

The Attitude of Youth to Alcohol: the Risk of Alcohol Dependence

Ставлення молоді до алкоголю: ризик виникнення алкогольної залежності

Hlavinska Elina

Postgraduate Student,
Rivne State University of the Humanities,
Rivne (Ukraine)

ORCID ID: <https://orcid.org/0000-0002-7670-4931>

Researcher ID: ABB-1976-2021

E-mail: elin.belka@gmail.com

Главінська Еліна

Аспірант,
Рівненський державний гуманітарний університет,
м. Рівне (Україна)

ABSTRACT

The purpose of this article is: to reveal the psychological aspects of some diseases, as a result of alcohol consumption; to describe the peculiarities of physical dependence in a way of alcoholic state; to make a scheme how alcoholism is developed; to describe the characteristic complications of binge drinking, such as white fever, alcoholic delirium; to model the degrees of intoxication; to provide the pilot research and to find out the attitude of youth to alcohol.

Methods of the research. The following theoretical methods of the research were used to solve the tasks formulated in the article: a categorical method, structural and functional methods, the methods of the analysis, systematization, modeling, generalization. The empirical method is a pilot re-

Address for correspondence, e-mail: kpnu_lab_ps@ukr.net

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search. The research was organized in Kyiv, Lviv, and Rivne. While researching the socio-demographic characteristics (age of respondents, their gender) were taken into account.

The results of the research. A clear correlation was found: the practice of alcohol consumption was spread according to the age of respondents. Drinks such as beer, wine, vodka, cognac, whiskey, liqueur, moonshine, etc. have ever been consumed by one of three 10-year-old respondents (36%), one in two 11- and 12-year-olds (49% and 54%), 73% – 13-year-olds, 78% – 14-year-olds, 85% – among boys and girls who were 15 years old. The share of young people at the age from 16 to 22 who drank alcohol is extremely high, ranging from 93% to 98%. Data on the age of the first case of alcohol consumption are indicative. For example, the largest share of respondents said that they had tasted beer for the first time at the age of 10 – this group is 28%, and at the age of 16 and older – 9% of respondents. The group of people who never drank alcohol is 24%. "The acquaintance" with wine and spirits occurs mainly in adolescents aged 13-16 years old and older (in particular, in the group of respondents in the age of 10-14 years old, the experience of the first drinking, at least a glass of wine have 43% of respondents). Among all respondents, 31% and 43% of ones, respectively, never drank wine or spirits. Almost half (43%) of the younger group (10-14 years old) did not answer the question about the age of the first beer. Another 75% of respondents of the same age ignored the question about the first use of spirits. Such a distribution may indicate a tendency of children and adolescents to secrecy, their bias against the confidentiality of individual answers to questionnaires.

Conclusions. Chronic alcoholism or alcohol addiction is a disease in which a person develops an incredible craving for alcohol, symptoms of asthenia and abstinence and other alcoholic disorders. The alcoholic is very depressed, he/she is insecure, sometimes repents, scared. The character deteriorates sharply, sleep is short and superficial, he/she sees terrible dreams. At the same time, the body's resistance to alcohol poisoning increases. At the stage of domestic drunkenness the usual doses of alcoholism are no longer enough. Another sign of alcoholism is weakening of protective reflexes, such as vomiting, nausea, salivation. Hallucinations, acute psychosis and memory loss are observed with large doses of alcohol. There is an unstable motive for the person's behavior, the patient performs acts that are not the main characteristics of him/her before. In the past, a sincere, merciful, a kind man becomes indifferent, immoral, angry. The alcoholic lacks focus. He/she never brings the case to the end.

Key words: *alcohol, alcohol dependence, alcoholic disorders, the body's resistance to alcohol poisoning, the practice of alcohol consumption, the degrees of intoxication.*

Introduction

In Ukraine we constantly see an increase in the scale of socially dangerous diseases. In particular, among the population in our country there are 720 thousand patients with alcoholism. In our society, where 90% of the population first drank alcohol in adolescence, the problem of alcoholism is one of the most painful and difficult to solve. It is well-known that alcoholism is a disease that accompanies alcohol dependence. Addiction can lead to negative physical and behavioral consequences that cause medical or social problems. People who often "look into the glass", mostly do not recognize this, that complicates the treatment process (Tabachnikov, Mishyiev, Kharchenko, Osukhovskaya, Mykhalchuk, Zdoryk, Komplienko & Salden, 2021).

