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Community Based Nursing Intervention Strategies and its effectiveness on Alcohol Dependence and Quality of Life among Alcoholics

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ABSTRACT

Alcoholism or alcohol dependence is a serious problem that needs to be recognized and addressed in India at the individual, medical and social levels. There is a need to develop comprehensive, integrated and people-centered alcohol control and prevention programs. This study utilizes the community resources, brings the importance of community participation through community forums, community camps, group discussions, community mapping, and diagnoses the nursing problems in alcohol dependence. Comprehensive, coordinated interventions with involvement of the community were developed and implemented for alcohol dependents. The community based nursing interventions were Individual need- based nursing interventions, Alcohol Education, Family counselling, Detoxification and Training of local workers. The overall mean difference in the score of level of dependence and quality of life was statistically significant revealing the effectiveness of the intervention. The individual based alcoholic education, nursing interventions based on the individual need and family counseling proved to be effective. Community volunteers provided support in identification and motivating the alcoholics for the interventions. There was a high correlation between the level of dependence and quality of life among alcoholics. This revealed that the Quality of life among alcoholics is directly related to the level of their dependence on alcohol.

Keyword: *Community based nursing intervention strategies, Alcohol dependence, Quality of life, alcoholics*

1. INTRODUCTION

Alcohol has now become a common word in Indian society. With the impact of globalization, urbanization, industrialization, media influence and changing life styles, alcohol has entered the lives of Indians in a big and unrestricted manner. The word 'alcohol' means different things to different people in our society. Midnaik and Room (1992) [1] have identified different meanings attributed to alcohol use in the community:

- to governments - alcoholic beverages are a source of revenue,
- to a market economist - alcoholic beverage is one more category of consumer product,
- to a cultural anthropologist - a widely used medium of sociability with diverse symbolic meanings, and to a public health specialist - an agent of morbidity and mortality

Research in the past few years has conclusively demonstrated that nearly one in three male adults consume alcohol, and 5% of Indian women are already regular users. All- India averages were Male 31.9% and Female: 2.2% for alcohol consumption (Source: NFHS 3) (2).

The collective review reveals that nearly 30- 35% of adult men and approximately 5% of adult women consume alcohol (Male to Female ratio being 6:1). It has been identified that India has nearly 70 million alcohol users which includes 12 million users who are dependent on alcohol, but does not include millions of social drinkers. Six percent of the male respondents were past - drinkers. The habit was higher among men, with 30% consuming alcohol in the past 12 months as compared to only 0.1% among women.

The average number of drinks consumed on a drinking day was 2 drinks. Less than five percent of current drinkers were binge drinkers (high drinking). The mean age of initiation to regular alcohol consumption was 21 years for the respondents in the age group 15-34 years and 25 years for the respondents in the age group of 35-64 years. Twenty-one percent of males and no females were reported to have consumed alcohol in the past 30 days. The percentage of current drinkers was higher for respondents whose main occupation was agriculture (3)

The field of Community Based Participatory Research (CBPR) is a growing discipline in the field of public health. CBPR is an approach that involves the community of focus in many components of the research process. Focus groups, interviews, surveys, forums, nominal group process, pile sorts, and community mapping are only a few of the methods that can be used

to involve community members in the CBPR process (4).

The futuristic approach towards health promotion and Quality of life for alcohol dependence is the utilization of community participation and community based interventions. The investigator worked to utilize the community resources, bring the importance of community participation through community forums, community camps, group discussions, community mapping, and diagnose the nursing problems in alcohol dependence. Through this community based nursing intervention strategies, the investigator has implemented the nursing strategies to improve the quality of life and reduce the level of dependence among alcoholics

2. METHODOLOGY

Pre-experimental – one group pre-test and post-test was adapted for the study. The dependent variables were level of alcohol dependence and quality of life among alcoholics and the independent variable was community based nursing intervention strategies.

The study was conducted at 5 adopted rural villages of OAHC. Total enumeration of all the alcoholics identified as clinically significant in the 5 adopted rural villages were considered as samples. Sample size comprised of a total estimated 473 alcoholics. The sample size was estimated by power analysis.

The CAGE Questionnaire was used to identify clinically significant alcoholics. The level of alcohol dependence was assessed through SADQ-C (severity of alcohol dependence Quotient- community) and the Quality of Life was assessed through WHO WOL BREF 26 items modified tool which has 4 dimensions of Physical, Psychological, Social Relationship and Environmental domains.

The identified alcoholics were administered with community based nursing intervention strategies over a period of one year. The interventions included individual need- based nursing interventions, alcohol education, family counselling, detoxification and training of local workers.

