

Country report “Take Care” Project

1. Context Information

Regulations on the protection of minors:

According to the 1985 law regarding recreational centres, the children law of 1956 and the amendment in 1999, the consumption and sale of alcoholic beverages such as beer, wine, champagne, spirituous beverages and spirits is prohibited. The penalty for committing such an offence varies between a maximum of 6 months imprisonment or maximum 1710 Euros fine and possible recall and cancelling of licence. Stay in public locations such as restaurants is allowed under the age of 16, whilst the sale and consumption of alcohol is still prohibited. However, the stay is not allowed under the age of 16 in places like clubs, discotheques and cabarets. The punishment entails in the case of a first offence, 855 Euros fine or maximum imprisonment of 3 months. In the case of second offence 1710 Euros fine or maximum imprisonment of 6 months or possible recall and cancelling of licence can be the consequences.

Cultural Background of Alcohol Consumption:

Though in many European countries there are clear and strict regulations concerning professionals who sell and serve alcohol, and to be granted a license to sell they must participate in specific courses, in Cyprus there are no such perquisites. Furthermore, it seems that in Cyprus there is a more relaxed attitude to the fact that adolescents drink, from parents and retailers. Alcohol use it seems is embedded in every aspect of the Greek Cypriot culture. Furthermore, there seems to be no sense of ethical responsibility from the retailers part in the part they play provide excessive amounts of alcohol and to youths under the legal age limit.

Police reports have claimed that 42% of fatal road accidents reported that the victims were under the influence of alcohol. Most of the involved persons were males between 15-24 years old. Increase of police reports referring to driving under the influence of alcohol. 79% of students in Cyprus have consumed alcohol in the past year and 12% have reported being drunk. The percentage of youths between the ages of 15-24 who consumed alcohol the last month increased from 49.4%- 63.4%. Also the percentage of youths who drove after consuming 6 or more drinks increased from 12.5%- 14.6%.

Existing interventions:

At the present time in Cyprus, two pilot studies seems to comply to the context of existing interventions and services for young people with problematic alcohol consumption. One of the

projects, “safe alcohol serving”, does not reach the youths directly but it is aimed at educating male and female retailers of all ages and positions of work that sell and serve alcohol about responsible alcohol distribution.

It takes place at the retailers’ venue (bar, club, and restaurant) at a time that is convenient for the retailer, in order to make it as simple as possible for the retailer to take part in the project. Its Objectives are to inform about the present laws in Cyprus, to educate about the impact of alcohol on the organism, to inform about responsible serving, to educate about the signs of intoxication and cases where medical help is required and to increase the understanding of the retailers own moral and social responsibility when serving alcohol.

Through the methodology, a questionnaire is handed out to participants in which they are required to answer true, false, I don’t know followed by some multiple choice questions about some general questions regarding alcohol. A presentation is delivered by the coordinator regarding laws, effects of alcohol on the organism, myths and realities of alcohol use, standard units of alcohol, BAC levels, dependence and possible interventions for responsible drinking that can be used by the retailers. The presentation is then followed by a second questionnaire provided to the participants in the same format as the first one.

The second project aimed at youths regarding problematic alcohol consumption is again at its pilot stage and encompasses more of a harm reduction methodology. “Safer Clubbing Intervention” in its first phase, will be carried out outside selected recreational settings. The intervention will later on be expanded to other settings such as alcohol testing points, at first aid departments and tourist areas of the island. It will encompass trained outreach workers that will be present outside various night clubs to distribute harm reduction information material on licit and illicit substances including a guide of available services, information on legal issues, distribution of condoms and other material including t-shirts, water etc.

Voluntary alcohol test will be carried out outside night clubs, upon individual’s consent, to measure alcohol blood level and be able to make an informed decision to drive. In case the individual exceeds the set alcohol limit, he or she can use a free of charge taxi voucher along with the information material mentioned above. Ultimately, the policy’s response aims to reinforce young people’s enjoyment and social experience by providing objective information and professional support to stay safe and make their own healthy choices.

3. Half-open/semi-structured interviews

The sudden and fast population change in a small society like the town of Paphos, Cyprus, has brought about difficulties in the adjustment not just of the new populations but also of the native population. As a result, the whole population mapping of the town has changed making it a more multi-cultural town. Therefore, it was decided that an area of Paphos town would be chosen. This was decided as Paphos County, is consisted of villages from which inhabitants

travel to the town for their various activities. Thus, it is in Paphos town where there are more activities and as a result more retailers and key persons. Furthermore, the town is more multicultural and would give a more holistic sample of the population.

Interviewees:

Young persons: The young persons we chose were two at the age of 18; one male and one female, a female youth at the age of 15 and another female youth at the age of 20. We wanted to choose participants from various ages of the project age spectrum. Though two of the participants were 18, the boy was in the army and the girl was going to university, so we thought that we would get an all-round collective of information. To our surprise we found that many of the answers they gave were similar.

Retailers: We chose three big supermarkets (interviewees were the managers of these supermarkets) and one kiosk owner, in order to get a comparison between the less personal selling in a big supermarket and the more personal atmosphere in a local kiosk.

Parents: It was decided to choose parents who have children of various ages throughout the project age spectrum and we thought necessary to include at least one male parent in order to get a more holistic approach on the subject. The parents interviewed (three women and one man) all had at least one child aged between 12 and 21.