There may be various risk factors for each addiction. In many cases the causes of excessive alcohol consumption were originated in the childhood: lack of parental attention, resentment of adults. There are also some genetic causes. It is well-known that children whose parents were alcoholics have an increased risk of addiction (there is evidence that alcohol dependence is developed in 25% of the offspring of both parents who are alcoholics). The cause of this disease can be perceived as environmental influences, cultural habits, physiological changes in the body due to emotional stresses, mental illnesses, etc. (Комплієнко, 2020)

And all these factors are started with drinking for company, for fun and good mood (Максименко, Ткач, Литвинчук & Онуфрієва, 2019). Eventually, each good tradition falls into regular drinking and binge drinking, memory lapses and drinking alone. This leads to deterioration of physical health, some sexual problems and the breakdown of family ties. Finally, excessive alcohol consumption causes psychosis, "white fever", alcoholic epilepsy, dysfunction, and then – a death. It also leads to conflicts, misunderstanding, frequent spending of money on

alcohol, deteriorating health. This is the first signal that something is happening to a person. Alcohol abuse always has negative consequences: family quarrels, conflicts at work, various problems (Blagovechtchenski, Gnedykh, Kurmakaeva, Mkrtychian, Kostromina & Shtyrov, 2019).

At the beginning of the disease native people pretend that there is no problem. They are usually ashamed of what their relatives drink and try to hide it from others. And this is the first mistake. For example, a man came home being drunk. What to do? Wash him, change his clothes, put him to bed so that he doesn't fight, quarrel and do something bad. But in fact it is wrong. If the man woke up in the morning not in the warm bed where the woman put him, but dirty in the place where he fell drunk, it would obviously make him think more about his behavior. So, first of all, you do not need to feel sorry for alcoholics or help them solve problems caused by alcohol consumption. The main task of a loved one is to prove to the addict person that he is unable to stop and he needs help. After all, the first step to recovery is the addict's awareness that he is ill. This requires providing as much information as it is possible to the addict one about the disease and its consequences. It is worth noting that alcohol dependence is a disease of denial. Therefore, it is very difficult to convince the patient that he needs treatment and that the rhythm of life in constant binge drinking is not normal (Бютнер, 1991).

The problem of alcoholism is not a problem of one person, it is a problem of the whole family. People who live next to an addicted person are interdependent. They develop a certain mechanism of their behavior. It can be avoidance, quarrels, etc. Therefore, it is important that family members seek help for themselves, and thus help the alcoholic. Our experience has shown that drug treatment of alcoholics is just the beginning of the recovery process. In general, drugs treat the effects of chronic poisoning of a human body with alcohol, but not alcohol dependence itself as the independent disease. And it, this disease, affects not only the

body but also the mind and the soul. Accordingly, if the drug intervention occurs at the body level, the result of such treatment is not always high.

Moreover, there is an opinion that this is a disease that no one has cured and will not cure. However, this statement does not mean that addicts do not need to be treated at all. After all, there is such a thing as "experience of sobriety" of addicts. For some people it can last a month or two, and for others – even some decades. The truth is in that fact that an alcoholic will never be able to drink in a controlled way, and this, in fact, is the incurability of alcoholism. Control over alcohol will not return after a month of non-consumption, or after a year of "dryness", or after twenty years of sobriety. If such a person tries to drink "little by little" after a long period without alcohol, after certain (rather quickly) time he/she will return to drunkenness and to problems associated with active alcoholism (Mykhalchuk & Ivashkevych, 2019).

So, **the purpose** of this article is: to show the psychological aspects of some disease, such as it is alcohol consumption; to describe the peculiarities of physical dependence in a way of alcoholic state; to make a scheme how alcoholism is developed; to describe the characteristic complications of binge drinking, such as white fever, alcoholic delirium; to model the degrees of intoxication; to provide a pilot research and to find out the attitude of respondents to alcohol.

