



## **PASSIVE LOCAL MADE ALCOHOLISM IN NAGPUR CITY SLUM AREA: CAUSES AND PRECAUTIONS**

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### **ABSTRACT**

*Passive drinking refers to the damage done to others as a result of drinking alcoholic beverages. These include the unborn fetus and children of parents who drink excessively, drunk drivers, accidents, domestic violence and alcohol-related sexual assaults.*

*'Passive drinking kills. It causes family breakdown and violent crime. It costs the economy billions of pounds. It causes misery. It affects many spheres of life and leaves no communities untouched.'* -Sir Liam Donaldson, 2009 CMO Report. Substance abuse is an important health problem throughout the world including India, but prevalence and pattern of abuse varies from country to country and in different types of population. Slums have their own social and economic problems so that substance abuse may be different in this population and might be related with these problems. A slum is consequence of fast development. Slum is defined as "a cluster inside urban areas without having water and sanitation access." India is urbanizing very fast and along with this, the slum population is also increasing. It has doubled in the past two decades.

**Keywords:** Slums, Substance abuse, Alcoholism, Causes, Precautions

### **INTRODUCTION**

Alcoholism abuse is prevalent in India since recorded history. Alcoholism abuse affects not only physical and mental health of people but also has social and economic consequences. Alcoholism abuse is a growing concern. In India, most of the studies have been carried out in the last four decades. Alcohol and drug related behavioural and medical complications are a major concern for policy planners and health professionals of most of the countries. This problem has received some attention in the recent years among the general public and mental health professionals. In last three decades, many epidemiological surveys have been carried out in India to assess the prevalence of alcohol and drug users. Sales of alcohol have seen a growth rate of 8% in the past 3 years. Officially, Indians are still among the world's lowest consumers of alcohol—government statistics show only 21% of adult men and around 2% of women drink. But up to a fifth of this group—about 14 million people—are dependent

drinkers requiring “help”. Alcohol is one of the leading causes of death and disability globally. Present study is undertaken to identify the extent and pattern of alcohol use in city slum populations using a similar methodology.

### **OBJECTIVES:**

This study taken with the following objectives:

- a. To study the individuals using of alcohol in slum areas.
- b. To study the adverse effect of alcohol use on personal, health, family, occupation and social areas.
- c. To find out the strategies used in the community to deal with alcoholism in area of Nagpur city.

### **METHODOLOGY:**

Data is collected by a postgraduate student. After reaching the selected slum area around Laxmingar(Nagpur), a centre point like school or temple is identified and door-to-door survey is conducted in a particular direction from the centre point by random walk method until the required 30 houses has interviewed. If the area contained more than one cluster, the houses has surveyed by moving in a different direction from the centre point, depending on the number of clusters, until required 30 houses in each direction were obtained. Total samples 140 collected from the laxminagar area and derived as per table given below for checking effect.

The purpose of the study is first explained to the responsible adult of the household, their consent is taken in writing, and general information such as family details, education, occupation, income, environmental condition, and psychosocial environment has enquired from them.

All the individuals in the family above 18 years were met individually, purpose of the study is explained to them, and their written consent of voluntary participation has taken. They are asked whether they have consumed alcohol in the past 12 months. The persons who answered yes are interrogated in detail.

