Familial and social conditions of alcohol drinking in children and adolescents

Maciorkowska E*, Buraczewska E, Sacharewicz A

Department of Pediatric Nursing, Medical University of Białystok, Poland

Abstract

Purpose: The aim of the study was to evaluate the frequency of alcoholic beverage use among children and young people of Białystok city and to assess the influence of familial and environmental factors on this phenomenon.

Material and methods: The study included 894 pupils in the city of Białystok. An anonymous questionnaire, prepared in the Department of Pediatric Nursery of the Medical University of Białystok was used in the study.

Results: The examinations revealed that alcohol use among adolescents of Białystok increases with the increasing age of pupils (33.2% – the first grade of middle school, 63.4% – the third grade of middle school, and 79.9% – the second grade of high school). The first experience with alcohol took place in the 5-10 age bracket, but the greatest alcohol initiation (35% of young people) was reported in the 10-15 age bracket; 16% of children were not capable of establishing proper relations with their parents. The examined pupils observed destructive behavior most frequently among their friends (38%) and in people with whom they had no direct contact (36.8%). Adolescents were revealed to use alcohol for company (21.6%), due to lack of safety feeling (18.4%), and the ability of free time organizing (23.4%).

Conclusion: 1. Alcohol use by children and adolescents from the city of Białystok increases with the age and the biggest alcohol initiation takes place in the age of 10-15 brackets. 2. Familial and social conditioning/factors influence alcohol use by children and adolescents.

Key words: children and adolescents, alcohol, familial and social conditioning.

* CORRESPONDING AUTHOR:

Department of Pediatric Nursing, Medical University of Białystok 15-274 Białystok, ul. Waszyngtona 15, Poland Tel: +48 85 7450565; Fax: +48 85 7450568

e-mail: emaciorkowska@o2.pl (Maciorkowska Elżbieta)

Introduction

The development of civilization creates numerous positive possibilities of the intellectual, physical, and psychosocial development of a young man. However, it can also bring about situations that influence negatively on his health [1].

The school age is a period of a child's dynamic development, in which behavior and abilities are created. It is also the period in which many disorders appear or are deepened and then are brought to the adult life.

The health potential, from childhood and adolescence, determines health, quality of further life, and proper functioning in the society [2].

According to the World Health Organization, alcohol use is one of the main risk factors for the health of young people [3]. The results of various studies, both in Poland and other countries, point to the fact that more than 80% of adolescents start drinking alcohol before 18 years of age [4-7]. Over 25% of examined pupils admit at least 4 alcoholic intoxications, treating it as "the life success" [8]. The National Agency for Alcohol Problems Solution in Poland stresses that each year the number of young people consuming alcohol increases and the age of alcohol initiation decreases [9]. The relation between the familial and social factors and children's drinking alcohol has been stressed in many studies. The relation to alcohol in adolescents' social environment as well as general situation in their families attracts a particular attention [9]. A detailed analysis of these factors can contribute to the establishment of effective prophylactic strategies in order to diminish the number of children and adolescents drinking alcohol.

The aim of the study was to evaluate the frequency of alcoholic beverage use among children and young people of Białystok city and to assess the influence of familial and environmental factors on this phenomenon.

Material and methods

The study included 894 pupils of the first grades (319 pupils) and of the third grades of middle schools (284 pupils), and the second grades of high schools (291 pupils) from schools randomly chosen in the city of Białystok in 2006. Girls comprised 52.5% while boys – 47.5% of the examined population. An anonymous questionnaire, worked out in the Department of Pediatric Nursing, was used in the study. The part entitled "You and your family" consisted of 25 questions concerning family and social conditions of alcohol consumption by children and adolescents while the part entitled "You and alcohol" was made up of 14 questions. Children's parents, adolescents above 16 years old, the Board of Science and Education in Białystok, the headmasters of randomly chosen schools as well as the Bioethical Committee of the Medical University of Białystok gave their consent for the study.

The results were presented in correlation tables containing absolute numbers and appropriately counted percentage values, with the use of Statistica 5.0 program.

Results

The present study revealed that alcohol use among children and adolescents increases with the age. The percentage of young people consuming alcohol in the first grade of middle school equaled 33.2%, in the third grade, the use was two-fold higher, and almost 80% drank in the second grade of high school. The first experience with alcohol took place in the 5-10 age bracket, but the greatest alcohol initiation (35% of young people) was reported in the 10-15 age bracket.

