

ALCOHOL AND VULNERABLE YOUTH IN ROMANIA

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Abstract: Among adolescents and young people aged between 10 and 24, alcohol is the main risk factor, accounting for 7% of life years with incapacity or lost prematurely. Among young people, one in ten women's deaths and one in four men's deaths is related to alcohol. Adolescents and young people under the age of 25 represent a particularly vulnerable population due to inadequate risk perception. The earlier the onset of alcohol consumption, the stronger its relationship with chronic alcoholism, short-term abstinence, and severe health and social consequences. In the case of young people exposed to vulnerability factors, the risks associated with consumption are much higher than among the advantaged population. The pattern of consumption and sometimes the type of alcohol consumed, the alcohol consumption of parents and the disadvantaged socio-economic status amplify this gap.

INTRODUCTION

According to the World Health Organization (WHO), after smoking and high blood pressure, alcohol is the third risk factor for disease and premature death for the general population in the European Union (EU).(1,2) For adolescents and young people aged between 10 and 24, alcohol is the main risk factor, accounting for 7% of life years lost by incapacity or premature death.(3) Young and young adults are particularly exposed to the short-term effects of excessive alcohol consumption, one in ten deaths among 15-29 year olds and one in four young men's deaths are due to alcohol.(4)

The paper provides an insight into the risks of alcohol consumption and the size of vulnerable groups of young people in Romania.

Adolescents and young people form a population group described by the term “young population”, accounting for about 30% of the world's population.(5) Young people show a natural tendency towards an exploration behaviour in all areas of life, which can lead to risk behaviours, in the context of an insufficient knowledge and deficiencies in access to information and counselling. Alcohol is the substance of abuse most commonly used by young people.(5) Drinking alcohol at parties is often accompanied by the use of recreational drugs, increasing the risk of negative consequences.(6)

Alcohol consumption in Romanian youth

About 84% of the boys and 12% of the 16-year-old girls consumed an alcoholic drink at least once in their life, down from 2007 (81%), 2003 (88%) and 1999 (85%) and below the EU average (87%). The proportion of school pupils who consumed their first alcoholic drink before the age of 9 years and that of those who started drinking alcohol after the age of 17 are fairly equal (about 6%). At least once in life, 16% of boys and 7% of girls have been drunk. One in five boys first got drunk before the age of 13. The share of boys who got drunk in the past 30 days is 9 percent higher than girls. Episodes of intoxication are less frequent among Romanian adolescents than the average European adolescents (26% versus 39%). While the number of boys who start consuming alcohol increases with age, doubling during the four-year high school, the proportion of

consumption among girls is not influenced by age. A quarter of 18-34-year-olds have been the victims of alcohol-related physical violence. In the past 10 years, both the percentage of adolescents who regularly consumed alcohol (52% in 2007, 47% in 2015) and the frequency of episodes of excessive consumption decreased (27% in 1999, 36% in 2011, 12% in 2015). Within the European profile, Romanian adolescents are in the category of moderate drinkers, but the data should be interpreted with caution because “Romanian pupils are tempted to offer answers that they consider socially desirable, which means that the level of alcohol consumption is probably higher than the one reported”.(5,6,7,8,9,10)

Effects of alcohol consumption on young people in vulnerable groups

Adverse factors that act during childhood and adolescence tend to have a negative effect on different areas of development, such as intellectual, communication, language, or social and emotional abilities. The deprivation environment, low parental income and low living standards, low educational levels, stressful workplaces, or homelessness, lack of shelter are key factors associated with a wide range of negative health and developmental consequences for the child and the future adult. These effects become more evident with aging.(11) Because the factors that make vulnerability vary from country to country, it is difficult to quantify the young vulnerable population, most often the statistics referring to the number of young people in state child protection and juvenile offenders. Very few countries estimate the size of vulnerable youth populations from a wider perspective.(12)

Alcohol consumption at an early age is mainly associated with the short-term consequences of alcohol consumption such as death through acute ethanol intoxication, traumas (road accidents, falls, drowning), suicide, physical aggression (beatings, rape), impairment of nervous system development, school problems (poor school attendance, absenteeism), alcoholism in adulthood, the risk of developing other addictions (drugs, tobacco) or other risk behaviours.(8,13) The earlier the age of onset of alcohol consumption, the stronger its relationship to chronic alcoholism, multiple recurrences after

