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**Knowledge, Attitudes and Practice towards Alcohol Use  
and its Related Factors among Regular Users**

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## **Knowledge, Attitudes and Practice towards Alcohol Use and its Related Factors among Regular Users**

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### **Abstract**

**Background:** Extreme and regular use of alcohol may cause the progression of chronic diseases and other serious health issues. Regular alcohol consumption has serious consequences for the health and well-being of those who drink regular additionally, the lives of those around them.

**Purpose:** Reason for conducting this research study was to evaluate knowledge, attitudes and practice towards alcohol use and its related factors among regular users. It also examined the socio-demographic, drinking and purchasing behavior of the targeted population using alcohol in District Multan and Khanewal.

**Methodology:** A descriptive study with self-structured questionnaire that represent sample (n = 100) of regular alcohol users in the study area for quantitative analysis and focus group discussions were conducted with regular alcohol users; three focus group discussions involved 4 regular alcohol users and three involved 5 regular alcohol users for qualitative analysis. A total of 100 regular alcohol users took part in the study through convenient sampling after their written informed consent.

**Findings:** This study illustrated the leading cause of alcohol use-curiosity which indicated 66% of the respondents' preferred to intake 1 to 2 bottles which used to relax their brains. It is quite evident that the regular alcohol users used very cheap alcohol if they had low income. The information among the users was insufficient but the attitude towards alcohol use was positive.

**Unique contribution to theory, practice and policy:** The outcomes ought to be thought of by the concerned departments, decision and policy makers for endorsing the execution of alcohol deterrence approaches especially within the districts and also in the whole country.

**Keywords:** *Consumption, consequences, knowledge, attitude, practice.*

## Introduction

Alcohol is considered as one of the ancient addictions ever known to mankind and is legally prohibited in Pakistan since 1970s. Still a considerable proportion of the community is associated with its consumption. Currently, a flourishing illegal market satisfies the enormous need. Nadeem Farooq Paracha traced the troubled history of liquor utilization in Pakistan (Naya Daur Media, 2018). Drinking alcohol is a taboo in the community and very few people discuss it openly. It is because of an official law of the country which has declared about 96% of the people in the country to abstain from drinking alcohol except the minorities. The figures obviously have changed due to extensive population (Suneel et al., 2021). Around three million individuals passed on worldwide because of liquor consumption which represents 5.3% of all deaths reported by the World Health Organization in the year 2016. Thousands of these deaths were men. In general, the unsafe utilization of liquor causes over 5% of the worldwide sickness (World Health Organization (WHO), 2018).

A few studies involving the dynamics and behavior of alcohol consumption have shown that mostly alcohol is used for recreation such as in weddings, parties, new year etc. Most researches have shown that alcohol consumption is also associated with depression, relationship and social issues. There has also been a case that shows its usage for decreasing stress (Haviland, 2013; Jones et al., 2015). Some other studies have depicted other reasons such as unstable political condition, terrorism, and insecurity. A study in Pakistan also observed that male Muslims, specifically daily wagers, labor force and elite businessmen are more involved in alcohol consumption (Ali et al., 2011).

In Pakistan the data of alcohol consumption, knowledge, attitudes and perception of alcohol among regular users is only limited to big cities, specifically of Lahore in upper Punjab, and Karachi in Sindh. There is enough data of alcohol use and abuse collected through cross-section studies but only from developed cities of the country (Suneel et al., 2021). The demographics of alcohol users are critical in understanding the dynamics and involvement of a community. And to determine the impact that it is causing on that specific community. It can be endorsed by a similar cross sectional study conducted in Karachi, the author concluded that alcohol was the third most abused drug after amphetamine and cocaine (Ali et al., 2011). Further the impact of this abuse is shown by Ahmed et al., (2014) stating that about 10% of the alcohol related diseases have been increased in past 5 years. Another study showed that in recent period about 1 million of people developed alcohol related diseases. The change in the age of the people to initiate drinking has also observed to be changed in the recent times. The more teenagers have appeared to start alcohol consumption (Haviland, 2013; Ali et al., 2011).

According to WHO report (2018), the health consequences of alcohol use in Pakistan is shown in the figure 1.

## HEALTH CONSEQUENCES: MORTALITY AND MORBIDITY

Age-standardized death rates (ASDR) and alcohol-attributable fractions (AAF), 2016

	ASDR*		AAF (%)		AAD** (Number)
Liver cirrhosis, males / females	28.7	30.1	12.8	3.2	2 576
Road traffic injuries, males / females	25.4	12.7	1.0	0.7	268
Cancer, males / females	113.2	123.9	0.9	0.1	601

\*Per 100 000 population (15+); \*\*alcohol-attributable deaths, both sexes.

Years of life lost (YLL) score\*, 2016

LEAST < 1 2 3 4 5 > MOST

\* Based on alcohol-attributable years of life lost.

Prevalence of alcohol use disorders and alcohol dependence (%), 2016\*

	Alcohol use disorders**	Alcohol dependence
Males	0.6	0.3
Females	0.1	0.1
Both sexes	0.4	0.2
WHO Eastern Mediterranean Region	0.8	0.4

\* 12-month prevalence estimates (15+); \*\*including alcohol dependence and harmful use of alcohol.

**Figure 1: Health consequences of alcohol consumption in Pakistan by WHO, 2018.**

The present study is specifically designed to provide baseline information of alcohol consumption pattern, knowledge, attitudes and perceptions of the people in the major districts of South Punjab, Multan and Khanewal. This article is focused on understanding the complex set of relationships between demographics i.e. urban and rural, economic factors, and attitudes i.e. violent nature with alcohol-related outcomes which have not been discussed in previous studies.

### Objectives of the Study

#### Primary Objectives

The most important objective of this study was to discover knowledge, attitude and practice towards alcohol use and its related factors among regular users in district Multan and Khanewal within a period of 2 months starting from 10<sup>th</sup> June, 2021 to 10<sup>th</sup> August, 2021.

#### Secondary Objectives

Secondary Objectives were simplifying the clear understanding of the relationship between;

- Demographic and alcohol use among Regular users
- Drinking Behavior and alcohol use among Regular users
- Purchasing Behavior and alcohol use among Regular users

### Review of Literature

Alcohol is a naturally dissolvable particularly known for its human utilization. The type of liquor that is found in alcoholic drinks is ethanol. Most normal alcohol refreshments are lager, wines, and spirits. Ethanol has been known to humanity for its inebriating impacts since old day's occasions. Nonetheless, there are likewise various adverse consequences identified with the utilization of alcohol including liver cirrhosis, cardiovascular sickness, various types of disease, and neuropsychiatric conditions. One more adverse consequence of alcohol is its habit-forming

potential. When contrasting the unfriendly impacts of alcohol and those brought about by different medications of misuse, sorted as hard medications, one could contend that alcohol ought to be named a hard medication. However, most government laws basically those from generally western nations consider alcohol as lawful under specific least age limitations (Nutt et al., 2007). Its intoxicating nature and euphoria causal feature is quite addictive and hard to let go off. This euphorically addictiveness accessibility and socially approved by western communities has made alcohol one of the rapidly spreading and acceptable drug in Pakistan (Ahmed et al., 2014). Alcohol worldwide is responsible for 6.0% deaths around the globe. Alcohol not only imparts severe addiction but imparts acute intoxication. That leads to gradual loss in reaction time, slowing of motor skills and perceptions. It also is responsible for increasing risks of traffic accidents. Thus causing self-afflicted injuries, suicide and violence (Haviland, 2013; Ali et al., 2011).

According to various studies conducted in Pakistan, a number close to 10 million uncovered to be involved in alcohol consumption and among them about 1 million people are reported to be an acute case of alcoholism. While in some other studies, it has also been claimed that the number of alcohol users are about 20 million. But the concluding statement of these studies shows that in Pakistan, where alcohol consumption is prohibited, still have a high number (Ghazal et al 2015). It can be clearly seen that alcohol addiction is slowly rising and fascinating the population. The ban and the urge to drink alcohol lead people to buy from smuggled and cheap sources leading to frequent death cases. Mostly illegal and cheap whiskey for consumption among working class is the causal agent of death cases (Suneel et al., 2014).

Overall per capita utilization of cocktails in 2005 rose to 6.13 liters of pure alcohol consumed by each 15 years or older mature persons established. The massive part of alcohol use 28.6% or 1.76 liters per individual was homemade and wrongfully formed alcohol or, at the end of the day, unrecorded alcohol. The utilization of handmade or wrongfully produced alcohol might be related with an expanded danger of damage in view of vague and possibly risky contaminants or toxins in these drinks. By and large, perilous and destructive drinking designs, for example, the use of alcohol, appear to get higher among teens and youths (Lancet, 2008). One explanation might be the utilization of alcoholic beverages, which compared to the hazardous drinking designs, like more regular drinking, the prior beginning alcohol utilization, intoxication, and alcohol related disastrous results (Kraus et al., 2010).

