Original Research Article

Effectiveness of Community Based Nursing Intervention Strategies on Quality of Life among Alcoholics in Selected Rural Communities

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ABSTRACT

Introduction and Objectives: Alcohol consumption has been identified as a risk factor for many health, social and economic problems of communities. 62.5 million alcohol users estimated in India. WHO strategies for nursing education, research and practice emphasize on early diagnosis, medical/social problems, counseling and access to services and opportunities to achieve social integration, medical detoxification and long term identification and management of alcoholism and its related problems. In this study, the investigator focused on quality of life among alcoholics. The objectives of the study were to assess the effectiveness of community based nursing intervention strategies on quality of life among alcoholics. The study also aimed to associate the level of quality of life among alcoholics with their demographic variables. Pre-Experimental-One group pretest and posttest design was adopted. 473 clinically identified alcoholics fulfilling inclusive criteria were considered as samples. Community based nursing intervention strategies were provided for the participants. CAGE Questionnaire was used to identify clinically significant alcoholics. WHO QoL (Quality of Life) questionnaire was used to assess the quality of life among alcoholics. The mean differences between pre-test and post-test overall QOL, was 23.93 with t-value 32.99. These scores were highly significant at p<0.001 level suggesting that the community based nursing interventions were effective in improving the QOL among alcoholics. The study recommended the utilization of the community based nursing intervention strategies for the Community Health Nurses to aide them in reducing the alcohol dependence and thereby improving the Quality of Life among alcoholics

Keywords: quality of life, alcoholics, community based nursing intervention strategies.

INTRODUCTION

Alcohol has now become a common word in the Indian society. **(1)** According to (WHO) estimates, there are about 2 billion people worldwide who consume alcoholic beverages and 76.3 million with diagnosable alcohol-use disorders.**(2)**Research in the past few years has conclusively demonstrated that nearly one in 3 male adults consume alcohol, and 5% of Indian women are already regular users. All India averages were Male 31.9% and Female: 2.2% for alcohol consumption. In Tamil Nadu, about 15% of the respondents report to have consumed alcohol in past 12 months and 11% consumed in last 30 days preceding the survey. The habit was higher among men with 30% consuming alcohol in past 12 months as compared to only 0.1% among women. **(3, 4)**

Alcohol abuse/dependence is a serious clinical condition, signifying a major impairment in the dependent individual's quality of life (QOL) in conjunction with the severity of alcohol misuse. Quality of life is defined as individuals' perceptions of their position in life in the context of the culture and value systems in which they live and in relation to their goals, expectations, standards and concerns. **(5,6)**

The field of Community Based Participatory Research (CBPR) is a growing discipline in the field of public health. CBPR is an approach that involves the community of focus in many components of the research process. Alcohol dependence and its impact on QOL demands participatory research to control the problem with the help of community involvement and resources. Communities can be supported and empowered by governments and other stakeholders to use their local knowledge and expertise in adopting effective approaches to prevent and reduce the harmful use of alcohol by changing collective rather than individual behaviour while being sensitive to cultural norms, beliefs and value systems.**(7,8)**

The various research studies conducted on alcoholics and the approaches to manage the alcoholics have supported the investigator to involve in this study. Through this community based nursing intervention strategies, the investigator has implemented the nursing strategies to improve the quality of life among alcoholics.

The objectives of the study were
1. To determine the effectiveness of community based nursing intervention strategies on the Quality of Life among the alcoholics.
2. To associate the overall mean difference in the score on the quality of life among alcoholics with their background variables.

Extensive review of literature was done on Research studies related to prevalence of Alcoholism, level of Quality of Life and community based nursing interventions on Quality of Life among Alcoholics

MATERIAL AND METHODS
A Pre-experimental-one group pre-test and post-test design was adapted for the study. The dependent variable was quality of life among alcoholics and the independent variable was the community

based nursing intervention strategies. The study was conducted at 5 adopted rural villages of OmayalAchi Health Center.

