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CONCLUSION AND THE WAY FORWARD

The history of mankind is full of stories of alcohol consumption. This is equally true in countries of the South-East Asia Region especially India, where its use has been glorified in poems and literature, and in recent days in both the print and visual media. India which had low levels of consumption of alcohol until recently is moving towards a higher level of alcohol use. The impact of western civilization and global cultural patterns seem to have accelerated this move in the last decade of the twentieth century. It is well established that an increase in alcohol consumption by a community or a nation leads to a higher proportion of persons with what can be considered problem use (abuse/harmful use), hazardous use and addiction (dependence).

In this comprehensive study including a survey of 28 507 individuals from four diverse populations groups (rural, town, slum and urban areas), the distinct effect and impact of alcohol consumption was examined in a cross-sectional manner with the combined use of quantitative and qualitative research methods. The study shows the phenomenal burden and impact among individuals and families of alcohol-users in several areas. Poor health status, low levels of happiness, greater extent of health problems, increasing occurrence of intentional and unintentional injuries including suicides and violence, higher proportion of social deviancy, high degree of problems in work and education spheres, deprivation of the family and greater legal involvement were documented among alcohol-users compared to non-users. These findings illustrate the increasing burden that the health, social and economic sectors will have to face in the years to come, if systematic efforts are not made to control the growing burden of alcohol consumption and its related problems for the Indian society.

Alcohol use is no more just an individual's choice of drinking or not drinking. Alcohol use can be described as the sum total effect on the individual, family and society. Harmful use of alcohol poses a significantly adverse impact on the lives of affected persons and their families, especially as far as their health is concerned. At the same time, the socio-economic impact and the burden on communities and the nation due to increasing alcohol consumption also deserves the urgent attention of

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policy-makers. As such, there is a need to focus on prevention of harm from alcohol consumption, both from the perspective of health promotion as well as social and economic development.

Recognition of the consequences of alcohol use on physical and mental health as well as socio-occupational life is a necessary step for initiating appropriate action to reduce the harm from alcohol use. The facts and figures available, although not complete, provide adequate basis for such an effort.

Although some research has been initiated, more active and vigorous research on the epidemiological trends, consequences of alcohol use, the socio-cultural mechanisms related to alcohol consumption and effective treatment and prevention strategies needs to be carried out so as to generate information which can be useful. At the same time, there is a need to understand and modify some myths related to alcohol use.

The increasing homogenization of the world's population and the reality of a global village in the beginning of the twenty-first century obligates all individuals and agencies involved in health and human welfare, especially in the countries of the third world, to recognize alcohol as one of the important factors impacting on health and development. The global history of measures for alcohol control and growing scientific evidence are also compelling reasons to accept the need for pragmatic solutions as compared to extreme positions like total prohibition. A public health approach that takes into account the trends of alcohol use, the factors contributing to use and the strategies needed for preventing or reducing the harm from alcohol use, the range of issues for those affected with problem use and the strategies for less harmful use for various groups in the population on a scientific basis, is more likely to be effective in preventing harm from alcohol use.

Opening more alcohol detoxification centres addresses the end of the spectrum and has poor long-term effectiveness. Criminalizing the user through insufficient legal interventions is also largely ineffective. The emphasis should be on prevention of harm from alcohol consumption wherein there is sufficient collective deterrence to its use. The paramount social responsibility is to enable a health promotion programme which aims especially at emerging risk groups (the youth and women). Sustained campaigns need to be adopted, which can transgress traditional boundaries and be able to respond to new and emerging challenges particularly in transitional towns and rural communities.

The contextual evidence from the region for what is successful in reducing the harm from alcohol consumption is a mixed bag.

An effective public health approach for preventing harmful alcohol use, should consider the trends of alcohol use, factors contributing to use, and strategies for preventing harm from alcohol use, among various groups.

An understanding of the public health principles and a policy with a viable action plan is required.

Notwithstanding this there is plenty of international evidence which suggest components of successful programmes. However, there are many challenges. The transition from traditional to modern societies provides a unique opportunity to leverage the positive factors within the Region (family values, religion and culture, greater proportions of people who do not use alcohol, low proportion of drinking among females). What is needed is an understanding of the public health principles and a sustainable policy with an action plan which is implementable and sustainable in the long run.

In the final assessment, it is not just the individual who suffers but the family and society too. It is not merely a question of who gains or who loses. The critical point is how we leverage the gains and devise mechanisms to reduce the losses. For a long time, the debate on alcohol control policies has revolved around economic issues rather than health issues. Consequently, revenue generation and income is seen to be more important while health and socio-economic impact has been down played. For example, on a conservative basis as derived from the Bangalore study, while the revenues in India are estimated to be Rs 216 billion, the losses are estimated to be 244 billion, apart from immeasurable losses due to multiple and rollover effects of alcohol use. Thus, there is a need for consensus building for a shared vision on promoting health of individuals and families and to protect them from the ill-effects of alcohol. Multiple agencies need to come together to list strict 'dos' and 'don'ts'. Each sector must identify its specific role and list out its responsibilities. The health sector needs to take the leadership in this public health endeavour.