

REVISTA IBERO-AMERICANA DE SAÚDE E ENVELHECIMENTO REVISTA IBERO-AMERICANA DE SALUD Y ENVEJECIMIENTO

ALCOHOL CONSUMPTION IN ADOLESCENCE: KNOWING TO INTERVENE

CONSUMO DE ÁLCOOL NA ADOLESCÊNCIA: CONHECER PARA INTERVIR

EL CONSUMO DE ALCOHOL EN LA ADOLESCENCIA: SABER INTERVENIR

Fernanda Louro – Care Unit in the Community of Redondo – Administração de Saúde do Alentejo, IP/ ACES Alentejo Central, Évora, Portugal.

ORCID: https://orcid.org/0000-0002-8159-4466

Ermelinda Caldeira – Nursing Department, University of Évora, Évora, Portugal. ORCID: https://orcid.org/0000-0003-1949-9262

Corresponding Author/Autor Correspondente:

Fernanda Louro - Unidade de Cuidados na Comunidade de Redondo, Redondo, Portugal. fernandalimalouro@gmail.com

Recebido/Received: 2022-06-16 Aceite/Accepted: 2022-08-02 Publicado/Published: 2022-08-29

DOI: http://dx.doi.org/10.24902/r.riase.2022.8(1).555.39-54

©Authors retain the copyright of their articles, granting RIASE 2022 the right of first publication under the CC BY-NC license, and authorizing reuse by third parties in accordance with the terms of this license.

©Os autores retêm o copyright sobre seus artigos, concedendo à RIASE 2022 o direito de primeira publicação sob a licença CC BY-NC, e autorizando reuso por terceiros conforme os termos dessa licença.

ABSTRACT

Objectives: To know the alcohol consumption behaviour of 7th grade students from a school in the district of Évora; identify their knowledge about alcohol, effects and consequences.

Methodology: Cross-sectional, descriptive study with a quantitative approach. Data collection through questionnaires: Characterization Questionnaire and Knowledge about Alcohol Questionnaire. Convenience sample, consisting of 34 adolescents. Descriptive analysis techniques were used to characterize the data.

Results: It was observed that 38.2% of the adolescents had already consumed alcoholic beverages. When they consumed alcohol for the first time, most of them (53.8%) reported being accompanied by parents or other relatives and 46.2% in the company of friends/colleagues. Regarding knowledge about alcohol, an average of 26 correct answers per student was observed, which represents a Satisfactory level of knowledge, but with a deficit of knowledge about the consumption/abuse of alcohol, effects, and potential consequences. There was also a facilitating attitude of parents/family towards experimenting with alcoholic beverages.

Conclusion: The data suggest different factors related to alcohol consumption in adolescence. Health Promotion, carried out through Health Education programs, should provide adolescents with knowledge that will allow them to make informed and conscious decisions in the future, to promote a healthier life. Preventive programs should involve the entire educational community, with a particular focus on parents, in order to raise their awareness about the influence their behaviours have on their children.

Descriptors: Adolescent; Alcohol; Community Health Nursing; Prevention.

RESUMO

Objetivos: Conhecer o comportamento do consumo de álcool dos estudantes do 7.ºAno de uma Escola Básica e Secundária do Distrito de Évora; identificar os conhecimentos acerca do álcool, seus efeitos e suas consequências.

Metodologia: Estudo transversal, descritivo, de abordagem quantitativa. Recolha de dados através de questionários: Questionário de Caracterização e Questionário de Conhecimentos acerca do Álcool. Amostra por conveniência, constituída por 34 adolescentes. Foram utilizadas técnicas de análise descritiva para caracterizar os dados.

Resultados: Observou-se que 38,2% dos adolescentes já consumiram bebidas alcoólicas.

Quando consumiram pela primeira vez, a maioria (53,8%) refere que estava acompanhada pelos pais ou outros familiares e 46,2% na companhia de amigos/colegas. No que se refere aos conhecimentos acerca do álcool, observou-se uma média de 26 respostas corretas por aluno, o que representa um nível suficiente de conhecimentos, no entanto com um défice de conhecimentos sobre o consumo/abuso de álcool, efeitos e potenciais consequências. Constatou-se ainda uma atitude facilitadora dos pais/família face à experimentação de bebidas alcoólicas.

Conclusão: Os dados sugerem diferentes fatores relacionados ao consumo de álcool na adolescência. A Promoção da Saúde, realizada através de programas de Educação para a Saúde, deve dotar os adolescentes de conhecimentos que lhes permitam no futuro tomar decisões informadas e conscientes, no sentido de promover uma vida mais saudável. Os programas preventivos devem envolver toda a comunidade educativa, com uma perspetiva particular nos pais, no sentido da sua consciencialização sobre a influência que os seus comportamentos têm nos filhos.