The most important factors of severe consequences of alcohol use related to binge drinking, resulting of injuries. Intense alcohol drinking is relatively high in many countries with middle to high per capita utilization, like in Brazil and South Africa. There are likewise contrasts among nations with comparably higher per capita alcohol consumption. The unsafe consumption of alcohol is one of the world's driving wellbeing chances. It is a causal element in excess of 60 significant sorts of infections and wounds and results in around 2.5 million deaths every year. In the event, the gainful effect of liquor use on grimness and mortality in certain sicknesses and in some populace gatherings, the complete number of deaths owing to alcohol consumption was assessed to be 2.25 million of every 2004 (WHO, 2018). A portion of the damage associated with substantial drinking emerges from public responses to consuming, rises up out of friendly reactions to drinking. In various social orders, intoxication is criticized, particularly if the customer has less ability to afford. WHO study that was conducted in 14 countries, alcohol included depictions were reliably considered among criticized (Room, 2005; Room et al., 2006). The data, like age and



sexual orientation, can foresee the susceptibility of alcohol use among people. In the first place, use of alcohol is mostly present among people age range between 18 to 39 years, yet constant alcohol fixation is most normally found in individuals who are somewhere between 25 to 50 years (Koob, Le & Thompson, 2010).

In low consuming alcohol nations, pace of alcohol use is fundamentally higher among males than the females (Michalak & Trocki, 2006). Excessive alcohol consumption results in mortality. It might be clarified to some extent as it somehow depends on the financial status, drinking style, quantity and setting, which brand of alcohol is consumed (Hamdi, Krueger & South, 2015). Drinking by youngsters is related to multiple issues. Every year in the United States, approximately 5,000 adolescents mostly youngsters, 21 years old pass away because of drinking-related vehicle crashes, killing another person, self-destruction, and different wounds, like sudden collapse and suffocation (Hingson & Kenkel, 2004). The beginning stage of drinking is additionally connected with an improved probability of a wide scope of unfortunate results further down the road, like reliance and misuse, driving under the influence, undesirable or spontaneous sex, accidental pregnancy, sexually transmitted diseases, brutality and unexpected injury.

Severe drinking is characterized as at least seven drinks each week for ladies and at least 15 drinks each week for men. Alcohol is constrained by laws, for instance, minimum drinking age is between 18 to 21 years but depends on country. Although, alcohol is prohibited in Pakistan but still Pakistani gobbling up alcohol in enormous quantities which can be seen in the World Population Review report (2016). The utilization of pure alcohol by Pakistani's each year is 26 liters, daily intake in grams of pure alcohol is averagely 56.2 grams among people with age 15+ (World Population Review, 2016). The utilization of alcohol is known to have many short and long term impacts on the human body. High alcohol utilization has been shown to add frustration, distress and lack of self-control. There have been many surveys that incline towards the possibility that the vast majority who buy stocks suddenly lament their activities soon after.

A report called Rock's Review, viewed that just 20% of individuals who participate in sudden purchasing practices have announced negative sentiments concerning their shopping (Khorrami et al., 2015). It has been tracked down that when individuals are in an exceptionally strong gathering, all things considered, their dynamic cycle will be affected by their friend's, paying little heed to the buddy's gender (Cheng et al., 2014). This equivalent investigation likewise discovered that in bunches with high-cohesiveness; individuals are more averse to making drive buys, as the responsibility that this would acquire in front of their friends would prevent them from acting along these lines. This is abundantly identified with the possibility of normal practices and what is viewed as acceptable conduct in the present society.

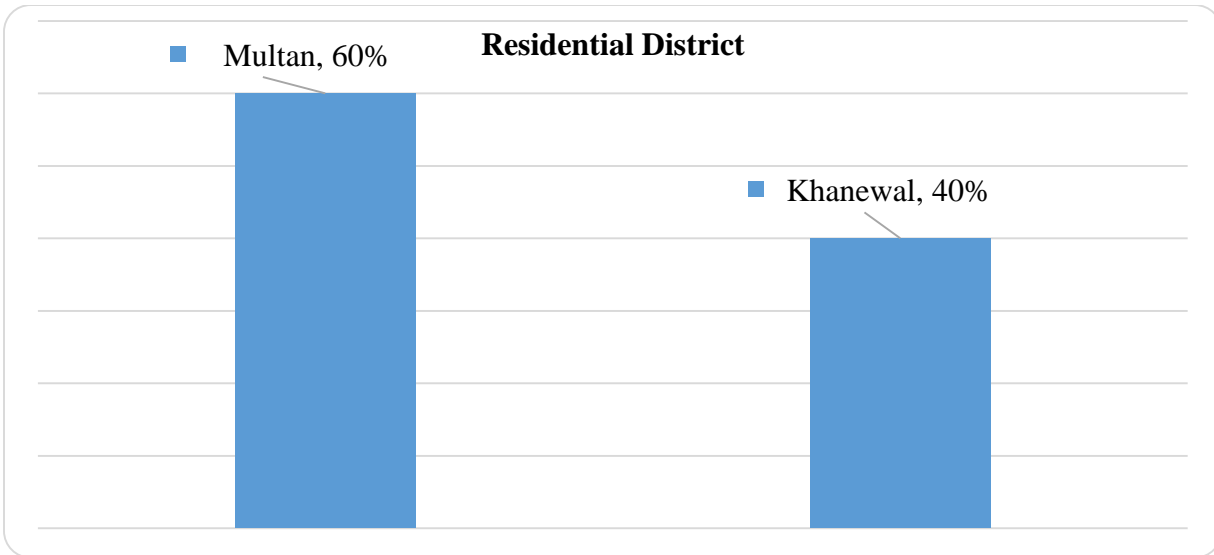
### **Research Methodology**

This research study was conducted within two months starting from June 2021 to August 2021. It was a descriptive study, comprised of mixed methods such as both qualitative and quantitative analyses. It was conducted within villages, cities & colonies of District Multan and Khanewal – Pakistan. These areas were chosen because regular alcohol users were spotted there (identify from our previous survey of substance use) and would thus provide a good indication of the knowledge, attitude, and practice of using alcohol and its associated aspects.

## Results and Discussion

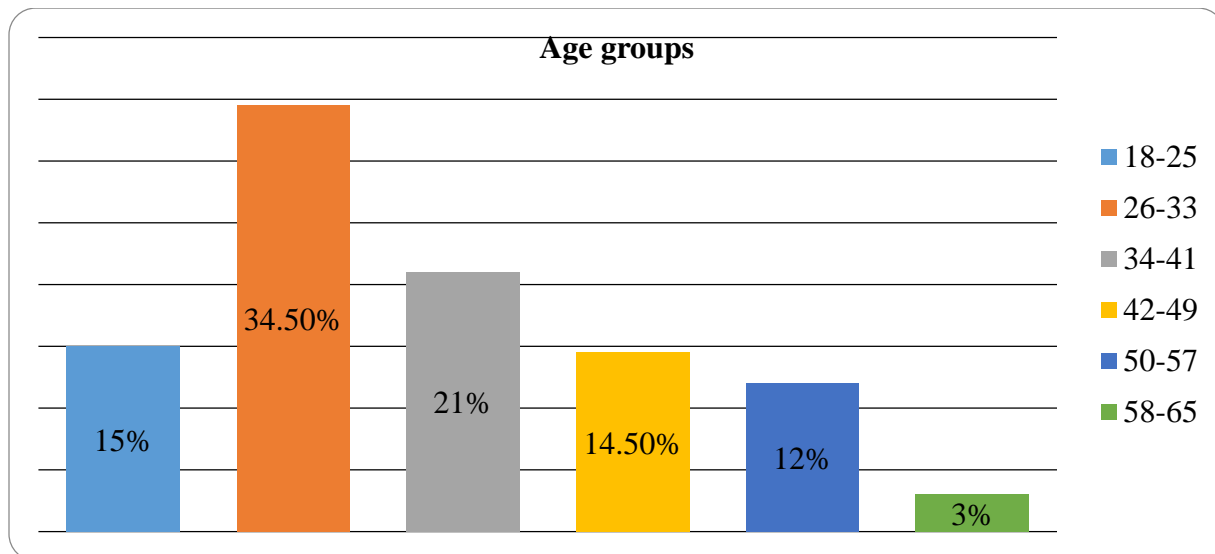
### Quantitative Results

This research provides detailed data regarding the dynamics knowledge, attitudes and practice towards alcohol use & its related factors among regular users. (Age 18 – 65 years) - District Multan and Khanewal, Pakistan. The data provided in the study is cumulative of the two districts involved in the research.



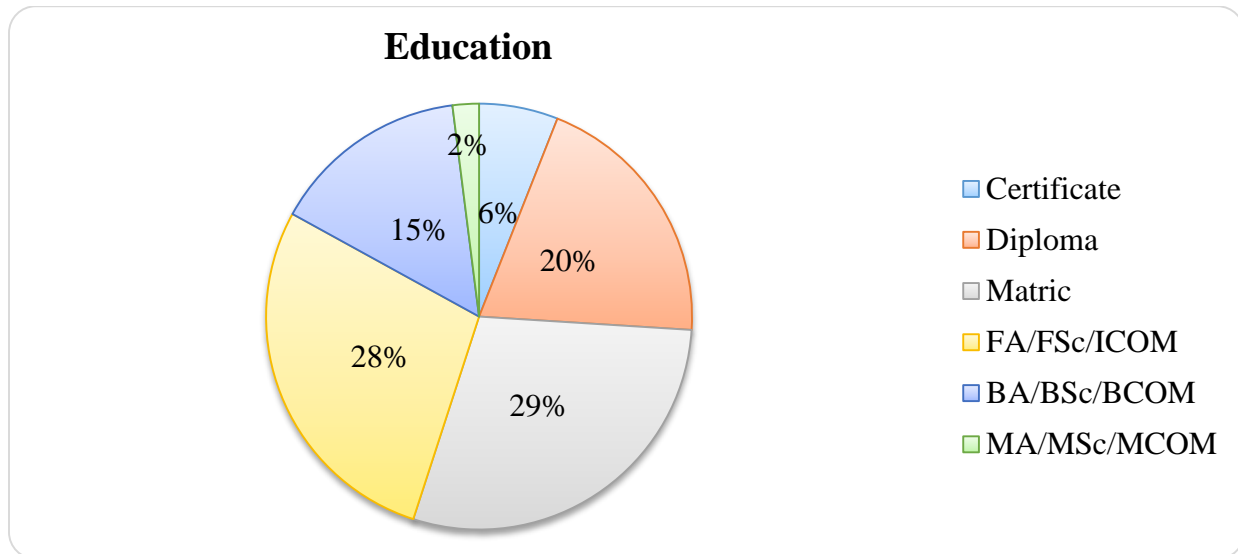
**Figure 2: Residential district of respondents**

In the current study, it is observed that only the male respondents took part in this research. As the table showed that 100% of regular alcohol users were males who selected for this research in which 60% of the interviewees belonged to Multan as shown in figure 2.