Methods of the research

The following theoretical methods of the research were used to solve the tasks formulated in the article: a categorical method, structural and functional methods, the methods of the analysis, systematization, modeling, generalization. The empirical method is a pilot research. The research was organized in Kyiv, Lviv, and Rivne. While researching the socio-demographic characteristics (age of respondents, their gender) were taken into account.

Results and their discussion

It is also important to pay attention to the psychological aspects of this disease, only then the treatment will be effective. It is impossible to reject also a medical method of treatment. After all, there are some cases when even coding helps. The motives for alcohol use by adolescents are divided into two groups. The motives of the first group are based on the desire to conform to traditions, the experience of new sensations, curiosity, etc. The formation of these motives is facilitated by some characteristics of the psyche of minors, which awakens a sense of adulthood, the desire to be like everyone else, the desire to imitate the elders. The age characteristics of adolescents to some extent can be explained by their use of alcohol "for courage". This motive is associated with the lack of juveniles' life experience, knowledge that allows them to freely communicate with others (Brédart, 1991).

The second group of motives of alcohol consumption, which form drunkenness as a type of behavior of offenders, deserves special attention. These motives include a desire to get rid of boredom. In Psychology, boredom is a special mental state of the individual associated with emotional hunger. Adolescents of this category have significantly weakened or lost interest in the paradigm of cognitive activity. Adolescents who drink alcohol are almost not involved into social activities. Significant changes are observed by them in the field of leisure. These guys are less interested in fiction, rarely participate in amateur activities, almost never go to the theater, and lose interest in serious music, painting. Some adolescents consume alcohol to get rid of unpleasant experiences (Mykhalchuk & Onufriieva, 2020; Mykhalchuk, Pelekh, Kharchenko, Ivashkevych, Ed., Ivashkevych, Er., Prymachok, Hupavtseva & Zukow, 2020).

Alcoholism is a severe chronic disease, in most cases it is difficult to cure. It is developed on the basis of regular and long-term alcohol consumption and is characterized by a special pathological condition of the person's body: uncontrollable craving for alcohol, changes in a degree of its tolerability and degrada-

tion of personality. For an alcoholic, intoxication is the best mental state. This train is not a reasonable reason to stop drinking. The alcoholic directs all his/her energy, resources and thoughts to the production of alcohol, according to a real situation (the availability of money in the family, a need to go to work, etc.). Once drunk, he/she seeks to get drunk to the point of intoxication, to oblivion.

Alcohol is used for positive emotions, but often the result is the opposite one – the mood deteriorates. There is aggression, exacerbate chronic diseases. It is impossible to predict such consequences in advance, because the effect of alcohol on the body is unpredictable. It all depends on many factors: the amount drunk, its concentration, the quality of food with which alcohol is drunk, health status. It is even important where and with whom he/she drank.

Harmful consequences of alcohol consumption include the emergence of dependence on it, which is due to heredity, body characteristics, diseases. As for men, with constant use, the disease is formed within one and a half to two years (mostly up to 30 years), women enough six months to a year of active use (usually after the age of 40). The last term during which the disease occurs also applies to adolescents. In the old age, addiction occurs even faster. Anyone who drinks alcohol regularly risks becoming an alcoholic, that is becoming mentally and physically addicted to alcohol.

Addiction is more severe the sooner a person starts drinking. *Physical dependence* is that a break with regular alcohol consumption can cause an increase in blood pressure, feelings of sadness and anxiety, fever, insomnia. This condition can be alleviated with medical help, it usually passes in a few days. *Mental dependence* is the desire to experience a state of intoxication that displaces all other interests, as alcohol stimulates "pleasure center" in the brain.