Descritores: Adolescente; Álcool; Enfermagem de Saúde Comunitária; Prevenção.

RESUMEN

Objetivos: Conocer el comportamiento de consumo de alcohol de los alumnos de 7.º curso de una escuela del Distrito de Évora; iIdentificar sus conocimientos sobre el alcohol, efectos y consecuencias.

Metodología: Estudio transversal y descriptivo con un enfoque cuantitativo. Los datos se recogieron mediante cuestionarios: Cuestionario de caracterización y Cuestionario de conocimientos sobre el alcohol. Muestra de conveniencia, compuesta por 34 adolescentes. Se utilizaron técnicas de análisis descriptivo para caracterizar los datos.

Resultados: Se observó que el 38,2% de los adolescentes ya habían consumido bebidas alcohólicas. Cuando consumieron alcohol por primera vez, la mayoría de ellos (53,8%) declararon estar acompañados por los padres u otros familiares y el 46,2% en compañía de amigos/compañeros. En cuanto a los conocimientos sobre el alcohol, se encontró una media de 26 respuestas correctas por alumno, lo que representa un nivel de conocimiento Satisfactorio, pero con un déficit de conocimientos sobre el consumo/abuso de alcohol, sus efectos y sus posibles consecuencias. También se encontró una actitud facilitadora de los padres/familiares hacia la experimentación de bebidas alcohólicas.

Conclusión: Los datos sugieren diferentes factores relacionados con el consumo de alcohol en la adolescencia. La promoción de la salud, llevada a cabo a través de programas de Educación para la Salud, debe proporcionar a los adolescentes conocimientos que les per-

mitan tomar decisiones informadas y conscientes en el futuro, con el fin de promover una vida más saludable. Los programas preventivos deben implicar a toda la comunidad educativa, con especial atención a los padres, para concienciarlos sobre la influencia que sus comportamientos tienen en sus hijos.

Descriptores: Adolescente; Alcohol; Enfermería de Salud Comunitaria; Prevención.

INTRODUCTION

Adolescence is between 10 and 19 years and corresponds to the transition period between childhood and adulthood. It is marked by rapid growth and development at the physical, mental, emotional, sexual and social levels. At this stage, adolescents become independent, establish new relationships, develop social skills and learn behaviors that last for the rest of their lives. There are many challenges that adolescents face in the expectation of responding to the demands of society, often leading them to be exposed to situations that may compromise their health⁽¹⁾.

One of the most common risk behaviors in adolescence is the consumption of alcohol, the psychoactive substance most consumed by young people in Portugal, being made available in leisure spaces and recreational contexts frequented by them. The consumption of alcohol associated with an occasion, such as parties at evenings, creates a pattern of high-risk consumption, characterized by large quantities in a short period of time^(2,3). It is also related to other risk behaviors that include tobacco consumption, other drugs, risky sexual behaviors, suicidal ideation, violence and accidents, the latter two being the causes that contribute, considerably, for the mortality rate of this age group⁽⁴⁾.

Despite the legislation establishing the regime of availability, sale and consumption of alcoholic beverages in places open to the public, prohibited to children underage, we have a very permissive society regarding alcohol consumption⁽⁵⁾. "The social tolerance granted to alcohol consumption and the scarce perception of the risk associated with this intake have been the factors that have contributed to the generalization of consumption among adolescents and young people (…)"⁽⁶⁾.

According to the Global Status Report on Alcohol and Health 2018, Europe has the highest per capita consumption in the world and more than 3 million people died from harmful alcohol use in 2016. It is also estimated that there are 2.3 billion consumers and that global consumption will increase in the next 10 years⁽⁷⁾. Portugal occupies the 8th position of the largest consumers in the region of Europe, also emerging as one of the ten countries

with the highest consumption of alcohol per capita in the world. At the national level, alcohol consumption represents the 5th risk factor that most contributes to the reduction of the total number of years of healthy living and it is estimated that there are over half a million chronic alcoholics. According to recent statistics, an average of 20 people die each day from alcohol-related problems^(8,9).

In recent years, there have also been several studies on this issue related to adolescence. According to the Global Status Report on Alcohol and Health 2018, worldwide, more than a quarter of young people (27%) between the ages of 15 and 19 are consumers⁽⁷⁾. Based on the survey of young people on National Defense Day in 2017, by the Intervention Service on Addictive Behaviors and Addictions (SICAD), 19% of young people experienced problems associated with alcohol consumption, The main ones were the situations of emotional malaise (11%) and sexual relations without condom (7%), being possible to verify a correlation between alcohol consumption and the increased risk of contracting Sexually Transmitted Infections as is the case of HIV/AIDS, which was considered the fourth most frequent cause of death in Europe in 2017^(10,11).

