

REPORT "TAKE CARE"

Country: Greece

Contact: OKANA Prevention Center against Drugs "Ippokratis", Kos

Date: 31 October 2010

In Greece the last law reformation that concerns the protection of minors from smoke and alcohol took place in the year 2008 and includes the following basic provisions:

- Consumption and sale of beer, wine, champagne, and all other alcoholic beverages is prohibited.
- Minors are allowed into public venues (restaurants, bars, etc) only if accompanied by a parent or guardian.
- Private events are not included.

According to Greek Law a person under 18 years of age is a minor and youths must prove their age on request.

It is compulsory for bars and amusement centers to have signs near the entrance stating "entrance is forbidden to people under the age of 18 that are not accompanied by a parent or guardian".

In other public locations there should be signs which state that consumption of alcohol is forbidden to people under the age of 18 if not accompanied by a parent or guardian.

The consumption of alcohol in our country is traditionally equivalent to many social events in our life such as fests or dinner parties. This is mainly because Greece is a country which produces wine, and so the prices of alcohol drinks are affordable, and readily available to people of any age.

In comparison to other countries of the same size as Greece, the way teenagers consume alcoholic drinks shows the cultural difference in the consumption of alcohol at an early age.

Even if Greek teenagers (16 years of age) are positioned high among other countries in frequent alcohol consumption, they are positioned lower in excessive drinking and getting drunk. Teenagers in Greece and other countries around the Mediterranean sea do not drink in order to get drunk,

which happens in countries of Northern Europe, where the teenagers tend to get drunk for the first time at a younger age. Traditional values which associate alcohol with social events and feasts, the acceptance shown by parents, the lack of forbiddance at the place of purchase of alcoholic drinks in super markets, easy access at cafes and bars explain the size of alcohol consumption by teenagers in our country. For teenagers, alcohol works symbolically as the stage at which they are getting older, becoming more independent and generally are able to become members of a group of people. (ESPAD 2004)

The basic prevention policies adopted in Greece concern 3 areas:

1. the control of production in alcoholic beverages,
2. the prohibition of selling alcoholic beverages to young people,
3. the prohibition of drinking and driving.

Controlling the production of alcoholic beverages is implemented through the introduction of specific licenses for the production of alcoholic beverages. However this measure is more related to the increase of State tax revenue rather than the protection of public health.

The regulations in force for the prohibition of selling alcohol to young people apply to people under the age of 17. Nevertheless, the measure is not supervised therefore making it practically inactive.

The prohibition of driving under the influence of alcohol (maximum permitted blood alcohol rate 0,5%), is a measure that is monitored sufficiently at times while it lacks monitoring at other times. Greece has the highest mortality rate from traffic accidents in Western Europe, which indicates the need for the urgent implementation of the measure.

On the contrary, there is a whole range of sectors and prevention policies for which Greece has not developed any activities at all yet. First of all, Greece is one of the few European countries where there is no legislative definition of "spirits". This makes it difficult to take measures and implement prevention policies.

It is also one of the few European countries which have no policies on:

- licenses to sell alcohol,
- legislative restrictions on point of sale and serving,

- legislative limitations on the day, time or place of selling alcohol,
- legislative limitations on alcohol consumption during work hours.

In the region of Kefalos, preventative interventions are carried out by the staff that works in the Prevention Centers (71 Prevention Centers of OKANA). In Kos there is no other social structure or service except for the Prevention Center “Ippokratis” that deals with social issues such as alcohol.

The area we have chosen in order to materialize our activities for the “Take Care” programme is the community of Kefalos. The total number of questionnaires that were answered was 16 (4 participants/focus group). The participants that answered the questionnaire were twelve (12) males and four (4) females, within the age range of 16 to 40 years. The choice in interviewees for each target group was such as to obtain a full and clear picture on the problem of alcohol abuse by young people. We believe that the interviewees are a representative sample from each target group. They are active participants in their local community and they are able to express their opinion precisely and freely without prejudice or fear.

The most important criterion for our choice of participants was that they could become the core people for creating our focus group.

The answers were a result of extensive conversations with the interviewees in their home. There was difficulty from some individuals in understanding some questions, especially those that concerned retailers.

Starting with the part one section of the questionnaire (questions 1-4) regarding the consumption of alcohol from young people we can state the following:

In the first question, “Have you observed inappropriate drinking of young people (12 to 21 years old) in your local area”, we had seven (7) interviewees (43,75%) answer “often”, six (6) (37,5%) “sometimes”, two (2) (12,5%) “very often” and one (1) (6,25%) “never”. The majority indicated that the consumption of alcohol occurs mostly in bars, café-bars, but also during school parties, parties at home, social events and school excursions.

In the second question, “Are there particular groups of young people who attract negative attention due to drinking and, if yes, which groups”, the

majority of interviewees thirteen (13) (81,25%) answered “no” and three (3) (18,75%) “yes” mentioning groups of teenagers 16-18 years of age and young people who have no parental control.

Concerning the third question, “Are there any particular times when you notice inappropriate drinking and, if yes, when”, fifteen (15) (93,75%) answered “yes” and one (1) (6,25%) “no”. The most common hours of alcohol abuse are late at night after 10:00 p.m. and one (1) interviewee answered all day.

For the fourth question, “who do you think has the biggest influence on young people’s drinking”, it is interesting to note that, although there was the opportunity for multiple answers, all sixteen (16) interviewees (100%) indicated “friends” as the most influential factor, six (6) answers indicated “parents”, three (3) indicated “key persons” and two (2) indicated “retail employees”.

