IMPACT OF ALCOHOL MISUSE ON FAMILY ECONOMY:

DATA FROM INDIA

Dr. Vivek Benegal

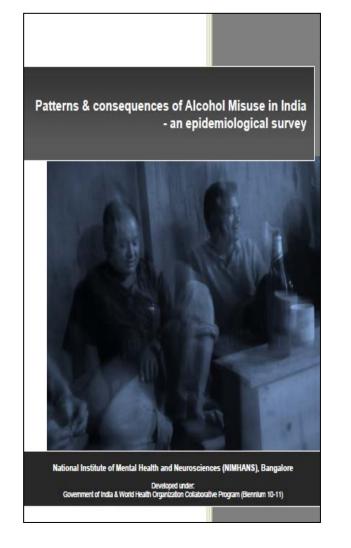
Professor of Psychiatry

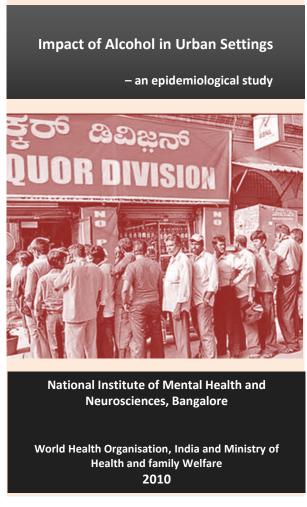
Centre for Addiction Medicine,

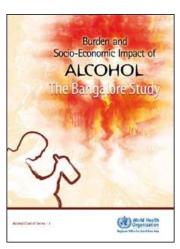
National Institute of Mental Health and Neurosciences, Bangalore, India

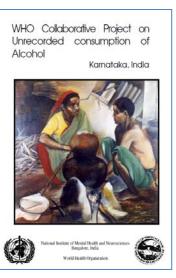
Data from 11 states of India - recent studies

2012 2010

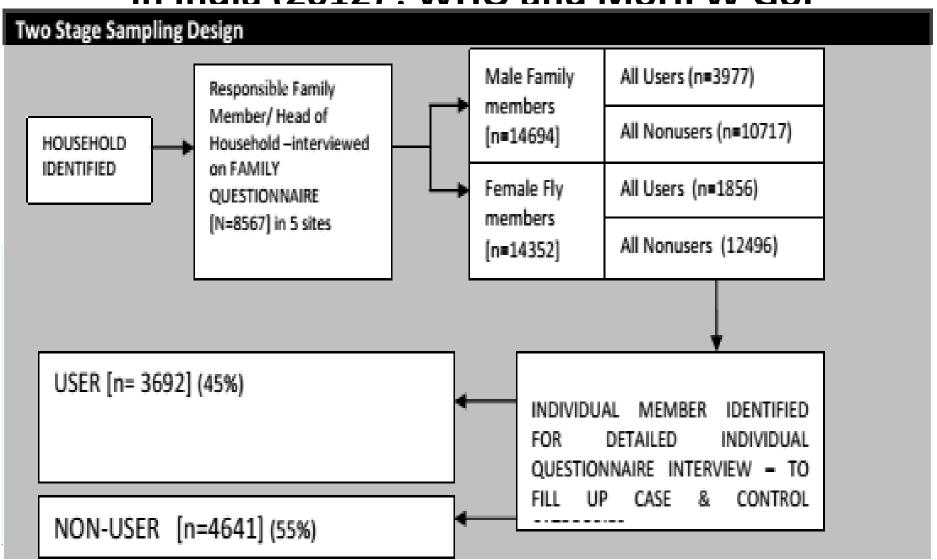




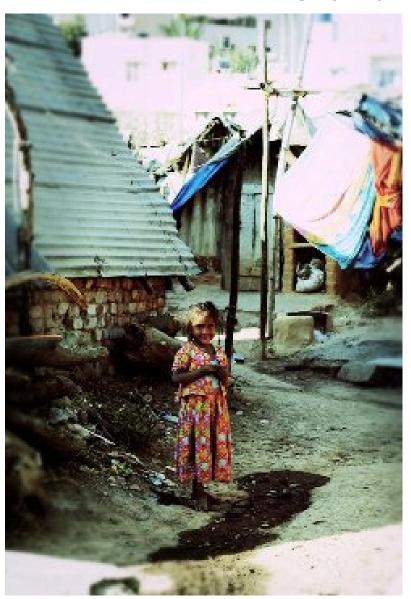




Patterns and Consequences of Alcohol Misuse in India (2012): WHO and MoHFW Gol



Impact of Alcohol in Urban Settings (2010) WHO and MoHFW Gol



- House hold survey across 13 working-class neighborhoods in Bangalore city
- GENACIS questionnaire
- + Monthly household expenditure
- 2456 people from 517 houses