According to the World Health Organization, studies conducted at schools show that, in many countries, alcohol consumption begins before age 15, with little significant differences between boys and girls⁽⁹⁾. In Portugal, the beginning of the consumption of alcoholic beverages appears mainly between 13 and 15 years old, below the legal minimum age, and is considered by young people as a natural and expectable experience, which becomes a concern within the school community⁽¹²⁾. According to the study Health Behavior in School-Aged Children (HBSC/WHO), conducted in Portugal in 2018 and involving primary and secondary schools throughout the country, totaling 6997 young people, with an average age of 13.73 years, concerning the frequency of alcohol consumption, concluded that 20.7% of adolescents have consumed 20 days or more of alcohol throughout their lives⁽¹³⁾.

The consequences related to alcohol consumption and abuse assume large proportions at the individual, family and social level and, when associated with early ages such as adolescence, the impact is greater. Due to the immaturity of the biological system of adolescents, alcohol abuse can lead to brain damage and neurocognitive deficits that will negatively influence intellectual development and health. All these factors, associated with the high prevalence of consumption behavior, make it a current public health problem^(3,14).

Health education as a health promotion strategy in a school context is a process that enables individuals and the community to train and increase their skills, aiming at the control and autonomy over their health, in order to improve it^(2,15). The ability of young peo-

ple to stop drinking alcohol is closely linked to the fact that they have knowledge and accept as true the consequences caused by this harmful habit⁽¹⁴⁾.

The vulnerability of adolescents associated with the problem of alcohol consumption and the lack of studies and publications of the context make this study relevant, in order to know the behavior of alcohol consumption and identify the knowledge about alcohol, effects and consequences of students from the 7th grade of a school in the Évora District, allowing the development of specific and targeted strategies, aiming at prevention of alcohol consumption in adolescence and, consequently, obtaining health gains.

This study is part of the project "Know Global Act Local" – Project of Diagnostic Evaluation and Intervention in the scope of risk behaviors and consumption of psychoactive substances, result of a partnership between the University of Évora (UE), the Regional Health Administration of the Alentejo Region (ARSA) and the General Directorate of Educational Establishments – Department of Services of the Alentejo Region (DGEstE – DSRA)⁽¹⁶⁾.

METHODOLOGY

Cross-sectional, descriptive, quantitative study. Convenience sampling, consisting of students from the 7th grade of a public school EB2,3+Secondary of the Évora District, totaling 34 students, who met the following inclusion criteria: agree to participate in the study, timely delivery of the Informed Consent Form; be present at the time of data collection. The collection took place on June 3, 2019, in a classroom context.

After carrying out bibliographic research, taking into account the target population and the purpose of the study, the questionnaire was selected as a data collection instrument, which was followed by the proper request for authorization. Two questionnaires were applied: (i) Characterization Questionnaire⁽¹⁷⁾, consisting of three parts. The first, concerning sociodemographic and school features, had three questions excluded and one changed, in order to ensure participants' anonymity. The second contained questions about the consumption of alcoholic beverages and, the third, questions about the perception of alcohol consumption by peers; (ii) Alcohol Knowledge Assessment Questionnaire (QCaA)⁽¹⁷⁾, which addresses general issues related to alcohol and its consumption. The questionnaire consists of 40 statements about the dichotomous format alcohol (True/ False) and allows evaluating the pre-existing knowledge of students about the subject. Of the 40 statements that make up the questionnaire, 21 are true statements (1, 2, 3, 7, 8, 10, 12, 13, 17, 19, 21, 25,

26, 27, 30, 33, 35, 37, 38, 39 and 40) and the remaining 19 are considered false (4, 5, 6, 9, 11, 14, 15, 16, 18, 20, 22, 23, 24, 28, 32, and 34). Data analysis will consider a score from 0 to 40 points, assigning 1 point to each correct answer and 0 to each mistake. The total correct answers assign the final score of the questionnaire⁽¹⁷⁾.

All ethical procedures (informed consent, confidentiality and anonymity) were followed, according to the Helsinki Declaration of Ethics in research involving human beings and obtained the favorable opinion of the Ethics Committee of the Polytechnic Institute of Portalegre, the Direction of the School Grouping and the Institution/Functional Unit where the study takes place. The informed decision of the parents/guardians was also respected, in which they were informed about the objectives of the study, its confidential and anonymous character and their voluntary participation, after requesting the proper authorization to complete the instruments of data collection by their students, by signing the Informed Consent Form.

