The use of mood-altering drugs is as old as man himself. Alcoholic libations have been a part of human culture since the dawn of civilization. Most ancient cultures used alcohol in their religious and secular activities. This pattern has persisted to the present.

In addition to alcohol’s role in man’s social and cultural life, other drugs have been, and are, widely used to alter mood, to comfort, to stimulate, or otherwise satisfy our emotional needs. Tobacco and coffee, as well as the preprandial cocktail, contain drugs used in their own right for these purposes.

We have learned to seek the comforts not only of these nonmedical drugs, but have developed a vast pharmacopeia of substances of medical origin available to the public. These include aspirin, sedatives, stimulants, tranquilizers, mood-elevators, and so forth. Advertisers exhort the public to solve their ills with non-prescription drugs. Physicians are subtly assured by ethical advertising that their patients need and will benefit by the prescription of such medication.

CONFUSION OF DRUG USAGE AND ABUSE

By definition, drug abuse is the injudicious or intemperate use of a drug, whereby some form of damage results—physical, social or emotional—acute or chronic. In adolescents, the possibility of educational damage is also included.

Alcohol consumption, by virtue of its long-standing social acceptance, is considered to be drug abuse only when carried to an extreme form. Usage of other drugs, cannabis and its derivatives, for example, is considered by most societies to be so dangerous that any usage, however innocent, is drug abuse. Both attitudes are faulty, and potentially dangerous.

DRUG USAGE IN TEEN-AGERS

The recently released final Le Dain Commission Report on the Non-Medical Use of Drugs reports that alcohol abuse is the commonest and most important drug problem encountered in Canada. The report highlights the problem of alcohol in contemporary adolescent society.

The pattern of use of “hard drugs” by teenagers has been changing. The epidemic of amphetamine abuse, the day of the “speed-freak,” probably peaked in 1970 and is now declining in most urban centers in the United States and Canada. At present there is a hard core of amphetamine users in young adults rather than teenagers.

Use of hallucinogenic drugs such as LSD and its related compounds are also declining. Most teenagers are aware of the “bad trips” and “freak-outs” and consider hallucinogens passé.

Heroin, while a serious medical and social concern in many areas, is rare in others. Heroin abuse seems to be related not only to socioeconomic desperation, but also to the availability of a supply of this drug.
THE ADOLESCENT AND ALCOHOL CONSUMPTION

The lowering of the drinking age from 21 years to 18 or 19 in most locales has lessened the difficulty in obtaining alcoholic beverages for older teen-agers and also makes alcohol consumption more attractive for the younger teen-ager. Alcohol has been "rediscovered" by our adolescents as an alternative to cannabis, which is illegal, or hallucinogens which are becoming passé.

The social acceptance of alcohol consumption by adults has lessened the anxiety of parents toward drinking in their children.

Police attitudes toward alcohol consumption and alcoholic intoxication are far less punitive than their attitude toward similar use of cannabis. Thus, all cannabis use is frequently considered to be drug abuse, while alcohol abuse is overlooked or ignored.

Advertising media exploit youth. Very young models are used on television, magazine, or billboard advertising to sell beer and wine—the models are engaged in youthful activities; the ingestion of these alcoholic beverages is portrayed as being socially acceptable and fun.

Many recent studies done in the United States and Canada report a marked increase of alcohol consumption in young teen-agers. In most studies, as many as 10% of children interviewed admit to having gotten drunk. A smaller (5%) but definite number of children report that they have consumed alcohol to help them relieve tension or nervousness, that is, for self-medication rather than social reasons or experimentation.

Alcohol-related motor accidents have also increased. Centers report a doubling of accidents in the 16- to 21-year age group related to increased blood alcohol levels. The degree of police enforcement has remained constant and is not considered to be a factor in this increased incidence.

