

WHEN ALCOHOL BECKONS, EVERYTHING TAKES A BACK SEAT- CROSS SECTIONAL STUDY OF KNOWLEDGE, ATTITUDE AND PRACTICES ABOUT EFFECTS OF ALCOHOL ON SEXUAL FUNCTIONING IN PATIENTS WITH ALCOHOL USE AND SEXUAL PROBLEMS

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Received:16/09/2019

Revised:09/11/2019

Accepted:19/11/2019

ABSTRACT

Background: To assess the Knowledge, Attitude, Practices (KAP) about sex with or without alcohol in patients presenting with alcohol use disorder and sexual problems attending Alcohol group meeting (ALG) and Psychosexual counselling (PSG) to see the commonalities and differences of their KAP. **Materials and Methods:** A cross-sectional study was carried out in patients of two different groups in a state general hospital of western India. Department of Psychiatry runs two different group meetings, (1) alcohol group meeting (ALG) for alcoholics and (2) psychosexual group meeting (PSG) for patients coming for sexual problems. After approval from Human research Ethics Committee and consent taken, A semi structured questionnaire was used to analyse and compare KAP about effects of Alcohol on sex for both groups. **Results:** Nearly 2/3rd patients in both the groups had adequate knowledge. While assessing attitude ALG had healthier attitude than PSG. Regarding practice, 21.1% of ALG vs 1.75% of PSG take alcohol regularly before sex. 73.7% of ALG vs 21.1% of PSG enjoy sex better after drinking alcohol. 33.3% of ALG but only 1.05% of PSG had sex with commercial sex worker after alcohol. More than half participants from ALG had casual unwanted sex and sex unknowingly without condom after alcohol consumption. **Conclusion:** Despite good knowledge and healthier attitude, sexual practices are significantly different in Alcohol dependents. Thus, Knowledge and Attitude do not matter when alcohol prevails.

Keywords: alcohol, psychosexual, myths and practice related to alcohol

INTRODUCTION

Alcohol is one of the commonest substances perceived as an aphrodisiac causing better sexual performance and frequently identified as a contributor to risky sexual behaviours, such as young age at first sex, multiple partners, sex with casual partners or sex workers, and inconsistent condom use. However, research results are mixed,

given the conflicting evidence; researchers have focused on other factors, such as expectations about alcohol's effects that might help in explaining the relationship of alcohol use and risky sexual behaviours (1). Literature shows perceived consequences of sex after drinking causes potential

reinforcement of alcohol-sex expectancies increasing both alcohol use and sexual behaviours (2, 3).

In the past two decades, over 600 studies have investigated the association between using alcohol and having sex (4, 5). The majority of studies have found a positive association, although most have used purely cross sectional, between-subjects, and correlational designs. Emerging adults commonly consume alcohol before having sex estimates range from ¼ to more than ½ of people at the most recent sexual occasion (6-8). Hingson et al. (2005) (9), estimated that 8% of U.S. college students aged 18 to 24 (474,000 people) have unprotected sexual intercourse resulting from alcohol use annually. In addition patients intoxicated with alcohol encountered with negative consequences such as unwanted sex (9).

Based on alcohol expectancy theory, one of the reasons some college students use alcohol with the expectation that alcohol facilitates sexual drive and decreases sexual inhibitions (10). Having positive alcohol expectancies, or anticipating rewarding effects as a result of drinking, is consistently associated with higher rates of alcohol use (11) consistent with a positive feedback loop, Patrick and Maggs (2008) found that experiencing more positive consequences from alcohol use in the prior week was associated with increased plans to drink and experience positive alcohol consequences the following week (12).

However, a more complete picture of the associations between alcohol use and sexual behaviours within-persons and across occasions is required to understand whether a link between alcohol and sex is prevalent and whether it is perceived as rewarding (i.e., experienced positive sex consequences) or not (i.e., negative sex consequences).

Most of the research on this topic has been conducted in developed countries, some was done in specific populations such as college drinkers (13) and some did not adequately control for alcohol consumption levels (14).

The study attempts a holistic approach to see the common and different themes about knowledge, attitude, practice about effects of Alcohol on sexual functioning in patients presenting with alcohol use disorder and sexual problems. In India there are few studies and very less focused group discussion regarding the effects of Alcohol on sex, so with this

background, we want to see this aspect locally, globally and the extent of it in human sex life.

Materials and Methods:

A cross-sectional study was conducted using a semi-structured questionnaire in patients of two different groups in a Western India State General Hospital. Department of Psychiatry runs two different group meetings, 1. alcohol group meeting (ALG) for alcoholics and 2. psychosexual group meeting (PSG) for patients coming for sexual problems. After approval from Human research Ethics Committee (NO.MCS/STU/ETHICS/Approval/26028/15.

Dated: 18th Dec, 2015), 57 patients (15-60 years) each attending ALG & PSG with informed consent, were enrolled. Patients who didn't give consent, with other substance dependence, psychiatric disorders and language barrier were excluded. After collecting demographic data, same semi structured questionnaire covering qualitative and quantitative information regarding KAP about effects of Alcohol on sexual functioning was administered for both groups. Data were analysed and compared separately.