Level of Dependence	**Mild Dependence (SADQ Score = 4 -19)**	**Moderate Dependence (SADQ Score = 20 - 30)**	**Severe Dependence (SADQ Score = 31 - 44)**	**Very Severe Dependence (SADQ score = 45+)**
Interventions (Community)	Training of local workers			
Interventions (Alcoholic Individuals)	Individual need based nursing interventions	Individual need based nursing interventions	Individual need based nursing interventions	
	Alcohol education	Alcohol education	Alcohol education	
	-	Family counseling	Family counseling,	
			Detoxification	

Fig. 1 Schematic representation of community based nursing interventions

Findings of the study

- The Overall Mean difference between the pre-test and post-test level of alcohol dependence was 1.57 with t-value 31.66, which was highly significant at $p<0.001$. It is evident that Community based nursing intervention strategies were effective in reducing the level of alcohol dependence.
- With regard to QOL in Physical domain, the mean difference was found to be 5.27 with t-value 21.19; QOL in Psychological domain, the mean difference was found to be 5.71 with t-value 23.15; QOL in Social domain, the mean difference was found to be 8.37 with t-value 27.03; QOL in Environment domain, the mean difference was found to be 4.58 with t-value 24.94 and in Overall QOL, the mean difference was23.93 with t-value 32.99. These scores were highly significant at $P<0.001$ level suggesting that the interventions were effective in improving the QOL of alcoholics
- The Correlation r-values suggested that there was negative correlation between levels of alcohol dependence and Quality of Life among Alcoholics. This described that as the level of dependence reduces, the quality of life

improves among alcoholics.

- The overall findings of associating mean differed scores of level of dependence and Quality of Life among alcoholics, show significance with demographic variables like occupation, food habits, income, duration of alcoholism, and times of alcohol intake per week

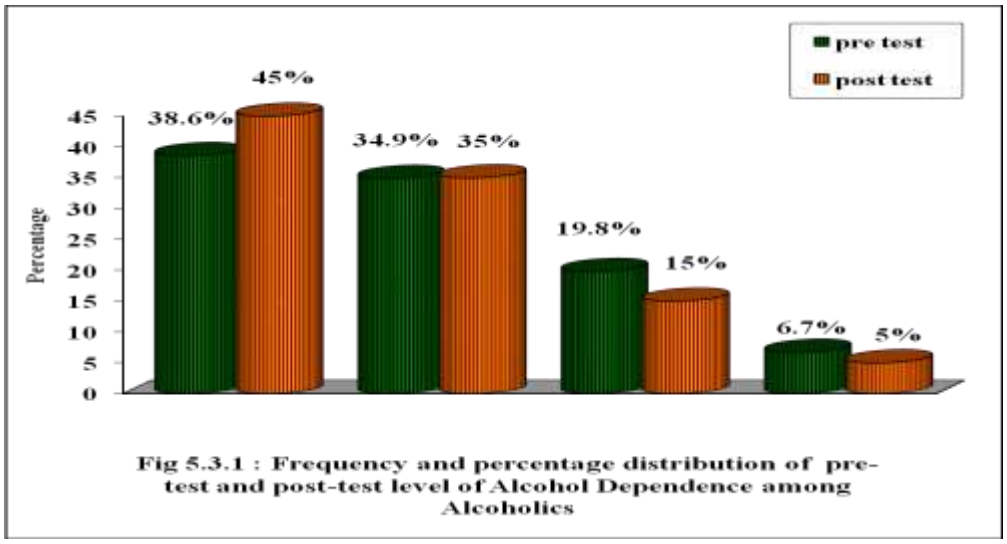

Fig 2- Frequency and Percentage distribution of pre-test and post-test level of alcohol dependence among Alcoholics