Economic Costs of Alcohol misuse

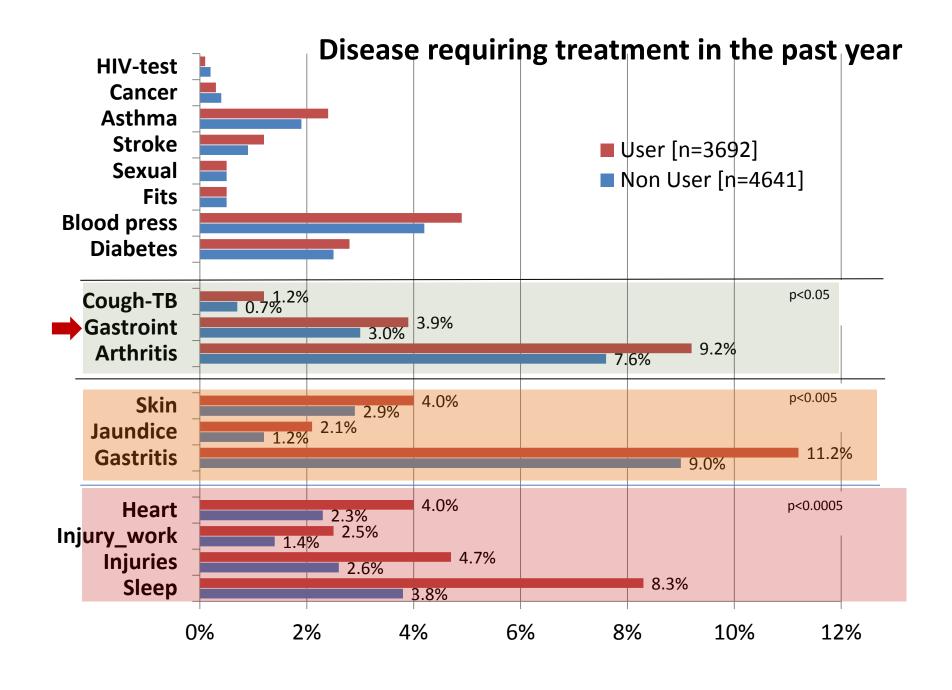
A. DIRECT AND INDIRECT COSTS

- 1. HEALTH RELATED COSTS
- 2. LOSSES DUE TO DECREASED
- **PRODUCTIVITY/EARNING**
- 3. BORROWING-ASSETS ETC.

B. INTANGIBLE (UNMONETIZABLE) COSTS & HARMS TO OTHERS

Health-Related Costs

- (1) expenditures on medical treatment
- (incl. medical consequences of alcohol consumption, treatment of alcohol abuse &dependence),
- (2) lost productivity from workers' abuse of alcohol, and
- (3) losses to society from premature deaths due to alcohol problems.



Hypertension / ? CHD & Stroke

- J shaped curve effects may be obscured in low income countries, where the mortality and morbidity due to prevalent patterns of drinking outweigh any possible benefits (Jernigan et al 2000)
- Alcohol intake and invariably associated smoking, both individually and collectively related to the higher prevalence of hypertension as well as CHD (Chockalingam et al 2005, Gupta et al 1995).
- 28 % of patients with CVA (stroke) had history of regular, heavy use. (Nagaraja et al, 2005).