After applying the questionnaires, the data were analyzed using the Statistical Package for the Social Sciences (SPSS) program, version 24 and descriptive analysis techniques were used to characterize the data.

RESULTS

Of the 34 students included in the sample, 58.8% are female and 41.2%, male, aged between 11 and 16 years old, with the majority (61.5%) between 13-14 years, 30.8% between 11-12 years and 7.7% between 15-16 years old. Regarding family typology, 44% of respondents live with parents and siblings, followed by 20.6% who live only with parents and, in some specific cases, cohabit with father or mother and/or siblings, grandparents and uncles. Of the respondents, 70.6% had never failed and 38.2% are classified as Good, in relation to school results, a value almost similar to those classified with a level of Satisfied (35.3%) (Table 17).

When analyzing alcohol consumption, 38.2% (n = 13) answered that they had already drunk alcoholic beverages (Figure 1^{7}).

Of the students who had already drunk alcoholic beverages, 8 (61.5%) answered that they do it rarely, 3 (23.1%) from occasionally and 2 (15.4%) never.

Considering the students who answered they had already consumed alcohol, 6 (46.2%) are male and 7 (53.8%), female. We found that when they ingested alcohol for the first time, 7 (53.8%) of the adolescents were with their parents or other family members and 6 (46.2%), with friends/colleagues. As for the context, 5 (38.5%) of the students drank alcohol for the first time at home, along with 5 (38.5%), who say it was at the bar, the rest mentions at the coffee and the restaurant. For 11 (84.6%) students, the occasion was festive.

Regarding the perception of the students surveyed, regarding the frequency with which the peers drink alcoholic beverages, 38.2% refers from occasionally and 29.4%, rarely. Concerning the number of alcoholic beverages that couples drink at the same time, 38.2% perceive that they drink one drink and 23.5% more than four drinks. Of the students who have consumed alcohol, 15.4% claim to have already been drunk once.

In relation to the issues in which the types of beverages (beer, wine, distilled drinks and other beverages such as champagne) and the frequency with which they are ingested are correlated by students who have already drunk alcoholic beverages, the beverages consumed with some frequency are: other beverages such as champagne, by 12 (92.3%) students, followed by distilled drinks, by 6 (46.2%), beer by 5 (30.8%), and wine by 4 (38.5%) students (Table 2^n).

Regarding the analysis of the data obtained in the application of the Questionnaire of Knowledge about alcohol, there was an average of 26 correct answers per student, which is equivalent to 65% of the valid answers. According to the normative order No. 24-A/2012, No. 236 of December 6, 2012⁽¹⁸⁾, we can affirm that, in a quantitative scale, the students' level of knowledge is equivalent to 3, which corresponds, in a qualitative scale, to Sufficient. As for the students' level of knowledge, 5.9% have Insufficient level, 35.3%, Sufficient, and 58.8%, Good.

Despite these results, a high percentage of students (over 50%) answered incorrectly 8 of the 40 items, which fall into questions related to the constitution of alcoholic beverages, the metabolization of alcohol by the body, its action and consequences in the body, as well as the presence of erroneous ideas related to alcohol.

Of the students surveyed, 97% are unaware that alcohol from alcoholic beverages is ethyl alcohol or how it is metabolized, judging that it is in the stomach along with food (58.8%) and 61.7% are unaware that alcohol prefers areas of the body with higher water constitution, such as the brain. In questions about the effects of alcohol, 70.5% ignore that they differ according to sex and 55.8% that the effects depend on age; 55.8% also believe that drinking in moderation is when a healthy adult drinks without getting dizzy or sick.

DISCUSSION

Alcohol consumption in adolescence is a reality and a concern due to its consequences on the adolescents' health. Through data analysis, regarding the behavior of alcohol consumption by the adolescents surveyed, we found that 38.2% had already consumed alcoholic beverages, similar to the results of many studies developed in the school context of several countries, including Portugal, where alcohol consumption begins between 13 and 15 years of age, and is considered by young people as a natural and expectable experience^(7,12).

In the Alentejo region, in the academic year 2014/2015, the study of the University of Évora on the consumption of additive substances by adolescents, encompassed in the project "Know Global, Act Local" (16), in which 3141 students from the 7th and 9th grades participated, found that 30.8% of young people reported consuming alcoholic beverages; however, 90.5% mentioned having never been drunk. They started consumption with family members (50%) or friends (49.7%). We can see that these results are in line with those of the present study, in which, of the young people who had already consumed alcoholic beverages (38.2%), 84.6% reported that they had never been drunk. Similarly, the majority of our sample (53.8%) consumed for the first time with parents/relatives and 46.2% with friends/acquaintances.