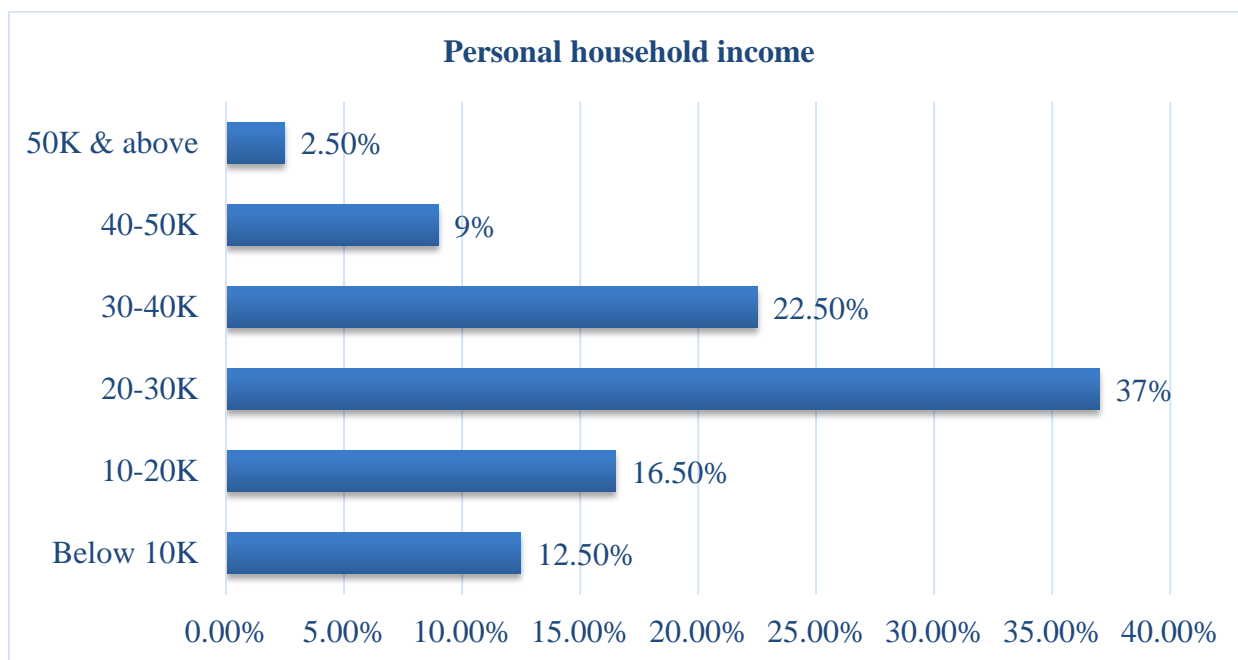


**Figure 3: Age group of respondents**

There were six age groups, minimum range started from 18 to 25 years and above. About 15% were between 18-25 years old while 34.5% were between 26-33 years, which shows that this age group of males had high alcohol consumption rate. This age is more prone to such risks as this age has to deal with so many responsibilities and if someone becomes regular alcohol user at this age then not only they suffer but also their family as indicated in figure 3.

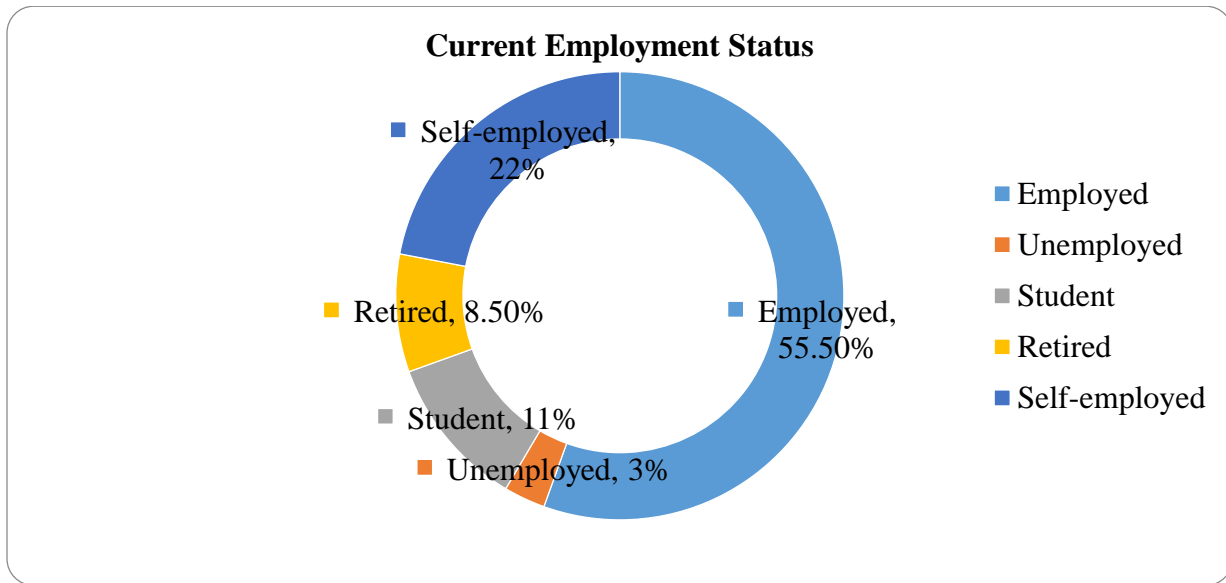


**Figure 4: Education/Qualification of respondents**



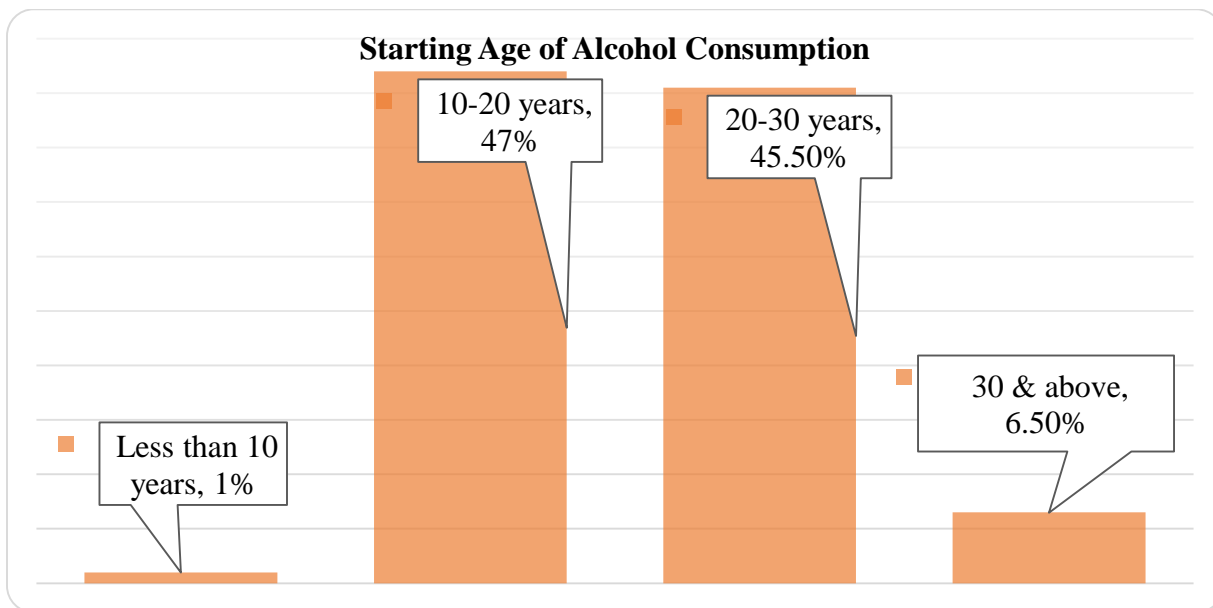
**Figure 5: Personal household incomes of respondents**