Alcohol Misuse and earlier age at death

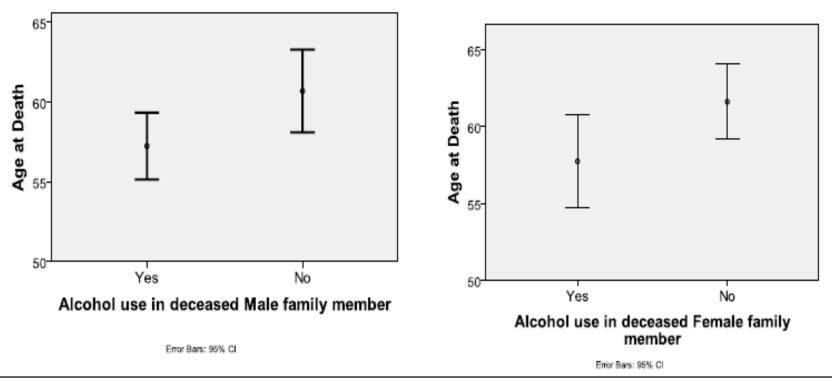
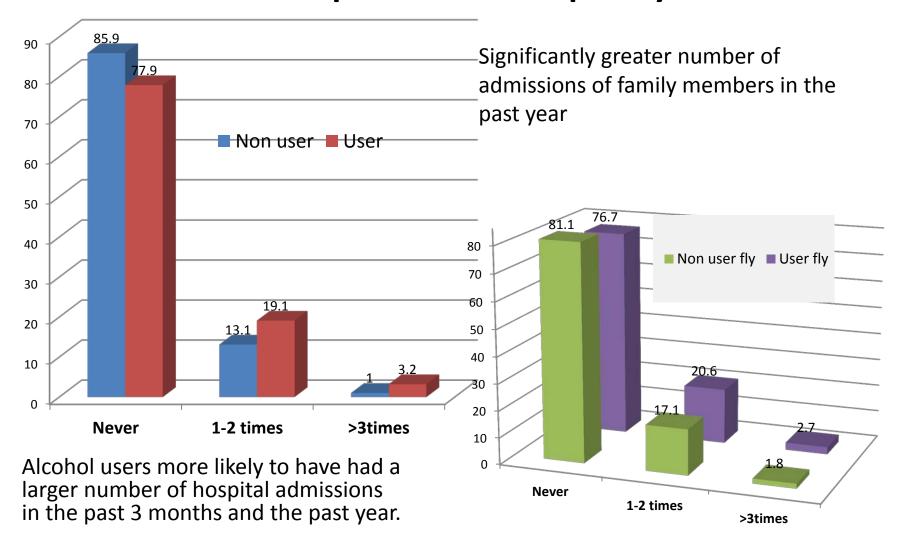


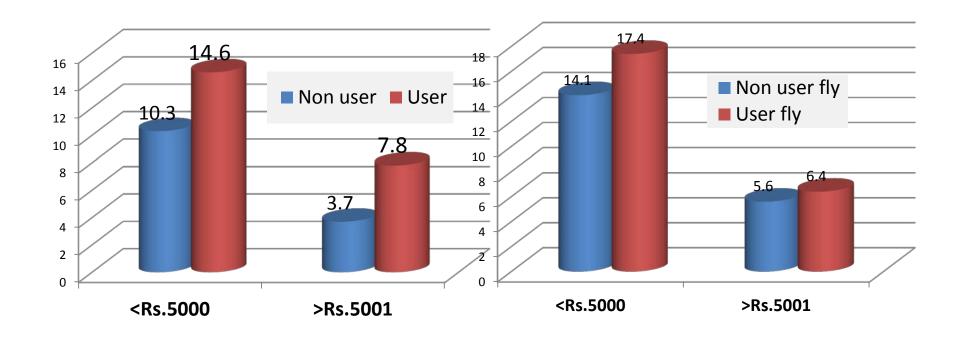
Figure 8: Differences in age at death between users and non-users

Among all deaths in the past five years: both male and female alcohol users had a significantly lower age at death than non-users

Health Seeking and Health Costs Hospitalisation frequency



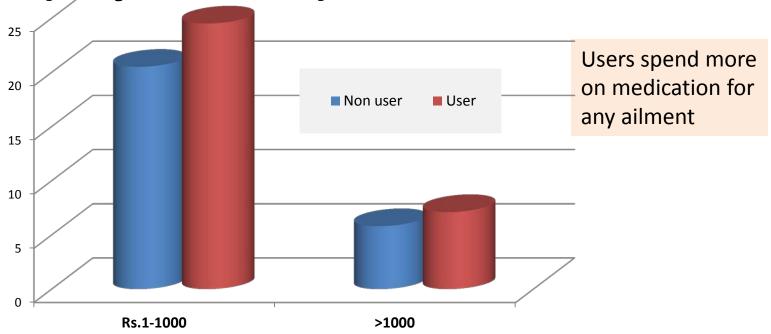
Health Seeking and Health Costs



 Alcohol users reported greater expenses related to hospitalization for themselves and their family members