Also included in the project "Know Global, Act Local" (19), in the 2018/2019 school year, the study had the participation of 66 young people, from the Primary and Secondary School where the current study was carried out, born between 2001 and 2006, attending the 7th and 9th grades. The data reveal that 37.9% of these young people had consumed alcoholic beverages at least once in their lives, the age of onset was mostly between 13 years (19.37%) and 14 years (10, 61%), which coincides with the majority of the sample of our study. Other data from the study reveal that 4.55% of this sample admits having ingested five or more beverages in a row on at least one occasion in the last 30 days and 10.61% admit having been drunk once or twice in life. The young people who reported having started drinking with family members were 10.61% and those who admit having started with friends correspond to 28.79%. Of these young people, 19.70% consider there to be a low risk of harming themselves physically or otherwise if they consume 1 to 2 alcoholic beverages every day, and a moderate risk if they consume 4-5 drinks every day (21.21%). As for the difficulty to access alcoholic beverages in their locality, this varies according to the type of beverage, with 31.82% considering easy to access beer and 28.79%, distilled beverages. When compared to the results of our study, we found a coincidence in the percentage of young people who reported having already consumed alcoholic beverages, which is very considerable given that it covers our target population.

According to the published scientific literature on the subject, alcohol consumption increases proportionally with age, as observed in a 2015 study on Alcohol, Tobacco and Drug Consumption and other Addictive Behaviors (ECATD-CAD)⁽²⁰⁾, promoted by SICAD/Ministry of Health/Directorate General of Education/Ministry of Education, which had a sample of 18,000 students from Basic and Secondary Education, from where we can derive results, such as: prevalence of alcohol consumption throughout life increased proportionally to age, with 30.7% (13 years), 48.1% (14 years), 65.1% (15 years), 76.9% (16 years), 87.1% (17 years) and 91.1% (18 years), the prevalence of consumption in the last 12 months also recorded an increasing evolution, which varied between 20% (13 years) and 86% (18 years), and consumption in the last 30 days, with the same trend and values between 9% (13 years) and 67% (18 years).

Still referring to the consumption of alcoholic beverages among adolescents in Portugal, the study Health Behavior in School-Aged Children (HBSC/WHO) in 2018, which involved schools across the country, totaling 6997 young people with an average age of 13.73 years, regarding the frequency of alcohol consumption, concluded that 20.7% of adolescents have consumed alcoholic beverages 20 days or more throughout their life⁽¹³⁾, which is compatible with the data obtained regarding the frequency of consumption of different alcoholic beverages, varying from occasionally to rarely according to the type of drink.

Relevant data from the analysis of the results of our study show that 15.4% of the students have already drunk at least once, for 84.6%, the occasion of the first consumption was festive and for the majority of our sample (53.8%), the first consumption occurred with the parents/relatives, the remaining 46.2% have done so with friends/acquaintances. Regarding the consumption perceived by peers, only 8.8% reported that they never consume.

Regarding the places where the first consumption occurred, we found that the family home and the bar arise equally, with 38.5% of answers given.

Concerning knowledge, there was a lack of knowledge about alcohol, its effects and consequences of alcohol in the body. As more than half of the sample answered incorrectly the questions related to the constitution of alcoholic beverages, the metabolization of alcohol by the body, its action and consequences in the body, it also revealed the presence of erroneous ideas related to alcohol.

Some authors highlight the importance of knowledge about alcohol by adolescents, stating that "the lack of knowledge about the effects of alcohol and its consumption during adolescence is worrying since it can translate into harmful consequences on the development and performance of the adolescent, in particular due to the decrease of risk percep-

tion, an important risk factor for the consumption of alcoholic beverages"⁽³⁾. They also relate the ability of young people to stop the consumption of alcoholic beverages with the fact that they have knowledge and accept as true the consequences caused by this harmful habit⁽¹⁴⁾.

CONCLUSION

This study allowed knowing the behavior regarding alcohol consumption of 7th grade adolescents from a school in the Évora District and identifying their knowledge about alcohol, effects and consequences.

There was a considerable incidence of adolescents who already consumed alcohol (38.2%), which reveals the early experimentation of alcohol at this stage of life.

In addition to the early experimentation of alcoholic beverages, it was also possible to identify other problems such as: Parents/Family facilitating attitude towards alcohol consumption and unawareness of alcohol consumption/abuse and potential consequences.