ALCOHOL CONSUMPTION IN CULTURALLY DEPRESSED YOUTH

Cross-cultural and international studies show that the nature and prevalence of alcohol problems in youth reflect the alcohol problems of society generally. Where alcohol has been used as a means of escape from deprivation and hopelessness, as in socially and economically deprived populations, it is abused by teen-agers as well as adults. This type of deprivation and alcohol abuse should not be equated with any one ethnic, cultural, or racial group. In many such homes the use of alcohol is condoned by adults and their children are usually absorbed into this cultural pattern by the teen years. Alcohol is not necessarily put into the category of being a harmful drug. The possibility that alcohol abuse might evolve into a health hazard is usually disregarded.

In addition to the fact that children in the close living of deprived areas are invariably exposed to the drinking and drug habits of adults, disrupted family structures allow long hours of unsupervised self-responsibility. Schools in deprived areas may lack suitable recreational facilities and idleness enhance unwholesome activities. Alcohol education programs may be nonexistent in schools in deprived areas.

SUMMARY

(1) There has been an increase in consumption of alcohol and the consequent problems associated with alcoholic intoxication in children and teen-agers.
(2) There has been an increase in alcohol-related automobile accidents involving teen-agers in many centers.
(3) The lowering of the legal age of drinking and the anxiety toward cannabis usage have made alcohol more acceptable to adults and led to its "rediscovery" by teen-agers as an alternative to marijuana and hashish derivatives.
(4) Advertising, by its youth-oriented message, has made the use of alcohol, beer, and wine especially attractive and acceptable to teen-agers.
(5) Alcohol consumption and its abuse is a major health hazard in North America.
(6) Studies in young teen-agers show that a small but definite number of persons drink not only for social reasons, such as peer acceptance, curiosity, experimentation, and so forth, but also as self-medication to relieve tension and anxiety. Such self-medication paves the way for drug abuse and early alcoholism.

RECOMMENDATIONS

(1) Adults and children should perceive alcohol as a nonmedical drug.
(2) Existing and proposed drug education programs instituted by the schools and the healing professions must include alcohol in the curriculum.
(3) Legislators must better define the differentiation between socially acceptable drug usage and physically or emotionally harmful drug abuse.
Physicians must be aware of this new drug problem in teen-agers.

History-taking and interviewing must identify the patient with a potential or existing problem of alcohol abuse. The underlying factors causing the need for self-medication must be identified and efforts must be made to ameliorate these conditions.

REFERENCE


This statement has been reviewed and approved by the Council on Child Health, American Academy of Pediatrics.

WHY IT IS WRONG TO EDUCATE CHILDREN OF THE LOWER CLASSES: TWO EIGHTEENTH CENTURY VIEWS—ONE FRENCH, THE OTHER ENGLISH

The two quotations below are representative examples of eighteenth century French and English views about the undesirability of offering too much education to the children of the poor.

Today, [1763] even the lower classes want to study. Laborers and artisans send their children to boarding schools in the small towns where living is cheap, and when they have received a wretched education, which has taught them merely to despise their fathers' trades, they fling themselves into the monasteries, become priests or officers of justice, and frequently turn out to be a danger to society.

The Brothers of Christian Doctrine, nicknamed the "Ignorantines," have made things worse. They teach reading and writing to people who should never have learned more than a little drawing or how to handle the plane or the file and who now don't want to do this . . . . The good of society requires that the lower classes' knowledge should go no further than their occupations. No man who can see beyond his depressing trade will ply it with patience and courage. The lower classes scarcely need to know how to read or write except for those members of it who live by these skills or are helped by them to make their living . . . . it is better to have few students provided they are well educated . . . . [L. R. Caradeuc de la Chalotais, Essai d'éducation nationale].

England, 1792. However desirable it may be to rescue the lower kinds of people from ignorance . . . . it cannot be right to train them all in a way which will probably raise their ideas above the very lowest occupations of life and disqualify them for those servile offices which must be filled by some members of the community, and in which they may be equally happy with the highest, if they will do their duty . . . . The children of the poor should not be educated in such a manner as to set the above the occupations of humble life, or so as to make them uncomfortable among their equals. [Sarah Trimmer, Reflections upon the Education of Children in Charity Schools].

Noted by T. E. C., Jr., M.D.

REFERENCE

### Alcohol Consumption: An Adolescent Problem

*Pediatrics* 1975;55;557

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Alcohol Consumption: An Adolescent Problem

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