The following factors play a crucial role in the formation of *alcohol dependence*:

- *social ones* (cultural and material standards of living, stress, information overload, urbanization);
- *biological factors* (hereditary predisposition; according to the research, up to 30% of children whose parents abused alcohol can become potential alcoholics). Biological predisposition to alcohol can be established by laboratory methods. This procedure is performed by physicians for experimental and scientific purposes. In practice, the determination of biological predisposition to alcoholism is not carried out, so a person must determine it for himself/herself;
- *psychological ones* (psycho-emotional personal traits, the abilities to social adaptation and coping with stress).

Problematic alcohol consumption usually develops unnoticed. Very often it is kept secret by deception and denial. Sometimes it may seem that the problem is gone. But this problem comes back again. And it's getting a little bigger than before. If you notice the following symptoms, you may find that alcohol becomes stronger than its consumer.

- * *He/she drinks to lift his/her spirits.* Drinking alcohol is a way to get rid of depression, fear and stress, because without alcohol it is impossible to cope.
- * *Always have 1 or 2 servings.* As the body gets used to alcohol, it needs more and more to achieve the same effect.
- * *He/she drinks quickly and greedily.* The drinker wants to get drunk, and it has to happen fast. He/she is the first to drink, and the first one or only one to pour the second portion.
- * *Secrecy.* Sometimes he/she drinks secretly and masks it with a chewing gum. Also, if he/she is coming home quickly the man drinks to hide the smell of drinking during the day.
- * *He/she switched from occasional to systematic use.* It started with occasional drinks on Fridays or Saturdays. "It will pass" – it seemed then. But now almost every night is under the sign of alcohol.

- * *Beautiful words* like "Today it is the last day, tomorrow I'm quitting". There are promises that are taken seriously. But, unfortunately, every time everything goes wrong.
- * *Withdrawal symptoms*. When a drinker stops drinking for a while or reduces the dose, withdrawal symptoms may happen. They can range from feelings of excitement (anxiety), sweating, sleep disturbances, understand feelings of fear or stress. In severe cases, the body begins to tremble and may make a person nauseous. These symptoms make the person drinks again, because thanks to alcohol they will disappear for a while.
- * *Problems*. A person who drinks begins to complain about physical illness. He/she is constantly late, does not fulfill his/her responsibilities, neglects his/her parents, his/her behavior is increasingly criticized, and there may be problems with the police and justice. Again, this may be a reason to continue drinking, which will exacerbate the problem.

We would like to provide some recommendations from a point of view of psychologist how to talk to a drinker. It is not easy to talk to those ones who drink alcohol about their habit, especially if they are sure that everything is fine. And this happens very often. Remarks and condemnation lead to objections: "Everything is not so bad"; "My colleagues drink even more". There are some other well-known statements: "I'll stop when I want"; "I used to drink more".

This kind of the discussion usually leads to an empty pointless dispute. Thus, if you find yourself in a dead end in this dispute, you are convinced that the problem with alcohol exists, but the drinker himself/herself does not even want to hear about it. Alcoholism is not a habit, but a disease. The habit is controlled by consciousness, it can be got rid of. The addiction to alcohol is more difficult to overcome due to poisoning. About 10 percent of people who drink alcohol become alcoholics. Alcoholism is a

disease which is characterized by mental and physical changes in the body.

The facts show the evidence that alcoholism is a progressive disease. Since 1900, Soviet scientists have been observing the rate of consumption of absolute alcohol in liters per capita per year. By the beginning of the twentieth century Soviet Russia was considered one of the most sober countries in the world, and it was ranked penultimate in per capita alcohol consumption. Before 1900, alcohol consumption was 2.8 liters per year. From 1900 to 1914, the level gradually increased and reached an unprecedented level of 4.7 liters a year. In 1914, Lenin introduced "a dry law", which lasted for 11 years. Alcohol consumption in these years was 0.2 liters a year. This law was repealed on October 5, 1925 by Rykov, who signed a decree "On the resumption of wine and vodka trade". Drunkenness in the country had been risen again and grown before the Second World War, reaching 1.9 liters a year. During the war, the level of drunkenness dropped sharply, reaching pre-war levels only in 1952. After the death of J.V. Stalin, the country flew into the abyss of alcohol and in 1980 the consumption was 11 liters a year, beating the world level of alcohol consumption 3 times a year (the average in 20 "drunk" countries is 4 liters a year). In 1985, anti-alcohol regulations were passed in the USSR. They began to close outlets selling alcohol by mass, reducing consumption by 2.5 times. During these 2.5 years, there was an increase in birth rates and a decline in mortality. Sociologists call this period a population explosion. But in 1988 the Force came to power, which resumed the process of mass production of alcohol. Birth and death rates have changed, and in 1991 the birth and death rates were crossed. Alcohol consumption began to grow and in 2000 amounted to 18.5 liters per year (Tabachnikov, Mishyiev, Drevitskaya, Kharchenko, Osukhovskaya, Mykhalchuk, Salden & Aymedov, 2021).