Alcohol is the most consumed psychoactive substance in most countries and the most consumed by young people in Portugal, thus being considered the drug of choice among adolescents, at very early ages below 15 years. Although the current legislation prohibits the sale of alcohol to children under 18⁽⁵⁾, its availability in leisure and entertainment spaces is common, without any control of the situation. The permissiveness of society and the family concerning alcohol consumption, in addition to revealing the lack of perception of the risks associated with it, has contributed to the adoption of this behavior among adolescents⁽⁶⁾. Also certain characteristics inherent to this phase of life, such as curiosity, the need to be accepted by peers and the desire to experience new situations, sometimes leads adolescents to adopt risky behaviors. The family context, the group of friends, the school and the rest of the community are also very significant influences during the adolescence phase, and may become protective or triggering factors for the adoption of certain behaviors, such as alcohol consumption.

Adolescents who consume alcohol abusively are more likely to engage in other risky behaviors, such as the consumption of other substances and risky sexual behaviors, and are more exposed to situations of violence and accidents. In addition to these situations, it also increases the likelihood of developing a pattern of abusive alcohol intake and the risk of developing mental illnesses^(21,22).

Although alcohol consumption in adolescence is a subject that has deserved much attention, through the development of research studies, programs, projects and interventions at various levels, remains a problem of urgent action. The high incidence worldwide and the alcohol consumption influence on physical, mental and social health of adolescents that can affect their development permanently make this a current public health problem.

The Nurse Specialist in Community and Public Health Nursing has in-depth training in the area of Community and Public Health, being essential their recognition of the utmost importance of community intervention, adopting a proactive attitude to assess the most varied health problems as well as to make decisions about them. Community intervention, particularly in intervention programs and projects, aims to empower individuals and communities in order to achieve collective health and promote the exercise of citizenship⁽²³⁾.

The school, as a space where adolescents stay much of the time and as an organization committed to developing the acquisition of personal, cognitive and socioemotional competences, becomes a privileged place of community intervention, through the implementation of Health Education and Promotion actions that involve adolescents, with a view to acquiring knowledge that promotes the adoption of healthy lifestyles and the prevention of harmful behaviors. Intervening in the school environment also allows the involvement of the rest of the educational community, such as parents/guardians, teachers and other agents, which is essential for an effective Health Promotion⁽²⁾.

Authors' contributions

FL: Design and coordination of the study, data collection, storage and analysis, review and discussion of results.

EC: Design and coordination of the study, analysis of data, review and discussion of results.

All authors read and agreed with the published version of the manuscript.

Ethical Disclosures

Conflicts of Interest: The authors have no conflicts of interest to declare.

Financial Support: This work has not received any contribution, grant or scholarship.

Provenance and Peer Review: Not commissioned; externally peer reviewed.

Responsabilidades Éticas

Conflitos de Interesse: Os autores declararam não possuir conflitos de interesse.

Suporte Financeiro: O presente trabalho não foi suportado por nenhum subsídio ou bolsa.

Proveniência e Revisão por Pares: Não comissionado; revisão externa por pares.

REFERENCES

- 1. World Health Organization. Coming of age: adolescent health. Geneva: World Health Organization; 2019. [accessed 2021 Dec]. Available from: https://www.who.int/health-topics/adolescents/coming-of-age-adolescent-health
- 2. Direção geral da Educação/ Direção Geral da Saúde. Referencial de Educação para a Saúde. DGE/DGS; 2017. [accessed 2019 Dec]. Available from: http://www.dge.mec.pt/sites/default/files/Esaude/referencial_educacao_saude_novo.pdf
- 3. Barroso, T. Parar para Pensar-Intervenção em contexto escolar para prevenção do uso e abuso do álcool. 1.ed. Loures: Lusociência; 2012.
- 4. Direção Geral da Saúde. Abordagem da Intoxicação Alcoólica Aguda em Adolescentes e Jovens. Norma n.º 035/2012 de 30/12/2012 atualizada a 17/07/2017. Lisboa: DGS; 2012. [accessed 2019 Dec]. Available from: https://www.dgs.pt/directrizes-da-dgs/normas-e-circulares-normativas/norma-n-0352012-de-30122012.aspx
- 5. Diário da República Eletrónico n.º 115/2015, Série I de 2015-06-16. Decreto-Lei n.º 106/2015. Lisboa: 2015. [accessed 2019 Dec]. Available from: https://data.dre.pt/eli/dec-lei/106/2015/06/16/p/dre/pt/html
- 6. Cabral, L. Alcoolismo juvenil. Revista Millenium 30, 172-188. Viseu: 2004. [accessed 2019 Dec]. Available from: http://repositorio.ipv.pt/handle/10400.19/557
- 7. World Health Organization. Global Status Report on Alcohol and Health. Geneva: World Health Organization; 2018. [accessed 2019 Nov]. Available from: https://www.who.int/substance_abuse/publications/global_alcohol_report/en/
- 8. Direção Geral da Saúde. A Saúde dos Portugueses. Perspetiva 2015. Lisboa: DGS; 2015. [accessed 2019 Nov]. Available from: https://www.dgs.pt/estatisticas-de-saude/estatisticas-de-saude/publicacoes/a-saude-dos-portugueses-perspetiva-2015.aspx
- 9. Serviço de Intervenção nos Comportamentos Aditivos e nas Dependências. Lisboa: SICAD; 2019. [accessed 2021 Jan]. Available from: http://www.sicad.pt/PT/Cidadao/Subs tanciasPsicoativas/Paginas/detalhe.aspx?itemId=1

