

# Alcohol Education and Consumption in Rural Northwest Ohio



Figure 1: Location of Auglaize County. Image from US News.<sup>2</sup>

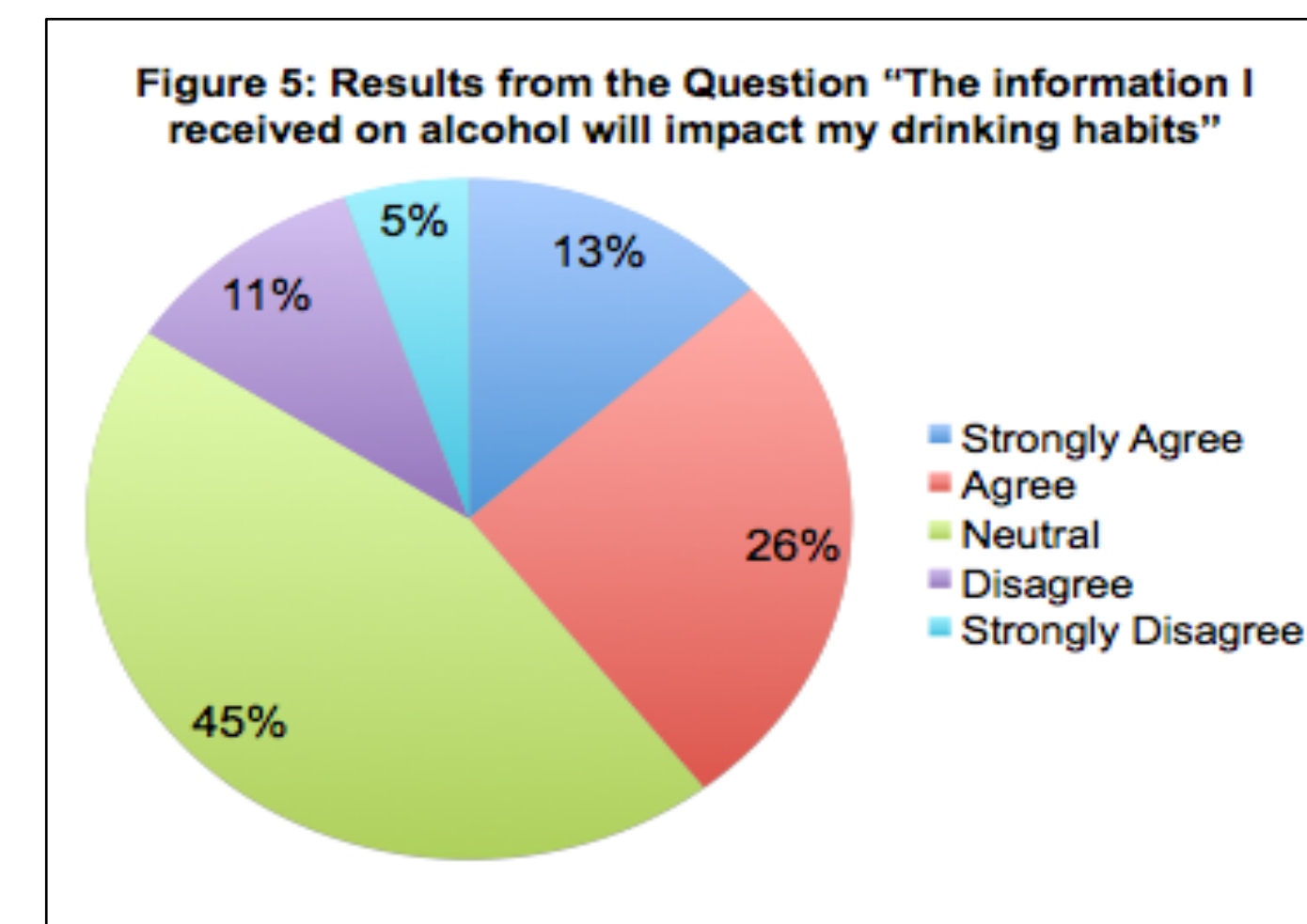
