

A Study to Assess the Knowledge of Etiological Factors and the Effect of Alcoholism on Health Status among Alcoholic People Residing in a Selected Village

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Abstract: *A descriptive cross-sectional research design was conducted in this study. An evaluative and phenomenological approach was felt suitable for the study. Knowledge assessment design for alcoholic individuals. The study sample consisted of 60 (n=60) alcoholic individuals and their families in a selected village. A total 7-day assessment program was planned for the alcoholic individuals; hence, the delayed post-test was given after 7 days of the immediate post-test. The results: revealed that guidance and awareness helped alcoholic individuals to improve their knowledge about preventing alcohol-associated problems. In the pre-test, 50 alcoholic individuals had inadequate knowledge, 10 alcoholic individuals had adequate knowledge about alcoholic disorders and the impact of alcoholism on family and society, before guidance and Assessment Of knowledge. After the introduction and providing Guidance and education, 40 alcoholic individuals had moderate knowledge, and 20 people had adequate knowledge about the impact of alcoholism. Conclusion: The use of a structured knowledge questionnaire during the pre-test, immediate post-test, and delayed post-test demonstrated that health education is an effective tool to enhance awareness and understanding among alcoholic individuals.*

Keywords: Alcoholism, Alcoholic People, Knowledge Assessment

1. Introduction

Alcoholism is a chronic, often progressive disorder characterized by an individual's dependence on alcohol. It has become one of the most prevalent public health issues worldwide, with a detrimental effect on both individual and societal well-being. Alcohol addiction not only impairs an individual's physical and mental health but also disrupts family structures, economic stability, and social harmony. In rural areas, where access to healthcare and support services may be limited, the negative impact of alcoholism on public health is significant.

Alcohol consumption is influenced by various etiological factors, including genetic predisposition, environmental influences, psychological conditions, and socio-cultural pressures. Despite its widespread occurrence, there is a significant gap in understanding how these factors interconnect and contribute to the development of alcoholism, especially among populations residing in rural communities. Knowledge of etiological factors is crucial for early detection, intervention, and prevention of alcohol addiction¹.

Alcoholism is a significant public health issue that affects individuals and communities worldwide, with profound implications for both physical and mental health. The etiology of alcohol dependence is multifactorial, influenced by genetic, environmental, psychological, and social factors. Understanding these causes and their effects is essential for developing effective prevention and intervention strategies. In rural areas, where alcohol consumption patterns may

differ from urban settings, it is particularly important to assess the knowledge of individuals about the factors contributing to alcoholism and how it impacts their health. This study aims to evaluate the awareness of alcoholic individuals regarding the causes of their addiction and the potential health consequences they may face, such as liver disease, cardiovascular problems, and mental health disorders. By examining the relationship between alcohol use and health status in a rural village context, this research seeks to provide insights into the local community's understanding of alcoholism, its dangers, and the broader health implications, ultimately informing strategies to address this growing public health challenge².

The effects of alcohol use and addiction are particularly concerning in rural areas, where the availability of healthcare resources is limited, and access to mental health services is often scarce. In rural communities, alcohol consumption is frequently embedded within social and cultural norms, making it more challenging to recognize and address problematic drinking patterns. Drinking may be tied to agricultural labor, religious practices, social gatherings, or community events, often seen as a way of coping with the economic and psychological stresses inherent in rural life³.

This study is essential for understanding the impact of alcohol consumption on rural populations, who may face cultural acceptance of alcohol use and limited education regarding its risks. It addresses gaps in knowledge related to the genetic, psychological, and social factors contributing to alcoholism, as well as its health consequences, including liver disease, mental health disorders, and accidents.

Furthermore, by identifying barriers to treatment and examining the impact of alcoholism on families and communities, this research can help inform public health policies, improve access to care, and promote preventive measures, thereby empowering individuals to make informed decisions about their drinking habits⁴.

Rural areas of Nashik district face considerable challenges related to alcoholism due to factors such as low literacy levels, occupational stress among agricultural workers, poverty, and limited access to health education services. Alcohol consumption in these villages not only affects the physical and mental health of individuals but also leads to social problems such as financial instability, domestic conflicts, and reduced work productivity. Due to inadequate healthcare facilities and lack of regular health screening, the adverse effects of alcoholism on health status often remain unnoticed and untreated in rural populations of Nashik⁵.

