

ALCOHOL AWARENESS MONTH: “FOR THE HEALTH OF IT: EARLY EDUCATION ON ALCOHOLISM AND ADDICTION”

April 2015

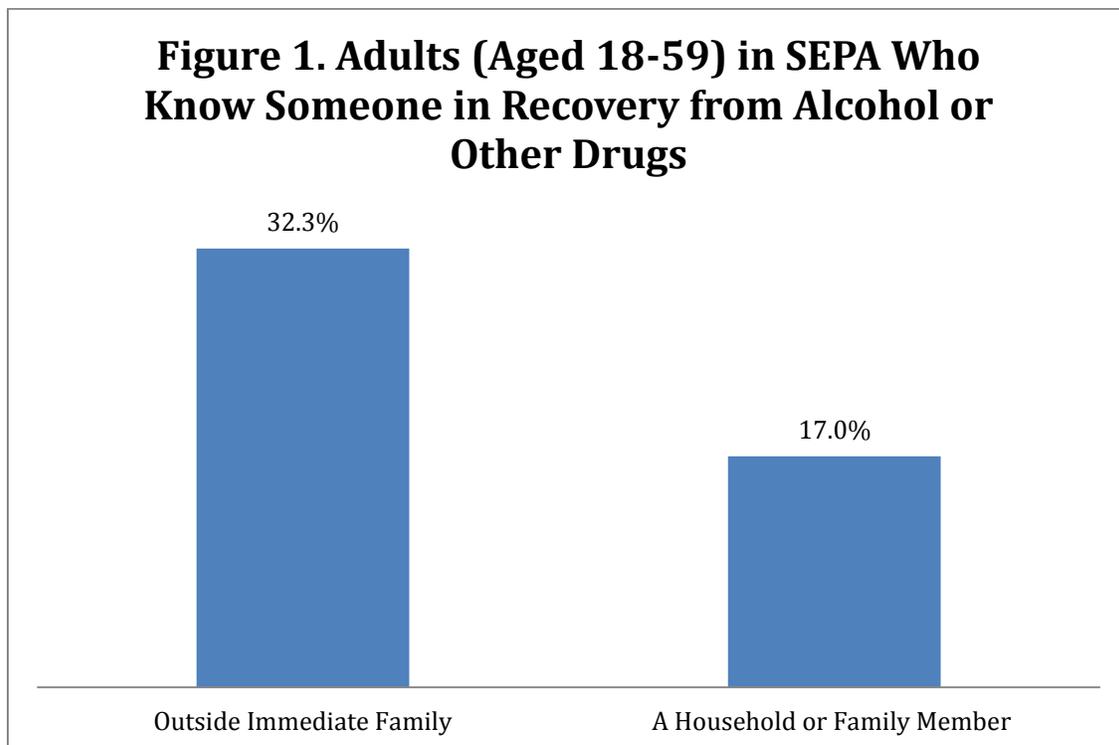
Since 1987, April has been deemed Alcohol Awareness Month. Each year, The National Council on Alcoholism and Drug Dependence, Inc. (NCADD), sponsors this month-long initiative in order to increase public awareness and understanding, reduce stigma, and encourage local communities to focus on alcoholism and alcohol-related issues. The theme for April 2015, “For the Health of It: Early Education on Alcoholism and Addiction,” calls for a focus on local, state, and national events that are aimed at educating people about the treatment and prevention of alcoholism, and the benefits of providing early education to give young people a better understanding of the impact that alcohol can have on their lives.

The Issues

- Alcohol is the most commonly used addictive substance in the United States
- *Excessive alcohol use* can lead to numerous health problems, chronic diseases, neurological impairments and social problems, including, but not limited to:
 - Dementia, stroke, and neuropathy;
 - Cardiovascular problems (myocardial infarction, cardiomyopathy, atrial fibrillation and hypertension);
 - Psychiatric problems (depression, anxiety, and suicide);
 - Social problems (unemployment; lost productivity; family problems; violence, including child abuse, arguments, and homicide);
 - Unintentional injuries (motor-vehicle accidents, falls, drowning, burns, and firearm injuries);
 - Increased risk for many types of cancer (liver, mouth, throat, larynx, and esophagus);
 - Liver diseases (fatty liver, alcoholic hepatitis, and cirrhosis);
 - Gastrointestinal problems (pancreatitis and gastritis); and
 - Alcohol abuse or dependence.
- *One-time and/or occasional alcohol use* can result in tragedy:
 - Alcohol overdose (alcohol poisoning);
 - An accident that occurs while under the influence of alcohol; and
 - An arrest associated with alcohol that can damage a person’s reputation and/or freedom.
- *Those who don’t use alcohol/drugs* could still become a victim of an alcohol or drug-related crime.
- An individual’s decision to begin to use alcohol is a choice, influenced by their environment (peers, family, and availability). However, the risk of developing alcoholism is largely influenced by genetics.
- There is no single age group of people affected by alcohol (and drugs) more than our youth.

- People aged 12 to 20 drink over 11% of all alcohol consumed in the United States;
- More than 23 million people over age 12 are addicted to alcohol and other illicit drugs, affecting millions more people (family, friends, spouses, and children);
- Children who start drinking alcohol before age 15 are five times more likely to develop alcohol dependence than those who first used at age 21 or older; and
 - The use of alcohol before the brain has fully developed increases the risk for future addiction (alcohol and/or drugs) dramatically.
- Alcoholism is a chronic disease with no known cure at this time. However, alcoholism can be treated. Treatment programs use both counseling and medications to help a person stop drinking, rebuild their lives, and live a life in long-term recovery.