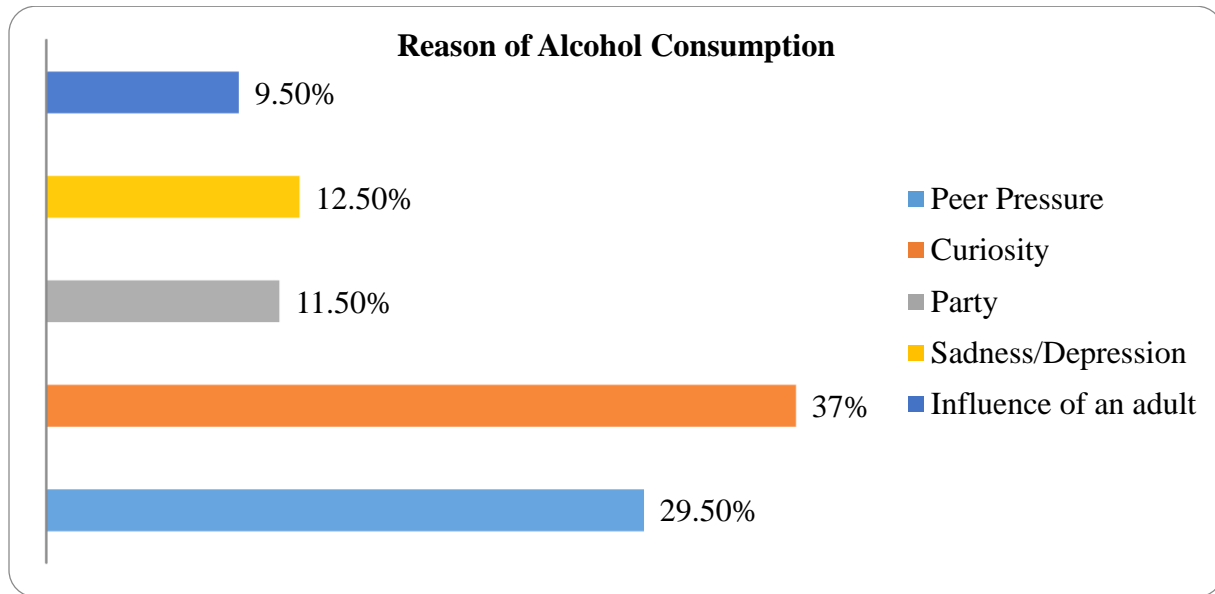
**Figure 6: Current employment status**

It can be clearly seen that 11% of the respondents were students who were involved in alcohol intake regularly. About 8.5% retired persons are also enjoy their drinks on regular basis as shown in figure 6.



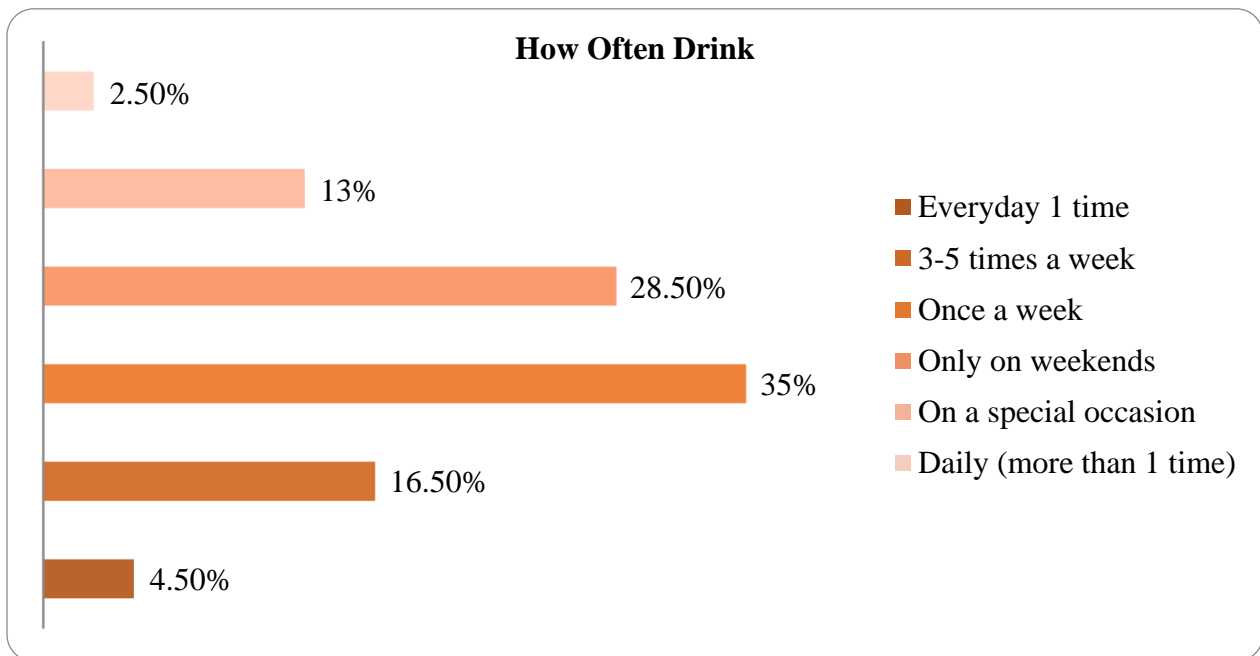
**Figure 7: Starting age of alcohol consumption**

The figure 7 shows that the maximum percentage- 47% is associated with the starting age 10-20 years (adolescence) which could have harmful outcomes and lead to an alcohol use disorder later in life whereas 45.5% were those who started alcohol consumption between the age of 20-30 years exactly during their blooming age and we cannot ignore the 1% who started alcohol in the age when they were just 10 years old or younger.

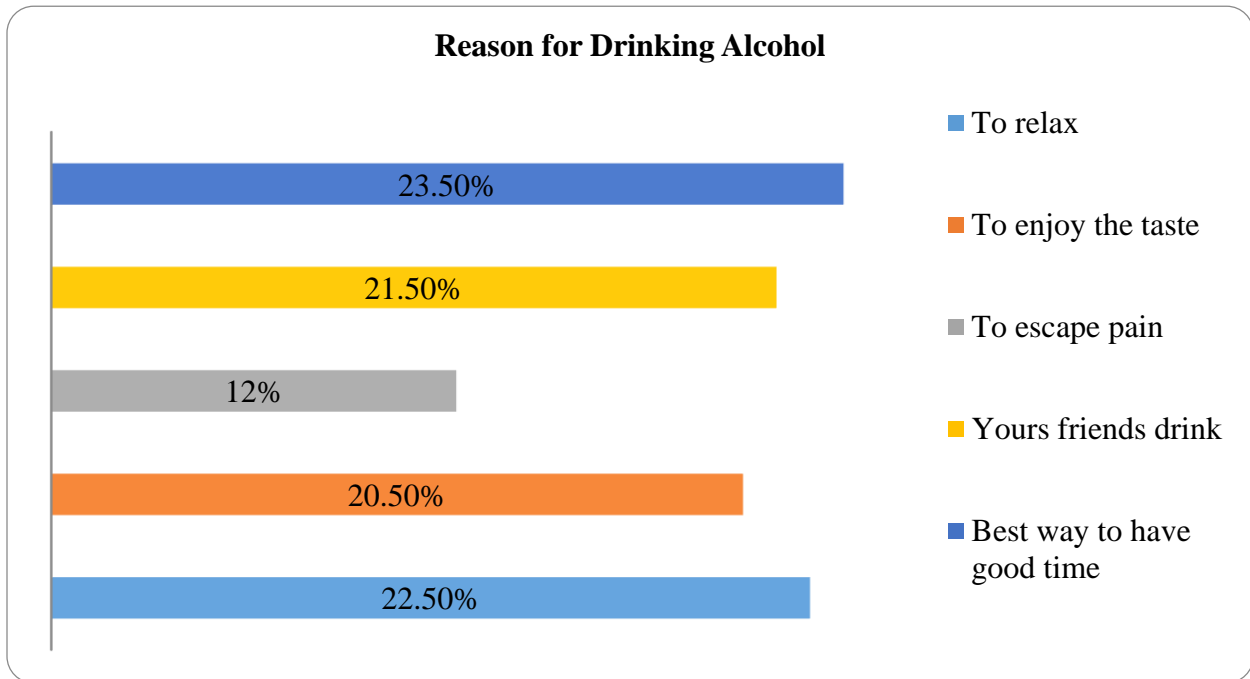


**Figure 8: Reason of alcohol consumption**

The leading cause of alcohol consumption was curiosity which indicated 37% in figure 8. According to a respondent, “I view alcohol as a way to relax”. About 29% alcohol consumption was due to peer pressure. One of the respondents said that, “I started drinking to fit in with my older friends and to maintain popularity among them”. About 11.5% were those who enjoyed their shots at party however 12.5% had told that they drunk when they were in depression or sadness as illustrated in figure 8.

