

ALCOHOLISM AND MENTAL WELLNESS AMONG YOUTHS IN OYO METROPOLIS: IMPLICATIONS FOR COUNSELING

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Abstract

Alcohol consumption has been associated with mental health all over the world. Poor mental health especially during adolescence no doubt has significant negative impact on their educational achievement as well as their behavior. In Nigeria today, alcohol consumption has contributed immensely towards increase in road accidents and Juvenile crimes. Many youths indulge in taking alcohol in order to belong or feel comfortable among their peers. Some take solace in alcohol consumption as an escape route from feeling of depression or unhappiness. Some identified negative consequences of alcohol consumption include risky sexual behavior, increased suicidal rate, violence, Juvenile delinquency, greater risk of accidents and illicit drug use. Hence it is considered a serious health challenge. This paper therefore investigated selected youths in Oyo Metropolis in South West Nigeria and their alcohol consumption with the aim of providing preventive measures in the reduction of their alcohol consumption and coping strategies to prevent the intake of alcohol altogether. The quasi-experimental research design was employed. 100 samples (50 male and 50 female youths) were randomly selected. 5 null hypotheses were raised and tested using Pearson Product Moment Correlation and T-test statistics to analyze the data generated at 0.05 level of significance. Results obtained revealed no significant relationship between religious background and alcohol consumption. No significant difference was found between gender and alcohol consumption among others. However, a significant relationship was found between alcohol consumption and relationship with others (peers and friends). Adequate recommendations were made based on the findings which include preventive approach to mental health problems and parental responsibilities.

Key words: *alcoholism, alcohol consumption, mental health, mental Wellness, Juvenile delinquency.*

INTRODUCTION

Alcohol is a substance that has been in consumption by man for many centuries in order to get special bodily sensation and is deeply embedded in diverse cultures all over the world. It is used in almost all parts of the world yet many people are not even aware that it is classified as drug. Many Nigerians do not regard alcohol as a very potent drug due to the fact that it is readily available and its use is socially accepted by the society. In some societies other than Nigeria today, drinking behaviour is considered important for the whole social order and so drinking is defined and limited in accordance with fundamental motifs of the culture. However in Nigeria today, alcohol has contributed immensely to various road accidents and crimes. Many years ago, alcohol used to be the preserve of adult males, but recent studies show that alcohol is now abused by the young ones and also the females. When alcohol is taken in excess, the following effects could be experienced in the body:

It deadens the nervous system. It increases the heart-beat. It causes the blood vessels to dilate.

It causes bad digestion notably of vitamin B especially when taken on empty stomach. It interferes with the power of judgment and poisons the higher brain and nerve centre etc.

The abuse of various mood-altering substances has been reported to be prevalent among Nigerian youths. Some substances alter the mind, change the user's feeling, perception and behavior when

they are used because they exert action on the brain. It is believed that any paper concerning alcohol and mental health of the youths would be crucial to Nigeria where violence, kidnapping, insurgency and other vices are perpetrated by the youths. According to a recent report by- World Health Organisation (WHO) (2018) half of mental health disorders start at adolescence. It was stated that one in five adolescents experience mental health challenges, though most remain under-diagnosed and untreated. WHO is focusing on the psychological well-being of young people aged 10 to 14 years to stave off conditions that can impact their lives deep into adulthood. Dr. Tarun Dua, mental health expert in WHO explained: "Half of mental health disorders arise before the age of 14. If these are left untreated, they extend into adult life, thus impacting educational attainment, employment, relationships or even parenting. "UN Secretary-General Antonio Guterres, in his statement marking the Day, World Mental Health Day urged adolescents to start nurturing their mental health "at an early age". World Mental Health Day is observed annually on October 10, with the overall objectives of raising awareness of mental health issues around the world and mobilizing efforts in support of mental health. Guterres stated further that "poor mental health during adolescence has impact on educational achievement and increases the risk of alcohol and substance use as well as violent behavior. A great deal of mental health conditions are both preventable and treatable, especially if we start looking after our mental health at an early age Guterres further stated. The UN chief stressed that many children and teenagers caught up in conflicts and disasters worldwide were particularly at risk of psychological distress.

