

## Experiences and opinions of first-year students at a previously disadvantaged medical university in South Africa about alcohol consumption

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**Background:** The use of alcohol amongst first-year students in institutions of higher learning is problematic as it often leads to social and academic problems, for instance high dropout rates and high-risk sexual behaviour. Research on first-year students' opinions regarding their own use of alcohol at the University of Limpopo, Medunsa Campus, was seen as pertinent as this institution trains medical doctors, dentists and other health professionals. The findings could inform appropriate interventions by policy-makers at the institution. This paper presents the qualitative data nested from a larger study on alcohol use among first-year medical students.

**Methods:** A sample of 217 first-year students was obtained, to whom a questionnaire was administered which included open-ended questions formulated from discussions with a focus group of eight first-year students. The open-ended questions were formulated in a manner that allowed participants to give an account of their experience and opinions related to the drinking of alcohol. Thematic content analysis was used to analyse qualitative data.

**Results:** The participants comprised 90 (41.5%) females, 13 (6%) White, 196 (90.3%) Black, 4 (1.8%) Asian and 4 (1.8%) Coloured students. The study revealed substantive views relating to first-year students' opinions and experiences of alcohol consumption. Themes gleaned from the interpretation were awareness, physical location of the campus, economic opportunities, health considerations, identity, belief in alcohol use, and interventions.

**Conclusion:** The results indicate that first-year students have varying opinions and experiences concerning alcohol consumption at the University of Limpopo (Medunsa campus). Social identity and peer pressure are motivating factors in students' use of alcohol.

**Keywords:** alcohol use, first-year students, medical students, opinions and experiences

### Introduction

There seems to be consensus that the first year of university life is characterised by endless parties.<sup>1,2</sup> Amongst other things, these authors have noted that social gatherings are associated with substance abuse, which in turn is linked to risky sexual behaviour(s), which can result in pregnancy, HIV or other sexually transmitted infections. Globally the use of alcohol amongst student populations is high, and South Africa as a developing country is no exception.<sup>3</sup> The majority of studies on alcohol use amongst student populations use quantitative approaches, which do not document the self-reported personal experiences of students who drink.<sup>4</sup>

Higher education environments are important for preparing students academically, emotionally and socially for entrance into the world of work. Universities are geared more towards preparing students academically, than to helping them adjust socially.<sup>5</sup> As first-year university students are away from parental supervision, they often have a distorted sense of freedom and leisure time and are thus inclined to misuse alcohol.<sup>6</sup> It has been documented that excessive alcohol consumption, especially amongst first-year students, leads to negative educational outcomes such as high dropout rates.<sup>7</sup> This is because it impairs cognitive functions such as memory and attention span, which are fundamental to the learning process.<sup>8</sup> It is estimated that university students remember only up to 10% of what they learned following excessive alcohol consumption after lectures.<sup>9</sup> Interestingly, research in the United States of America (USA) has postulated

that students who are more religious and committed to their respective religious beliefs are much less likely to use alcohol and integrate better socially with their peers than their counterparts who drink.<sup>10</sup>

In the United Kingdom the majority of student populations report moderate to excessive drinking, with 52% of male and female students drinking alcohol excessively (14 units per week for women and 21 units per week for men).<sup>11</sup>

A study conducted in Kenya indicated that the prevalence rate of alcohol use by university students was 51.9%, and 97.6% of this group of students reported problems associated with alcohol use including unprotected sex and unplanned pregnancies.<sup>12</sup>

A survey conducted by the Department of Health (1998) in South Africa found that approximately 8.3 million South Africans from the age of 15 years upwards consume alcohol on a regular basis. In another investigation, using a sample of South African students, it was reported that 80% of participants drank large quantities of alcohol.<sup>13</sup> Furthermore, a study conducted at the University of Limpopo (Medunsa) campus found that 22% of students at the institution used alcohol in a manner that was physically harmful.<sup>14</sup>

This study aimed to explore the University of Limpopo, Medunsa campus first-year students' opinions and experiences regarding their use of alcohol.