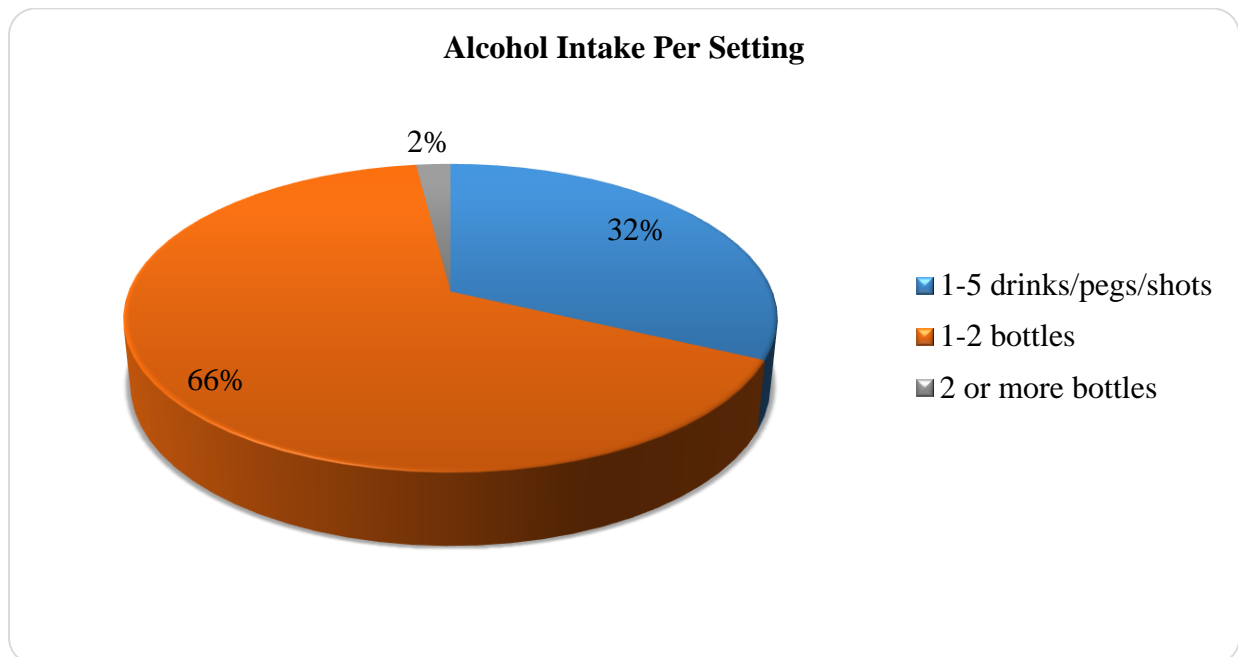


**Figure 9: How often drink**

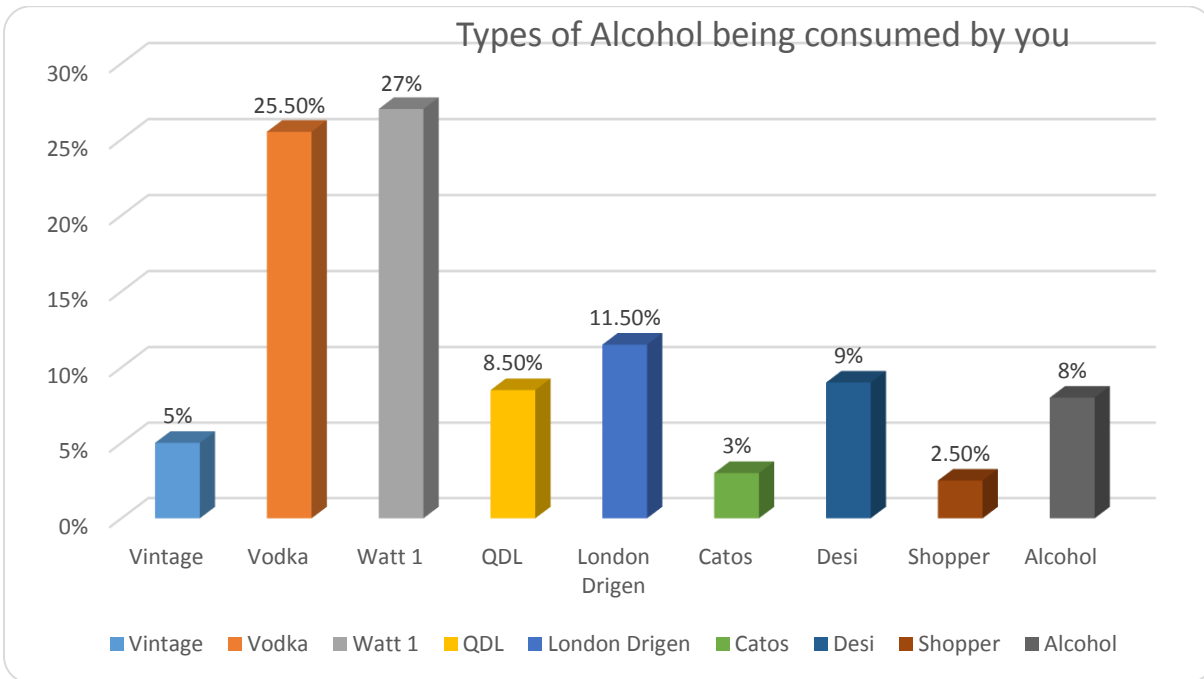


**Figure 10: Reason of drinking alcohol**

Figure 10 shows that 23.5% respondents said that the main reason of drinking alcohol is the best way to have good time either in the form of enjoyment or to enhance sociability.

