



Western Cape  
Government

Social Development



# Alcohol Abuse

Booklet



## Harmful alcohol use

**!** Alcohol is the oldest and most widely used drug in the world.

Consumed recreationally, most people do not have a problem with alcohol. However, millions do have a drinking problem. Many are alcoholics or suffer from the consequences of an alcohol-related or -induced problem or disease.

Blood alcohol test results for 2 230 people who died on the road between 2013 and 2015 showed that over half (1173 or 52%) had been drinking. Of the group that tested positive for alcohol, 1074 had more than 0.05g of alcohol per 100ml of blood (the legal limit for drivers), and 584 had 0.2g or more. A person with 0,2g of alcohol per 100 ml of blood is four times over the legal limit for drivers, and is likely to have consumed ten or more alcoholic beverage (e.g. ten bottles of beer or ten glasses of wine).

Issued by Western Cape Department of Transport and Public Works

## What is alcoholism?

**!** Alcoholism is a treatable dependency on alcohol.

It means that the drinker continues to drink despite the repeated negative effects on the person's health, relationships, finances and other life areas.

## Types of drinkers:

The manner in which people consume alcohol often determines their behaviour. For many it is not a problem. What kind of drinker are you?

### Social drinkers

- Mostly drink on generally accepted social occasions.
- Do not feel regret, shame or guilt after drinking.
- Can decide to stop drinking even when there is still plenty to drink.
- Seldom or never have conflicts with those close to them about their drinking.
- Consider and obey the 'drinking and driving' regulations in force.
- Know their limits and stick to that.
- Do not place themselves, family, friends or others at risk as a result of their drinking.

### High-risk drinkers

- Occasionally experience blackouts (memory lapses) after drinking.
- Can drink a lot before getting drunk.
- Sometimes do or say things when they drink, which they regret afterwards.
- Find that their weekends are usually filled with drinking occasions.
- Behave impulsively and put themselves and others at risk as a result of their drinking.

## Problem drinkers

- Various occasions where their drinking embarrasses or angers those around them.
- Frequently drink to alleviate a perceived problem – loss, loneliness, anger.
- Frequently drink to alleviate the symptoms of a hangover.
- Lie about their drinking/drink in secret.
- Experience major problems in their relationships.

## Common misconceptions about alcohol

### MISCONCEPTION

Alcohol stimulates the brain to make people more sociable and outspoken.

### FACT

Alcohol depresses brain functions. By putting the rational part of the brain to sleep, inhibitions are reduced causing the person to believe he/she is more convivial, impulsive and cheerful.

### MISCONCEPTION

Being arrested for an alcohol-related offence is not a crime.

### FACT

If arrested and sentenced, even a suspended sentence for an alcohol-related offence will be regarded as a criminal record that may come back to seriously haunt you later in life.

### MISCONCEPTION

Alcohol can be eliminated from the body faster by doing physical exercise.

### FACT

The liver breaks down alcohol at a steady rate and this cannot be changed by doing strenuous physical exercise, drinking black coffee or taking a cold shower. Although one may feel more awake after doing this, it will not bring the Blood Alcohol Concentration (BAC) down.

### MISCONCEPTION

A person who is an alcoholic needs to drink on a daily basis.

### FACT

Problem drinkers do not necessarily drink daily or even regularly. In fact, in a desperate attempt to control their drinking, some problem drinkers often successfully abstain for long periods.

## Factors which would affect the way alcohol affects a person

**Alcohol concentration.** The greater the alcohol content of the beverage, the more rapidly the alcohol is absorbed by the body when it is consumed.

**Presence of food in the stomach.** Food dilutes the consumed alcohol, thus slowing down absorption of alcohol by the body.

**Speed of drinking.** Gulping drinks would result in a rapid rise in blood alcohol content (BAC).

**Substances in the alcoholic beverage.** Some beverages such as beer contain food substances which in themselves slow down absorption. Carbonated alcoholic drinks, on the other hand, will speed up absorption.