Alcoholism is developed according to the following scheme:

1) *Initial phase*: intoxication with memory loss, "eclipse". A person constantly thinks about alcohol, he/she develops a crav-

ing for alcohol. However, he/she keeps admitting his/her guilt, avoids talking about his/her craving for alcohol.

2) *Critical phase*: loss of self-control after the first sip of alcohol. The desire to justify his/her drunkenness, resistance to all attempts to prevent his/her desire to drink. A person develops arrogance, aggression. He blames others for his/her misfortunes. He/she starts drinking. He/she is forced to leave his/her permanent job, loses interest in everything that is not related to alcohol.

3) *Chronic phase*: daily hangover, personality breakdown, blurred memory, confusion. The person drinks surrogates of alcohol, technical liquids, cologne. He/she develops unfounded fears, white fever and other alcoholic psychoses.

One of the characteristic complications of binge drinking is *white fever*. White fever is the most common alcoholic psychosis. It usually occurs in a state of hangover, when the drunk appears unreported fear, insomnia, trembling hands, nightmares (chases, attacks, etc.), auditory and visual deceptions in a form of noise, bells, shadow movement (Vovk, Emishyants, Zelenko, Drobot & Onufriieva, 2020). Symptoms of white fever are especially pronounced at night. The patient begins vivid experiences of a frightening nature. During the day, hallucinations subside a bit, although the patient remains agitated, his/her hands are shaking, he/she is restless and can not sit still in one place (Crookes, 1989).

Another form of psychosis is *alcoholic delirium*. It occurs after a short period of drunkenness, but unlike white fever is not accompanied by hallucinations. Such patients are haunted by obsessive thoughts. Most often it is delusions of suspicion, persecution, jealousy. Without seeing a way out of the situation, he/she may commit suicide.

How often do some people proudly note for themselves and their friends it was increased resistance to alcohol, believing that it is related to physical health. In fact, increased resistance to alcohol is the first sign of beginning alcoholism, a symptom of

a serious illness. For an alcoholic, a glass, a bottle of wine is all the same. Already from a glass of alcohol, he/she comes to a kind of euphoria – such a disorder that only increases his/her desire to drink, then subsequent doses do not change his/her appearance, although there are noticeable shifts in the body. At first, the alcoholic is extremely active, trying to “extraordinarily” drink of another pile, begins to riot or “being a fool”. But the last straw exceeds the limits of stability, the alcoholic “disconnects” from the outside world, falling into oblivion. Loss of control over the amount drunk, excessive greed for alcohol and the accompanying uncontrolled, reckless, often cynical behavior – they all are persistent signs of alcoholism.

The will of a drunkard is weakened and not only to limit alcohol intake, but also in relation to other, business aspects of everyday life. Often during the festive feasts you can see how people behave recklessly after drinking alcohol, their actions become more awkward. It is immediately noticeable effect of alcohol on them. And if you ask its participants how often they drink, the most will say that it is irregular. However, even after a single drink of alcohol people spend the night restless, and in the morning they wake up broken, with a swollen face and a sore head. The working day, as a rule, becomes spoiled, and if the person at work is connected with some mechanisms, for example with the machine tool or the car, consider that this day he/she sharply increases risk of accident or even catastrophe. In a case of mental workers, after drinking alcohol, mental processes thoroughly deteriorate, the speed and accuracy of calculations fall, as they say, the work falls out of hand.