"The UN is committed to creating a world where by 2030 everyone, everywhere has someone to turn to, in support of their mental health in a world free of stigma and discrimination. If we change our attitude to mental health we change the world. It is time to act on mental health," the UN chief concluded. The word, "Alcoholism" has become a common terminology all over the world today, and Oyo state is not an exception. Most of our youths indulge in taking alcohol in order to belong or feel comfortable and or if they are not fulfilled in their lives, or their lives have no meaning they take solace in alcohol as an escape route.

An addicted person could be psychologically dependent on alcohol; this means that the person thought he or she must take alcohol at all times to be okay. The point is that, he goes on craving for it because he thinks his life depends on it. This craving can be so strong that he finds it difficult to stop drinking. This belief system among our youths needs to be changed through their cognition. Ellis ABC theory of Rational Emotive Behaviour Therapy uses cognitive method to change a person's belief system. The therapist teaches how to dispute and change the irrational beliefs, replacing them with more rational alternatives (Froggat, 2005).

Young people have greater problems regarding alcohol intake. Moreover, early initiation to alcohol consumption is one of the most important predictors of future health, socio-cultural and economic problems. The following factors are considered facilitators of alcohol use among youths: lifestyles, high level of stress and anxiety, low self-esteem, depressive symptoms, susceptibility to peer pressure, fear and problem associated with school.

Alcohol consumption has a number of consequences, such as risky sexual behavior, increased suicide rate, violence, juvenile delinquency, conflicts with friends, a greater risk of accidents and illicit drug use and is therefore considered a serious mental health problem.

The use of alcohol during adolescence and young adulthood years is a common phenomenon in many societies. For large number of youths it may signify psychological experimentation and risk taking, though alcohol consumption at a young age increases the risk of developing alcohol related problems later in life.

Statement of the Problem

There is general observation that the youths in Oyo town have a serious problem of alcoholism which affects them psychologically, physically and academically. Most of the youths have become psychologically and socially dependent on alcohol. This tends to manifest in everything they do each day whereby most of them find it difficult to study or work without taking alcohol. Some of them that are into sports, cannot step into the pitch or court without taking some alcohol, this eventually affects their mental health. This work is an attempt to prevent or curb the use of alcohol, among the youths in Oyo metropolis.

Purpose of the Study

The purpose of the study is to investigate how alcoholism can lead to mental disturbance (health); to identify youths who are addicted to alcohol; and to provide a lasting solution in preventing or curbing the intake of alcohol among our youths.

Research Questions

1. Are there differences among youths from different religious background on the causes of alcoholism?
2. Is there any difference among male and female youths in their alcohol consumption?
3. Are there differences among youths in the factors influencing alcoholism on the basis of family types?
4. How can social change be created among the selected youths in Oyo metropolis, on alcoholism and mental health?
5. Why is alcoholism on the increase among the teenagers?

Research Hypotheses

The hypotheses to be tested in the course of this study are:

- H0₁: There is no significant relationship between religious background and alcohol consumption among the youths.
- H0₂: There is no significant difference between gender and alcohol consumption among the youths.
- H0₃: There is no significant relationship between parental involvement and alcohol consumption among the selected youths.
- H0₄: There is no significant difference between social norms and alcohol consumption.
- H0₅: There is no significant difference between teens' alcohol consumption and attitudinal change.

Literature Review

Effects and Consequences of alcoholism among Youth

By raising the drinking age to 21 across the United States, the congress has provided a highly effective strategy to increase youths health and safety. Ten thousands of lives have been saved in traffic crashes alone. Nonetheless youths and young adults under age 21 often drink alcoholic beverages. Alcohol consumption is often accepted as normal adolescent and young adult behaviour. According to a 2011 report from the national institute on drug abuse, by the time teenagers reach grade 12, almost 71% had used alcohol at least once in their lives and 41.2% had taken alcohol during the past months (National institute on drug abuse 2011). Older adolescents and young adults drink at even higher levels, especially those who attend college (National institute on drug abuse 2011).