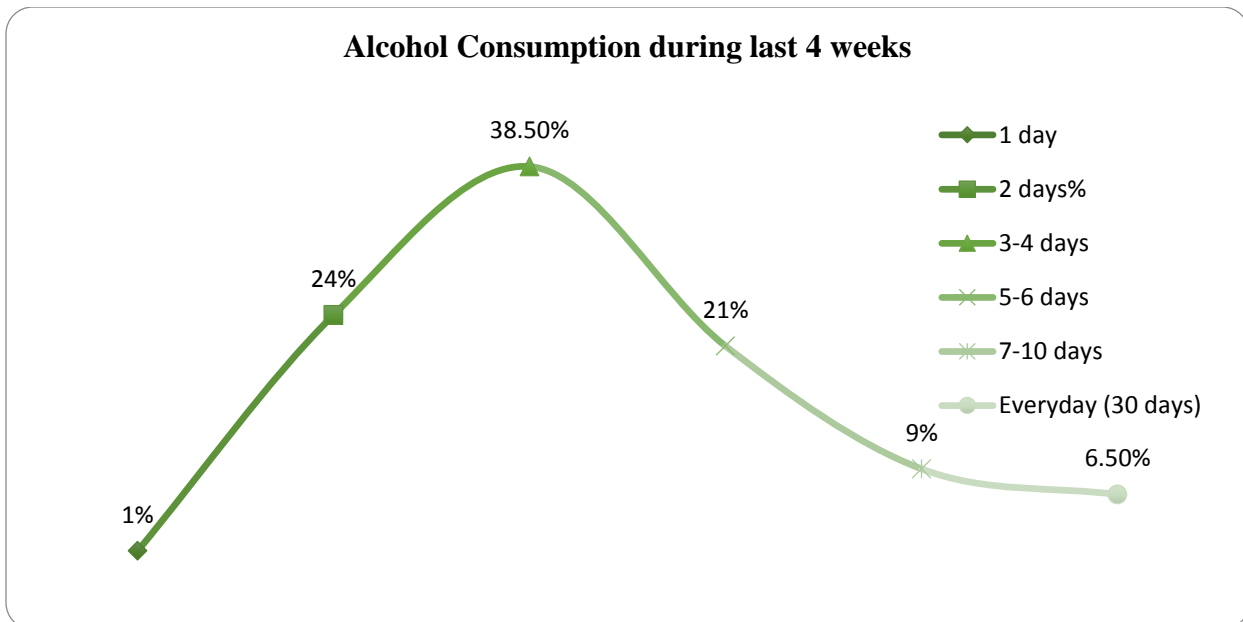


**Figure 11: Alcohol intake per setting**

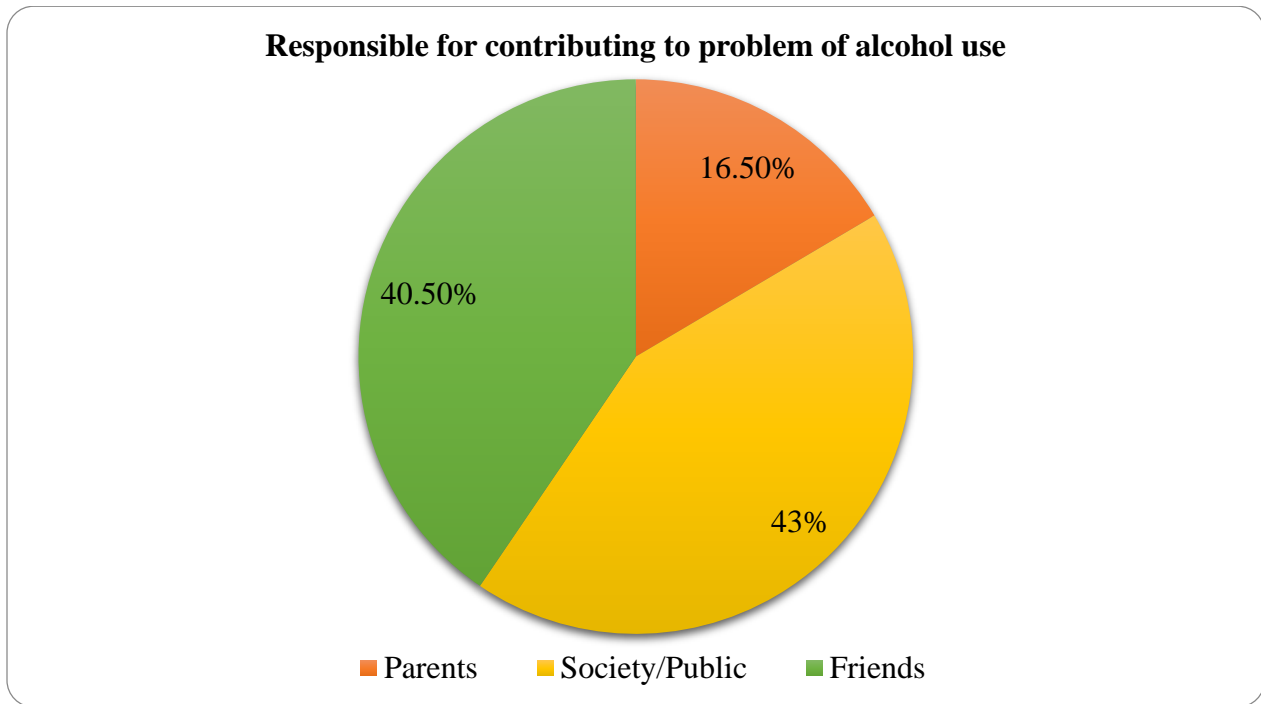


**Figure 12: Types of alcohol being consumed by respondents**

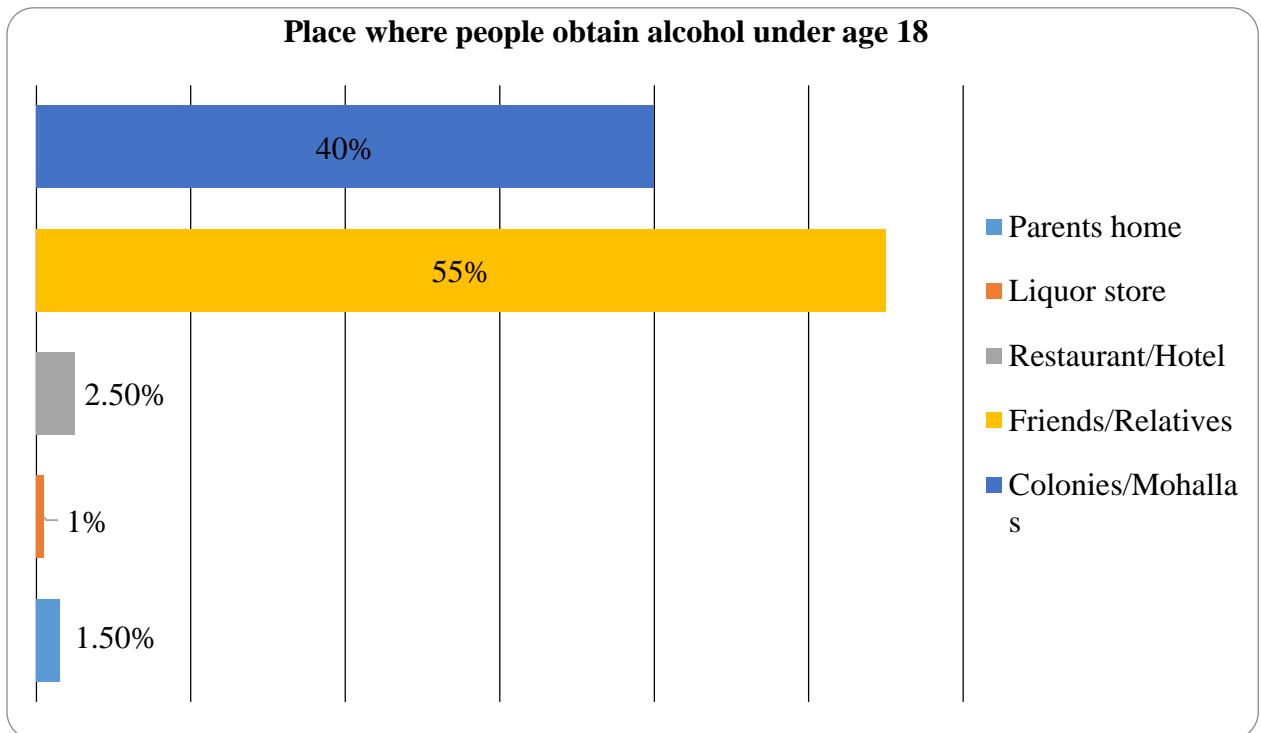
In Figure 12, Watt 1 & Vodka had the best types of alcohol according to the 27% & 25.5% regular users respectively, they responded that both types of alcohol were one of the finest quality available with reasonable amount. Figure 12 also shows a very key percentage of regular users that there were those 9% who consumed desi alcohol which was made in private houses & without proper brewing process while 8% males were also used similar type of alcohol.



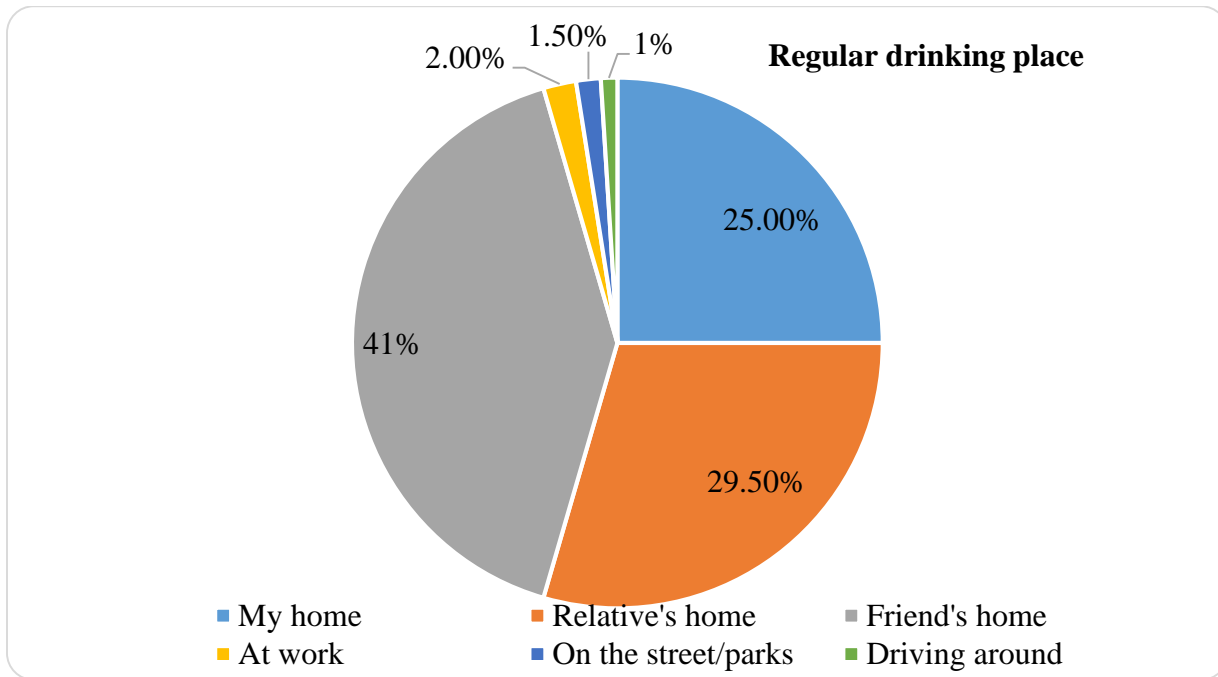
**Figure 13: Alcohol consumption during last 4 weeks**



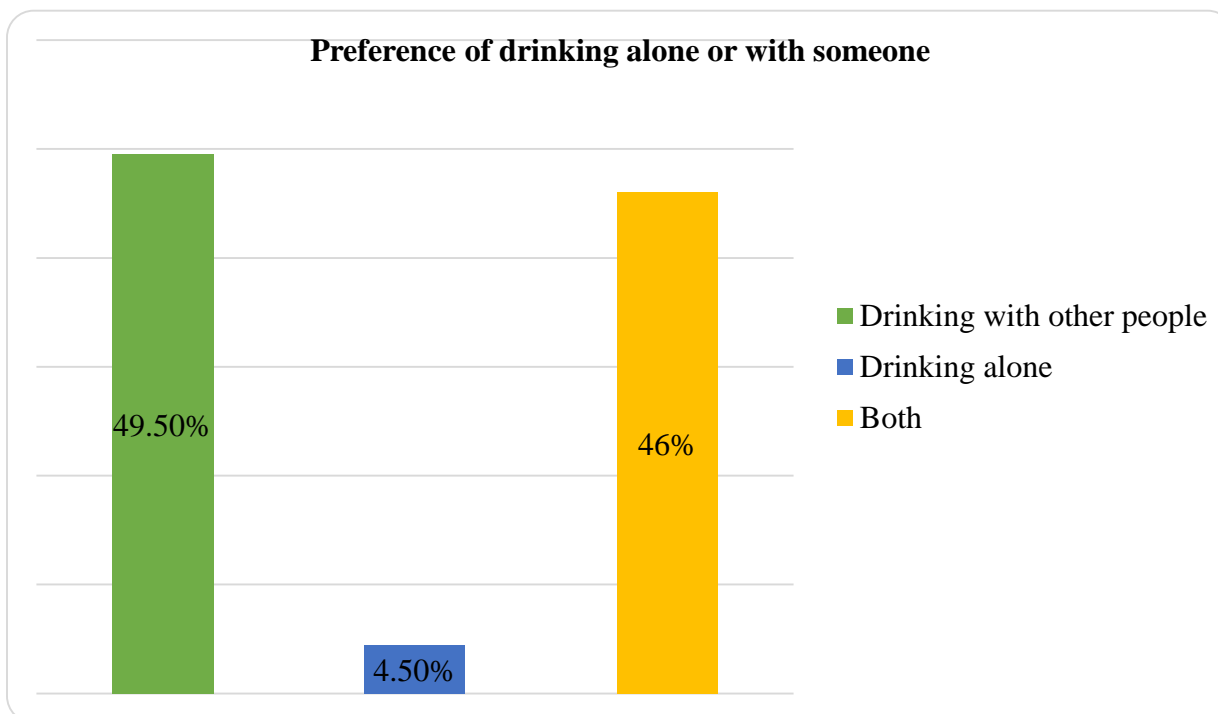
**Figure 14: Responsible for contributing to problem of alcohol use**