Thus, even after irregular, accidental consumption of alcohol, there are serious problems in the body, indicating severe poisoning. If the use of alcohol becomes systematic, a person drinks in any case, finding any reason to drink, it is already called “domestic drunkenness”. For a drunkard, the content of the holiday event does not matter, he/she does not care whether others approve of his/her behavior. At this stage of alcohol addiction

the attitude of the drinker to others significantly changes to the usual and acceptable norms of behavior. For a drunkard, the closest people are "companions", even if they are the first time at the same table. The time, the place and the environment in which people drink loses all the meaning. Thus, the difference between episodic alcohol consumption and drunkenness is not only the amount drunk at one time, but also the psychological establishment of the drinker. In the first case a person celebrates any solemn or significant event, and in the second one – he/she drinks only to bring himself/herself intoxicated. If you keep a person from drinking in time, it will prevent his/her fall and the development of alcoholism.

Alcohol intoxication is a gross violation of a normal brain function. Firstly, intoxication disrupts the cortex of the cerebral hemispheres, which provides all mental functions, and then other parts of the central nervous system. The use of even small doses of alcohol complicates the transmission of nerve impulses, leads to a disorder of active thinking. There are three degrees of acute alcohol intoxication: 1. Initial one. 2. Average degree. 3. Difficult one.

The initial degree of intoxication is manifested by a feeling of warmth, lightheadedness. Human behavior hardly changes, but self-confidence emerges. Heart rate increased, dilated pupils, facial vessels. External motor disorders are not noticeable, but the coordination of movements is somewhat disturbed, the reaction to external stimuli is slowed down.

In a case of the use of large amounts of alcohol it comes a moderate degree of intoxication. Drunk man is nervous, he is characterized by outbursts of anger, resentment, rage, he loses a sense of responsibility for his actions, prone to praise and aggression. Often in this state a person violates public order, commits hooliganism and even crimes. Coordination of movements is disturbed, therefore, such people often have accidents at work, on the street and in everyday life. After sobering up, there is lethargy, drowsiness, a headache.

Severe intoxication occurs because of a large dose of alcohol. This state is characterized by two phases: *excitation* and *inhibition*. In a case of the first phase speech becomes slurred, movements are uncoordinated, actions are meaningless, often aggressive. The inhibition phases are manifested in lethargy, drowsiness and end in deep narcotic sleep. In this state a person does not react even to severe pain stimuli, he/she can fall asleep in the street, and in the cold season even to freeze. After waking up, the person hardly remembers what happened to him/her, there is a strong desire to drink more. The person may experience nausea, show vomiting and other signs of poisoning.

As a result of repeated consumption of alcoholic beverages a person has a conditioned reflex. After forgetting and waking up, drunks have a severe hangover, the symptoms of which are relieved by repeated use of dexterosus files. This is the main sign of chronic alcoholism. It is accompanied by asthenia syndrome – fatigue, disability. The body is sick, but the alcoholic is not aware of his/her disease and its causes.

The object of our empirical research has such characteristics, as:

- spatial ones (the research was organized in Kyiv, Lviv, and Rivne);
- socio-demographic characteristics (age of respondents was 10-22 years old, 45% of people were of masculine gender, other respondents were of feminine gender).

The subject of specific psycho-sociological research is the most important characteristics and relationships of the person, knowledge of whom is important for solving the tasks set in the program. The subject of the research is formed on the basis of the object, but does not coincide with it. The same social object can be studied in order to solve different problems, and therefore the result is that it involves many subjects. Therefore, by defining the subjects of the research, we simultaneously determine the boundaries within which the object is studied.

In order to obtain qualified information, 500 people were interviewed. Among these people 275 ones were females and 225 males – young people in the age from 10 to 22 years old.

One of *the subtasks* of our research was to find out the attitude of respondents to alcohol, to find out how often it is consumed.