Key persons: It was thought that we should pick key persons to offer different opinions on prevention according to the field of work that they were in. So we chose a social worker, youth worker, a teacher and gym coach.

4. Preliminary conclusions regarding the key questions up to this stage

Question1. Most interviewees answered to this question “often” and “sometimes” and that it was most observed in the nightlife scene. This would suggest that some sort of intervention is deemed necessary and targeted to the youths that take part in the nightlife scene.

Question2. There was not a clear majority for answering this question, however from the interviewees that answered "yes" it seemed to be that their answers were not biased in way of gender, nationality or other group formations. However the term "young" may have caused the interviewees to think of immature teens and school student, as they may presume that a 15 year old drinking alcohol is deemed a more negative behavior than a 20 year-old drinking!

Question3. The majority of answers were "yes" for a particular time for inappropriate drinking. Time of day was night time and time of year was during celebrations (Christmas, Easter etc). Our conclusion would be that the interventions be targeted to youths going out at night and during the school holidays (Christmas, Easter, summer holidays etc).

Question4. All interviewees agreed that friends and peers have the greatest influence on young people, followed by half the answers saying parents and families and only a small minority mentioned adult contact persons, retail employees and others. So our conclusion is that the main target groups for the prevention should be friends and peers followed by family.

Question5. A). Most interviewees found that information giving was essential but in an active and interactive manner. Our conclusion is that the intervention should be as interesting and vivid as possible.

B). Furthermore, what not to do was explored by not forcing the youths to take part, not playing the "know it all", and not condemning alcohol completely. Avoid too much technical terminology and not to insult the youths. Our conclusion is that it must be kept simple and understandable, avoiding condemnation and show a sense of respect to the youths.

C). Our conclusion is that the intervention should include health aspects and that youths should know about consequences of alcohol use, abuse and dependence. It was stated that both physical and emotional health issues should be addressed.

Question6. A). It was mentioned that there should be training and parent groups, in their houses so they would feel comfortable, with the aim to get trained spotting early signs and also to learn communication skills. Our conclusion is that besides just information about alcohol, parents also need to be trained in communication skills.

B). It was found important not to throw responsibilities and blame onto the parents, not to give boring and unclear lectures, not to pressure the parents and not to confuse them. Our

conclusion is that the intervention has to be careful not to blame, confuse and worry them and make simple and comfortable for the parents.

C). Parents need to be informed about the negative consequences of alcohol and trained in communication skills with their children.

Question7. A). Key persons, everyone felt the need that they must be shown some gratitude for what they do (certificate), and do give them a sense of responsibility.

B). Not to take up a lot of their free time, and not to put too much pressure on them. Also it should be considered not to give just information to them and not to be pessimistic and ignorant. Our conclusion is that the two main points to take into consideration are to keep the intervention program short and simple for the key persons.

C). Key persons must know that they have a lot of influence on youths and they are acting as an example and have the position of a role model for healthy lifestyle.

Question8. A). It was found that the retailers should respect the age limit and enforcing the law more strictly. Some also mentioned raising the price of alcohol and offering alternative non-alcoholic drinks. Also mentioned was that they must have a greater sense of moral responsibility. Our conclusion is that with information giving about the negative consequences of alcohol we may be able to increase the sense of moral responsibility and that we must inform them about the law and the legal consequences of selling to underage youths.

B). Not to throw blame on the retailers was found to be important, not to pressure them and not to make them lose out on business/ waste their time. Our conclusion is that the intervention should not negatively affect them in finance and time. It must preferably be done on a volunteer basis.

C). How to reach them was decided that the best method would be to point out to them their moral responsibility, to offer incentives and in the final case to remind of the strict punishments.

6. Final Conclusions

What has come out in the interview stage of the project is that time and clarity seem to be big issues that need to be considered in the future. The interventions should therefore not be time consuming and all instructions should be simple and clear. It was noticed during the interviews that some questions were misunderstood by the participants and some answers did not initially

match the questions. As reported in the participant feedback, they found the questionnaire quite long, with the questions being a bit monotonous and repeating the same format of question again for each group which the participants found tiring. Furthermore, it was difficult but successful to explain to the participants that this was completely anonymous and that we merely wanted to hear their views, opinions and advice on the subject and not for them to talk about if their children or they had alcohol problems, which a lot of parents in particular were worried about.

Referring to the key persons, it was interesting to see the difference in responses between the teacher and coach who work with a broad range of children and the social worker who works with children that are situated in problematic surroundings. We observed that the social worker had a more pessimistic view on what can be done by the retailers and in general asked for more active prevention (experiential workshops), whereas the rest of the key persons suggested information giving for example leaflets. Please note that these differences could be due to the social workers personal beliefs and not merely the profession itself.

Regarding the retailers, it seems that the retailers in big supermarkets (managers), expect their staff to take over the responsibility for asking for identification of the customer without them receiving the appropriate training (they seem to have a “should” mentality). Whereas the kiosk who was the fourth participants in the interviewing declares to feel more personal responsibility to whom she sells alcohol. We would like to leave the question open how far the differences in responses are attributable to gender differences (supermarket managers were all male but the kiosk owner was a woman).

On a more positive note, nearly all the participants revealed that they thought the project (after it was explained, after the interviews what will be done in the future), was an excellent idea, was refreshingly different (especially about the youth activities, and getting the key persons involved with prevention) and showed great interest in taking part in the future. Especially surprising was the reaction of the retailers, by which they were very supporting for the project and welcomed the prospect of training for their staff.