2. Literature Survey

Literature on knowledge regarding etiological factors of alcoholism.

Ramalakshmi, G. A descriptive correlational study was conducted. Alcoholism is a chronic, progressive disease that affects nearly every cell in the body, including the central nervous system. A study assessing adolescents' knowledge of alcoholism found that 44% were aged 16-17 years, 73.33% were male, and 86.67% practiced Hinduism. The study revealed that 63.33% of adolescents had inadequate knowledge about alcoholism, while 36.67% had moderate knowledge, with none exhibiting adequate knowledge. Knowledge levels were associated with age, but no correlation was found between knowledge and other variables like sex, religion, family type, father's occupation, family income, or information sources. The study highlighted the need for increased education on alcoholism among adolescents⁶.

Joseph H Donroe, E Jennifer Edelman. A cross-sectional study was conducted on unhealthy alcohol use, which refers to drinking alcohol in a way that leads to or has the potential to cause negative physical, psychological, or social consequences, is both common and often not recognized or adequately treated. According to the 2020 National Survey on Drug Use and Health, 7.0% of adults reported engaging in heavy alcohol use in the past month, yet only 4.2% of adults with alcohol use disorder received treatment. Given this gap, primary care settings play a crucial role in improving the screening and treatment of unhealthy alcohol use, which is vital for enhancing both individual and public health outcomes⁷.

Zucker, R. A., & Gomberg, E. S. The etiology of alcoholism is best understood within a longitudinal-developmental framework that incorporates physiological, behavioral, and sociocultural variables. However, it is argued that follow-up studies on alcoholism, while seemingly based on this framework, downplay the importance of personality influences and dismiss the role of childhood experiences. A review of their data suggests a different conclusion regarding the roles of childhood influences, personality, and cultural factors in the

development of alcoholism. An alternative integrative review of the longitudinal literature is presented, framing the findings within a bio psychosocial process⁸.

Literature on Knowledge regarding the effect of alcoholism on health status.

Divane de Vargas. et al, A quasi-experimental study was conducted with 1,270 participants who investigated the effects of a remote intervention on anxiety symptoms and alcohol use in Primary Health Care service users. Of these, 1,033 participants had moderate to severe anxiety and alcohol use risk and received interventions via telephone calls with follow-ups at seven and 180 days. Results showed a significant reduction in anxiety symptoms between T0 and T1 ($\mu=1.6$, $p<0.001$) and in alcohol use patterns between T1 and T3 ($\mu=1.57$, $p<0.001$). The findings suggest that remote interventions can effectively reduce anxiety and alcohol use, providing an alternative for preventive mental health care, especially during accessibility challenges⁹.

Thomas Cargiulo et al, A review study. Alcohol dependence is widespread and has severe consequences for both physical and mental health. It is linked to a range of psychiatric conditions such as depression, anxiety, and schizophrenia, and is associated with more severe alcohol-related symptoms. Chronic alcohol use causes brain damage, impairing memory, cognition, and motor skills. While moderate drinking may be cardio protective, heavy drinking increases the risk of hypertension, heart disease, and stroke. It also raises the likelihood of various cancers, liver disease (including cirrhosis), and injuries due to impaired coordination and judgment. Overall, alcohol dependence poses a significant public health burden¹⁰.

3. Problem Definition

“A study to assess the knowledge of etiological factors and the effect of alcoholism on health status among alcoholic individuals residing in a village.”

4. Objectives of the study

- 1) To assess the knowledge of alcoholic individuals regarding the etiological (causative) factors leading to alcoholism.
- 2) To assess the knowledge of alcoholic individuals regarding the effect of alcoholism on physical, mental, and social health.

5. Methods/ approach

Descriptive research approach: Descriptive cross-sectional design

Study population: Alcoholic individuals residing in the selected village.

Samples: The sample will consist of alcoholic individuals from the target population in selected villages.

Sample size: 60 sample size

Sampling Technique: Purposive Sampling for both quantitative and qualitative components.

The first phase of research uses a quantitative design. Alcoholism will be introduced after assessing knowledge of etiological factors and the effects of alcoholism through a questionnaire. After the introduction of alcoholism, knowledge will be checked through a questionnaire.