It was proved that in a case of adolescences alcohol consumption was mostly a manifestation of curiosity, a desire to pretend to be an adult, a way of self-expression, self-affirmation. It is due to the desire not to be “a white crow” among peers, to gain authority. In the absence of skills and experience, the consequences of such aspirations are quite common cases of poisoning, psychosis, fights, theft, hooliganism, accidents and even murder and suicide. According to the Ukrainian Institute of Public Health the incidence of chronic alcoholism among adolescents in 2005 was 0.45 % for 10 thousand, in 2006 the amount was 0.37% (Tabachnikov, Mishyiev, Kharchenko, Osukhovskaya, Mykhalchuk, Zdoryk, Komplienko & Salden, 2021).

According to a survey conducted between the age groups of 10 and 22 years old, only 23% of respondents have no experience with alcohol consumption. The vast majority of those ones who have never consumed alcohol was the younger group of respondents – 10-14 years (40%). 93% of 15-22-year-olds drank alcohol.

There is *a clear relationship*: the practice of alcohol consumption is spread according to the age of respondents. Drinks such as beer, wine, vodka, cognac, whiskey, liqueur, moonshine, etc. have ever been consumed, one of three 10-year-olds respondents (36%), one in two 11- and 12-year-olds (49% and 54%), 73% – 13-year-olds, 78% – 14-year-olds, 85% – among boys and girls who are 15 years old. The share of young people in the age from 16 to 22 who drank alcohol is extremely high, ranging from 93% to 98%. Data on the age of the first case of alcohol consumption are indicative. For example, the largest share of respondents said that they had tasted beer for the first time

at the age of 10 – this group is 28%, and at the age of 16 and older – 9% of respondents. The group of people who never drank alcohol is 24%. “The acquaintance” with wine and spirits occurs mainly in adolescents aged 13-16 years old and older (in particular, in the group of respondents in the age of 10-14 years old, the experience of the first drinking, at least a glass of wine have 43% of respondents). Among all respondents, 31% and 43%, respectively, never drank wine or spirits. Almost half (43%) of the younger group (10-14 years old) did not answer the question about the age of the first beer. Another 75% of respondents of the same age ignored the question about the first use of spirits. Such a distribution may indicate a tendency of children and adolescents to secrecy, their bias against the confidentiality of individual answers to questionnaires.

In order to find out the intensity of alcohol consumption respondents were asked to answer questions about the number of drinks they had consumed in the last 30 days, as this period of time is much easier to remember. The distribution of answers of all respondents makes us possible to state that regardless of the strength of drinks, the frequency of their use by young people during the last month is 1-2 times. The percentage of children and adolescents (10-14 years old) who reported drinking alcohol just as many times was higher than the cohort of seniors (15-22 years old). Thus, 25% of 10-14-year-olds and 2% of 15-22-year-olds drank beer 1-2 times during the last month, 18% and 5% of respondents preferred wine. As for strong alcohol, 1-2 times during the last 30 days it was consumed mostly by boys and girls in age 15-22, the latter cases were twice as often (respectively 8% and 15%). We have to note that older people drink alcohol more regularly – 3-5 times a month. In general, among the alcoholic beverages that respondents drank most often, 10-19 and even 20-30 times a month (mostly for 15-22-year-olds), this is beer.

Conclusions

Chronic alcoholism or alcohol addiction is a disease in which a person develops an incredible craving for alcohol, symptoms of

asthenia and abstinence and other alcoholic disorders. The alcoholic is very depressed, he/she is insecure, sometimes repents, scared. The character deteriorates sharply, sleep is short and superficial, he/she sees terrible dreams. At the same time, the body's resistance to alcohol poisoning increases. At the stage of domestic drunkenness the usual doses of alcoholism are no longer enough. Another sign of alcoholism is weakening of protective reflexes, such as vomiting, nausea, salivation. Hallucinations, acute psychosis and memory loss are observed with large doses of alcohol. There is an unstable motive for the person's behavior, the patient performs acts that are not the main characteristics of him/her before. In the past, a sincere, merciful, a kind man becomes indifferent, immoral, angry. The alcoholic lacks focus. He/she never brings the case to the end.