Pleasure of alcohol use was stated by 30.7% of adolescents. It is a way of spending free time for 23.4% of examined young people. Other causes of drinking were the need of acceptation of a peer group (21.6%) and the escape from reality (18.4%).

The vacations and meetings with friends are favorable period for alcohol use according to 11% of young people, and for 6% of the questioned each occasion is good for drinking.

The study showed that 14.4% of children are brought up in abstinent families. In 15.8% of families, alcohol is drunk whenever there is an occasion while in 5.2% families alcohol is drunk without occasion. Alcohol consumption among siblings of the surveyed presented the similar percentage: 5.6% of siblings drink frequently and without a special occasion and 11% - always whenever there is an occasion. Full families were stated in 83.2% of pupils and one-parent families - in 16.1%. The examination revealed that 58.1% of adolescents have good contact with both their parents, 21% have better relations with their mothers, and 6.3% could not establish good relations with their parents. Every 5 child (18.8%) admits that they underwent various kinds of violation at home. According to young people, the model of bringing up should include: increased mutual trust (33%), the system of rewards (32%), decreased parents interference as far as school and free time were concerned (29%). As for the system of punishment, 18.3% of pupils supported the idea, 13.2% think that excessive strict discipline should be eliminated, and 7.1% of adolescents claims their parents spend too much time working. The pupils observed negative standards most frequently among their peers (38%) and people with whom they have no direct contact (36.8%). Young people also observed destructive behavior in their familial environment – father (7.1%), siblings (5%), and mother (1.9%). More than half of children (63.4%) have problems with conflicts solution and 19.7% were unsatisfied with their lives.

Despite the statuary ban on selling alcohol to minors, only 5% of the examined reported that a shop assistant asked each time for the identification document. It was also stated that 18% of examined adolescents obtained alcohol at parties, 15% bought it themselves, and 7% counted on older mates to buy it.

According to the study, alcohol was very easily accessible as young people buy it most frequently in the neighborhood (21.7%) or in a shop, where no one knew them (12.1%). It turns out that only 70.8% of parents talk about bad habits with their children.

Discussion

The results showed that the number of young people consuming alcohol increased with age (33.2% – the first grades of middle school, 63.4% – the third grades of middle school, and 79.7% – the second grades of high school) and each year the age of alcohol initiation decreased. It was also confirmed by national questionnaire studies ESPAD of 2003. According to them, alcohol was tested by 92.5% of the third grade of middle school pupils and 96.7% of the second grade of high school pupils [10]. The family takes the moral and legal responsibilities for the health of their children. According to Muszalik and Bartuzi, the family should be a model and ally of school in the creation of pro-healthy behavior [1].

One of the watchwords of the World Health Organization, "Health starts at home", points to a significant role that is played by a family in the promotion of health of its members [1].

Woronowicz has stressed that, bringing up children in sobriety, presenting information of bad habits and creating a proper life style, is of great importance in prophylactic actions [11]. Parents should comment on the cases of alcohol abuse observed by children in the street or on TV and instill proper behavior standards in their children [12-14].

Thus, the system of preventive bringing up is based on the rational appropriate activities and creation of such a conduct of a young person, which could be deprived of inappropriate behavior and deviations and should also concentrate on egoistic and asocial conduct [15].

Moreover, the studies revealed that approximately 20% of parents of the examined pupils did not try to discuss the problem of alcohol with their children due to lack of competence and knowledge on alcohol use and abuse. It was also confirmed by studies carried out in Wrocław. The results of these studies stressed that a large amount of parents (37%) is interested in gaining information concerning bad habits and ways of helping young people having drinking problem [1]. Therefore, it is required to conduct wide and detailed education of not only among young people but also their parents. It is important for them to know causes and mechanism of habit formation in order to recognize the danger and take up prophylactic actions. Among familial factors, conditioning alcohol consumption by adolescents, the parents relation to the phenomenon plays a great role. According to studies conducted by Niełacny, 37% of parents do not realize that their children drink alcohol. Moreover, 15% of those who knew, accepted such a behavior while 14% were indifferent [16]. The results of many studies give a warning that young people, whose parents drink a lot, use alcohol more often than those whose parents do not drink [12,17,18]. Thus, it is alarming that 16% of the examined young people can observe their parents drinking alcohol always whenever there is an occasion to drink and 5% – parents drinking even without an occasion. It can lead to the conviction that drinking is common and is accepted in the society as children take the models from specific behaviors of their parents than on what others say [19,20].

Young people state that mutual understanding, the system of rewards, more toleration of their parents regarding school and free time are the issues they expect from their parents.

