

Drinking Habits

A social drinker typically:

- Drinks slowly (no fast gulping)
- Knows when to stop drinking (does not drink to get drunk)
- Eats before or while drinking
- Never drives after drinking
- Respects non-drinkers
- Knows and obeys laws related to drinking

A problem drinker typically:

- Drinks to get drunk
- Tries to solve problems by drinking
- Experiences personality changes—may become Loud, angry, violent, or, silent, remote, reclusive
- Drinks when he or she should not—before driving or going to work
- Causes other problems—harms himself or herself, family members, friends, strangers

An alcoholic:

- Spends lots of time thinking about drinking and planning where and when to get the next drink
- keeps bottles hidden for quick pick-me-ups
- Starts drinking without conscious planning and loses awareness of the amount consumed
- Denies drinking
- Drinks alone
- needs to drink before facing a stressful situation
- May have “blackouts” - cannot remember what he or she did while drinking although he or she may have appeared “normal” to people at the time
- Goes from having hangovers to more dangerous withdrawal symptoms, such as delirium tremens (“DTs”)
- Has or causes major problems—with the police, an employer, family members or friends

If you or someone you know is experiencing problems with alcohol, the Center for Work and Family Life can help. Professionally trained staff is available for short-term counseling.

How do I contact the Center for Work and Family (CWFL)?

If you are a USC faculty or staff member and are interested in scheduling an appointment with a counselor or receiving information regarding resources and referrals, phone the CWFL at (213) 821-0800. If you are an immediate family member of a USC employee, you may also phone the Center directly to request services. CWFL services are available at all USC sites by special appointment.

The Center for Work and Family Life is open Monday through Friday from 8:30 a.m. to 5:00 p.m.

ALCOHOL ABUSE AND ALCOHOLISM

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Alcohol Abuse and Alcoholism

center for
work & family
life

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Employee Assistance Program
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ALCOHOL ABUSE AND ALCOHOLISM

What is alcohol?

First of all, alcohol is a drug. Like a sedative, alcohol is a central nervous system depressant. Alcohol is the nation's number one drug of abuse. Alcoholism, also known as "*alcohol dependence*"

is a disease that includes alcohol craving and continued drinking, despite repeated alcohol-related problems, such as losing a job or getting into trouble with the law. It includes:

- **Craving**—A strong need or compulsion to drink
- **Impaired Control**—The inability to limit one's drinking on any given occasion
- **Physical dependence**—Withdrawal symptoms such as nausea, sweating, shakiness and anxiety when alcohol use is stopped after a period of heavy drinking
- **Tolerance**—The need for increasing amount of alcohol in order to feel its effects

Is alcoholism a disease?

Yes. Alcoholism is a chronic, often progressive disease with symptoms that include a strong need to drink despite negative consequences. Like many other diseases, it has a generally predictable course, has recognized symptoms, and is influenced by both genetic and environmental factors. Alcoholism tends to run in families, and genetic factors partially explain this pattern. A person's environment, such as the influence of friends, stress levels, and the ease of obtaining alcohol, also may influence drinking and the development of alcoholism.

What effect does alcohol have?

In small doses, alcohol has a tranquilizing effect on most people, although it appears to stimulate others. Alcohol first acts on those parts of the brain which affect self-control and other learned behaviors. Lowered self-control often leads to the aggressive behavior associated with some people when they drink. In large doses, alcohol can dull sensation and impair muscle coordination, memory and judgment. Over a long period of time, alcohol can damage the liver and the heart, and can cause permanent brain damage.

Can people become dependent on alcohol?

Yes. When drinkers see alcohol as an escape from the problems and stresses of everyday life, they may want to keep on drinking. They begin to depend on the drug

for relief. Repeated drinking produces tolerance to the drug's effects and dependence. The alcoholic's body then needs alcohol to function.

Are certain groups of people more likely to develop alcohol problems than others?

According to the National Institute of Health, nearly 14 million people in the United States—1 in every 13 adults—abuse alcohol or are alcoholic. However, more men than women are alcohol dependent or experience alcohol-related problems. Rates of alcohol problems are highest among young adults ages 18-29, and lowest among adults 65 years and older. Among major U.S. ethnic groups, rates of alcoholism and alcoholism problems vary.

How can you tell whether you or someone close to you has an alcohol problem?

A good first step is to answer the brief questionnaire below: (To help remember these questions, note that the first letter of a key word in each question spells "CAGE"):

- Have you ever felt you should **C**ut down on your drinking?
- Have people **A**nnoyed you by criticizing you drinking?
- Have you ever felt bad or **G**uilty about your drinking?
- Have you ever had a drink first thing in the morning to steady your nerves or to get rid of a hang-over (**E**ye opener)?

What is a safe level of drinking?

Most adults can drink moderate amounts of alcohol—up to two drinks per day for men and one drink per day for women and older people—and avoid alcohol-related problems, (One drink equals one 12-ounce bottle of beer or wine, one 5-ounce glass of wine, or 1.5-ounces of 80-proof distilled spirits.) However, certain people should not drink at all. They include: Women who are pregnant or trying to become pregnant; people who plan to drive or engage in other activities requiring alertness and skill; people taking certain medications, including certain over the counter medications; people with medical conditions that can be worsened by drinking; recovering alcoholics; and people under the age of 21.

If a person with an alcohol problem is unwilling to seek help, is there any way to get him or her into treatment?

This can be a challenging situation. Many alcoholism treatment specialists recommend the following steps to help a person with an alcohol problem accept treatment:

Stop all "rescue missions." Family members often try to protect the alcoholic from the results of his or her behavior by making excuses to others about his or her drinking, and by getting him or her out of alcohol-related jams. It is important for the alcoholic to fully experience the harmful effects of his or her drinking and thereby become more motivated to stop.

Time your intervention. Plan to talk with the alcoholic shortly after an alcohol-related problem has occurred. For example, a serious family argument in which drinking has played a part. Be sure you are both in a calm state of mind, the alcoholic is sober, and you have a private place to have your discussion.

Be specific. Tell the alcoholic you are concerned about his or her drinking and want to be supportive in getting help. Relate a recent incident in which his or her drinking has caused problems for both of you.

State the consequences. Tell the alcoholic that until he or she gets help, you will carry out certain actions to protect yourself from the harmful effects of the drinking. This may mean moving or not attending alcohol-related social events.

Be ready to help. Gather information in advance about local treatment options. If the person is willing to seek help, call immediately for an appointment. Offer to go to the first visit of a treatment program or AA meeting.

Call on a friend. The intervention of more than one person, more than one time, is often necessary to persuade a problem drinker to seek help. Ask a friend to talk with him or her, using the steps described here.

Get support. Whether or not the problem drinker seeks help, you as a family member or friend may benefit from the encouragement and support of other people in your situation. Support groups offered in most communities include Al-Anon for spouses and significant adults, and Alateen for children of alcoholics.