## Methods

A cross-sectional survey design was used for the overall study. Students were recruited from the parent study that had a sample size of 972. A systematic random sampling of every fourth student from those willing to participate was carried out, the first participant having been decided upon by a throw of a dice. The final sample size was 217, and this sample size was maintained to ensure data saturation.

This study had two parts: the first used a standardised questionnaire, which gave a broad picture of alcohol consumption amongst the sample, and the second used a focus group to formulate questions that elicited students' experiences of alcohol consumption (Appendix 1). This component enabled the researchers to fill the gap between a purely quantitative and a qualitative study, which is consistent with triangulation of research methods.

The open-ended questions were derived from a focus-group encounter with a convenience sample of eight first-year students. Thematic content analysis was used to interpret the data from this section; first the researchers familiarised themselves with and engaged with the data, and then they deduced themes which arose from the data. Third, coding took place, which helped the researchers to categorise, describe and note implications arising out of the data. Fourth, an exhaustive engagement with the data occurred, out of which ideas were developed, and lastly the data were interpreted and checked for accuracy and relevance.<sup>15</sup> The questions posed were as follows: Do you think you drink too much alcohol, if so why?; Would you like to stop drinking alcohol, if so why?; If you do not drink alcohol, please state why? Would you like to say anything else?

To ensure trustworthiness of the findings the following measures were used: (a) triangulation of data from the quantitative survey was undertaken and an initial pilot study together with data from the focus-group interview; (b) the neutrality of the researchers was addressed through frequent meetings and discussion; (c) participants in the focus group were debriefed and read a transcript of their interview to ensure dependability of data; and (d) similar research was studied to ensure the data were credible. The researchers engaged in reflexivity and frequent debriefing sessions to discuss different approaches towards perceived flaws in the proposed course of action.

Ethical issues were adhered to throughout the investigation, and the study protocol was approved by the ethics committee of the University of Limpopo (Medunsa campus).

## Results and discussion

Amongst the participants there were 90 (41.5%) females, 13 (6%) White, 196 (90.3%) Black, 4 (1.8%) Asian and 4 (1.8%) Coloured students (see Table 1).

Despite the themes being presented as separate, independent constructs they are not mutually exclusive. The themes that emerged are: awareness, physical location of the campus, economic opportunities, health considerations, identity, belief in alcohol use, and interventions.

### Awareness

Responses from the majority of the respondents, both those who drink alcohol and those who do not, suggested that moderate and responsible consumption of alcohol is necessary if they want to maintain psychological and physical well-being. In answer to the open-ended questions the respondents stressed that as students registered in the health professions, they should be the ones teaching the general public about the importance of maintaining a healthy lifestyle without an emphasis on imbibing alcohol. As one participant noted:

'Alcohol is considered a drug for its addictive properties. It is not really recognised like other drugs because it is normally taken as a social drug. I think alcoholism is a serious issue because it's one of the reasons behind road accidents and violent actions. Drinking should be monitored more seriously on campus.'

Another participant stated:

'I think people who drink alcohol lack a better way of getting in contact with themselves (their emotions) and feel the need to run away from normal mental states into a euphoric state. I think that if contact with one's emotions was encouraged more within the community then people would not need alcohol much. People need to acknowledge that feelings are there to be felt, by letting yourself feel them you are in a way dealing with your mental state more and you will be able to find logical solutions to whatever that unsettles you; you do not need alcohol to run away from

**Table 1:** Demographic characteristics of the participants

Variable		n	%
Sex	Female	90	41.5
	Male	127	58.5
Age (years)	18–20	35	16.1
	21–25	102	47.0
	26+	80	36.9
Field of study	BSc (Diet)	7	3.2
	BSc (Physiotherapy)	6	2.8
	BCur (Nursing)	62	28.6
	Radiography	35	16.1
	Oral Hygiene	34	15.7
	B Occ Therapy	22	10.1
	Other	51	23.5
Population group	White	13	6.0
	Black	196	90.3
	Indian or Asian	44	1.8
	Coloured		1.8
Religious affiliation	Charismatic churches	82	36.8
	Roman Catholic	27	12.4
	Protestant churches	24	11.1
	Other	84	38.7

them. Religion also helps to see a different perspective in life, relieving you from dreadful emotions.'