**Figure 15: Place where people under 18 obtain alcohol obtain**

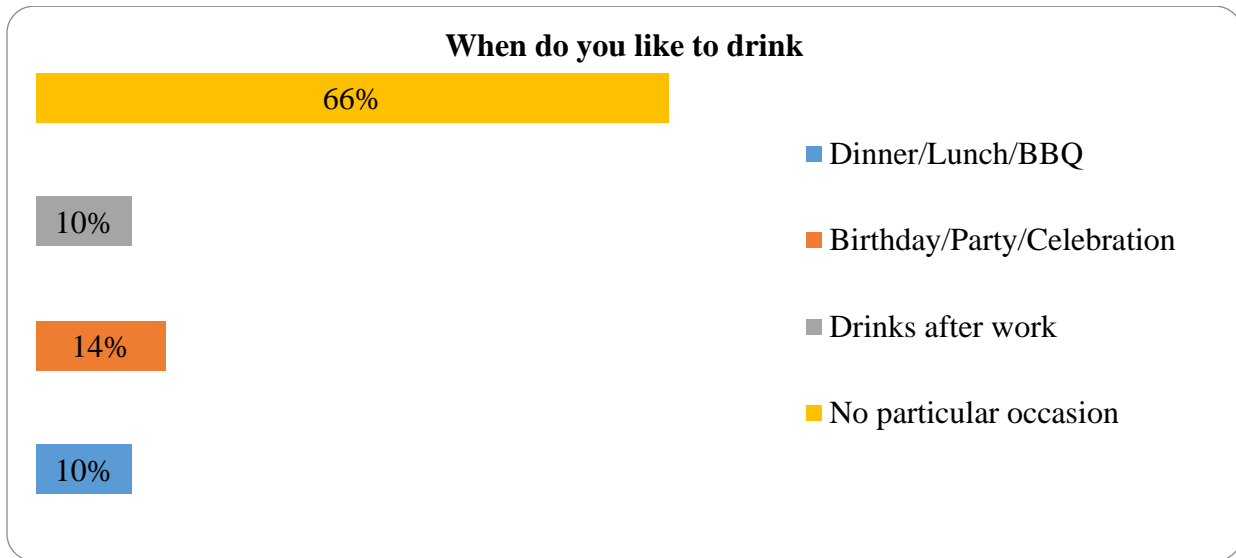


**Figure 16: Regular drinking place**



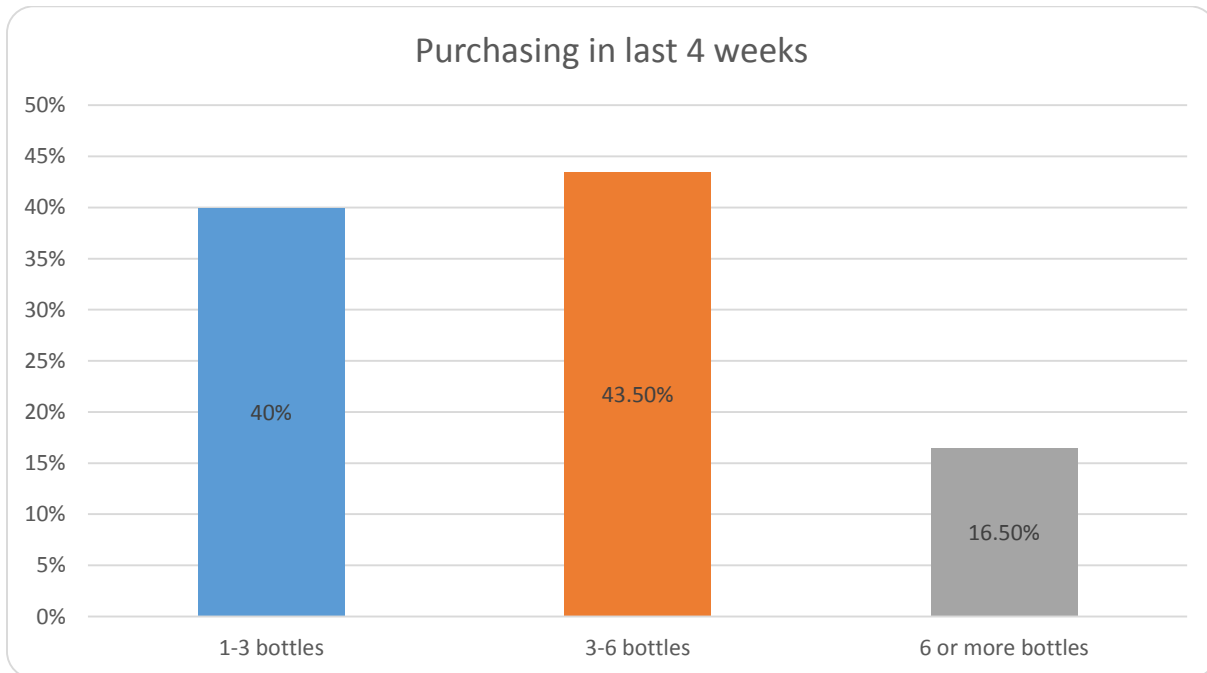
**Figure 17: Preference of drinking alone or with someone**