The studies by Jelonkiewicz and Kościńska-Dec showed that support and control as the factors of familial process are connected with drinking by adolescents [21]. It was observed that the weak support and a poor control of parents are strictly connected with the intensified drinking by young people. Our study revealed that 7.2% of young people has difficulty with establishing good relations with their fathers, 2.5% – with their mothers, and 6.3% are not able to establish proper relations with both their parents.

According to Lowe et al. drinking alcohol by young people is connected with improper mother-child or father-child relations [22]. It was confirmed by Chassin and DeLucia [23]. Young people abuse alcohol more frequently in families, where parents are not emotionally connected with their children and are not consequent in their bringing up practices. Simultaneously, Stępień stresses that in girls – the most important is emotional relation to their parents while in boys – decisive and conventional rules of the familial life [24].

Conflicts in family (separation, divorce, violence in family), pathological ways of problems solving, lack of interest of parents in their children life and behavior, use of improper bringing up methods – the passive conduct of the parents, their tolerance, urging children to drink or buy alcohol, financial problems, the breakdown of familial rituals (shared meals, holidays and vacation), feeling of danger, lack of a strong model of mother or father in the family are other negative factors that influence drinking alcohol by children and young people [12,23,25,26].

Besides familial factors, the environment and peers have also an effect on drinking alcohol by adolescents. Raundner claims that too much tolerant social conduct to that kind of phenomenon is another supporting factor of drinking alcohol by young people [26].

Kobrzyńska and Marcinkowski add that teachers and tutors are frequently too tolerant to alcohol drinking by their charges and such a tolerance can sometimes take the form of consent and is manifested with lack of interest in the problem and liberal treatment of the alcohol-influenced pupils [27]. Moreover, easy access to alcohol undoubtedly benefit the intensification and distribution of drinking alcohol by children and adolescents. Despite the statuary ban on selling alcohol to minors, more than 30% of the examined reported that a shop assistant did not ask for the identification document. Inefficiency of rules that limit the access to alcohol for young people was also confirmed by ESPAD studies [10].

As it was shown in the studies, young people from Białystok city use alcohol most frequently not to stand out from the group, lack of safety, self-confidence, and certain skills, such as organizing free time and getting to know new people. Thus, they drink because they have problems with social, family, and emotional life, and the acceptation in the environment.

According to Bartnicka, these are the main factors that favor, initiate, and consolidate alcohol use by adolescents [25]. It was observed that destructive behavior was most frequently seen by young people among their friends (38%).

Muszalik et al. stressed that the number of drinking young people who adopt the standards from their peers increases [28]. It happens due to the fact that the child treats alcohol as the means of gaining the acceptation and contacts in the group.

Other social factors affecting alcohol use by young people are as follows: local destructive environment, school concentrated on the didactic function and no or minimum bringing up function, lack of appropriate knowledge concerning properties, action, and effects of alcohol use, and specifically knowledge that alcohol is a substance not necessarily harmful for young people.

Many authors claim that alcohol use by young people should be openly countered due to health and bringing up considerations and should not be tolerated in the society.

According to Muszalik and Bartuzi, introducing the consistent programs of bringing up without bad habits, raising young people and teachers' attention as well as cooperation with the family could bring expected results [1].

Conclusions

1. Alcohol use among children and young people from Białystok city increases with the age, and the biggest alcohol initiation is in the 10-15 age brackets.

2. Familial and social conditioning have the influence on alcohol use by children and young people.

References

1. Muszalik M, Bartuzi Z. Znaczenie środowiska wychowawczego w ograniczaniu palenia papierosów i picia alkoholu wśród młodzieży szkolnej miasta Włocławka. Pielęgniarstwo XXI, 2004; 1: 59-65.

 Herda J, Poznański K, Wdowiak L. Problemy społeczne dzieci i młodzieży w środowisku nauczania i wychowania. Zdr Publ, 2004; 114: 595-9.

3. Raport o stanie zdrowia na świecie 2002. Analiza zagrożeń, promocja zdrowia. PARPA, Warszawa, 2003.

 Bachman JG, Wadsworth KN. Smoking, drinking and drug use in young adulthood. Lawrence Erlbaum Assoc Mahwah. New Jersey, 1997.

5. Engels R. Forbiden Fruits. Social dynamics in smoking and drinking behaviors of adolescents. Universitaire Press. Maastricht, 1998.

6. Jessor R, Donovan JE, Costa F. Beyond adolescence: problem

behavior and young adult development. Cambridge: Cambridge Univ. Press; 1999.

