Social Science

Original Research Paper



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ALCOHOL CONSUMPTION AND SEXUAL RISK BEHAVIOUR **AMONG YANADHI YOUTH - A STUDY**

ABSTRACT Background of the study: The relationship between alcoholism and STI /HIV infection needs to be investigated because alcoholism may influence high risk sexual behaviour. The study aims to explore the prevalence and pattern of alcohol use in rural tribes and the levels of sexual risk behaviours, sexual knowledge, attitudes and practices among tribal adults. Materials and Methods: The present study was conducted from rural areas in Chittoor district, sample was 120 male respondents belonging from age of 15-59 with help of simple random sampling technique were adopted. The data was collected through interview schedule, sampling criteria was taken from recently updated voter list.

Results and Conclusion: The present study result shows that prevalence of unprotected sex following alcohol consumption was found to be higher (64.1 percent) among alcohol abusers than among moderate alcohol drinkers (46.7 percent).

KEYWORDS : Alcoholism, sexual risk behaviours, sexual knowledge, Yanadhi, Tribe

Introduction:

A history of alcoholism has been associated with a lifetime tendency towards high risk sexual behaviors including multiple sex partners, unprotected sexual intercourse, and sex with high risk partners and the exchange of sex for money. This type of sexual practices may damage health status of the alcohol abusers, further; both are culture – sensitive phenomena of the people.

The relationship between alcoholism and STD / HIV infection needs to be investigated because alcoholism may influence high risk sexual behavior (NIAAA, 1992). In addition, alcoholism may influence high-risk behaviors at particular encounters by impairing normal judgment and disinheriting socially learnt restraints. Alcohol use and unsafe sex are common behavior and has serious implication for the health of people due to advent of STD /HIV infections. Alcohol consumption also been linked to early sexual experiences. Generally, people use alcohol before they engage in sex, risk taking behavior occurs, notably unsafe sex, because they are less likely to adopt safe sex procedures when under the influence of alcohol.

Alcohol abuse is a well-known and serious social problem in Indian continent; particularly among the lower strata people in towns as well as in the country side. In India, 75 per cent of adults are actively consuming alcohol. With this high level of alcohol consumption and the high prevalence of HIV/AIDS, it would be worthwhile investigating the existence of any association between alcoholism and high-risk sexual behavior that predisposes an individual to contracting HIV infection. Further, at the micro level, it becomes important to understand links between risk behaviors and cognitive, affective and behavioral factors in the individual at the time of event. What makes the person drink before having sex? What happens to the risk perception? What kinds of sexual encounters is one likely to engage in? What happens to the likelihood of and the ability to use condoms under the influence of alcohol? What is the likelihood of STD/HIV transmission? Are appropriate steps taken by the alcohol user towards prevention?. Studies that have explored alcohol use related factors and their associations with sexual risk have not been widely reported from India, where there are now over 5 million individuals infected with HIV (NACO, 2006).

In India, the alcohol use prevalence estimates vary from state to state, ranging from 6 per cent (in a state under prohibition) to 75 per cent. Alcohol use in India has long been associated with intimate partner violence, sexual coercion and other violent acts towards family members (Go, et al., 2003). NACO Behavioral surveillance study (2001) shows that 75 per cent of a nationwide sample of female sex workers consumed an alcohol drink occasionally before sex, among their male clients, 23 per cent reported drinking on a daily basis. Other studies which evaluated behavioral factors associated with sexual risk in India, reported that alcohol use is associated with hetero sexual risk markers such as prevalent STDs and sex with female sex workers (Madhivanan et al., 2005) extramarital sex (Schensul et al., 2006) and non - use of condom (Gupta et al., 2005).

The linkages between alcohol use and sexual risk are noteworthy since hetero- sexual intercourse accounts for 87 per cent of all reported HIV infections in India (NACO, Annual report, 2009-10). Heterosexual risk in India arises from both lack of condom use and having multiple sexual partners (Solomon, et al., 2004). Some studies have shown that, between 15 to 19 per cent of Indian married men (Bhattacharjee et al., 2000) and over 45 per cent of unmarried men have multiple partners (Bhatia et al., 2005).