Rs. 5000 ~ USD 80

Household expenses on medication (any ailment) in last month



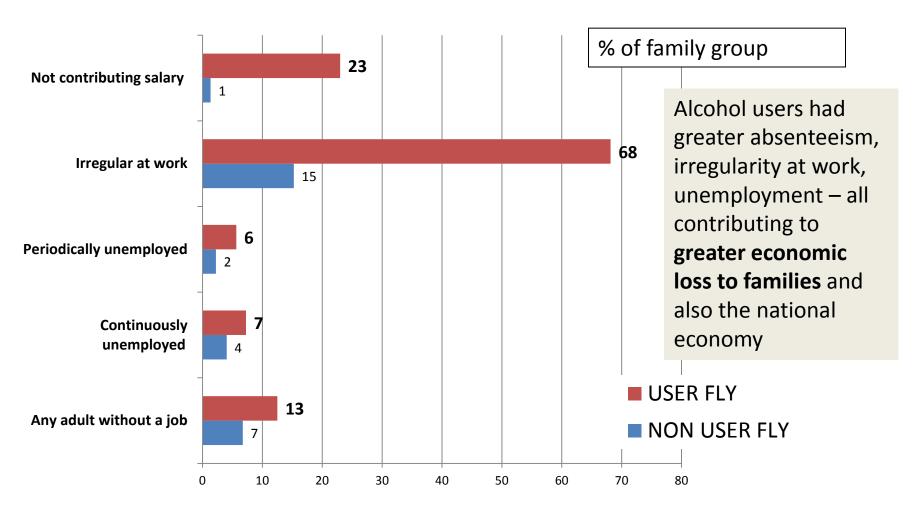
Not only do costs from illnesses fall on alcohol users but family members also at greater risk of illness or injury mounting additional health care costs.

Greater costs due to reduced productivity

- Users were also much more likely than non-users to have
 - decreased efficacy or productivity at work as a result of greater absenteeism due to their self or having taken greater leave of absence due to a family member's illness
- This is an important area of indirect social cost, as it impinges on both the family's available finances as well as translates into a cumulative lowering of industrial productivity.

Occupational problems

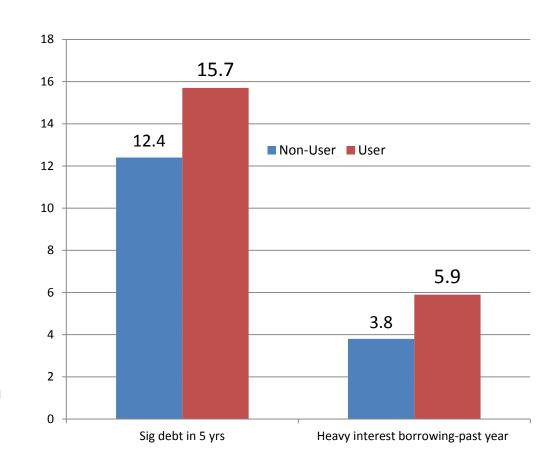
Prevalence among User & Non-user Families



WHO Study on Impact of Alcohol in Urban Settings, 2010

Debts and Loans

- Users had larger debts; more difficulties with creditors; more likely defaulted on loans, bills or credit card payments.
- Loans more likely because of spending on treatment of illness.
- Loans more likely taken from a money-lender rather than official credit/lending agencies.
- In order to pay off loans, users more likely to have sold land/property, stopped children's education, borrowed further with interest or pawned off jewelry/household items



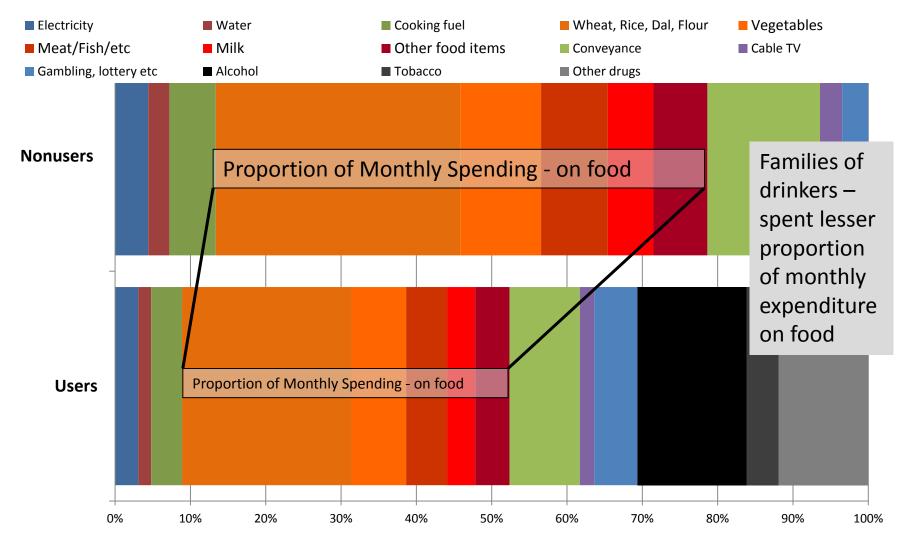
Savings & Assets Creation

- More savings: Probability of saving money (in last month) was more in nonuser families compared to the user families [Odds Ratio 0.86 (C.I. 0.6-1.2)].
- Reliable savings: Non users had three times higher chances of saving the money in reliable instruments e.g. saving bank cf. users more likely to put money money in dodgy chit funds
- Creation of assets: Non-user families had a significantly larger asset-holding than user families (t=3.432; df 5908, p<.001)