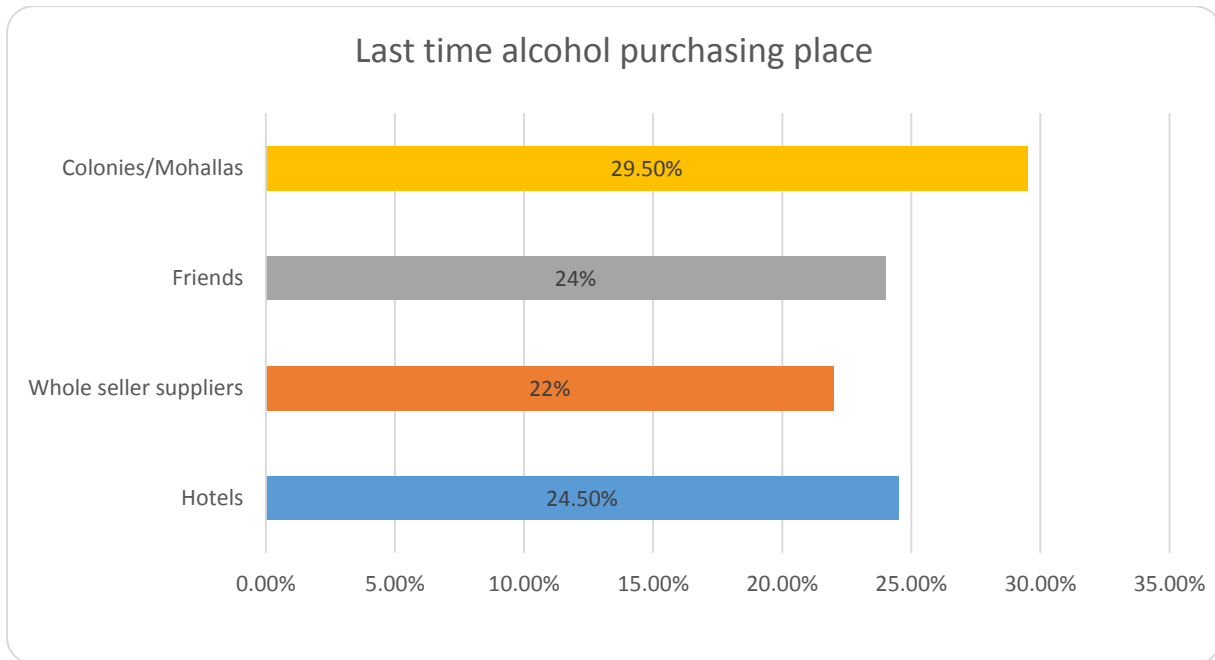


**Figure 18: When do you like to drink**

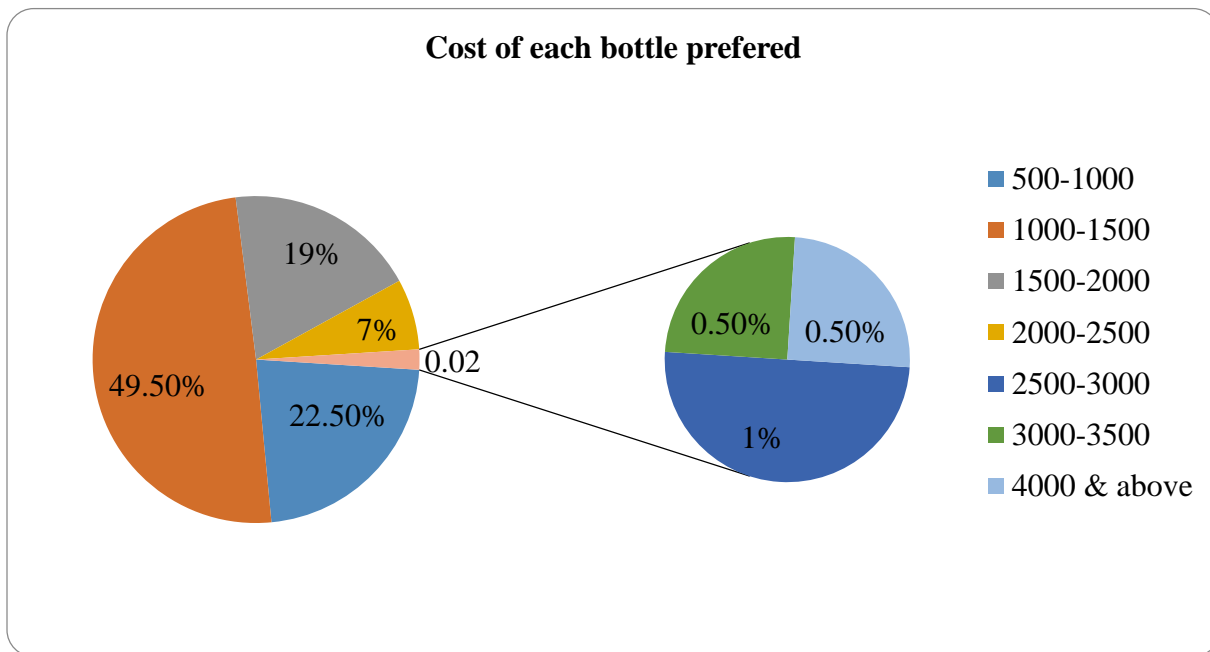
When they were asked when do you like to drink then 66% of the respondents replied that there is no any particular occasion when we prefer to drink, it just depends on the mood as shown in figure 18.



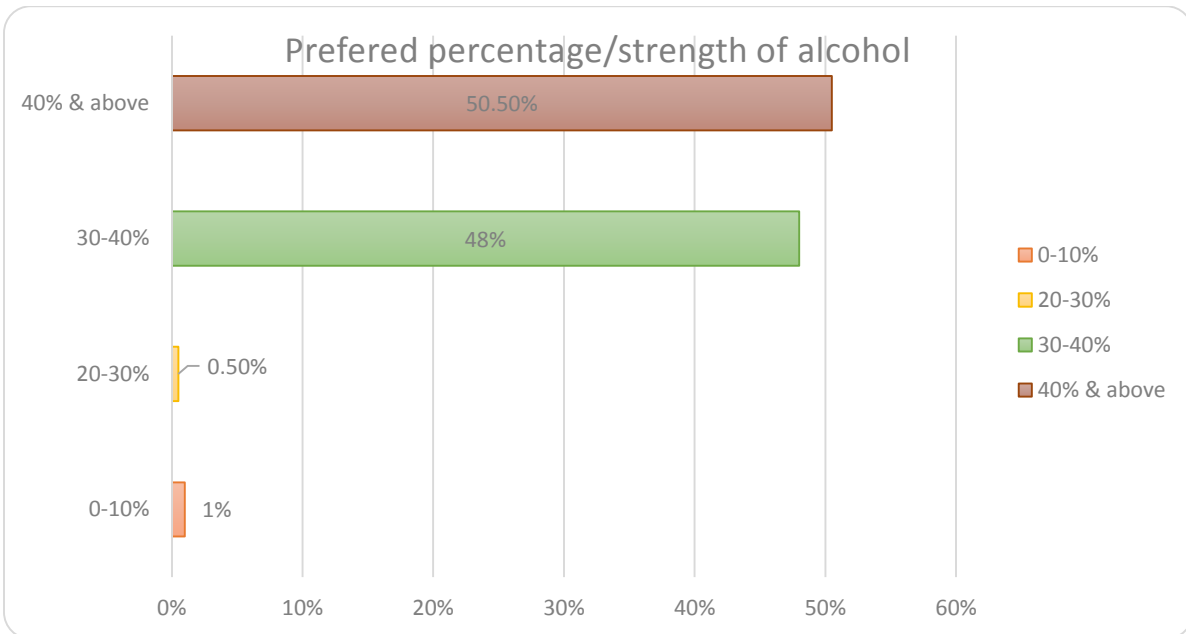
**Figure 19: Purchasing quantity in last 4 weeks**



**Figure 20: Last time alcohol purchasing place**



**Figure 21: Cost of each bottle preferred**



**Figure 22: Preferred percentage/strength of alcohol**

### Qualitative Results

The study participants (Regular Alcohol Users-RAUs) were asked certain questions about their experiences regarding drinking practices. The questions are reported along with the responses of the participants below.

### Drinking Behavior

Question 1: Why did you start consuming alcohol?

- “I did not want to drink but when I was encountered with loneliness and depression I started consuming alcohol.” (RAU-FGDs)
- “Curiosity led me to start consuming alcohol.” (RAU-FGDs)

Question 2: Do you have a history of alcohol or drug problems in your family?

- “A big No as my parents is on the view that drinking alcohol isn’t so wise and neither do I.” (RAU-FGDs)
- “Yes, my uncle was used to it and then my father started consuming alcohol so I’d inclined to drink alcohol.” (RAU-FGDs)
- “Everybody in my family drank a lot. So, when everyone is drinking around you it becomes quite difficult to hold on.” (RAU-FGDs)
- “Not specifically in my family but yes, my best friend drinks alcohol and that made me join him when I would be at his place.” (RAU-FGDs)

Question 3: Were you ever sexually taken advantage of while under the influence of alcohol?

- “Sometimes as it becomes quite easier to approach a girl if she’s also drunk.” (RAU -FGDs)

Question 4: Have you ever become violent or aggravated while drinking?

- “I remember, once I was drunk, my parents were in conflict as my brother ran away from home, and I quarreled with my best friend for the very first time in life.” (RAU- FGDs)
- “Yes, I became aggressive and at that time I just wanted a beat.” (RAU-FGDs)

Question 5: Who is responsible for contributing to the problem of alcohol use by youth under age 18?

- “Though, I wasn’t allowed to drink but still the community where I live was one of the major contributors in alcohol consumption by me when I was under 18.” (RAU- FGDs)
- “In my opinion, it was actually the society and especially the locality around you.” (RAU-FGDs)

Question 6: When do you like to drink?

- “Well, it totally depends on the mood.” (RAU-FGDs)
- “There is no any particular occasion when I prefer to drink. If it’s available, I am ready to drink.” (RAU-FGDs)

### **Purchasing Behavior**

Question 7: Any preference the percentage or strength of the alcohol?

- “Most probably 5- 6 glasses in a day.” (RAU-FGDs)
- “I don’t drink that much but it happens when I used to cross the limits.” (RAU- FGDs)

### **Discussion, Conclusion and Recommendations**

#### **Discussion**

The motive to conduct this study was to evaluate the knowledge, attitudes and practices towards alcohol use & its related factors among regular users in the districts of Multan and Khanewal. Excessive alcohol consumption is a habitual phenomenon among regular users not only in the whole world but also in Pakistan. In both districts, the most alcohol consumption among regular users of 34.5% is associated with the ages of 26–33 years. Many reports indicated that the rates of regular and intense periodic drinking exist in that age range of young people (figure 3).

In this survey, it is clear that 15% regular alcohol users are very young males- the age group of 18-25 and they are mostly out of school/college students or unemployed (figure 3 & 6). The cost of alcohol is known to be a critical determinant of alcohol consumption among normal clients and moderateness is one of the vital variables for them that mentioned in the present study. Most of the researchers have discovered that adolescents and teens are exhorted not to drink liquor before the age of 18 as liquor use during the adolescent years is identified with a wide scope of wellbeing and social issues. This study found out that the maximum percentage- 47% is associated with the starting age 10-20 years (adolescence) which could have harmful outcomes and lead to an alcohol use disorder later in life. The leading cause of alcohol consumption was curiosity which indicated 37% in figure 7 and figure 8.

Individuals regularly attempt to draw their own lines with alcohol utilization. There is regularly the contention that nobody drinks that little; nonetheless, this review discovered that 28.5% of the respondents drink liquor one time each week (figure 9) and 66% of the respondents’ preferred to intake 2 or more bottles as it used to relax their brains. According to a respondent, “it causes feeling of pleasure and when I drink, my brain triggers to drink more”. 23.5% respondents considered it the best way to have good time either in the form of enjoyment or to enhance sociability. In figure

12, Watt 1 had the highest percentage which was 27% as according to the respondents it is one of the finest quality with reasonable amount.

### **Conclusion**

This study identified knowledge, attitudes and practice towards alcohol use & its related factors among regular users. The results identified lack of knowledge, specific training related to alcohol in the targeted areas. Because of the significance and seriousness of this health related issues in these two regions of Multan and Khanewal, the outcomes ought to be thought of by the concern departments, decision and policy makers for endorsing the execution of alcohol deterrence approaches within the districts and in the whole country as well.

### **Recommendation**

Alcohol related surveys ought to be embraced, awareness of alcohol dangers to public should be spread, implementation of educational plan and growing proficient ability based preparing by the related organizations who are working on the alcohol misuse & control should be enforced.

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