Rural Indian tribes are anthropologically distinct with unique cultures, traditions and practices over the years, due to a poor health infrastructure, high levels of poverty ignorance and illiteracy. Throughout India, nearly 8 per cent of the population lives with in rural tribal communities, and these people have existed on the fringe of Indian society, they many still are unaware or indifferent to the potential health threats from STD/ HIV/AIDS. Ascertaining whether or not, tribal communities are potentially a high risk group, warranting intervention is a necessary step in India's war on STD and HIV/AIDS. There is a unique sexual practice among tribal members, because they did not have a structured marital system; they practice a form of serial monogamy in which they change partners and remarry, because they many forced to migrate outside of their communities in search for work and they may much influenced by alcohol, this many contribute to the spread of HIV/AIDS as many engage in extra-marital affairs, seek commercial sex partners. However, in India we have scanty research on the relationship between alcoholism and sexual behavior and health that to on tribal groups.

Important of Study

The study aims to explore the prevalence and pattern of alcohol use in rural tribal yanadhi and the levels of sexual risk behaviors, sexual knowledge, attitudes and practices among yanadhi tribal adults. Hence, the study specifically describes the association between alcohol use and risky sexual behavior and health. Now, there is an urgent need that future HIV prevention interventions in India might consider the role of alcoholism and its implications on sexual risk and sexual health.

Methodology:

The study will be undertaken in the rural areas in Chittoor district of Andhra Pradesh with the objective of the study is to collect demographic, socio- economic information from the respondents with special reference to alcoholism and its implications on their sexual health, and to analyze whether alcohol abuse encourage multiple sex partners and paying for sex and the association

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between alcohol use and non-use of condom or lower condom use at the time of sexual intercourse. In other words, to assess the alcohol consumption in the promotion of high-risk sexual behavior and therefore transmission of STD/HIV infections because, this may be adversely affects health status of the tribal people. A total sample of 120 respondents will be selected using simple random sampling technique. The sample unit will be the house hold having a male aged 15-59 years (productive and reproductive age). The data will be collected through interview schedule. A list of eligible respondents in the sample area satisfying the sampling criteria will be prepared with the help of the recently updated voters list.

Background	Frequency of alcohol Consumption (Percentage)			
	Never	Sometimes	Regular	
Age 15-19	27.8	38.9	33.3	
20-24	26.9	30.8	42.3	
25-29	09.1	27.2	63.7	
30 and Above	04.7	32.6	62.7	
Education No Education	09.8	21.3	68.9	
Primary	07.7	43.6	48.7	
Secondary	31.2	37.6	31.2	
Occupation Daily wages	04.5	13.6	81.9	
Fishing / Hunting	04.9	31.6	63.5	
Petty shop & others	30.8	38.4	30.8	
Personal Income (Per month) <1000	04.9	33.3	61.8	
1001-2000	09.7	35.5	54.8	
2001>	25.0	37.5	37.5	

 Table:
 1. Socio-demographic background and frequency of alcohol consumption.

Nearly the same percentage of the participants 63.7 percent (in the age group of 25-29 years) and 62.7 percent (above 30 years) were expressed that they taking alcohol regularly. At the age of 20-24 years age group, 42.3 percent of the participants was agreed that they taking alcohol regularly. About one-third of the participants (33.3 Percent) were consuming alcohol regularly at the age of 15-19 years and more than one-fourth of the participants (27.8 percent) were not taking the alcohol ever. In the sample area sixty nine per cent of the participants were no education, forty nine per cent of the participants had some form of primary education while nearly onethird of the participant (31.2 percent) had secondary education and one-fourth of the participants with post-secondary level of education had consumed alcohol regularly. Among the sample higher proportion of the participants (81.9 percent) was daily wage labours followed by fishing/hunting (63.5 percent), Petty shop and others (30.8 percent) were regularly consuming alcohol. More than three-fifths of the participant's (61.8 percent) month income was below 1,000 rupees and more than one-half (54.8 percent) were having monthly income between the 1001-2000 rupees and anther thirty eight per cent of the participant were belongs to more than 2000 rupees income monthly but they were consuming alcohol regularly in the study area.