**Body weight.** A person with a larger body mass generally has more blood (water) and therefore a given amount of alcohol will not be as concentrated as in the body of a person with a lower body mass.

**Effect of alcohol.** It is a central nervous system depressant and therefore it will slow down and eventually put the entire brain to sleep.

**Alcohol affects everyone differently. If one person does not seem to be affected by a certain amount of alcohol it should not be assumed that another person will be affected in the exact same way. Be vigilant about what you drink and know your own limitations.**

## Do I have a problem with alcohol? Self-assessment

Today, drinking alcohol in the home or socially is an acceptable social activity. Whilst drinking alcohol may not present a big risk, the incorrect use and/or abuse of the substance does present a direct risk to the consumer.

Not everyone that consumes too much alcohol is necessarily an alcoholic.

**Loss of control:** The inability to limit one's drinking on any given occasion.

Alcoholism, or 'alcohol dependence' is a disease that includes the following symptoms:

**Physical dependence:** Withdrawal symptoms, such as nausea, sweating, shakiness, and anxiety occur when alcohol use is stopped after a period of heavy drinking.

**Craving:** A strong need, or compulsion, to drink.

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**Tolerance:** The need to drink greater amounts of alcohol in order to “get drunk”.

### SYMPTOMS

Here are some common symptoms to look out for. Be honest with yourself. Have you noticed that you:

- cannot control drinking (salience of drinking);
- experience increased tolerance – drinking more before you feel drunk;
- suffer withdrawal symptoms;
- seek relief or avoidance of withdrawal symptoms by further drinking;
- experience cravings for a drink;
- experience relapses.

### EFFECTS

The resultant effect may be:

- Elated mood
- Impaired judgement

**How many of the above symptoms do you have?** If you can relate to more than **FIVE** of the above, you may have a problem. Go and speak to someone – your doctor, a counsellor or family member — about it. It is in your own best interest and the interest of those you love.

- Anger (Belligerence)
- Impaired social and occupational functioning
- Mood swings (mood liability)
- Brain Damage (cognitive impairment)
- Reduced attention span
- Slurred speech
- Lack of co-ordination
- Loss of balance (unsteady)
- Non-functioning (stupor)
- Coma
- Alcohol-induced amnesia
- Hallucinations
- Depression and suicide

### EFFECTS ON ALIMENTARY TRACT:

- Liver damage: hepatitis, liver cirrhosis, liver cancer
- Gastritis
- Peptic ulcer
- Esophageal varices
- Pancreatitis
- Cancers of the mouth, pharynx and oesophagus

## Alcohol and young adults

### Young people today face more challenges and temptations than any other generation.

More is expected from them in their schooling – their course loads are bigger. There are new drugs and forms of drugs that are easily and readily accessible to them.

Peer pressure is a constant strain and influences the choices they make. Relationships with parents and siblings are vitally important and have a strong influence on decision making. Alcohol and drugs play more of a role in a teenager’s attitude,

schooling and health than most parents realise. Alcohol and drugs are becoming more and more accessible to teenagers every day.

The Department of Social Development: Western Cape and an array of district and local partner organisations are dedicated to informing parents about these drugs and help them help their teens.

For young people, alcohol is the number one drug of choice. In fact, young people use alcohol more frequently and heavily than all

other illicit drugs combined. Early adolescence is a time of high risk when experimenting with alcohol begins.

While some parents and guardians may feel relieved that their teen is “only” drinking, it is important to remember that alcohol is a powerful, mood-altering drug. Not only does alcohol affect the mind and body in often unpredictable ways, but young people lack the judgement and coping skills to handle alcohol wisely.

### AS A RESULT:

- Alcohol-related traffic accidents are major causes of death among young people. Alcohol use is also linked with youthful deaths by drowning, suicide and homicide.
- Young people who use alcohol are more likely to become sexually active at earlier ages, to have sexual intercourse more often, and to have unprotected sex more than young people who do not drink. A high percentage of young people say they did something sexual while using alcohol that they wouldn’t have done if they were sober.
- Young people that drink are more likely than others to be victims of violent crime, including rape, aggravated assault, and robbery.
- Young people that drink are more likely to have problems with school work and school conduct.
- An individual that begins drinking as a young teen is four times more likely to develop alcohol dependence than someone who waits until adulthood to use alcohol.