- 10. Serviço de Intervenção nos Comportamentos Aditivos e nas Dependências. Comportamentos Aditivos aos 18 anos: Inquérito aos jovens participantes no Dia da Defesa Nacional 2017, 1-2. Lisboa: SICAD; 2017. [accessed 2019 Dec]. Available from: http://www.sicad.pt/PT/EstatisticaInvestigacao/EstudosConcluidos/Documents/DDN_20 17 RelatorioNacional.pdf
- 11. Instituto Nacional de Estatística. Boletim Mensal de Estatística Fevereiro 2019. Portugal: INE; 2019. [accessed 2021 Feb]. Available from: https://www.ine.pt/xportal/xmain?xpid=INE&xpgid=ine_publicacoes&PUBLICACOESpub_boui=290269273&PUBLICACOESmodo=2&selTab=tab0
- 12. Serviço de Intervenção nos Comportamentos Aditivos e nas Dependências. Os Jovens, o Álcool e a Lei: Consumos, atitudes e legislação. Lisboa: SICAD; 2014. [accessed 2019 Dec]. Available from: http://www.sicad.pt/BK/EstatisticaInvestigacao/EstudosConcluidos/Documents/2015/Os_Jovens_Alcool_Lei_Consumos_Atitudes.pdf
- 13. Matos, M., & Equipa Aventura Social. A saúde dos adolescentes portugueses após a recessão Dados Nacionais do Estudo HBSC 2018. 1.ª Edição. Lisboa: Equipa Aventura Social Faculdade de Motricidade Humana/Universidade de Lisboa; 2018. [accessed 2019 Dec]. Available from: http://aventurasocial.com/publicacoes/publicacao_1545534554.pdf
- 14. Moutinho, L. Consumo de Álcool: da experimentação precoce ao consumo de risco. Tese de Doutoramento em Enfermagem. Lisboa: Universidade de Lisboa; 2018. [accessed 2019 Nov]. Available from: http://repositorio.ul.pt/bitstream/10451/34563/1/ulsd731978 _td_Lidia_Moutinho.pdf
- 15. Direção Geral da Saúde. Carta de Ottawa para a Promoção Da Saúde. 1.ª Conferência Internacional sobre Promoção da Saúde. Ottawa, Canadá. 1986. [accessed 2019 Oct]. Available from: https://www.dgs.pt > documentos-e-publicacoes > carta-de-otawa-pdf1
- 16. Lopes. M. J., Caldeira, E., Murteira, M.M., Leão, R., Jesus, P. Conhecer Global, Atuar Local. In L. P. Nico & B. Nico, Aprenderes do Alentejo, 47-52. Santo Tirso: De Facto Editores; 2018.
- 17. Barroso, T., Mendes, A. & Barbosa, A. Prevenção do Uso/Abuso de Álcool nos Adolescentes: Construção e Avaliação de um Programa de Intervenção em Contexto Escolar. (Tese de Doutoramento em Enfermagem). Lisboa: Universidade de Lisboa; 2009.
- 18. Diário da República Eletrónico n.º 236/2012, 2.º Suplemento, Série II de 2012-12-06. Despacho Normativo n.º 24-A/2012 de 6 de dezembro. Lisboa: 2012. [accessed 2019 Oct]. Available from: https://dre.pt/web/guest/pesquisa/-/search/1847070/details/maximizedjp =true