This comment supports findings amongst college students in the USA<sup>10</sup> and may be typical of religious students generally. However, broader studies should be conducted to find out whether religion is a moderating factor amongst students generally in South Africa.

### **Physical location of the campus**

An important factor that emerged out of the participants' responses was the fact that the physical location of Medunsa campus makes it difficult for students to drink too much. One of the participants stated:

'Unlike other universities where there are an array of pubs and clubs to choose from, Medunsa has only a limited number of shops and taverns and there is nothing that inspires me to drink as the available taverns are not elegant. As a young individual, I believe that drinking should be enjoyed, and to be that way, the environment in which one drinks should be relaxing.'

This statement supports the view that the levels of drinking and binge drinking are significantly higher amongst tertiary students where there are greater numbers of outlets licensed to sell alcohol near campus.<sup>15</sup> Closely related to these views were opinions concerning the availability of other economic opportunities.

### **Economic opportunities for students**

Economic opportunities for students at former black universities in South Africa are few, as these institutions are located in areas that have limited resources. The maldistribution of wealth and income were major features of the previous apartheid era, and this will have ramifications for decades to come.<sup>17</sup> Several of the participants stated that they 'do not even think of drinking' because they come from poor backgrounds; therefore even though they would like to, they cannot afford alcohol as the money they have is for essential needs such as 'food or emergencies'. They also noted that it is difficult to 'get work' (part-time employment) near campus, so they cannot supplement their allowances.

### **Health considerations**

Alcohol is sometimes used by students to help them cope with their personal problems, as they feel they are able to express themselves more openly under its influence.<sup>16,17</sup> In this study participants felt that drinking in moderation was acceptable in helping them overcome specific problems, but excessive use of alcohol posed health risks. For instance, one participant noted:

'Drinking is causing lot of heartache in families. People are getting divorced because of alcohol abuse. People should drink responsibly.'

Other students showed frustrations and mixed feelings regarding alcohol use. These students indicated that alcohol use is 'a bad habit' and 'it is not good for health', and some indicated that 'alcohol does not taste good'. The following opinions, from different participants, support this statement:

'Alcohol is bad to those who abuse it, but drinking responsibly is the only way to get away from the consequences of alcohol.'

'Drinking alcohol is not bad but if only it is taken in responsibly. When people take in alcohol they should consider food, a proper meal while drinking for their immune system to be strong and not get weaker quickly.'

### **Identity**

The construct of identity reflects the adaptation of individuals to the socio-economic and cultural context in which they exist and by which they define themselves.<sup>18</sup> Young adults usually do not have a good sense of self and want to fit in with their peers. To achieve this they may behave in a manner that they usually do not think is acceptable. This causes cognitive dissonance where the individual's construct of his or her own identity does not match the pattern of their actual behaviour, causing them stress and anxiety.<sup>18,19</sup> Participants in this study are from disadvantaged backgrounds. Self-confidence and identity are related to poverty and lack of other resources, which have an effect on drinking patterns.<sup>14</sup> Many participants who admitted to the occasional use of alcohol indicated that peer pressure influenced their drinking:

'I did not consider myself as an alcoholic user before I came to Medunsa, but due to the fact that my roommate, who also happens to be my course mate, drinks occasionally, I have found myself sharing his drinks because I do not want to bore him.'

The following contradictory statement from one participant supports the notion of problems with self-identity:

'No, I hardly drink alcohol. I hate the taste and am very aware of its effects on the human body, particularly the brain. I don't want to endanger myself. However, when I do drink I drink one or two 500 ml bottles of spirits, just for recreational purposes.'