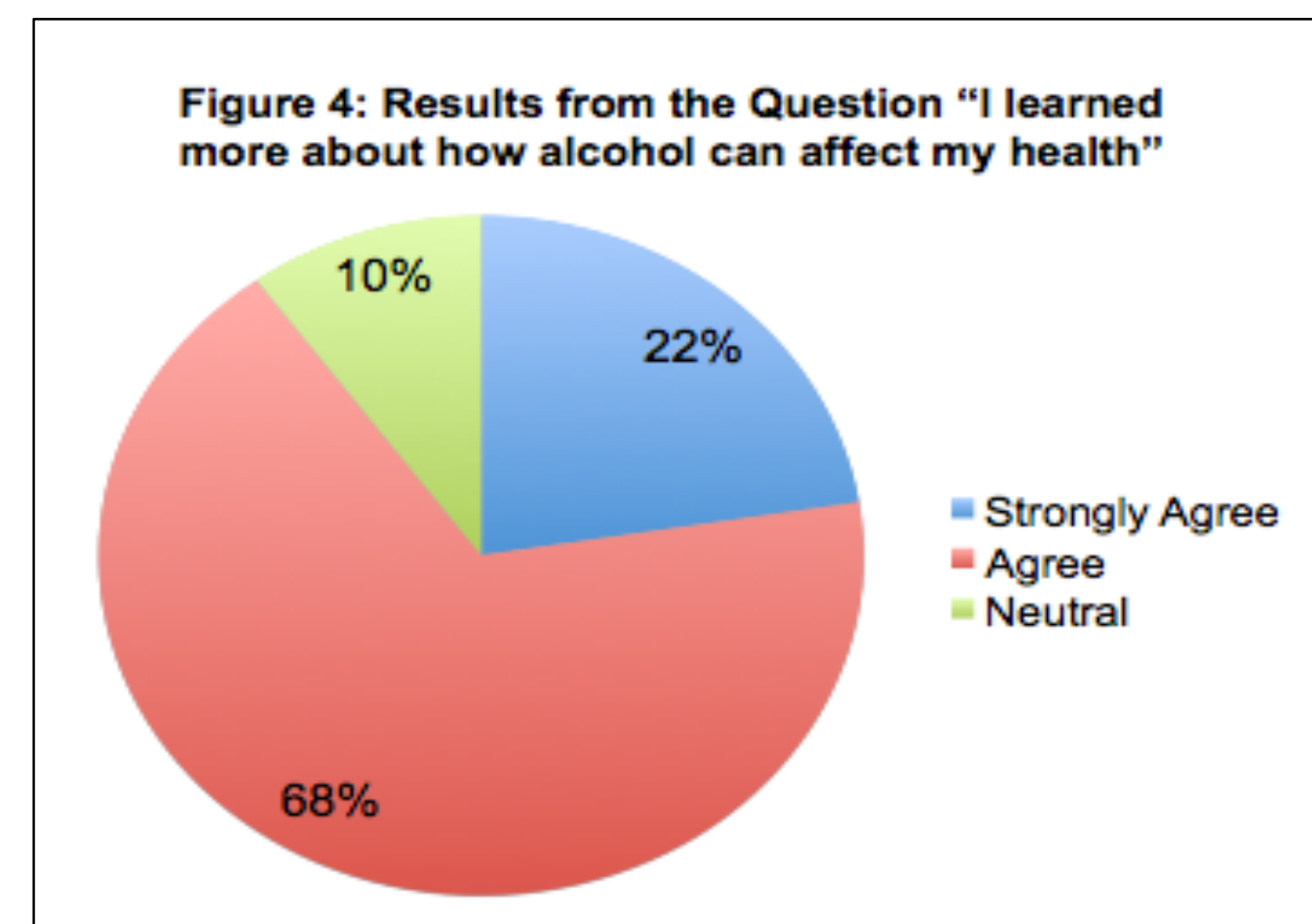