- 19. Lopes, M. J., Caldeira, E., Murteira, M.M., Leão, R., Jesus, P., & Cota, B. Conhecer Global Atuar Local 2018/2019; Resultados 2018/2019, 43-81. Évora; 2018.
- 20. Serviço de Intervenção nos Comportamentos Aditivos e nas Dependências. Relatório Anual, 2015 A Situação do País em Matéria de Álcool. Lisboa: SICAD; 2016. [accessed 2019 Sep]. Available from: http://www.sicad.pt/PT/Publicacoes/Documents/Relat%C3%B 3rio%20Anual%20%C3%81lcool%20%202015.pdf
- 21. Valim, G., Simionato, P., & Gascon, M. O consumo de álcool na adolescência: uma revisão literária. Adolescência e Saúde, 2017;14(4);184. Rio de Janeiro; 2017. [accessed 2019 Dec]. Available from: http://www.adolescenciaesaude.com/detalhe_artigo.asp?id=698
- 22. Barreto, M. R., Juárez-Acosta, F., & Cuartas-Arias, M. Funciones ejecutivas y antecedentes familiares de alcoholismo en adolescentes. Pensamiento. Psicológico, 2018; 16(1),57-68. Bogotá, Colômbia; 2017. [accessed 2019 Dec]. Available from: https://doi.org/10.11144/javerianacali.ppsi16-1.feaf
- 23. Ordem dos Enfermeiros. Regulamento n.º 428/2018 de 16 de julho de 2018. Regulamento de Competências Específicas do Enfermeiro Especialista em Enfermagem Comunitária na área de Enfermagem de Saúde Comunitária e de Saúde Pública e na área de Enfermagem de Saúde Familiar. Diário da República, 2.ª série N.º 135, 19354-19359. [accessed 2019 Dec]. Available from: https://www.ordemenfermeiros.pt/media/8731/com unit%C3%A1ria-e-desa%C3%BAde-p%C3%BAblica.pdf

Table 1 – Sociodemographic Characterization of the Sample (n = 34).

Variables	Numerical Frequency (n)	Percentage Frequency (%)
Gender (n = 34)		
Male	14	41.2%
Female	20	58.8%
Lives with (n = 34)		
Both Parents and siblings	15	44.1%
Parents	7	20.6%
Father or mother with or without siblings	8	23.5%
Other situation	4	11.8%
School failure (n = 34)		
Yes	10	29.4%
No	24	70.6%
Level of Classification as student (self-evaluation) (n = 34)		
Good	13	38.2%
Satisfied	12	35.3%
Other classifications	9	26.5%

Have you ever drunk alcoholic beverages?

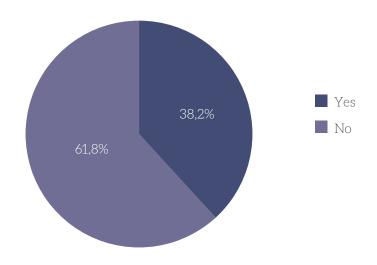


Figure 1 – Consumption of alcoholic beverages (n = 34). $^{\kappa}$

Table 2 – Characterization of the Consumption of Alcoholic Beverages. $^{\kappa}$

Variables	Numerical Frequency (n)	Percentage Frequency (%)
Have you ever drunk alcoholic beverages? (n = 13)		
Male	6	46.2%
Female		53.8%
Who were you with at the first time? (n = 13)	/	33.076
Parents/Other relatives	7	53.8%
Friends/acquaintances	6	46.2%
Where were you at the first? (n = 13)	0	40.270
Home	5	38.5%
Bar	<u>5</u>	38.5%
Other place	3	23%
The Occasion when you drank for the 1st time was festive (n = 13)	<u> </u>	23/0
Yes	11	0140/
res No	2	84.6% 15.4%
How many times do your peers drink? (n = 34)	<u> </u>	13.4%
	0	F 00/
Every day	3	5.9%
Every week	3	8.8%
Every month		8.8%
Occasionally	13	38.2%
Rarely	10	29.4%
Never	3	8.8%
How many alcoholic beverages do you drink at the same		
occasion? (n = 34)	4.0	00.00/
One	13	38.2%
Two	6	17.6%
Three	4	11.8%
Four	3	8.8%
Over four beverages	8	23.5%
Have you ever been drunk? (n = 13)	4.4	0.4.404
No, never	11	84.6%
Yes, once	2	15.4%
In relation to the different alcoholic beverages, how many		
times do you drink (n = 13)		
Beer		
Occasionally	1	7.7%
Rarely	4	30.8%
Wine	_	
Occasionally	0	0%
Rarely	4	30.8%
Distilled Beverages		
Occasionally	1	7.7%
Rarely	5	38.5%
Other beverages, like Champagne		
Occasionally	4	30.8%
Rarely	8	61.5%