In part two which concerns young people between the ages of 12 and 21 in question 5 (a), “How can we reach young people to prevent inappropriate drinking”, we had many interesting answers. They are as follows:

- through dialogue and communication,
- through informative and advisory activities for youth regarding the consequences of alcohol use and abuse,
- through training parents and key persons on communication techniques,
- through the creative utilization of leisure time,
- through the activation of the local community and local institutions,
- through activities organized in youth meeting places (bars, cafeterias, athletic clubs and cultural associations),
- through activating young people to become volunteers (young people teaching young people).

In question 5(b), “What should we avoid”, we had the following answers: Continuous moralizing and lecturing, stop parents from being a negative influence on their children, avoiding conflicts and the encouragement/development of already “corrupted” social networks.

In question 5(c), “What do you think young people should know / learn to prevent inappropriate drinking”, all answers state the negative consequences

of alcohol consumption in physical and emotional health of their social life as well as within the family.

In part three, “Parents”, and specifically in question 6(a), “How can we reach parents to prevent inappropriate drinking” answers were different and interesting, such as:

- dissemination of informational material,
- organization of seminars, lectures and other training activities that will be implemented by specialized experts,
- collaboration with schools, local church, associations and institutions.

In question 6(b), “What should we avoid” there were answers regarding the tendency to stigmatise parents involved in such actions, the unreasonable placement of responsibilities upon people, the implementation of long-term programmes that do not have measurable results. We should also mention that due to an obvious difficulty in understanding the question, many interviewees had left this question unanswered.

In question 6(c), “What do parents need (information skills) to support their children to drink responsibly”, almost all answers included the following:

- training,
- effective communication with their children,
- being a positive influence on their children,
- being actively involved in their children’s lives.

In part three, “Key Persons”, and specifically question 7(a), “what could motivate key people to participate in a programme to prevent inappropriate drinking”, we had the following answers:

- realisation of their role and duty as key people against young people,
- in depth understanding of the problem,
- realisation of their influence on young people,
- implementation of short term action-plans with specific goals and measurable results.

There were three interviewees that did not answer the above question. In the same section, in question 7(b), “What should we avoid”, we should note that there was significant difficulty in understanding the question and despite of the clarifications given, only three (3) answers were given:

- the implementation of long-term programmes that do not have measurable results,
- to have unreasonably high expectations from key people,
- to not place the responsibility / burden upon young people.

At the end of this section in question 7(c), “What can key people do to prevent inappropriate drinking” we had many interesting answers, such as: make themselves a positive influence, receive training from specialised staff on the implementation of prevention programmes, talk to young people from an early age, promote healthy leaving and activities, always be informed.

In the final part that concerns retail employees, question 8(a), “What can retail employees do to reduce inappropriate drinking of young people”, all interviewees agreed that retail employees should comply with the relevant legislative framework regarding the selling of alcohol and its consumption, and should not have profit as their primary motive and selling criteria and finally to promote non-alcoholic drinks to young people.

In question 8(b) “What should we avoid in order not to lose their support”, the majority of interviewees answered to avoid conflicts and accusations against retailers.

In question 8(c) “How can we reach retail employees in order for them to participate in a programme to prevent inappropriate drinking”, many interviewees answered that there is a need for dialogue and active collaboration between the parties involved, participation in seminars and lectures, realisation that the limited and right consumption of alcohol by young people is primary for their own privilege.

Taking into consideration the open discussion we had with the interviewees, the responses to the questionnaires and the in-depth knowledge of the specific social environment, we have the following initial conclusions which we must take into account while planning the implementation of our interventions:

From the first part of questions (1-4) we should mention the following:

- a) Alcohol abuse is a social problem with negative consequences in the health and social life of the individual.

- b) The consumption of alcohol by young people usually takes place in cafes/bars and school parties organized especially at night.
- c) No specific groups of young people are linked to alcohol consumption.
- d) Friends, peers and family have the largest influence on young people.

In part two of the questionnaire, regarding young people aged between 12-21 years of age, we noted the following:

- a) In order to approach young people we need effective communication with them,
- b) Parents and key persons play an important role in educating young people,
- c) Implementation of interventions at places where young people meet,
- d) It is essential that young people are aware of the risks of alcohol abuse.

In part three of the questionnaire concerning parents as the target group, it is necessary to exploit the following:

- a) How well informed and educated parents are,
- b) The collaboration between the school, the church and local associations,
- c) The avoidance of stigmatization,
- d) Short term intervention with clear and measurable targets.

In part four of the questionnaire, relating to key persons, we emphasize the following points that are considered to be important in order to implement interventions:

- a) The fact that key persons are often role-models for young people,
- b) The responsibility they have towards young people in order to motivate them,
- c) The fact that key persons should realize the high importance of the problem and finally
- d) They need to be fully informed/briefed about alcohol abuse.

Finally, regarding the part on the target group of retailers, it is necessary to mention the following:

- a) good knowledge and compliance with the legislative framework in regards to selling and the use of alcohol,
- b) motivate them to participate in prevention programmes,
- c) avoid conflicts and accusations against them,
- d) enhance their professional duty against alcohol abuse.

Final Conclusions

For the future planning of implementing our actions, regarding the prevention of alcohol abuse by young people, we have set for following goals:

1. Short-term interventions with measurable and understandable (clear) targets.
2. Evaluation of the intervention before, during and after its implementation.
3. Organization of training activities on communication skills for all target groups.
4. Informing all target groups regarding the risks of alcohol abuse.
5. The implementation of interventions in places where young people meet, are entertained, play sports, consume alcohol.
6. The adoption of smart practices in order to promote positive messages. The people interviewed will be the core target groups.
7. Establishment of a prevention network in the local community, which will continue to implement its own interventions to the local community even after the completion of the "TAKE CARE" programme.