

Drugs, Alcohol and Violence

Alcohol and some drugs may have a causal link to perpetration of violence since they act as disinhibiting agents. These agents are likely to lead to violent behaviour. In addition, victims of violence may use drugs as coping mechanisms to deal with violence and abuse. Alcohol is associated with crime and violence, mental health problems like alcohol dependence and psychoses.¹

Extent of the problem

- Alcohol abuse, responsible for 3.5 per cent of the global burden of disease, leads to domestic violence and reduced productivity.²
- Drug use is accompanied by crime either to purchase the daily supply of drugs or before gang violence in street subcultures in South East Asian cities.³ Illegal trade of drugs and the legal (and growing) sales of liquor in general stores and shops in SEAR countries increase the risk of violence.⁴
- On the other hand, violence undermines health by increasing a variety of negative behaviours, such as smoking, alcohol and drug abuse among men, women and adolescents.
- Evidence suggests that women who live with heavy drinkers are at risk of partner violence.
- Men who have been drinking or are taking drugs tend to get violent and commit assault or sexual violence. Women who are under the influence of alcohol and drugs find it difficult to protect themselves by interpreting and effectively acting on warning signs of violence and abuse. Consuming alcohol may also place women in settings where their chances of encountering a potential offender are greater.⁵

Evidence from South-East Asia

Partner violence. Many studies find excessive alcohol use to be strongly associated with perpetrating partner violence. Sometimes heavy drinking causes men to be violent, and in some cases it is used to excuse violent behaviour.

- In a study of almost 5 000 drug abusers from 14 cities in India in 2000-2001, between 22 per cent (in Ahmedabad) and 45 per cent (in Delhi) said they had been physically assaulted.⁶
- Nearly 50 per cent of respondents in a study of violence against women in Nepal in 1997 thought alcohol abuse was a major cause of violence against women and girls.⁷



- An injury surveillance Report (by the Ministry of Public Health) on assaults in Thailand in 1998 found a high level of alcohol consumption among assault patients admitted to government hospitals.
- Violence increases long-term risk of a number of other health problems, including drug and alcohol abuse and depression. Persons abusing alcohol may have a range of depressive symptoms during intoxication and withdrawal from alcohol. A number of alcoholics commit suicide, especially when they suffer from depression.
- Abuse often erodes self-esteem of a person and increases the person's vulnerability to depression, suicide and alcohol and drug abuse.
- Victims of partner violence and women sexually abused in childhood are more likely than other women to abuse alcohol and drugs.
- Many chronic drinkers develop psychotic symptoms like hallucinations or delusions that result in behavioural problems leading to social and occupational impairment.

Professionals can help...

A bright and sociable 12-year old student became withdrawn and irritable. The student's school performance suffered over two years. The teacher noticed that the child's mother appeared at all the parent-teacher meetings and never the father. Enquiry revealed that the father was an alcoholic who frequently quarrelled with his family. When the parents were referred for counselling and the father sought treatment for alcohol abuse, the child's marks and temperament improved considerably.

(Source: an unpublished study by WHO)

Role of health sector

- Appropriate documentation of cases through tactful interviewing and careful examination are essential for all suspected cases of violence.
- In cases of domestic violence and sexual assault, health providers should be trained to assess the role of alcohol abuse in addition to environmental circumstances such as family and other problems, and to assess the risk of further incidents.
- Health care facilities should manage cases of drug and alcohol abuse in collaboration with other professionals.



1 World Health Organization. *Women of South-East Asia: a health profile*. New Delhi: WHO Regional Office for South-East Asia; 2000. Regional publication SEARO series no. 34.

2 Ibid.

3 World Health Organization. *Health situation in South-East Asia Region 1994-97*. New Delhi: WHO Regional Office for South-East Asia; 1999. Document No. SEA/HS/209.

4 Gopalan, Sarala and Shiva, Mira. *National profile on women, health and development: country profile – India*. New Delhi: Voluntary Health Association of India; 2000.

5 World Health Organization. *World report on violence and health*. Geneva; 2002.

6 Ministry of Social Justice and Empowerment. *Rapid assessment survey of drug abuse in India*. New Delhi: Government of India; 2000.

7 SAATHI. *A situational analysis of violence against women and girls in Nepal*. Katmandu: 1997.