Table: 2. Number of Sexual partners compared to alcohol drinking patterns.

			Alcohol drinking Category		Total
			Moderate Alcoholdr inking		
Number of sexual partners	One partner	Count	26	15	41

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	% within alcohol Drinking category		35.1	32.6	34.2
	Multiple Count partners		48	31	79
		%within alcohol Drinking category	64.9	67.4	65.8
Total		Count	74	46	120

The prevalence of multiple partnerships among the study participants was 65.8 per cent (79) compared to 34.2 per cent (41) for single partnerships. The prevalence of multiple partnerships was 48 (64.9 percent) among the moderate alcohol drinkers compared to 31 (67.4 percent) among the alcohol abusers. Single partners were also less among the alcohol abusers at 15 (32.6 percent) compared to moderate drinkers at 26 (35.1 per cent). Thus, alcohol does play a significant role in promoting high –risk sexual behiviour promoted, an individual who abused alcohol stood a higher risk of contracting HIV/AIDS) infection than a modern drinkers.

Table: 3. Prevalence of sexual intercourse following drinking alcohol.

			Alcohol Drinking category		Total
			Moderate Alcoholdrin king		
Drinking alcohol before having sex	Yes	Count	59	33	92
		% within alcohol Drinking category	79.7	71.7	76.7
	No	Count	15	13	28
		% within alcohol Drinking category	20.3	28.2	23.3
Total			74	46	120

The prevalence of sex after drinking alcohol in the study sample was 92 (76.7 percent). Alcohol abusers had a higher prevalence of 33 (71.7 percent) of having sexual intercourse after drinking alcohol compared to 59 (79.7 percent) among the moderate alcohol drinkers. Being drink often provides the necessary excuse for inappropriate, unsociable or risky sexual behiviour. Thus, alcohol abuse was noted to be associated with multiple risk for HIV transmission among sexual active youths underscored the need to integrate alcohol abuse and HIV prevention efforts.

Table -4: Condom use with FSWs and Non-FSWs after alcohol consumption

Condom Use					
	Total	No	Yes		
Consumption of Alcohol before sex with FSWs	64.1	35.9	100.0		
Consumption of Alcohol before sex with non-FSWs	46.7	53.3	100.0		

In order to get an insight into safe sexual practices during the interface of alcohol and sex, responses have been analyzed about using condoms with FSWs as well as non–FSWs by the reported behavior of sex after alcohol consumption. It is interesting to note the reported use of condom is higher in case of sex with FSWs under the influence of alcohol (Tabel.4). This maybe because the majority of the respondent perceived sex with non-FSWs as safer than that of FSWs as far as chance of getting infected with STI/HIV. Among the sample 64.1 per cent of participants had said that they used condoms before sex with FSWs (during consumption of alcohol). On

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the other hand, 35.9 percent of the participants indicated that they did not use condoms before sex FSWs. More than on two fifths of the participants (46.7 per cent) expressed they used condoms along with consumption of Alcohol before sex with non-FSWs. Despite considerable variation in the safe practices with FSWs and non-FSWs as sexual partners, the degree of association is not strong. This raises question that could better explain the association between 'mixing sex'. It has been observed from the same source of data that three exists some variation in the behavior of mixing sex and drink, with respect to level of education and HIV/AIDS knowledge. Similar variation has also been observed in case of condom use.