### **SCOPE AND LIMITATIONS:**

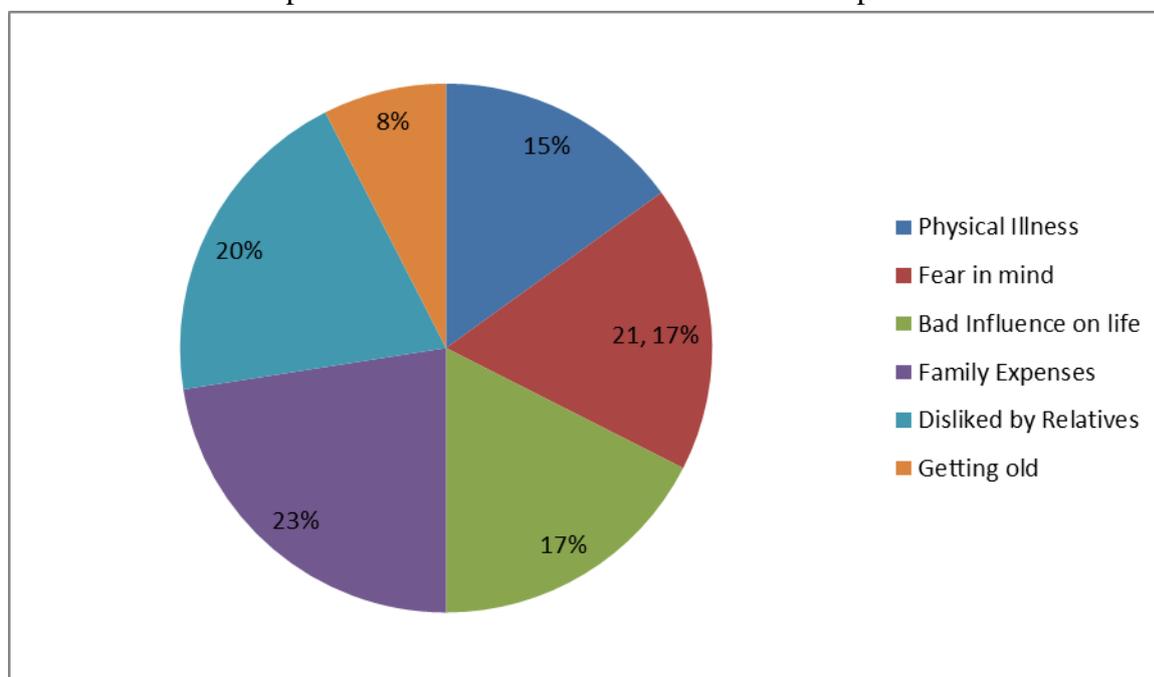
This study looked at how alcoholism among in slums affects right from conception to their upbringing. In addition to this, the study focused on the effects of alcoholism in the generation and management of household resources. The fact that the study did

not focus on men and that relied on wider generalisations means that getting detailed information may not be possible.

Table 1: Most important cause of concern for alcohol consumption

| S.No. | Cause of Concern      | Numbers | Percentage |
|-------|-----------------------|---------|------------|
| 1     | Physical Illness      | 18      | 15%        |
| 2     | Fear in mind          | 21      | 17.5%      |
| 3     | Bad Influence on life | 21      | 17.5%      |
| 4     | Family Expenses       | 27      | 22.5%      |
| 5     | Disliked by Relatives | 24      | 20%        |
| 6     | Getting old           | 09      | 7.5%       |

Pie Chart: 1. Most important cause of concern for alcohol consumption



### Precautions from local maid alcohol

1. Parents can improved communication styles with their children
2. Parents can support to their children
3. Greater school involvement
4. The development in children of positive goals for the future
5. Improved relationships with parents
6. Improved skills for dealing with refusal of alcohol offers.
7. Enhancing young people's social and refusal skills
8. Awareness Cum De-addiction Camps for alcoholism children
9. Rehabilitation programs by NGO's, Government.



## CONCLUSION

How young people learn about and acquire their attitudes, expectations and intentions towards alcohol are key to thinking about how to change early initiation and subsequent problematic patterns of alcohol consumption. Again, it is quite clear that changing the way that young people and their parents and society think about normative behaviour towards alcohol is a major task, and will only be achieved by intervening on multiple levels, as indicated above. The family has a major role to play, and the state has an equally major role in supporting them and providing universal prevention programmes to do that. The fact that efforts will need to be made at multiple levels within society should not be surprising. Individuals live in multiple social contexts simultaneously, whether they are family, peer, neighbourhood, school or work contexts

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