

Alcohol Addiction in Gozo

Editorial

Alcohol Addiction in Gozo	Poetry as a Sublime Expression	The ozone Layer over Gozo	A note on the Gozitan Economy	Ethnicity and Representation within The Maltese Media Industries (ii)
Adolescents and Religion	Book Reviews	Jum il-Vitorja	Front Cover	

A small semi-rural island is usually spared the uglier sights of big cities where derelicts sleep in the open air through summer and winter, and where all the undesirable side-effects of excessive alcohol consumption are only too obvious. But is the picture in Gozo such a rose one, or are we merely ignoring a major problem? Such a complacent self-assessment has received a jolt recently as a result of a report on the 'addiction problem' in Gozo, carried out by OASI Tertiary Prevention and Treatment Co-ordinator, Mr Noel Xerri (See oasi.com, May -August 2001).

In this survey, 1010 families chosen at random were questioned about their drinking and drug-taking habits. In each case, a member of the family reported on the situation within the family. The results, according to the investigators are worrying. The following are some of the answers obtained.

48% : a member of the family had drinks with lunch.

38% : a member of the family have sometimes drunk too much.

8%: a member of the family drink too much.

8%: a member of the family was advised by a family doctor to reduce alcohol consumption.

5%: a member of the family neglected work or other obligations for two or more days in a row because of drinking

4% : got into trouble because of drinking

5% : a member of the family ever drinks before lunch

85%: believe they can stop drinking without a struggle

7%: responded that they feel bad about their drinking

2%: had ever gone to anyone for help about their drinking problem.

Such a survey requires some comment.

A number of questions referred to 'drinks or drugs' and therefore the answers given could not be possibly analysed for each separately. While it is true to say that the aims of the exercise was to look at the 'addiction problem in Gozo', I believe that lumping these two issues together does not help to clarify the picture.

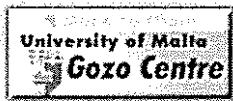
To be noted also that all questions referred to the situation where the interviewee or a member of his/her family satisfied the criteria indicated in the question. In other words, the incidence of 'alcoholism' cannot be assessed unless one knows the total number of persons at risk. If the average size of the family (including parents) is taken as 5, then the prevalence is a fifth of the figure given. Suppose for instance that 50 out the 1000 interviewees said that a member of their family had a drinking problem. The prevalence in the general population would not be 5% (50/1000), but 1%.

The second point relates to the importance of separating the 'soft' from the 'hard' questions. It is not really surprising that a significant proportion of the population had drinks with their meals. Likewise, it is an unfortunate fact that on occasion, such as the annual village festa, a member of the family would have been tempted to drink too much. These are foibles and weaknesses, but certainly cannot be included under the rubric of 'alcoholism' which is usually taken to refer to addiction to alcohol. It is presumably this group who believe that they can stop drinking without a struggle (85%).

On the other hand there is no doubt that there is a small fraction of the population where alcoholism is a problem. The survey shows that 4% got into trouble, 5% neglected work or other obligations because of alcohol, and 8% were advised by the doctor to reduce the alcohol intake. When divided by the average family size (as suggested above), this leaves a ground swell of one or two per cent of the population that can be classified as having a drinking problem.

One cannot be complacent about a serious condition such as alcoholism. Its effects on the social, psychological and physical well-being of individuals and their families are only too well known. This study helps to highlight the problem. It is re-assuring to see an organisation such as OASI doing such sterling work within our community in bringing these problems to our attention, and moreover, in providing help and advise where possible.

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