For understanding alcohol use behavior, it is essential to understand the context in which alcoholism is rampant among yanadhies in the rural areas. Some of the important issues, which may give an insight into these processes, maybe location, types, timing, companions etc. More specifically, place of drink and companion are important determinants of interface between alcohol and sex. Over the years, there has been a growing realization that there exists a nexus between place if drink and sex in the context between place of drink and sex in the context of different forms of bars and clubs. This study flags that bars are the most preferred place to drink among adolescents and youth in all the age groups irrespective of occupation and religion followed by 'Friend's place'. In order to explore the extent of deviant behavior in companion of their peers and friends, all respondents were asked about their main activities with their friends.

Table : 5. Forms of risk activities with friends.

Activities	Percentage
Smoking	73.2
Chewing tobacco/ Pan	58.3
Drinking	86.3
Watching Blue – Films	11.6
Gambling	17.4
Visiting Female sex workers	89.7

The study clearly brings out that a substantial proportion of youth in slum community are governed by the influence of their friends and peers, through the intensity varies from smoking, drinking, gambling, watching blue films to visiting female sex workers (FSWs).

Discussion of findings

Most of the participants in this study were aged between 25 to 29 years with the greater majority (68.9 percent) of them having no education. The study demonstrated that drinking alcohol before sex was a common practice in the study sample with alcohol abusers having a higher prevalence (71.7 percent) of sexual intercourse after drinking alcohol compared to 79.7 percent among the moderate alcohol drinkers. From the study, the prevalence of unprotected sex following alcohol consumption was found to be higher (64.1 percent) among alcohol abusers than among moderate alcohol drinkers (46.7 percent).

Conclusion

The study findings indicate that the levels of alcohol consumption and HIV risky sexual behaviours in communities of tribes are quite high. There is a strong correlation between indicators of alcohol consumption and those of HIV risky sexual behaviour. In some instances the higher the extent of alcohol use the more the likelihood of risky sexual behaviour. The screening for alcohol consumption and risky sexual behaviours was feasible. Research is needed to enhance cultural understanding of alcohol consumption and risky sexual behaviours in the tribal communities. Combined interventions to educate and control access to alcohol in tribal communities may be able to reduce alcohol consumption and sexual risk behaviours.

So, this study will be makes a significant contribution to understand the role of alcoholism and its implications on sexual behavior and

health of tribal people in southern rural India. Lack of awareness, permissiveness of tribal societies for alcoholism, and sexual mixing patterns predispose these people to STD and HIV/ AIDS infections. Hence, there is an at most need to integrate alcohol abuse in STD/HIV prevention efforts. So, national and state level policies and strategies can be evolved using the findings of this study. The findings of this study will also be a pace setter for the future studies in the other states in India.

REFERENCES

- Gupta PC, Saxena S, Pednekar MS, Maulik PK, Alcohol consumption among middleaged and elderly men: a community study from western India. Alcohol Alcohol 2003; 38:327-331.
- Saxena S. Alcohol problems and response: challenges for India. J Substance Use 2000; 5:62-70.
- Mohan D, Chopra A, Ray R, Sethi H, Alcohol consumption in India: a cross sectional study. In: Room R, Demers A, Bourgault C, eds. Surveys of drinking Patterns and Problems in Seven Developing Countries. Geneva: World Health Organization, 2001: 103-114.
- Varma VK, Singh A, Singh S, Malhotra A, Extent and pattern of alcohol use and alcohol related problems in North India. Indian Journal of Psychiatry 1980; 22:331-337.
- Fritz KE, Woelk GB, Bassett MT, et al. the association between alcohol use, sexual risk behaviour, and HIV infection among men attending beerhalls in Harare, Zimbabwe. HIDS Behav 2002; 6: 221-228.
- Simbayi LC, kalichman SC, Jooste S, Mathiti V, Cain D, Cherry C. Alcohol use and sexual risks for HIV infection among men and women receiving sexually transmitted infection clinic services in Cape Town, South Africa. J Stud Alcohol 2004; 65: 434-442.
- Derman KH. Cooper ML, Agocha VB. Sex-related alcohol expectancies as moderators of the relationship between alcohol use and risky sex in adolescents. J Stud Alcohol 1998;59:71-77.