Total enumeration of all the alcoholics identified as clinically significant in the 5 adopted rural villages were considered as samples. The Sample size estimated by power analysis was 369 and hence the sample size of the study comprised of total estimated 473 alcoholics.

The CAGE Questionnaire was used to identify the clinically significant alcoholics.**(9)** The Quality of Life was assessed through WHO QOL BREF 26 items modified tool which has 4 dimensions like Physical, Psychological, Social Relationship and Environmental domains. The tools were validated from various experts. **(10)**

Community based nursing intervention strategies were administered for the clinically significant alcoholics over a period of 6 months. The interventions were comprehensive, coordinated with community involvement and included individual need based nursing interventions, alcoholic education, family counseling, detoxification and training of local workers.

Reinforcement of the interventions was given by the researcher once in every month to the alcoholic dependents through telephonic conversation and in collaboration with trained local workers and health care personnel of OACHC. The post-test was carried out by the investigator after 6 months.

RESULTS
Percentage and Frequency distribution was used to assess the background variables. Mean and Standard deviation was used to analyze the level of quality of life among alcoholics. Paired 't' test was used to compare the pre-intervention and post intervention level of quality of life among alcoholics. ANOVA test was used to analyze the association between quality of life with demographic variables.

Statistical Package for social science /PC+Ver.17 was utilized for the data analysis. Totally, 473 Alcoholics were identified in the adopted rural communities. With regard to Physical Health QoL (Domain-I), the mean difference was 5.27 with t-value 21.19 which was highly significant at p<0.001. With regard to Psychological health QoL (Domain-II) the mean difference was 5.71 with t-value 23.15 which was highly significant at P<0.001.

With regard to Social Relationship QoL (Domain-III), the mean difference was 8.37 with t-value 27.03 which was highly significant at p<0.001. With regard to Environmental Health QoL (Domain-IV) the mean difference was 4.58 with t-value 24.94 which was highly significant at p<0.001. The Mean difference score for overall Quality of Life was 23.93 with t-value 32.99 which was found highly significant at p<0.001.
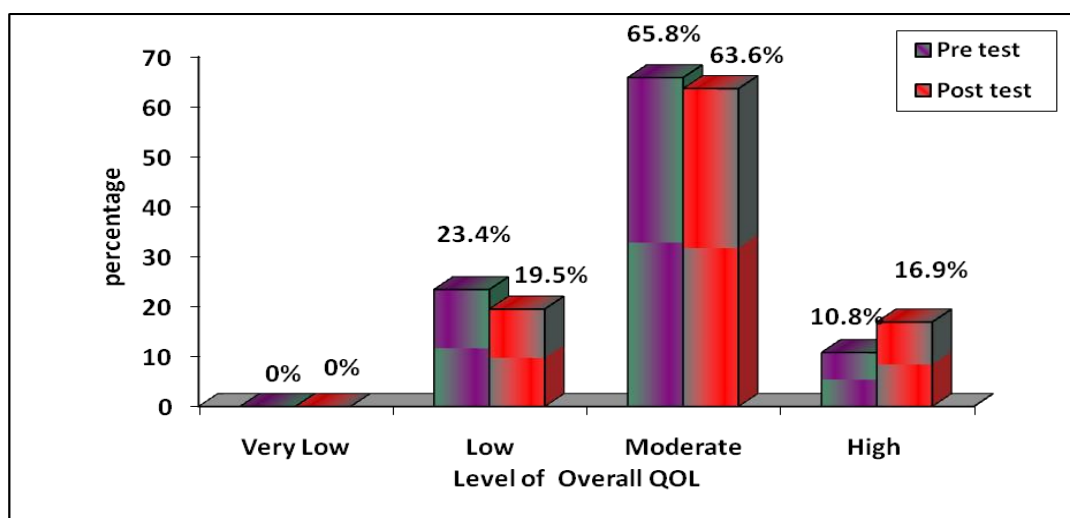

Fig 1: Frequency and Percentage distribution of pre-test and post-test Overall Quality of Life among Alcoholics

Table 1: Comparison of pre-test and post-test Mean, S.D, of QOL (Domain wise) and its significanceN=473