In the second phase, alcoholic individuals will be questioned about alcohol problems, and their answers will be recorded. Thus, the second part of the study uses a qualitative design, and after the second phase of data collection, interpretation will be done by comparing and combining results from the methods. One-to-one interviews with alcoholic individuals with alcoholism will be conducted to explore the problem of people related to alcoholism.

The collected data were analyzed using both descriptive and inferential statistics. The pilot study proved to be feasible and practical. The qualitative part of the study involved interviews with alcoholic individuals from the chosen

village. A total of 60 participants took part in this phase. Each interview was conducted during a home visit, which was an effective and essential method of communication, creating a comfortable and open setting in a familiar environment.

6. Result

Organization of Findings

Quantitative data analysis

Section A: Socio-demographic data for alcoholic individuals.

Section B: Observational questionnaire used by investigators.

Qualitative data analysis

Section B: Questionnaire for alcoholic individuals related to alcoholism.

Table 1: Frequency and percentage distribution of demographic variables of alcoholic individuals

S. No.	Demographic variables	frequency	Percentage %
1.	Age of alcoholism individual	18 – 25 Years	20%
		26 – 35 Years	23.4%
		36 – 45 Years	25%
		46 Years and above	31.6%
2.	Gender of the alcoholic individual	Male	95%
		Female	5%
3.	Education Level	Primary education	20%
		Secondary education	28.4%
		Higher education	43.3%
		Illiterate	8.3%
4.	Economic Status	Poor	25%
		Middle class	20%
		Upper class	43.3%
		Below the poverty line	11.7%
5.	Family Size	1 - 3 Members	50%
		4 - 6 Members	28.3%
		7 – 9 Members	13.4%
		10 or above Members	8.3%

Table 2: Frequency and percentage distribution of knowledge assessment of alcoholic individuals.

S. No.	Level of Knowledge	Pre-test frequency	Post-test frequency	Frequency difference	Pre-test frequency Percentage (%)	Post-test frequency Percentage (%)	Percentage difference (%)
1	Poor Knowledge	24	14	10	40%	23.3%	16.6%
2	Average Knowledge	35	42	7	58.4%	70%	11.6%
3	Good Knowledge	1	4	3	1.6%	6.7%	5%

Distribution of distinct themes of quantitative and qualitative data on the cause of alcoholism.

The analysis of both quantitative and qualitative data on the causes of alcoholism revealed that the majority of participants (70%) had an average level of knowledge, while 23.3% had poor knowledge and only 6.7% demonstrated good knowledge. Most participants identified common causes such as stress, peer pressure, and family problems, but lacked a deeper understanding of psychological, social, and biological factors contributing to alcohol addiction. Overall, the findings highlight a moderate level of awareness and emphasize the need for educational and preventive programs to improve understanding of the underlying causes of alcoholism and promote healthier lifestyle choices.

Distribution of distinct themes of quantitative and qualitative data of Strategies for Prevention

The findings suggest that the majority of participants (70%) have only a moderate understanding of preventive measures and strategies to control alcohol addiction, with limited awareness of structured interventions such as therapy and rehabilitation. This highlights the need for community-based awareness campaigns, educational programs, and access to professional support systems that can empower individuals to manage or overcome alcohol dependence effectively.

Distribution of distinct themes of quantitative and qualitative data of Awareness about alcoholism

The findings indicate that most participants (70%) possess only moderate awareness of alcoholism, with limited knowledge of prevention and rehabilitation efforts. Only a

small percentage demonstrated a comprehensive understanding and involvement in awareness activities. This highlights the need for stronger community outreach, educational initiatives, and family-centered interventions to increase public knowledge and promote a supportive environment for alcohol addiction prevention and recovery.

Distribution of distinct themes of quantitative and qualitative data: Effect of alcoholism on health

The findings reveal that the majority of participants (70%) have only a moderate understanding of how the duration of alcohol consumption affects the body. A smaller portion (6.7%) demonstrated in-depth knowledge of specific health consequences, while 23.3% had limited awareness. This reflects a significant need for health education programs to enhance understanding of how prolonged alcohol use damages internal organs, disrupts body functions, and leads to chronic health problems.

7. Discussion

The major findings of the study and discusses them in relation to similar research conducted by other investigators. The study aims to assess the knowledge of etiological factors and the effects of alcoholism on the health status of alcoholic individuals residing in the village.