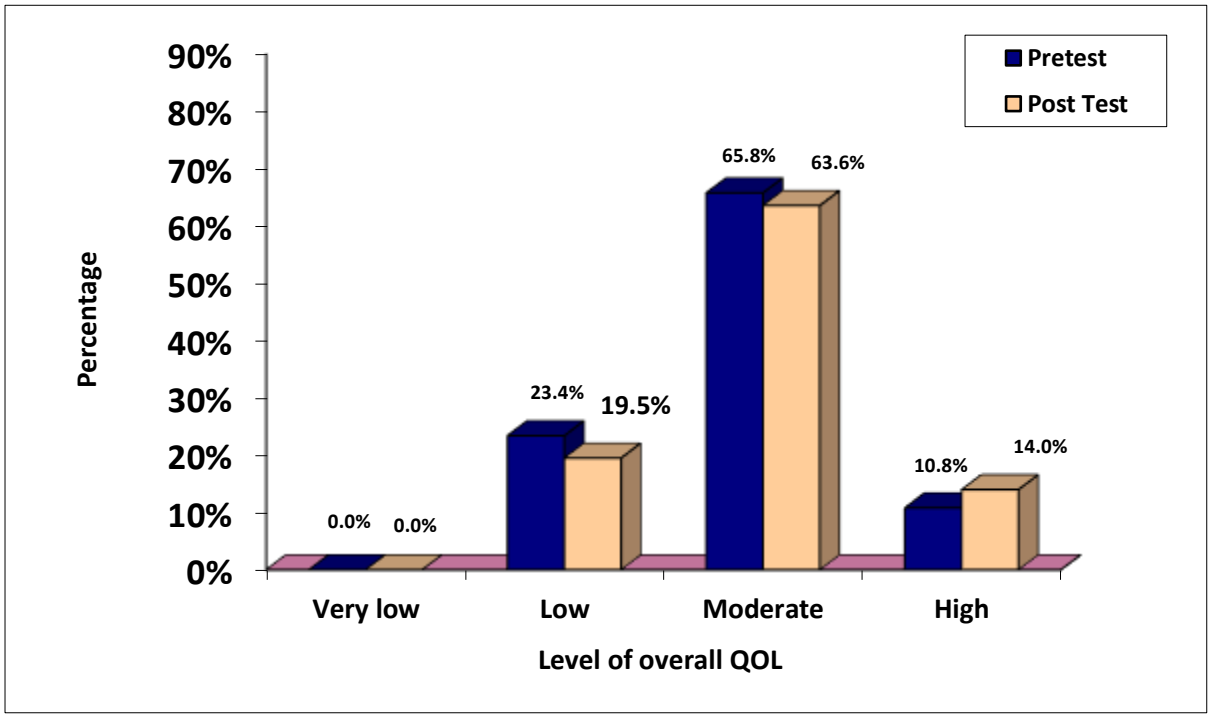

Fig.3 Frequency and Percentage distribution of pre-test and post-test Overall Quality of Life among Alcoholics

	Pre-test		Post- test		Mean difference	't'-value	P-value
Alcohol Dependence	Mean	SD	Mean	SD			
	24.15	11.65	22.59	11.62	1.57	31.66	0.000****

Table 1: Comparison of pre-test and post-test Mean, S.D. and mean % of Overall Level of Alcohol Dependence and its significance

N = 473

Overall QoL	Pre test		Post test		Mean difference	't'-value	P-value
	Mean	SD	Mean	SD			
	194.803	73.02	218.73	68.32	23.93	32.99	0.000***

Table 2: Comparison of pre-test and post-test Mean, S.D, and Mean% of Overall QoL and its significance

Sl.No.	Variables	Correlation	
		Pretest	Post test
1.	Level of dependence	-0.20***	-0.22***
	QoL – Physical Health		
2.	Level of dependence	-0.14	-0.44
	QoL-Psychological		
3.	Level of dependence	0.04	0.00
	QoL – Social Relationship		
4.	Level of dependence	0.12**	0.08*
	QoL – Environmental		

Table 3: Correlation between level of alcohol dependence and Quality of Life among alcoholics

Research Utilization

Communities were supported and empowered by ICCR & OACHC to use the findings and recommendations of the study in adopting effective approaches to prevent and reduce the harmful use of alcohol by changing collective, rather than individual behaviour while being sensitive to cultural norms, beliefs and value systems.

For this area the ICCR & OACHC utilized the research findings and implemented the following community based interventions:

(a) Supporting rapid assessments in order to identify gaps and priority areas for interventions at the community level

(b) Facilitating increased recognition of alcohol-related harm at the local level and promoting appropriate effective and cost-effective responses to the local determinants of harmful use of alcohol and related problems through local volunteers

(c) Providing information about effective community-based interventions, and building capacity at the community level for their implementation

(d) Providing community care and support for affected individuals and their families through the health center

(e) Establishment of rehabilitation & counselling centers for alcohol dependents in the community

(f) Tie-up with De-addiction centers for providing referral services for severe alcohol dependents

3. CONCLUSION

This research study evidenced that the community based nursing intervention strategies such as individual need - based nursing care, alcohol education, family counselling and

detoxification referral services can be used as effective measures in the community for alcoholics to reduce their level of alcohol dependence and improving their quality of life. This evidence was put in utilization through the regular implementation of the above said interventions through OACHC and ICCR. Implementation of continued and sustained

nursing interventions in the community on a long term may further reduce the level of dependence among alcoholics.

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Conflict of Interest: None

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