow-up study can be carried out to assess retention of knowledge and behavioral changes over time. The structured teaching programme can be modified into audio-visual or digital modules for better understanding and engagement of adolescents. Similar studies can be conducted among school students, college students, and working adolescents to compare effectiveness. A study can be conducted to assess the attitude and practice regarding alcohol dependence in addition to knowledge. Comparative studies can be conducted between male and female adolescents to identify gender differences in knowledge levels. A similar study can be carried out by including parents and teachers to evaluate their awareness regarding alcohol dependence. The effectiveness of other interventions such as peer

education, counseling sessions, or awareness campaigns can be compared with structured teaching programmes. A qualitative study can be conducted to explore the reasons for alcohol use among adolescents in the community. The study can be extended to assess the impact of teaching programmes on prevention of substance abuse including tobacco and drugs. Health education programmes can be integrated into school curriculum to promote sustained awareness about alcohol dependence.

VIII. CONCLUSION

The following conclusions were drawn from the findings of the study. Structured teaching method is an effective method of giving information to people. Pre- test was conducted for 30 adolescents in experimental group, 30 adolescents in control group. Demographic variables data and level of knowledge were collected by using structured teaching questionnaire (multiple choice questions) to assess the level of knowledge regarding alcohol dependence among adolescents. After the pre-test structured teaching programme was conducted for adolescents in experimental group and then post- test was conducted on seventh day. The findings revealed the effectiveness of structured teaching programme. The data collected from subject were edited, complied, and analysed by using SPSS version 13. The probability level of $P < 0.05$ was used as the level of significance. It was inferred that there was no significant association between the post-test level of knowledge among adolescents with their selected demographic variables. This method helps for easy understanding and gives more awareness about alcohol dependence among adolescents.

REFERENCES

- [1] ANTON, R.F.; O'MALLEY, S.S.; CIRAULO, D.A.; ET AL. Effect of combined pharmacotherapies and behavioral interventions for alcohol dependence: The COMBINE study: A randomized controlled trial. JAMA: Journal of the American Medical Association, 295(17) pp. 2003–2017, 2006. PMID: 16670409.
- [2] COHEN, E.; FEINN, R.; ARIAS, A.; AND KRANZLER, H.R. Alcohol treatment

utilization: Findings from the National Epidemiologic Survey on Alcohol and Related Conditions. *Drug and Alcohol Dependence* 86(2-3): 214–221, 2007.

- [3] DAWSON, D.A.; GRANT, B.F.; STINSON, F.S.; ET AL. 2006 E 'stimating the effect of help-seeking on achieving recovery from alcohol dependence". (pg.no):824–834.
- [4] National Institute on Alcohol Abuse and Alcoholism (NIAAA). *Alcohol Alert 70: National Epidemiologic Survey on Alcohol and Related Conditions*. Bethesda, MD, 2006.
- [5] GRANT, B.F.; DAWSON, D.A.; STINSON, F.S.; ET AL. "The 12- month prevalence and trends in DSM–IV alcohol abuse and dependence" United States, 1991–1992 and 2001–2002. *Drug and Alcohol Dependence* pg. no:223–234.
- [6] Damson SJ, Sellman JD. Five-year outcomes of alcohol-dependent persons treated with motivational enhancement. *Journal of Studies on Alcohol and Drugs*. 2008; Pg. no 69:589–593.
- [7] Heather N, Morton V, et preference al. Initial for drinking goal in the treatment of alcohol problem. *Treatment outcomes. Alcohol and Alcoholism*. 2010; 45:136–142.
- [8] Leggio L, Ferrulli A, et al. Effectiveness and safety of baclofen for maintenance of alcohol abstinence in alcohol-dependent patients with liver cirrhosis: randomised, double-blind controlled study. *The Lancet*. 2007 pg. no 370:1915–1922.
- [9] Agrawal A, Hinrichs AL, Dunn G, et al. Linkage scan for quantitative traits identifies new regions of interest for substance dependence in the Collaborative Study on the Genetics of Alcoholism (COGA) sample. *Drug and Alcohol Dependence*. 2008; 93:12–20.
- [10] Schlundt DG, Prue DM, et al. Impact of aftercare arrangements on the maintenance of treatment success in abusive drinkers. *Addictive Behaviors*. 1983; 8:53–58.
- [11] Ahmadi N. A double-blind, placebo-controlled study of naltrexone in the treatment of alcohol dependence. *German Journal of Psychiatry*. 2002; 5:85–89.
- [12] Wampold B. A meta-analysis of component studies in counseling and psychotherapy. *Journal of Counseling Psychology*. 2001; 48:251–257.

- [13] Alden LE. Behavioral self-management controlled-drinking strategies in a context of secondary prevention. *Journal of Consulting and Clinical Psychology*. 1988; 56:280–286.NET

REFERENCES

- 1. www.google.com
- 2. www.pubmed.com
- 3. www.nursingcentes.com
- 4. www.ask.com
- 5. www.answer.Com
- 6. www.yahoo.com
- 7. www.medline.com
- 8. www.emedicinehealth.com
- 9. <http://www.reviewsofprogress.org/>
- 10. <http://www.ukessays.com>