Internal (borne by the user) vs. external (borne by others)

- Traditional cost-of-illness (COI) have specific problems of measurement and estimation
- Also criticised for omitting consequences e.g. pain and suffering among alcohol misusers and their families, friends, and co-workers; effects on domestic stability; secondary effects on markets for other goods and services.
- Cost estimates exclude these elements because they cannot be quantified easily or reliably.

Impact on Monthly Expenditure



Reduced spending on food and essential non-food items in families of heavier drinkers



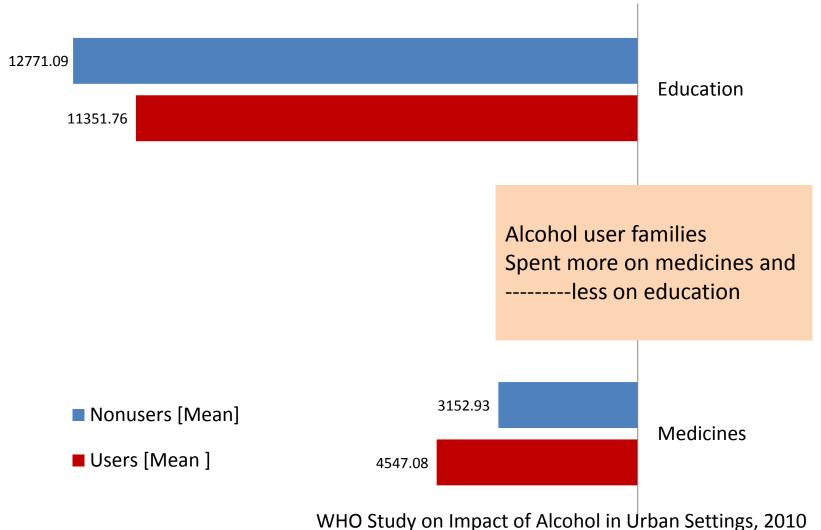
Reduced nutrition & well being

- User families fared significantly worse than non-user families
 - Reduced **nutrition** (regular consumption of fruits, pulses or beans, vegetables, eggs, meat or fish)
 - Reduced exercise, mobility and play
 - Reduction in indicators of social well being such as going on trips/picnics/pilgrimages, attending or conducting religious functions, having hobbies or even watching Tv together as a family
- Reduced well being due to more frequent verbal and physical fights among family members, fights and arguments with neighbors or embarrassment causing social isolation.