Semi structured questionnaires:

Knowledge questionnaire (total 8 statements)- taps knowledge(K) regarding physiological effects (statements 1,7), hormonal changes (statement 5) associated with alcohol, myths about effects of alcohol in sexual functioning (statements 2,3,4) and legal consequences (statements 6,8) related to alcohol use.

Attitude questionnaire (total 7 statements)- taps attitude (A) towards sexual desire, performance, satisfaction ,risky sexual behavior like group sex & sex with commercial sex worker,judgment and control of sexual behaviour, unprotected sex , sexual fantasies of partner associated with alcohol use.

Practice questionnaire consists of qualitative and quantitative questions of practices (P) related to frequency of alcohol use before sex for better performance and satisfaction, risky sexual behaviour like sex with CSW, group sex, Casual unwanted sex, Homosex ,sex without condom etc.

RESULTS

Sociodemographic Profile

In our study population all 114 patients were male equally distributed to each ALG and PSG. As per modified Prasad classification, most of the patients belong to middle socioeconomic class, educated up

to secondary standard, almost equally distributed to nuclear and joint family. 64% were married.

Knowledge regarding effects of alcohol on sex in both groups

Different questions measuring knowledge of the participants like effect of alcohol on working capacity of brain, penile size, quality & quantity of semen, level of testosterone, erectile dysfunction and some legal aspect related to alcohol, were asked. Nearly 2/3rd patients in both the groups had adequate knowledge in all eight questions. More number of participants from psychosexual group believe that alcohol increases penis size (82.5%) and alcohol improves quality of semen (91.2%) as compared to alcohol group. More than 70% of participants from both group acknowledge that alcohol drinking below 18 years of age is punishable in India.

Attitude regarding effects of alcohol on sex in both groups

While comparing both the groups, except statement numbers 2 and 5, Alcohol group had healthier attitude than Psychosexual group in all other statements.(Table 1)

Practice regarding effects of alcohol on sex in both groups

Regarding practice, 21.1% of ALG vs 1.75% of PSG takes alcohol regularly before sex. 73.7% of ALG vs 21.1% of PSG enjoy sex better after drinking alcohol. 33.3% of ALG but only 1.05% of PSG had sex with CSW after alcohol. More than half of the participants from ALG had casual unwanted sex as compared to only 1.05% of PSG participants. 70.2% of ALG vs 8.77% of PSG had sex unknowingly without condom respectively after alcohol consumption.

54.4% of ALG vs 8.77% of PSG and 17.5% of ALG vs 1.75% of PSG had sex without consent of partner and took advantage of an intoxicated partner for having sex with him/her respectively. Despite good knowledge and healthier attitude, sexual practices are significantly different in Alcohol dependents (Table 2). 24.56% of Alcohol group vs none of Psychosexual group had sex without condom unknowingly under influence of alcohol (Table 3).

DISCUSSION

The above findings supports a number of conclusions about the link between alcohol use and risky sexual behaviour. In a study using retrospective reports of the most recent sexual event, drinking was not related to condom use in the full

sample.¹⁵ However, for sexual events involving a non-steady partner, alcohol use was associated with a greater likelihood of unprotected intercourse. Other evidence suggests that individuals may be more likely to have sex with a new or casual partner after drinking (16, 17).

First, existing research shows that alcohol consumption and certain types of sexual behaviour covariate. Not only does the likelihood that an individual has ever drunk alcohol predict the likelihood he or she has ever had sex, but level of alcohol involvement also predicts level of sexual involvement. Equally strong evidence suggests that drinking in a potentially sexual situation (e.g., on a date) is associated with an increased probability of intercourse on that occasion and that drinking prior to intercourse is associated with risky partner choice as well as with decreased risk discussion on that occasion (16).

Alcohol use and risky sexual behaviour at the global level Studies examining the link between alcohol and risky sex at the global level typically ask participants about their overall involvement in some high-risk behaviour and their overall frequency and quantity of alcohol use. Studies using this approach have generally found strong relationships between alcohol use and indiscriminate behaviour, but they are inconsistent with alcohol use and protective behaviour. One study also suggested that more frequent drinking was associated with lower rates of condom use (16).

One study suggested beliefs about the effect of alcohol on sexual performance could help explain links between alcohol consumption and risky sexual behaviour not completely accounted for by the pharmacological effects of alcohol also support the findings of our study (1).

One study showed that those adolescents who reported higher levels of drug use at time 1. Also had more sexual partners, had higher frequencies of unprotected sex, and were more likely to have experienced early pregnancy at time 2. The reverse relationship was true as well (2). Similar practice we found in participants with alcohol group who were alcohol dependent. Whereas participants from psychosexual group who occasionally took alcohol showed more healthier practice.