In the last stage of alcoholism resistance to large doses of alcohol decreases sharply. Patients feel unwell, their blood circulation is disturbed, there are acute disorders of the cardiovascular system, liver failure. In appearance they resemble patients who are characterized by mental and social degradation.

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Главінська Еліна. Ставлення молоді до алкоголю: ризик виникнення алкогольної залежності.

Мета статті: розкрити психологічні аспекти захворювань, які виникають внаслідок вживання алкоголю; характеризувати особливості фізичної залежності у вигляді алкогольного стану; скласти схему розвитку алкоголізму; описати характерні ускладнення запою, такі як біла гарячка, алкогольне марення; змодельувати ступені сп'яніння; провести пілотне дослідження та з'ясувати ставлення молоді до алкоголю.

Методи дослідження. Для розв'язання поставлених у статті завдань було використано такі теоретичні методи дослідження: категоріальний метод, структурно-функціональний метод, методи аналізу, систематизації, моделювання, узагальнення. Емпіричним методом стало пілотне дослідження, яке було організовано у Києві, Львові та Рівному. Під час дослідження враховувалися соціально-демографічні характеристики (вік респондентів, їхня стать).

Результати дослідження. Емпіричним шляхом виявлено чітку залежність: практика вживання алкогольних напоїв поширюється з віком респондентів. Із респондентів, які будь-коли вживали такі напої, як пиво, вино, горілка, коньяк, віскі, лікер, самогон тощо, кожен третій був 10-річним респондентом (36%), кожен другий – з-поміж 11- та 12-річних (відповідно 49% і 54%), 73% молоді – 13-річних, 78% – 14-річних підлітків,

85% – серед юнаків та дівчат 15-річного віку. Питома частка молодих людей віком від 16 до 22 років, які вживали алкоголь, надзвичайно велика, і коливається від 93% до 98%. Показовими є дані щодо віку першого випадку вживання алкогольних напоїв. Наприклад, найбільша частка респондентів зазначили, що вперше скуштували пиво у 10 років – 28% та у віці від 16 років і старше – 9%, ніколи його не вживали – 24%. «Знайомство» з вином та міцними напоями відбувається переважно у підлітковому віці 13-16 років і старше (зокрема, у групі респондентів 10-14 років досвід першого вживання хоча б склянки вина мають 43%). Ніколи не вживали вина та міцних напоїв серед усіх опитаних, відповідно, 31% і 43%. Майже половина (43%) представників молодшої групи (10-14 років) взагалі не відповіли на запитання щодо віку першого вживання пива. Ще 75% респондентів цього ж віку проігнорували запитання щодо першого вживання міцних напоїв. Такий розподіл даних свідчить щодо схильності дітей та підлітків до скритності, стосовно їхньої упередженості щодо конфіденційності індивідуальних відповідей на запитання анкети.

Висновки. Хронічний алкоголізм, або алкогольна наркоманія – це хвороба, за якої у людини з'являється неймовірний потяг до спиртних напоїв, спостерігаються симптоми астенії і абстиненції та інші алкогольні розлади. Алкоголік, як правило, дуже пригнічений, він невпевнений у собі, часом кається, лякається. Характер людини різко погіршується, сон – короткочасний і поверхневий, він бачить жахливі сні. Водночас підвищується опірність організму до алкогольного отруєння. В стадії побутового п'янства звичайні дози алкоголізму вже є недостатніми. Ще одна ознака алкоголізму – послаблення захисних рефлексів – блювоти, нудоти, слиновиділення. За умов вживання великих доз алкоголю спостерігаються галюцинації, гострі психози, втрата пам'яті. З'являється нестійкий мотив поведінки, хворий здійснює вчинки, не властиві йому раніше. В минулому – щирий, милосердний, добрий чоловік стає байдужим, аморальним, озлобленим. В алкоголіка відсутня цілеспрямованість, він ніколи не доводить розпочату справу до кінця.

Ключові слова: алкоголь, алкогольна залежність, алкогольні розлади, опірність організму до алкогольного отруєння, практика вживання алкоголю, ступені сп'яніння.

Original manuscript received 12.03.2022

Revised manuscript accepted 23.04.2022