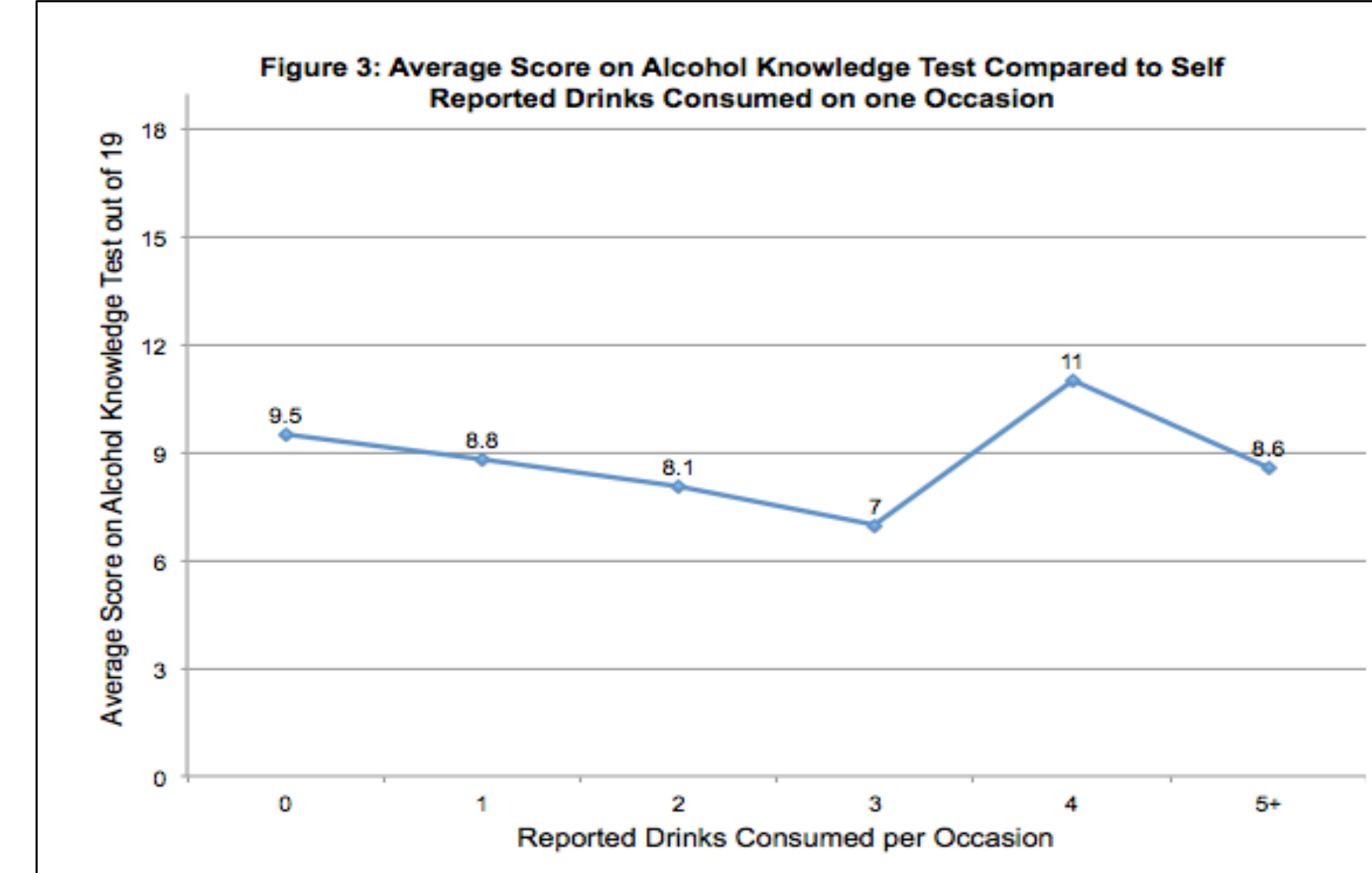
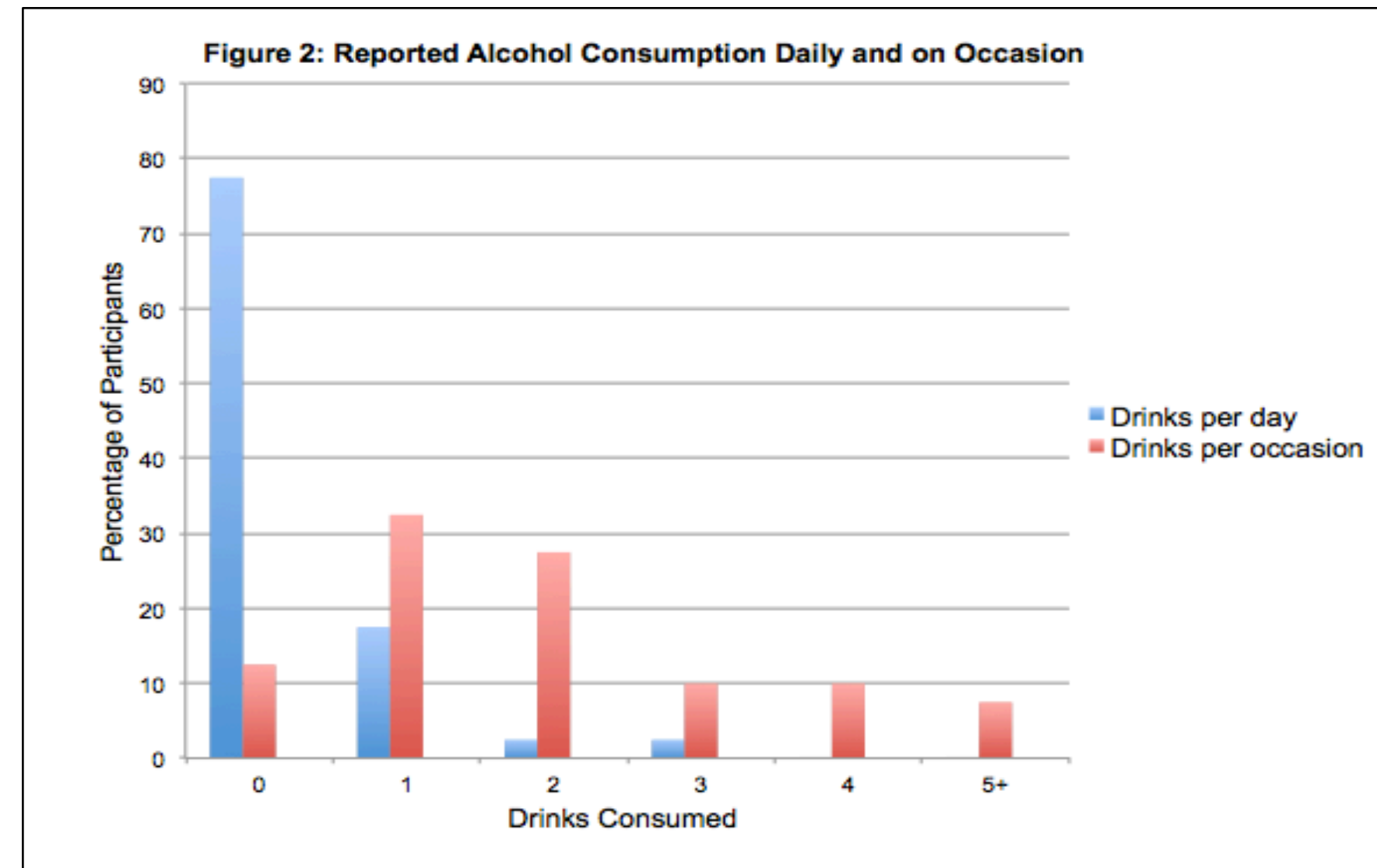
## Introduction