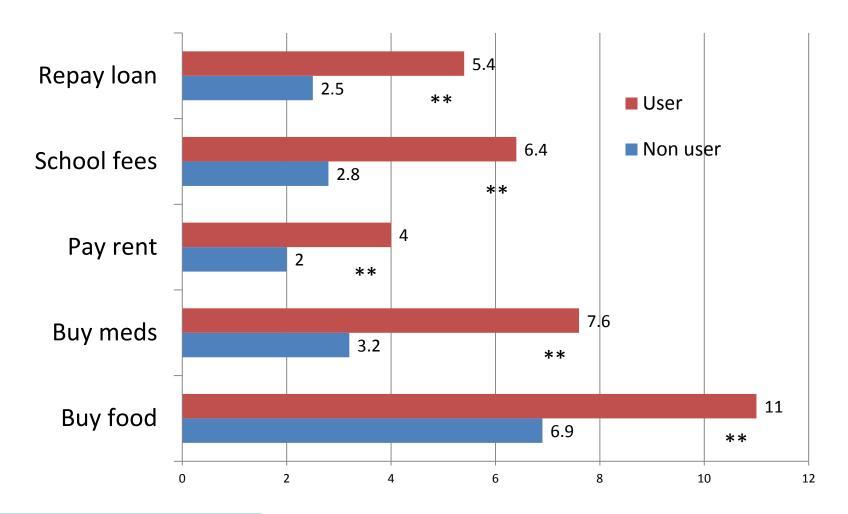


Spending on Health & Education

Expenditure / Annum in Rs

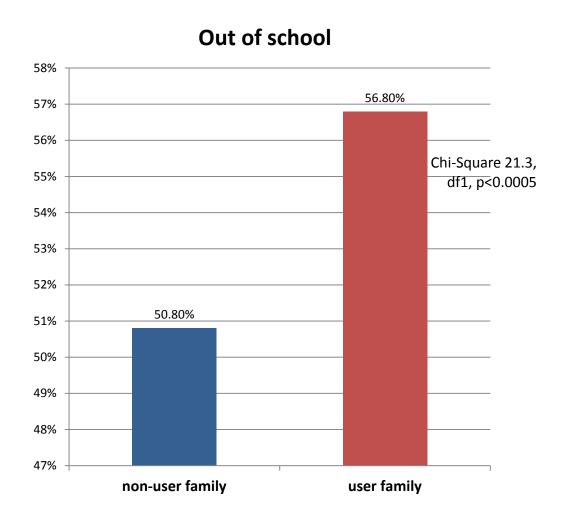


Financial difficulties in past year



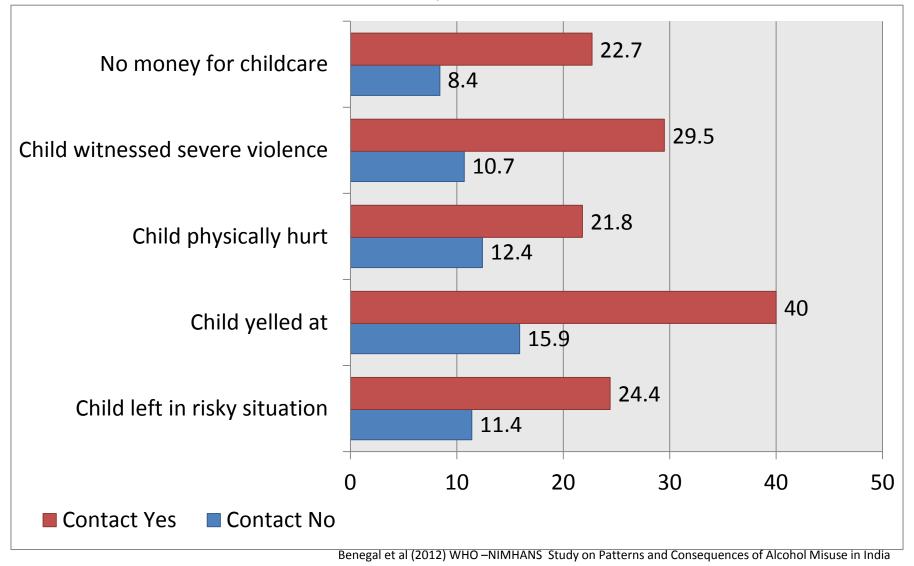
Foregone opportunity costs

significantly higher proportion of school-age children who were prematurely out of school in user families



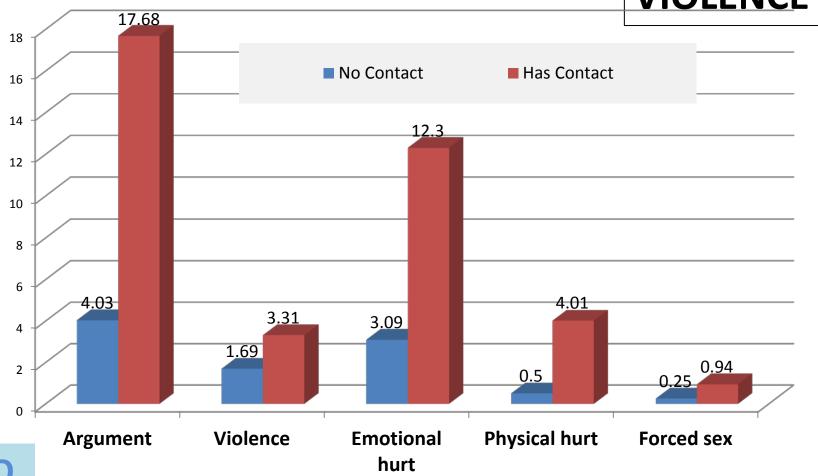
Harms to children

(Monthly and more)