The study utilized a mixed-method research design, incorporating both evaluative and phenomenological approaches. An observational checklist and structured interview schedule were developed to assess the knowledge of alcoholic individuals regarding the etiological factors of alcoholism and its effects on health.

The findings of the study revealed that the structured educational intervention was effective in improving knowledge of alcoholic individuals regarding the causes of alcoholism and its impact on health. The study provided the researcher with a valuable learning experience, enhancing knowledge and skills in community health education. Guidance from the research supervisor, inputs from experts, and cooperation from community leaders, healthcare workers, and participants played a major role in the successful completion of the study.

8. Conclusion

The study was conducted to assess the knowledge of etiological factors and the effects of alcoholism on the health status of alcoholic individuals residing in the village. Based on the findings of the study, the following conclusions were drawn.

A simple random sample of 60 alcoholic individuals residing in the village was selected based on specific inclusion criteria. The baseline characteristics of the samples were analyzed using descriptive statistics.

In the pre-test, the majority of the alcoholic individuals demonstrated inadequate knowledge regarding the etiological factors and the effects of alcoholism on health, while a smaller proportion showed moderate knowledge, and only a few had adequate knowledge. After the educational

intervention, the post-test findings revealed that most participants had achieved a moderate level of knowledge, and a considerable number demonstrated adequate knowledge about the causes of alcoholism and its impact on health. There was a significant difference between the mean pre-test and post-test knowledge scores, indicating that the intervention was effective.

The qualitative data were collected to gain a deeper understanding of the problems faced by alcoholic individuals and their perceptions regarding the causes and health effects of alcoholism. Participants' experiences, personal narratives, and feedback provided valuable insights and added depth to the research questions addressed in this study. The qualitative results showed that, before the educational program, participants reported having limited knowledge about the causes of alcoholism and its effects on health. However, after receiving the health education intervention, many participants expressed that their awareness and understanding had significantly improved.

9. Future Scope

1) Nursing Practice

The current health care delivery system demands quality and comprehensive care. Nurse administrators must have a clear understanding of the problems faced by alcoholic individuals and continuously update their knowledge regarding alcoholism and its health effects. They can play a key role in planning and implementing educational programs to improve knowledge about the etiological factors of alcoholism and its impact on health, as well as in motivating and guiding the health care team for effective program execution. Workshops, conferences, and discussions may be organized in collaboration with other allied health professionals to enhance awareness and strengthen the capacity of nurses in dealing with issues related to alcoholism.

2) Nursing Education

Psychiatric and community health nurses are expected to act as advocates for individuals struggling with alcoholism. Therefore, nursing education must allocate sufficient time and emphasis to build a strong foundation in understanding the etiological factors of alcoholism and its effects on health. To equip future nurses with the necessary knowledge and skills, the nursing curriculum should highlight the problems faced by vulnerable populations, including individuals with alcoholism, and introduce innovative and effective teaching approaches. Students can be involved in group projects to assess the knowledge level and health impact of alcoholism among community members. The present study reveals the importance of health education programs in improving awareness about alcoholism and promoting better health outcomes among alcoholic individuals.

3) Nursing Research

The present study provides new insights and confirms that health education programs are effective in improving the knowledge of alcoholic individuals regarding the etiological factors of alcoholism and its effects on health. The study suggests that structured educational interventions can be used across various community settings to enhance

awareness and promote healthier behaviors among people struggling with alcoholism. Today, understanding human behavior, decision-making, and dependency patterns is increasingly supported by scientific research in psychology and neuroscience. Alcoholism affects cognitive functions, judgment, and long-term health, and awareness of these changes helps individuals make informed choices. The findings of this study highlight that increased knowledge empowers individuals to recognize risks, seek timely help, and adopt healthier habits. Strengthening community-based educational strategies can therefore contribute significantly to improving the health status of alcoholic individuals residing in the village.

4) Nursing Administration

A nurse administrator is not only responsible for administrative duties but also for ensuring the health and well-being of the community and the healthcare staff under their supervision. He or she can take the initiative to provide opportunities for staff to implement various educational methods aimed at improving knowledge regarding the etiological factors of alcoholism and its effects on health among alcoholic individuals residing in the village. Nurses often encounter challenging situations in community settings; therefore, they should guide individuals through structured educational sessions, group activities, and group discussions to enhance their understanding of alcoholism.

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