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a period of abstinence, short-term abstinence and long-term consumption, and the presence of a major clinical symptoms. The highest vulnerability to alcohol and alcohol dependence is associated with the onset of alcohol use before the age of 15. This hypothesis is strongly supported by longitudinal studies that have assessed the alcohol consumption of several cohorts over the last decade. According to a 2009 study, the prevalence of alcohol addiction increases with the precognition of the onset of onset of consumption, being over 40% among those who started drinking before the age of 15, 39% among those who drank at 15 and 31% among those who began drinking after the age of 16. The risk of alcoholism is reduced by 8 to 14 percent with every year of age earned without alcohol.(14) Adolescents who start to consume alcohol on regular basis before the age of 15 have a fourfold risk of developing dependence and a significant risk for other psychosomatic disorders than those who do not regularly consume until the age of 20.(14) According to a 2006 study, teenagers who started drinking before the age of 13 have a sevenfold risk of engaging in excessive alcohol consumption episodes more than six times in a month than those who have began to drink after the age of 17.(15) Similar studies indicate that young people who drink alcohol before the age of 14 tend to consume three times as much alcohol and feel more stressors than those who consume alcohol after the age of 18. On the other hand, among teenagers drinking, the higher the stress level, the higher the amount of ingested alcohol, this association being the most intense in the group of people who started drinking before the age of 14.(14,15) Other studies suggest that the age at which an individual experiences the first episode of acute ethanol intoxication is more relevant for the prediction of alcohol-related disorders in adulthood than the age of drinking onset.(13)

Vulnerable groups of young people from Romania

The concept of vulnerable group derives from the universal principles of human rights and refers to segments of the population who face discriminatory attitudes and behaviours and/or need special attention to not being exploited. Vulnerable groups are classified by social or individual variables as: gender, ethnicity, disability, age, residence environment, income level, degree of training. There are overlapping between these groups. According to the Social Assistance Act 2011 in Romania, vulnerable groups include "people or families at risk of losing their ability to meet their daily living needs due to illness, disability, poverty, drug or alcohol addiction, or other situations leading to economic and social vulnerability" (*Law 219/2015 on Social Economy*)

Child in high risk situation

A study identifying the needs of disadvantaged groups at risk of marginalization and social exclusion on 1.200 people from 5 counties belonging to 5 development regions in Romania identified a significant share of vulnerable social categories with over-representation of young people (47.2%) in the population vulnerable to the share of young people in the general population (31%).(16) Nearly one third of the children of the country live in persistent poverty, the poverty rate among children is about 10 percent higher than the one calculated for the general population. While the poverty rate in the general population decreased over the period 2008-2012, the child poverty rate increased by about one percentage.(17) In 2012, more than half of children in rural areas lived in poverty (compared with 17% in urban areas). More than 2% of the children and young people were in the state protection system, one of the highest rates in the EU.(18) Street children are a typical phenomenon of the big cities. Between 10.000 and 11.000 children live on the streets, almost half of them in

Bucharest. Almost all street children (95%) are alcohol consumers. Of the Roma children, 80% are in poverty.(18) At present, juvenile delinquency in Romania is significantly lower compared to other European countries, but the quantification of the European indicator is difficult because of the differences in the criteria for classifying the phenomenon. The child's vulnerability is the result of family dissociation coupled with poverty, the decline in social control, and poor health. Estimates of the number of children in vulnerable families are grasped by the lack of official definition. Those families in which there is alcohol or drug abuse (one or many members), parental abuse or conflicts, dysfunctional relationships and/or serious material difficulties are considered to be vulnerable. Children from these families have a high risk of mental disorders, substance abuse, and addiction to teenage age.(19) Attitude towards alcohol is strongly mediated by the parental model. Between 50 and 70% of drug users had at least one alcoholic parent, an almost equal influence with alcohol consumption among relatives or friends.(5)

More than half of children from single-parent families or more children are at risk of poverty.(16) Romania faces a large number of children with school problems (absenteeism, discipline problems, abandonment of studies).(18)

Young people over the age of 18 who leave the social protection system face social integration difficulties due to lack of professional training, housing, employment and social support.(16)

Young people in poor communities and those far from municipalities have been more affected by discrimination in access to education and careers. Young people from large families have experienced discrimination related to housing, job creation and services health.(16) After the group of children in poverty, young people aged 18-24 represent the second largest social group at risk of poverty, the poverty rate evolving by 7 percent in the period 2008-2012.(17) On the other hand, cultural and environmental factors can influence inequalities in the consequences of alcohol consumption.

In Romania, there is a culture of alcohol consumption, over 70% of Romanians aged over 15 are regular alcohol consumers. Romania ranks 3rd in the EU after the amount of alcohol consumed and second place among the countries with the most harmful consumption pattern. (1 out of 4 Romanians consume at least 5 units of alcohol at one occasion, at least once a week).(1,10)

Roma young people have a substantially higher risk of poverty than the rest of the population, risk of exclusion and marginalization, low educational stock and skills shortages. Ethnic differences also influence the consumption pattern.(1)

Young homeless people represent the most exposed population of alcohol abuse, with alcohol being the most prevalent among them. The share of homeless alcohol consumers varies between 30 and 70%, almost one in five having harmful consumption.(18)

CONCLUSIONS

- The vulnerable young people may be prone to an early onset of alcohol consumption, a harmful consumption pattern in terms of frequency and/or quantity, and more severe medical and social consequences and consumption of other substance abuse (e.g. tobacco, illegal drugs).
- The inadequate perception on alcohol consumption is due to the fact that many of the negative consequences (e.g. chronic diseases, mental disorders or family degradation) occur over time.

- Vulnerable groups face specific problems for which general policies may not be effective, requiring “selective” policies, integrated and customized for their needs.

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