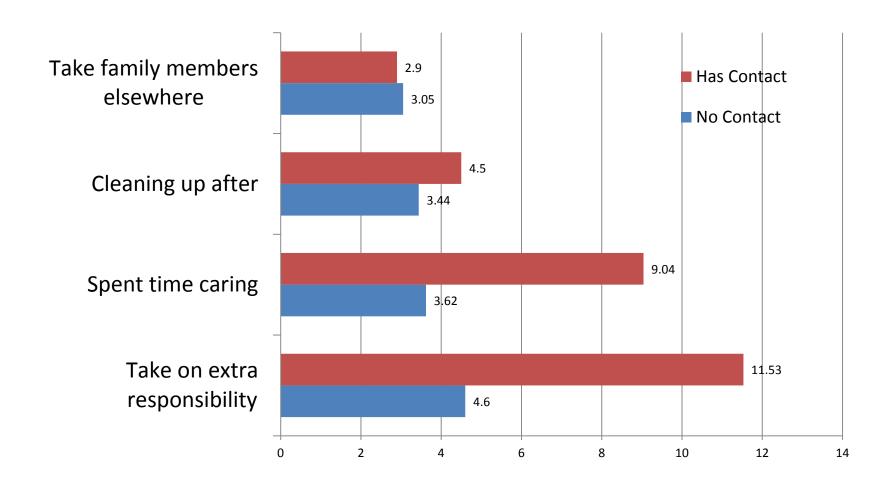
Greater Harms to non-users in contact with alcohol using family members / friends



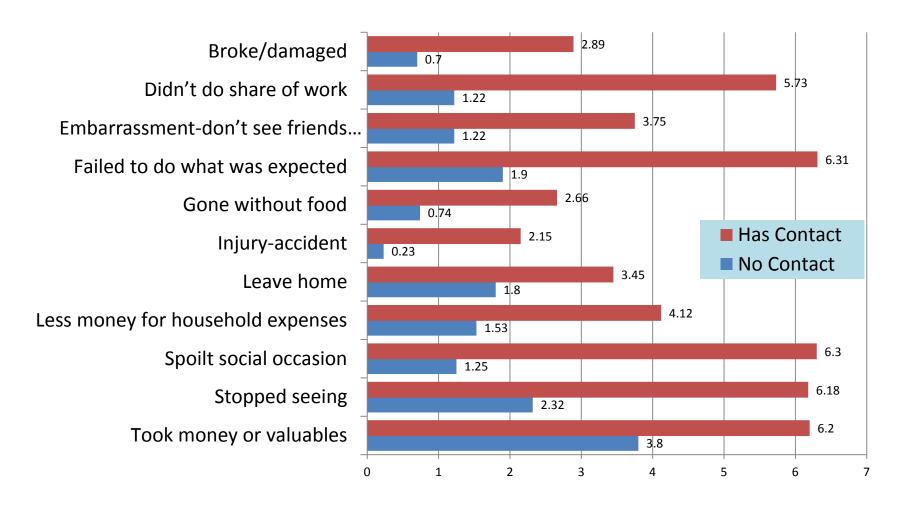




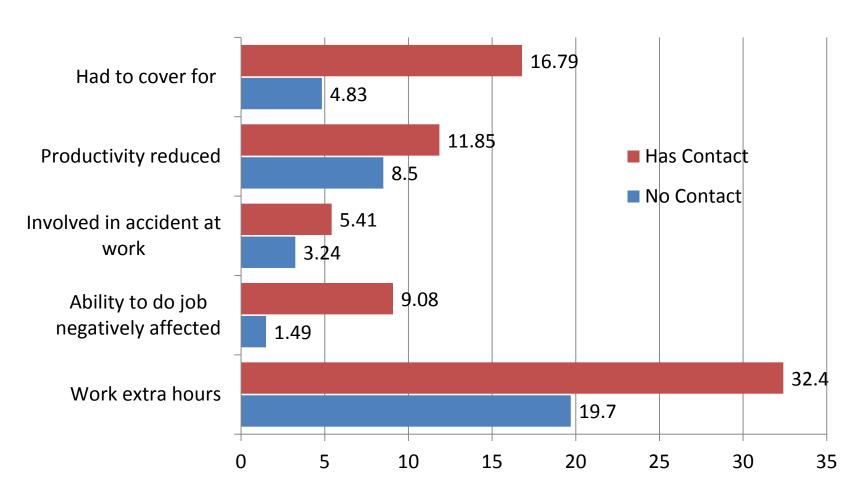
Extra responsibilities borne by non-drinking contacts