The current health assessment for Auglaize County claims that 61% of adults in Auglaize County had at least 1 alcoholic drink in the past month and 28% qualified as binge drinkers.<sup>1</sup> These numbers are compared to 53% of Ohio adults had at least 1 drink in the past month and 18% of Ohioans qualified as binge drinkers.<sup>1</sup> Many health providers in this rural northwestern Ohio community note sensitivity when talking to patients about their drinking habits. This study was conducted in order to assess alcohol consumption and alcohol knowledge level in patients with the introduction of in-office alcohol education in Auglaize County, Ohio. The aim is to ultimately address if alcohol education would have an impact on patients' drinking habits.

## Methods

Both behavioral and educational change based on the introduction of alcohol education was measured with pre and post surveys at Grand Lake Primary Care.

- Patients over the age of 18 received a pre-survey at check in.
- The pre-survey questions included the patient's demographics, daily and occasional alcohol consumption, and knowledge-based questions about alcohol.
- Patients were given a handout from the CDC<sup>3</sup> that had information about alcohol after completion of the pre-survey. Patients were encouraged to take this home with them.
- Patients were then given a post-survey that asked what degree they agreed to the following statements: "Today I learned something new about alcohol", "The information I received today will impact my drinking habits", and "I would like to learn more about alcohol and its affect on my health".
- Patients were also given a small quarter-sheet with a list of local resources if they wanted to seek help on their drinking habits.
- The alcohol knowledge part of the patient pre-surveys was graded with 19 being the maximum score.



## Results

The study was carried out on a small scale (n=41) at Grand Lake Primary Care.

- 22.5% of participants reported drinking one or more drinks a day (Figure 2)
- 17.5% of participants qualified as binge drinkers
- The average score, out of 19, on the alcohol knowledge portion of the pre-test survey was 8.8 or 46%
- The most frequent cancer reported from alcohol use was liver cancer with it selected by 90.2% of participants
- Results from the alcohol knowledge portion of the pre-survey demonstrated that those who drank 4 or more drinks on occasion had the highest average score at 11 out of 19 or 58% (Figure 3)
- 90% of participants claimed on the post-survey that they learned more about alcohol after reading the CDC handout (Figure 4)
- 45% of participants responded that the alcohol education provided will "neutrally" impact their drinking habits (Figure 5)
- 39% of participants agreed or strongly agreed that the information would impact their drinking habits while only 16% disagreed or strongly disagreed

## Conclusions

- In-office education increased patients' perception on their alcohol knowledge base.
- The inverse relationship between average score on the alcohol knowledge test and drinks consumed on one occasion held true up to the range for binge drinking.
- Almost half of participants reported that receiving alcohol education would neutrally impact drinking habits. It is important to note that more participants agreed or strongly agreed that it would impact that drinking habits than disagreed or strongly disagreed.
- In-office educational materials can be beneficial in increasing patient knowledge and may or may not lead to significant behavioral change.
- Using this study information in conjunction with SBIRT (Screening, Brief Intervention, and Referral to Treatment) can have an even bigger impact in rural communities, like Auglaize County, in bringing more awareness to patients about alcohol consumption and its affect on health.

## Limitation

The data was collected over two months and the sample size is limited to those that came to Grand Lake Primary Care. Further study is needed to gain representation of the population at large by increasing sample size.

## Acknowledgments

I would like to thank Dr. McNaughton and the staff at Grand Lake Primary Care for their help with survey distribution!

## References

- <sup>1</sup> Auglaize County Health Department. (2017). *Auglaize County Community Health Assessment* [PDF file]. Retrieved from <http://www.auglaizehealth.org/news/2017-community-health-assessment2017-community-health-assessment>.
- <sup>2</sup> USNews and World Report. *Healthiest Communities: Overview of Auglaize County, OH*. 2019. <https://www.usnews.com/news/healthiest-communities/ohio/auglaize-county>
- <sup>3</sup> Centers for Disease Control and Prevention. (2018). *Fact Sheets—Alcohol Use and Your Health* [PDF file]. Retrieved from <https://www.cdc.gov/alcohol/fact-sheets/alcohol-use.htm>