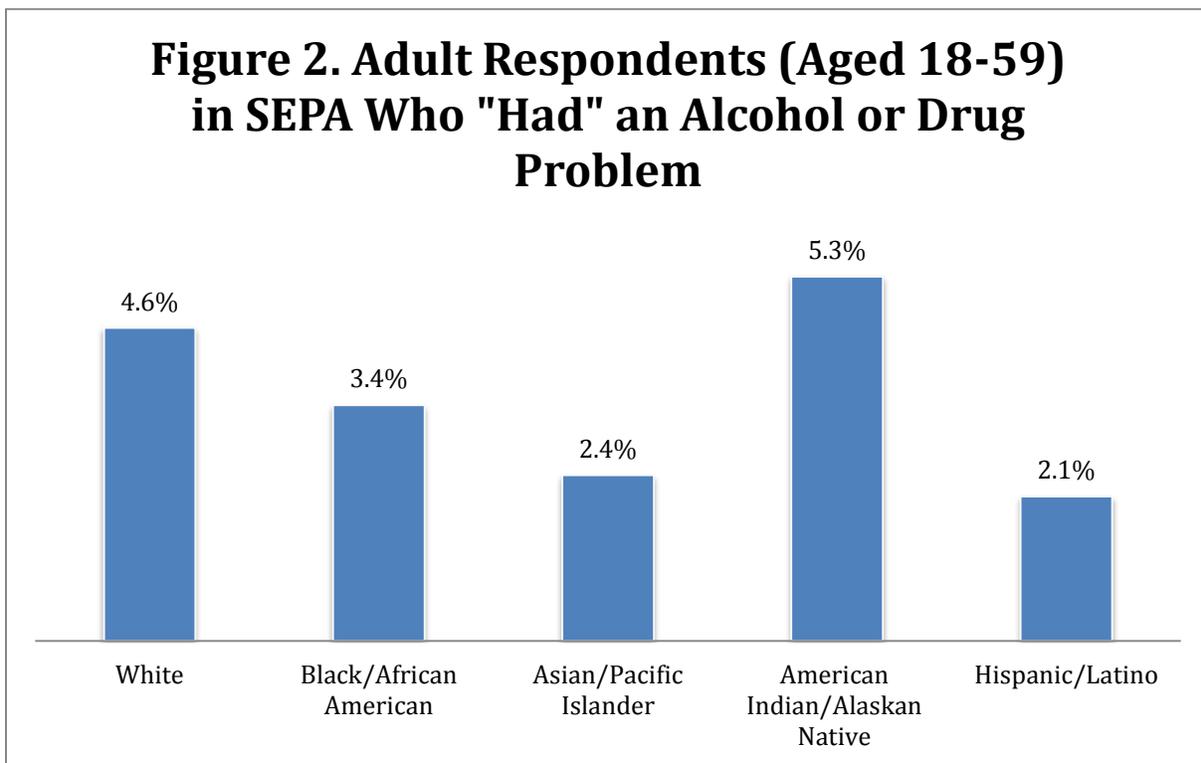
Information on alcoholism from the 2012 Household Health Survey for Southeastern Pennsylvania adults shows that alcoholism does not impact the alcoholic alone. Respondents were asked: “Do you personally know someone outside your immediate family who is in recovery from alcohol or other drugs?” (Figure 1); Respondents were also asked: “Is there another person in your household or family who once had a significant or major problem with alcohol or other drugs problem who is now in recovery from that problem?” Findings depict the impact of alcohol abuse that stretches far beyond the user. In Southeastern Pennsylvania, 32% of respondents know someone outside of their immediate family who is in recovery from alcohol or other drugs, and 17% of respondents know a household or family member in recovery. These percentages are alarmingly high without including those that are not yet in recovery. Therefore, while informative, findings only skim the surface of a problem that is affecting millions across the United States.



Source: 2012 SEPA Household Health Survey

NCADD. (n.d.). Understanding Alcohol and Alcoholism. Retrieved March 30, 2015, from National Council on Alcoholism and Drug Dependence, Inc.: <http://ncadd.org/learn-about-alcohol>

Information on alcoholism from the 2012 Household Health Survey for Southeastern Pennsylvania adults shows that alcoholism does not discriminate. Respondents were asked: "Did you once have an alcohol or other drug problem that is no longer a problem in your life?"(Figure 2). American Indian/Alaskan Natives reported slightly higher rates (5%) of once having an alcohol or drug problem when compared with five predominant racial/ethnic groups in Southeastern Pennsylvania, while Asian/Pacific Islander reported the lowest (2%). These percentages do not reflect those still living with addiction. These results show how widespread the problem of alcoholism is in Southeastern Pennsylvania among all races and ethnicities. However, it is also a testament to how successful treatment can be, and how much is left to be done in our communities to bring awareness to this topic.



Source: 2012 SEPA Household Health Survey

For information regarding Alcohol Awareness Month, or to learn how you can get involved in your own community, please visit NCADD's website at <http://ncadd.org>.

For questions/concerns about PHMC's Community Health Data Base Southeastern Pennsylvania Household Health Survey, please contact the CHDB Project Assistant Laurel Jones (267.350.7697) – ljones@phmc.org

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