

Alcoholism and Alcohol Abuse

Alcoholism is a topic which receives a fairly steady stream of attention in the general media, and in everyday conversation. Yet, perhaps for most people, alcoholism is not understood realistically. Most people tend to think of alcoholism in terms of its most extreme manifestations, including job loss, homelessness, financial destitution, etc. While all of these tragic outcomes can and do occur in the lives of advanced alcoholics, this is not the picture of the “typical alcoholic.” In fact, the truth is that there is no such thing as a “typical alcoholic.” Although it is true that alcoholism is known to occur at different rates of frequency among various ethnic groups, it occurs to some extent in every group at every socioeconomic level. Therefore, the “typical alcoholic” is a middle class person who works or goes to school, lives with a family, attends worship services, etc. If this is true, what then is alcoholism?

Alcoholism perhaps is best described as a maladaptive pattern of regular, frequent and immoderate use of alcohol. The emphasis to be noted here is that this is a disorder of behavior; unlike other psychological problems, it is not defined in terms of how someone feels or thinks, but primarily in terms of the pattern of behavior of alcohol consumption. It is true that alcoholism is known to be associated with some psychiatric disorders, but these disorders are not considered to be the basis of alcoholism, per se, because no one can be diagnosed with alcoholism or any other problem of substance use, unless they use or have used the substance in the way described below. In addition to the obvious behavioral component of alcoholism, there also is an experience of craving which underlies the drive to drink, which persists even in the face of very daunting consequences for the problematic drinking. This experience of craving is the central psychological element of alcoholism and, indeed, all chronic substance abuse.

In order for someone to be diagnosed officially as alcohol dependent (or alcoholic), they must have shown the maladaptive pattern of use for a period of at least 12 months, and they must have at least three of the seven following symptoms, including:

1. tolerance
2. withdrawal

3. episodes of greater use than the person intended
4. unsuccessful efforts or desire to cut back
5. large amounts of time spent obtaining the alcohol
6. reduction of important life activities
7. use of the alcohol in spite of knowledge that a physical or psychological problem is being made worse by the alcohol

Note that this formal definition of alcoholism does not refer to the amount of alcohol consumed, but rather to the pattern of use and the effect it has on the life of the drinker. It should be noted that there is a different pattern of problematic alcohol use which involves the occurrence or risk of problematic outcomes, such as driving while intoxicated, alcohol related fighting, inability to get to work or school, etc. In many cases, these difficulties occur in the early stages of alcohol dependence, so they may be regarded as the early symptoms in someone on their way to alcoholism. However, they can persist in this form without progressing, so that this pattern is regarded as an alcohol-related problem, but is not usually considered to be alcoholism in the usual sense. This pattern of problematic alcohol use is referred to as "alcohol abuse."

Alcoholism is known to be related to still unidentified genetic factors. About 11 percent of the population of the United States is thought to be alcoholic at some point in the course of their life, with about 7.5 percent having some symptoms of alcohol problems within any 12 month period. The normal course of alcoholism tends to involve periods of abstinence alternating with periods of relapse. Relapse typically is followed by a return to problems equal to or worse than the level of difficulty which preceded the period of abstinence. For those alcoholics who continue drinking, only about 1 to 4 percent of adults are able to establish a pattern of moderate drinking. In other words, people who are alcoholic almost always need to give up drinking entirely if they hope to be free of the problem. On the positive side, people who do decide to give up alcohol are able to live without it with increasing ease over time. The most difficult time, by far, is the very early stage of abstinence or "recovery." Many people succeed in achieving a complete recovery at some time in the course of their lives.

College student alcohol use is highly unusual in that a very disproportionate number of students (between 25 and 30 percent) exhibit behaviors which would qualify them as alcoholic. Fortunately, about 2/3rds of these reduce their drinking greatly in the years after college, and

join the general population of college educated adults which has a lower level of alcoholism than the general population. The remaining 1/3rd goes on to a course of relatively chronic alcoholism. It should be noted that the substantial majority of college students do not exhibit problematic drinking levels, but that among those who do, the risk of long-term problems is extremely high: about one in three. Unfortunately, there is no way, at this point, to identify reliably those students who will become alcoholic in the long term, although some risk factors are known. The highest risk factor for alcoholism in general is having a parent or close relative who is alcoholic, primarily because of the inherited, biological predisposition for alcoholism. A commonsense risk factor is a pattern of drinking which is excessive, even compared to the excessive use of other heavy-drinking students. A third risk factor is the existence of a psychological problem which is known to be associated with alcoholism: these include depression, generalized anxiety, panic disorder, a history of trauma, and others.

The appropriate treatment of alcoholism varies greatly according to the severity of the problem, the motivation of the drinker, the presence or absence of other problems, the history of previous efforts to stop, and many other considerations. It should be noted that heavy, frequent drinkers might require a brief period of hospital medical management, because the process of detoxification can be very difficult physiologically, resulting in acute physical symptoms. For less advanced cases, treatment can range from voluntary support groups, such as Alcoholics Anonymous, to individual psychotherapy, to various inpatient or outpatient rehabilitation services. Medication is useful for some people in deterring a return to alcohol use either through the threat of making alcohol very distasteful (Antabuse, or generic form Disulfiram), or by reducing the discomfort of craving or other symptoms associated with withdrawal. Clearly, all of these services are directed to increasing or maintaining a person's motivation to stop their problematic drinking.

Services for the treatment of alcohol related problems at Union College are offered through the Counseling Center. The Counseling Center offers the opportunity for any student to consider their own pattern of alcohol use in **an impartial, non-judging, caring and confidential setting**. The Counseling Center also helps people begin the process of recovery, and it helps them approach a longer term plan for their recovery. Referral to medical care can be arranged, where appropriate, and referral to a host of other important resources is also

available. In addition, treatment for other psychological problems can be planned and begun. It is important to remember that people can get help with alcohol problems and that obtaining support for the process of recovery is vital for most people who are successful in ending this damaging problem. Very few people are successful in achieving the necessary changes in their lives entirely on their own. Friends and family of the drinker are often unable to support efforts to stop drinking, especially in the early stages of the recovery process. Finally, it should be mentioned that the Counseling Center can serve as an important resource for those who are being affected by the behavior of alcoholics in their lives, as well as for the alcoholics themselves.

For More Information

The Union College Counseling Center offers caring, confidential help from psychologists experienced in helping students deal with alcohol related concerns. Call (518) 388-6161 or stop by the Wicker Wellness Center front desk to schedule an appointment.