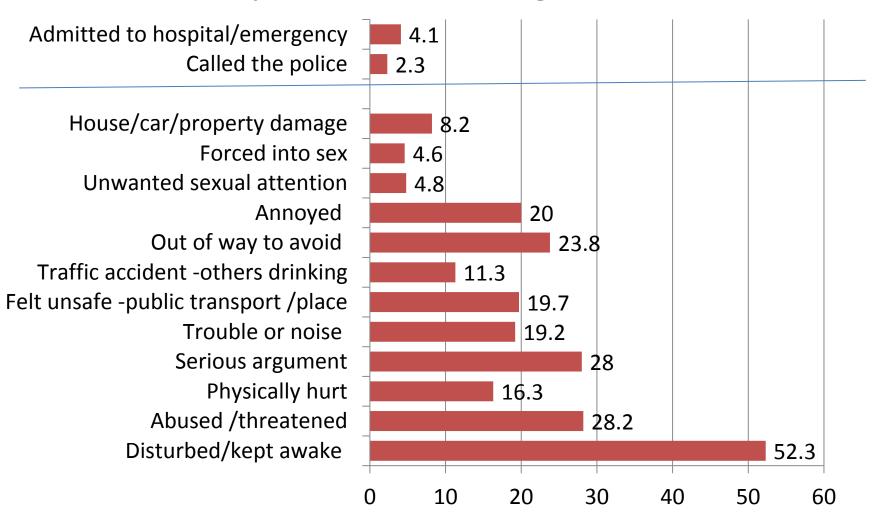
Harms to non-users in contact with alcohol using family members / friends



Harms in the workplace faced by nondrinking co-workers



Harms due to strangers' drinking – irrespective of personal drinking status

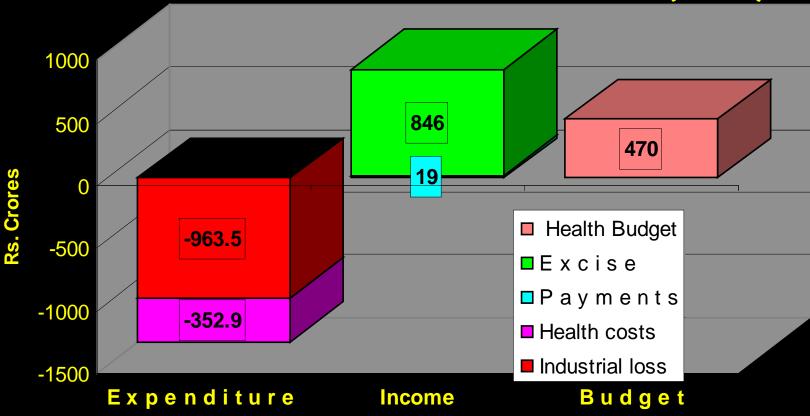


To summarise.....

- In effect, not only alcohol users but also families of alcohol users, appear to suffer greater economic cost, both
 - monetizable costs- reduced money spent on food and essential commodities, greater debt, greater costs due to absenteeism and lowered productivity, poorer creation of assets, less money for children's education
 - unmonetizable social costs such as poorer nutrition and health and well being, lost opportunities due to having to force children prematurely out of schools.

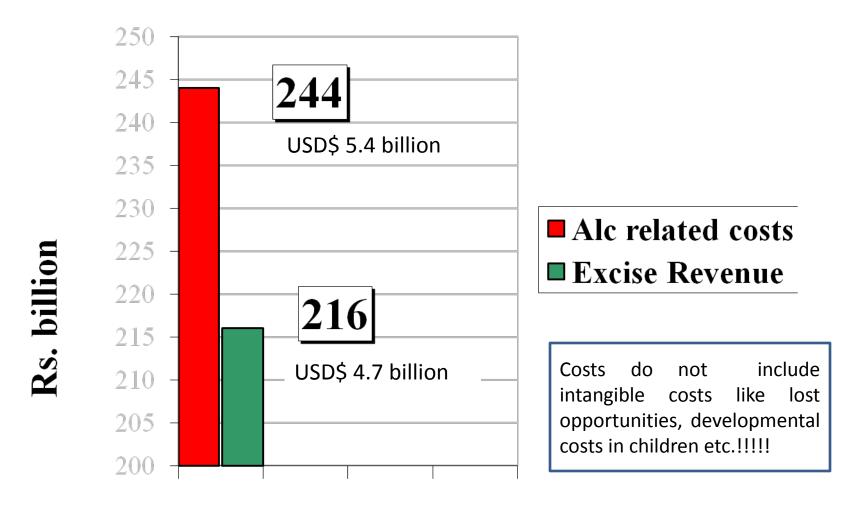
Thank You

Alcohol related Profits and Losses (1997)



Karnataka Government loses more money from alcohol related industrial losses & costs of treating alcohol related disease than it gains from excise on beverage alcohol. Shortfall above Rs. 975 cr.

Alcohol related profits & losses in 2003-04 Projected national estimate



• Gururaj, Girish & Benegal (2006) Burden & Socioeconomic Impact of Alcohol; WHO-SEARO