The association between sex-related alcohol expectations and risky sexual behaviours, however, suggests that in research related to alcohol or other drug use, it is also important to consider and control

for an individual's expectations of these substances' effects (18,19). Interventions focusing on changing beliefs about alcohol's effects could reduce both the amount of consumption and such risky sexual behaviours as unprotected sex. This is particularly relevant to interventions targeting men younger than 35, whose expectations of the positive effects of alcohol consumption have proven to be particularly strong (18,19).

In our study while comparing with PSG, we also found that though ALG patients had good knowledge and healthier attitude, they were more frequently involved in risky sexual behaviour like sex with CSW, group sex, unprotected intercourse without condom, casual unwanted sex, homosexual and punishable offence like sex against partner's will multiple times under influence of alcohol.

Overall, our findings indicate that when developing strategies to avoid risky sexual activities, alcohol use is an important factor to consider. Lastly, it is essential to educate young individuals how to cope with advertising messages that depict alcohol and sexuality as complementary, particularly in developing nations where there are no restrictions on mass media.

Strengths:

1. KAP of two different groups were compared.
2. Naturalistic study in routine patients representing community setting.

Limitation:

1. Small sample size.

CONCLUSION

Despite good knowledge and healthier attitude, sexual practices are significantly different in Alcohol dependents. Thus, Knowledge and Attitude do not matter when alcohol prevails.

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How to cite this article: Chandra N., Sheth S., Mehta R., Dave K., When alcohol beckons, everything takes a back seat-cross sectional study of knowledge, attitude and practices about effects of alcohol on sexual functioning in patients with alcohol use and sexual problems. Int.J.Med.Sci.Educ 2019;6(4):6-11

Tables:

Table 1: Comparison of attitude regarding effects of alcohol on sex in groups

| No | Attitudestatements | Healthy Attitude | |
|----|----------------------------------------------------------------------------------------------------------------|------------------|-------------|
| | | ALG GRP | PSG GRP |
| 1. | Alcohol helps to increase sexual desire | 91.2 | 61.4 |
| 2. | Consumption of alcohol leads to decreased sexual performance | 33.3 | 57.8 |
| 3. | Alcohol intoxication is associated with risky sexual behavior like group sex & sex with commercial sex worker. | 84.2 | 73.6 |
| 4. | Person loses the power of judgment and self control after drinking alcohol. | 91.2 | 86.7 |
| 5. | Alcohol use before sex results in decreased sexual satisfaction and pleasure | 42.1 | 43.8 |
| 6. | Alcohol is a major factor in inducing men and women to have sex without condom | 78.9 | 68.4 |
| 7. | Alcohol intake in small amount will do no harm to you sexually | 66.8 | 52.7 |
| 8. | Alcohol consumption makes the sexual partner appears more attractive and beautiful | 71.2 | 61.4 |

Table 2: Difference of Practice in two groups

| No | Practice Questions | ALG GRP% | PSG GRP% | p |
|----|----------------------------------------------------------------------------------------|-------------|-------------|-------|
| 1 | Taken alcohol ever before sexual intercourse? | 91.2 | 22.2 | 0.01 |
| 2 | Regularly take alcohol before sex for better performance? | 21.1 | 1.75 | 0.005 |
| 3 | Enjoy sex better after drinking alcohol? | 73.7 | 21.1 | 0.01 |
| 4 | Force anyone for sex against his/her will? | 54.4 | 8.77 | 0.01 |
| 5 | Ever done sex with commercial sex worker (CSW)? | 33.3 | 1.05 | 0.003 |
| 6 | Ever involved in group sex? | 5.26 | 3.51 | 0.647 |
| 7 | Sex without condom unknowingly under influence of alcohol? | 70.2 | 8.77 | 0.00 |
| 8 | Casual unwanted sex after drinking alcohol? | 56.1 | 1.05 | 0.00 |
| 9 | Ever taken advantage of a person who was intoxicated & tried to have sex with him/her? | 17.5 | 1.75 | 0.004 |
| 10 | Homo sex under influence of alcohol? | 3.51 | 0 | 0.154 |

Table 3: Difference of Practice in two groups

| Practice questions | Alcohol group (%) | | | Psychosexual group (%) | | |
|----------------------------|-------------------|------------|-----------|------------------------|------------|-----------|
| | 1-5 times | 6-10 times | >10 times | 1-5 times | 6-10 times | >10 times |
| Under influence of alcohol | | | | | | |
| Sex against partner's will | 28.07 | 7.01 | 19.29 | 7.01 | 0 | 1.75 |
| Sex with CSW | 22.08 | 3.51 | 7.01 | 8.77 | 1.75 | 0 |
| Group sex | 5.26 | 0 | 0 | 1.75 | 0 | 1.75 |
| Sex without condom | 38.6 | 7.01 | 24.56 | 7.01 | 1.75 | 0 |
| Casual unwanted sex | 28.07 | 5.26 | 22.81 | 8.77 | 1.75 | 0 |
| Homo sex | 3.51 | 0 | 0 | 0 | 0 | 0 |