Alcohol Consumption

Exploring Alcoholism and Related Services in Puentecillas, Mexico

Population

The population under analysis is the 2,799 person community of Puentecillas, Mexico in the state of Guanajuato (Puentecillas, Guanajuato, 2010). Puentecillas is located 25 minutes south of the city of Guanjuato, Guanajuato (Puentecillas, Guanajuato, 2010). Centro De Salud is the primary care clinic under the Mexican Secretary of Health. The clinic serves 13,000 patients living within the 13 surrounding communities (Matilde, personal communication, April 28, 2016). In four out of five key informant interviews, alcoholism was identified as a major health concern when asked "What are the three primary health concerns in your community?" The purpose of this poster is to explore the prevalence and impact of alcohol abuse in Puentecillas, and identify resources for the community to improve access to screening and treatment.

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Background/Significance

- The World Health Organization (WHO) ranked Mexico 5 out of 5 on their scale (1 being the least and 5 being the most) for years of life lost on account of alcohol consumption (WHO, 2014).
- In 2010, heavy episodic drinking was present with 19.1% of males and 5.3% of females over 15 years of age in Mexico (WHO, 2014).
- One third of all 12 year olds have already had their first drink (Benjet, Borges, Mendez, Casanova & Medina-Mora, 2014) yet the government doesn't require alcohol screening until age 20.
- One study found that people who abuse alcohol usually die 10-15 years earlier than those who don't (March, 2015). 50-60% of alcoholism is associated with genetics and thus extended family members are also at risk (March, 2015).
- On a community level, traffic accidents associated with alcohol lead to 26.7 male and 6.5 female lives lost per 100,000 people over age 15 in Mexico (WHO, 2014).
- The National Health Secretariat reported an average of 25,000 new cases of cirrhosis yearly between 2000 and 2010 in Mexico (Roman, 2013).

Aims/ Goals

- Identify the prevalence of alcohol abuse in Puentecillas and determine its impact on the community.
- Develop an understanding of the process of and barriers to screenings and referrals related to alcohol abuse.
- Identify and consolidate currently available resources for alcohol abuse treatment in and around Puentecillas.

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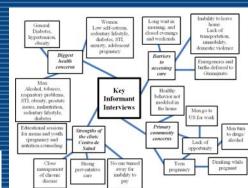


Assessment Methods

- Interviewed five key informants who work at Centro de Salud– including three nurses, one doctor and one youth educator—regarding the Mexican health system, the strengths and weaknesses of their clinic and their top health concerns for the community of Puentecillas.
- Reviewed 28 patient paper charts and noted the presence or absence of the AUDIT alcohol abuse screening tool.
- After identifying alcoholism as a primary concern, 25 randomly selected community members were interviewed using a seven question survey. The survey included questions about alcohol use, the affect alcohol has on their family, and knowledge of local resources regarding alcohol abuse treatment.
- Assessed community knowledge of safe alcohol consumption during educational presentations to youth and mothers.



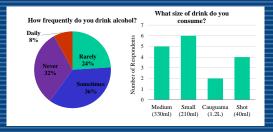
Educational poster presented to community of Puentecillas



Findings

- 68% of respondents drink alcohol.
- Out of 25 individual interviews in the community, 52% of respondents replied that alcohol has caused problems in their family.
- 40% of respondents drink beer as their preferred alcoholic drink, 12% drink tequila and 8% drink both beer and tequila.
- 68% of respondents identified Alcoholics Anonymous (AA) as a resource for alcohol abuse treatment in their community.
- 28% of respondents identified the nearby drug rehab center, Amor a la Vida, as a resource.
- On a written survey, 26.1% of adolescents in grades seven through nine stated they have drank alcohol within the last three months (Survey of Telesceundaria no.91, 2016).
- During a review of 28 charts, 64% of the charts contained AUDITS and only 7% of the AUDITS were fully filled out while 54% said "No consume alcohol" (they don't consume alcohol).

When you drink, how many drinks do you consume?



Recommendations

- Evidence-based studies have proven that integrating alcohol abuse treatment into primary care office visits, using self-help groups such as AA, individual psychological treatment, pharmacotherapies and referrals to mental health programs are all beneficial in the identification and treatment of alcoholism (Caple & Schub, 2015). Thus, the government psychologist should visit Puentecillas on a weekly basis to increase access to care.
- Ensure that all clinic staff are consistent in their patient education regarding resources for alcoholism in the state of Guanajuato (Purdy, 2015).
- Due to adolescent drinking, the government of Mexico should implement alcohol abuse screenings starting at age nine—rather than twenty—to catch adolescents with alcohol abuse issues earlier (Centers for Disease Control and Prevention, 2014).
- The government should implement a comprehensive plan—such as the "SBIRT", or "screening, brief interventions, referral to treatment" (Jaeggli & Mitchell, 2007) utilized in the U.S. — to improve alcohol rehabilitation support and access across Mexico.

Conclusions

- The majority of people surveyed in Puentecillas, Mexico stated that alcohol has caused problems in their family, which supports the clinical staff's concern that alcohol abuse is a primary health issue in the community. Resources are available but they are dispersed (e.g. multiple referrals are required between Puentecillas and Guanajuato) and thus are difficult to access. According to key informants, there is a lack of government funding for the AUDIT survey which decreases the number of screenings administered at the primary care clinic. The AUDIT survey is not administered until a person turns 20 years of age. This is troublesome because 26.1% of adolescents are drinking in the Puentecillas middle school system (Survey of Telesceundaria no.91, 2016). Thus, screening should be initiated at the CDC recommended age of nine years old.
- Alcohol abuse in Mexico is a major health issue. Alcohol ranks as the 4th leading risk factor for disease burden in Mexico (Institute for Health Metrics and Evaluation, 2010). The next steps for addressing alcohol abuse in Puentecillas involves implementing the above recommendations. Furthermore, OHSU nursing students who go to Puentecillas, Mexico in 2017 ought to further investigate government funding issues via a placement with the Secretary of Health.