7. Woynarowska B, Mazur J. Zdrowie młodzieży szkolnej w Polsce. Zachowania zdrowotne i zdrowie młodzieży szkolnej w Polsce i innych krajach. Wydział Pedagogiczny Uniwersytetu Warszawskiego, Warszawa, 2000.

8. Żuralska R, Dziedziczko A, Marcinowski A. Alkohol a młodzież szkolna. Zdr Publ, 2006; 116: 12-4.

9. Makara-Studzinska M, Turek R, Iwanowicz-Palus G. Nadużywanie alkoholu przez młodzież. Zdr Publ, 2006; 116: 8-11.

10. Sierosławski J. Europejski program badań ankietowych w szkołach ESPAD. Instytut Psychiatrii i Neurologii 2002-2006.

11. Woronowicz BT. Sposoby zapobiegania problemom alkoholowym. Wychowanie Na Co Dzień, 2001; 10/11: 304-5.

12. Adger H, Werner MJ. Problemy alkoholowe w praktyce lekarza pediatry. Pacjent z problemami alkoholowymi w podstawowej opiece zdrowotnej. Alkohol a Zdrowie. PARPA, Warszawa, 1997; 19: 69-75.

13. Tyburska A. Alkoholizowanie się nieletnich i jego konsekwencje. Prob Opiek-Wychow, 1998; 9: 15-7.

14. Ugniewska C. Pielęgniarstwo psychiatryczne i neurologiczne. Wydaw. Lekarskie PZWL, Warszawa, 1998: 199-214.

15. Krajewska-Kułak E, Klapa W, Lewko J, Wrońska I, Łukaszuk C, Jankowiak B, Bartoszewicz A, Rolka H, Leszczyńska M, Krajewska K, Sierakowska M, Szyszko-Perłowska A. Opinie pielęgniarek na temat potrzeby edukacji osób z marginesu społecznego oraz młodzieży narażonej patologiami. Alkoh i Narkom, Warszawa, 2004; 1: 91-101.

 Niełacny K. Ocena wybranych czynników kształtujących picie alkoholu wśród młodzieży szkolnej płci męskiej Ostrowa Wielkopolskiego i gmin ościennych. Ośrodek Apostolstwa Trzeźwości, Ostrów Wielkopolski, 1994. 17. Woronowicz BT. Bez tajemnic o uzależnieniach i ich leczeniu. Instytut Psychiatrii i Neurologii, Warszawa, 2003.

 Connor PD, Streissgut AP. Picie alkoholu w różnych okresach życia. Alkohol a Zdrowie. PARPA, Warszawa, 2000; 25: 70-80.

19. Okulicz-Kozaryn K, Borucka A. Zmiany w piciu alkoholu przez młodzież badania mokotowskie 1984-1988-1992-1996. Alkoh i Narkom, 1997; 2: 179.

20. Zajączkowski I K. Nikotyna, alkohol, narkotyki – profilaktyka uzależnień. Rubikon, Kraków, 2001.

21. Jelonkiewicz I, Kosińska-Dec K. Rodzinne właściwości a picie alkoholu przez dorastających. Alkoh i Narkom, 2003; 1: 57-68.

22. Lowe G, Foxcroft DR, Sibley D. Picie młodzieży a style życia w rodzinie. PARPA, Warszawa, 2000.

23. Vaillant GE, Hiller Strumhofer S. Picie alkoholu w różnych okresach życia. Alkohol a Zdrowie. PARPA, Warszawa, 2000; 25: 84-96.

24. Stępień E. Ocena własnych relacji z rodziną a picie alkoholu przez dorastających. Alkoh i Narkom, 1996; 1: 83-96.

25. Bartnicka D. Problematyka alkoholizowania się młodzieży szkolnej. Auxil Soc, 1999; 3/4: 66-78.

26. Raundner A. Zagrożenia alkoholowe wśród młodzieży szkół ponadpodstawowych w okresie zmiany społecznej. Auxil Soc, 2001; 3/4: 82-105.

27. Kobrzyńska T, Marcinkowski JT. Problemy związane ze spożywaniem alkoholu w okresie adolescencji. Problemy wieku dojrzewania cz. 2. Probl Hig, 2000; 69: 142-9.

28. Muszalik M, Marzec A, Bartuzi Z. Edukacja Zdrowotna metodą zapobiegania paleniu papierosów i piciu alkoholu wśród młodzieży szkolnej. Pielęg Pol, 2005; 2: 225-9.