Quality of Life Domains	Pre test scores		Post test scores		Mean difference	't'-value	p-value
	Mean	SD	Mean	SD			
Physical Health (Domain- I)	49.32	18.69	54.56	16.74	5.27	21.19	0.000***
Psychological Health (Domain- II)	48.03	18.99	53.74	17.98	5.71	23.15	0.000***
Social Relationship (Domain- III)	49.12	21.44	57.49	20.86	8.37	27.03	0.000***
Environmental Health (Domain- IV)	48.33	19.23	52.91	18.32	4.58	24.945	0.000***
Overall QoL	194.803	73.02	218.73	68.32	23.93	32.99	0.000***

df= 472   table value = 1.96, ***significant at p<0.001)

With regard to alcoholics Perception of Quality of Life, the mean difference was 0.11 with t-value 5.78 which was highly significant at p<0.001. With regard to

alcoholics perception of Health, the mean difference was 0.072 with t-value 4.64 which was highly significant at p<0.001.

Table 2: Comparison of pre-test and post-test Mean, S.D of Perception of QOL and Health among Alcoholics and its Significance N=473

Alcoholics Perception	Pre-test		Post test		Mean difference	't'-value	p-value
	Mean	SD	Mean	SD			
Perception Of Quality of Life	2.84	0.97	2.94	1.03	0.11	5.78	0.000***
Perception of Health	2.9	0.87	2.97	0.89	0.072	4.64	0.000***

(df= 472   table value = 1.96, ***significant at p<0.001)

The mean differed scores of perception of Quality of life among alcoholics was significant with Occupation (P<0.01) and duration of alcoholism (P<0.01).The mean differed scores of perception of Health was significant with

Income in rupees per month (p<0.05), and marital status (p<0.01) among alcoholics. The mean differed score of Quality of life in Physical Health (Domain I) among alcoholics was significant with number of times of alcohol intake per week (p<0.001).

The mean differed score of Quality of Life in Psychological Health (Domain II) among alcoholics was significant with Occupation ($p<0.05$) and Food Habits ($p<0.05$). The mean differed score of Quality of life in Social Relationship (Domain III) among alcoholics was significant with Educational Status ($p<0.01$), Occupation ($p<0.01$), Income in rupees per month ($p<0.05$), Marital status ($p<0.05$), Food Habits ($p<0.001$) and duration of alcoholism ($P<0.01$). The mean differed scores of 'quality of life in Environment health (Domain IV) was significant with demographic variables like Occupation ($p<0.05$). Income in Rupees per month ($p<0.05$), Food habits ($p<0.05$), times of consumption of alcohol per week ($p<0.01$).

The overall findings of association between mean differed scores of level of Quality of Life among alcoholics showed significance with demographic variables like occupation, food habits, income, duration of alcoholism, and times of alcohol intake per week.

DISCUSSION

The study finding revealed that 23.73% of male population was identified as clinically significant alcoholics, which was supported by the finding of National Household Survey of Alcohol and Drug Abuse with 21.4% were reported to be users of alcohol.

The study proved that the community based nursing interventions were effective in improving the Quality of Life among alcoholics. Comparing with the Domains in Quality of Life, the highest mean difference was found in Social Relationship (Domain III) followed by Psychological Health (Domain II), Physical Health (Domain I) and Environment Health (Domain IV) respectively. Overall, the statistical analysis infers that the Community Based nursing interventions were effective in improving the Quality of Life among Alcoholics.

The overall findings of association between mean differed scores of level of Quality of Life among alcoholics showed significance with demographic variables like occupation, food habits, income, duration of alcoholism, and times of alcohol intake per week.

CONCLUSION

The study concluded that the community based nursing intervention strategies was effective in improving the Quality of Life among alcoholics, the study emphasized the need for community based participatory research in enhancing the health of the people. The study recommended the utilization of the community based nursing intervention strategies for the Community Health Nurses, Nurse Educators, Nurse Administrators and Nurse Researchers to aide them in reducing the alcohol dependence and thereby improving the Quality of Life among alcoholics

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