### **Beliefs concerning alcohol**

In total, 42% of those who responded to the open-ended questions indicated that they had stopped drinking because it was bad for their health and well-being. The following responses underpin this theme:

'No, I no longer drink alcohol, it makes me sick and I vomit.'

'No, because I have only had a taste of alcohol in my early teens but have never drunk a whole bottle or ever experienced drunkenness and now I do not drink alcohol at all.'

'No, I do not drink alcohol because my body produces alcohol for itself and if I drink alcohol I will increase the recommended amount in my body.'

### **Interventions to combat alcohol use**

Given the adverse effects of alcohol use, over a third of participants offered their views on interventions that they perceived are needed to limit alcohol use. Interventions were discussed under the following sub-themes: regulation, alcohol policies, and educating the youth, especially first-year tertiary students.

#### **Regulation of alcohol use**

Some of the participants thought that alcohol sale should be regulated more rigorously. Several stated that social amenities surrounding the campus should be advised to control who they sell alcohol to, implying that students should not be able to buy alcohol from these outlets. Some participants went further, arguing that the legal drinking age should be increased to 20 years. The following is one such response:

'Alcohol is very bad for our communities and our generations. There must be strict regulations on who drinks alcohol.'

#### **Policies**

Just under a quarter of participants expressed their concern over lack of government policies or interventions aimed at helping the

youth in South Africa to deal with alcohol use. One of the participants stated that:

'There should be a strictly applied rule governing alcohol drinking in South Africa. Alcohol regulation policy is needed because the under-18 rule is not applicable in most cases, and children/people lie about their age. Alcohol is not good at all, because it affects our lives and society. Drinking and driving is not good at all.'

### Education

Some 15% of those who gave advice on how to help first-year students deal with alcohol use suggested that comprehensive and integrated information should be made available on campus. To emphasise this point one of the participants commended the research, which was reflected in the following statement:

'It is an awesome research, because alcohol is the problem factor in our country and amongst youth. I believe that after the research you will do something to help those who drink and you will also have a better understanding as to why youth engage themselves in alcohol. Good luck in your research, may God Almighty bless you.'

The results from the questionnaires also indicate that the patterns of alcohol use are similar between males and females and those students who use excessive alcohol also report use of other recreational drugs and engage in casual sex while under the influence of alcohol.

### Limitations of the study

Only one campus was studied and the opinions and experiences may differ on other campuses. Our study was with first-year students only. Students in other years of study may differ in their opinions and experiences. A study that compares more institutions (such as a comparative study of alcohol drinking patterns amongst university students) has the potential to give a more holistic overview of the national picture.

### Conclusion

First-year health sciences students have diverse opinions regarding the use of alcohol at the University of Limpopo (Medunsa campus). Results suggest that the participants had many differing experiences and opinions concerning alcohol use. Similar patterns of opinions and experiences regarding alcohol use were observed among men and women. Students with a hazardous consumption pattern were more likely to report smoking, illicit drug use and being sexually active. The findings highlight the opinions and experiences of alcohol use and its effect on education among university students relative to the general population. This is in keeping with findings in international studies.<sup>20</sup>

As the sample are all registered in various fields related to the health professions, it is likely they understand the negative consequences of alcohol use better than the broad majority of students in South Africa. Issues related to the physical location of the campus mean that it offers few economic opportunities, meaning many cannot afford to purchase alcohol. Moreover the lack of appropriate social amenities such as bars and nightclubs discourages students from the recreational use of alcohol. Social identity and the influence of peer pressure, on the other hand, are likely to be motivating factors in some students' use of alcohol, while religion may be a moderating factor.

It is recommended that health education on the use of alcohol be made accessible on the University of Limpopo Medunsa campus,

to guide students on the use of alcohol and especially how to avoid harmful use of the substance.

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### Appendix 1:

#### Open-ended questions in the questionnaire

##### PART D — YOUR OPINIONS

INSTRUCTION: WE WOULD LIKE TO KNOW YOUR OPINIONS. PLEASE WRITE YOUR ANSWERS IN.