Most young people are still very “now” oriented and are just starting to understand that their actions – such as drinking – have consequences. They also tend to believe that bad things won’t happen to them, which helps to explain why they often take risks.

## Alcohol consumption increases risk

Excessive consumption often leads to uncharacteristic and risky behaviour that has long-term and fatal consequences.

Young drinkers take unnecessary risks, act out of character and/or endanger themselves and others. People who are intoxicated lose their inhibitions, have impaired judgement and can easily become involved with risky sexual behaviour that can put them at risk of contracting STDs and HIV.

Research shows that most young people are aware of the risks of becoming infected with HIV. But when under the influence of alcohol or drugs they face a very real danger of engaging in risky behaviour, such as unprotected sex with multiple partners.

Alcohol consumption may increase host susceptibility to HIV infection.

**For people already infected with HIV, drinking alcohol can also accelerate their HIV disease progression.** The reason for this is that both HIV and alcohol suppress the body’s immune system.

Research has found that HIV patients who were receiving highly active antiretroviral therapy (HAART), and were currently drinking, have greater HIV progression than those who do not drink. They found that HIV patients who drank moderately or at “at risk” levels had higher HIV RNA levels and lower CD4 cell counts, compared with those who did not drink.

Patients with HIV who drink, especially

heavy drinkers, are less likely to adhere to their prescribed medication schedule and **forget to take their medication**.

## Violence

Alcohol contributes to the lowering of reflexes, motor skills and cognitive perception so that intoxicated people are more likely to become victims of violence:

- In 1999, 62% of murdered women in the Western Cape had elevated blood alcohol concentrations at the time of death (J Stud Alcohol Drugs 2009)

To seriously address this problem of violence, a holistic solution will be needed that includes the reduction in harmful drug and alcohol use.

- Mild to moderate mental retardation;
- Delay in developmental milestones (i.e. poor sucking, delayed sitting, crawling, walking and talking);
- Poor eye-hand co-ordination (e.g. catching a ball);
- Delayed development of fine motor co-ordination (e.g. picking up an item with his/her fingers) and gross motor co-ordination (e.g. running);
- Irritability and hyperactivity.



**Q:** How much alcohol consumed during pregnancy causes this syndrome?

**A:** The amount may vary from person to person.

**THE SIMPLE SOLUTION IS:** A woman should **stop** drinking as soon as she realises that she is pregnant. This will greatly reduce the risk of damage to the foetus.

Similarly, a mother who breastfeeds should not consume any alcohol as it will end up in her breast milk. This is passed on to the breastfeeding infant and has the potential to interfere with further development of the brain.

Information Courtesy of Nutrition Information Centre Stellenbosch University: Division of Human Nutrition

For more information, visit:  
<http://www.sun.ac.za/nicus>

## Where to find help

**Department of Social Development Toll-Free:**  
0800 220 250

**South African Police Services:**  
0860 010 111

**City of Cape Town:**  
0800 435 748

**Stikland Helpline:**  
021 940 4500 (detoxification alcohol) and 021 940 4496 (detoxification opioid)

**OR**

**Department of Social Development Regional Offices:**

**Metro North:** 021 483 7673

**Metro South:** 021 763 6200

**Metro East:** 021 360 4200

**West Coast:** 022 713 2272

**Eden-Karoo:** 081 588 9118

**Cape Winelands:** 023 348 5300

**OR**

**Department of Social Development's mobi site:**  
<https://www.westerncape.gov.za/substance-abuse/>

## Foetal Alcohol Spectrum Disorder (FASD)

Foetal Alcohol Syndrome (FAS) represents the severe end of the FASD spectrum in which there is physical growth retardation (height, weight and head circumference), characteristic facial dysmorphism, evidence of central nervous system neurobehavioural deficits and a positive or suspected history of alcohol in pregnancy.

Symptoms of FASD includes:



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