An overwhelming number of youths are alcoholics. Literature suggests that alcohol use among teens are high and the problems are complex. They observed that people who drink alcohol consistently are known for antisocial acts such as fighting, bullying, stealing, lying and all sorts.

Despite the significant progress that has been made in reducing adolescent drinking and other related problems, when a behaviour is as pervasive as alcohol use among youths and young adults under age, the general public may be tempted to question the emphasis being placed on it. Alcohol use is often considered a rite of passage, and adults who furnish alcohol to minors often abet this use. This casual attitude ignores the serious consequences of alcohol abuse by minors. This study discusses adolescents' neurological social and emotional development and examines why the youth begins drinking alcohol. It then reviews literature that addresses the neurological, health, behavioural, safety, social, academic and justice system consequences that result when youth and young adults engage in underage drinking. The following are some of the effects of alcoholism observed among youths in Oyo town.

Truancy and Absenteeism

According to Osarenren (2002), truancy is when students stay away from school or academic activities regularly without permission while absenteeism is when there is a high level of absence from school or academic activities where regular attendance is required. These problem are indications of adolescents rebellion, self-assertion, perceive poor academic achievement or maladjustment which are traceable to alcoholism (Falaye and Gesinde, 2003; Falaye and Adebayo, 2002).

Examination Misconduct

University students who are into drugs or alcohol experience different levels of personality disorders as highlighted above. As a result their involvement in cult and other related activities, truancy and absenteeism, poor study skills and poor memory, many of them resort to cheating during examination (Awa, 1983; Ogunyemi, 2003a; Olatoye & Afuape, 2003; Ogunyemi, 2003b).

Health Effects of Alcohol Consumption on Young people

Risky behaviors can occur when teenagers drink alcohol. This behavior can have both short-term and long-term impacts that are why it is important to change the community attitudes surrounding alcohol, and stop underage drinking from being the norm. When young people drink alcohol, the way they drink, the culture that supports their drinking and how much they drink, increases the likelihood of them experiencing alcohol-related harm:

- * Increase risk of accident and violent injury-

- * The occurrence of risk-taking behaviors increases in adolescence and the possibility of injury increases even more when alcohol is also involved.
- * Alcohol consumption in young adults is associated with physical injury, risky sexual behavior, adverse behavioral patterns and academic failure.
- * Adolescents are also more likely to get involved in a fight when they drink alcohol compared with when they were sober.

Mental health problems including depression, self-harm and suicide-

- * Alcohol use increases the risk for a range of mental health and social problems in young adults.
- * The nature of the relationship between alcohol use and mental health in adolescence is somewhat reciprocal.
- * Young people with poor mental health are more likely to initiate alcohol use in adolescents, and report drinking frequently; they are also more likely to drink with the intent to get drunk.
- * Alcohol use may contribute to mental health.
- * Adolescents who use drinking as a method of coping are more likely to suffer from depression, and can bring on heavy drinking, which is itself predictive of suicidal behavior.

Factors influencing Alcoholism among Youths

Youths and young adults begin to drink alcohol for a variety of reasons. Resource and treatment providers must understand these motives when working with underage drinking offenders and targeting behaviors. These factors are enumerated below:

Emotional satisfaction from drinking

Young drinkers want to feel different when they drink. Some of the reasons why youths drink according to Johnson, (2004), Bonnie and O'Connell, (2004) include the following:

- * To relax and lower their inhibitions in social situations.
- * To reduce stress, tension and worries.
- * To increase courage and feelings of power.
- * To enhance sexual attractiveness and performance.
- * To satisfy their curiosity about the feelings that alcohol produces or make one to feel more like grown up

Curiosity and search for excitement

Some youths take alcohol because of curiosity and desire for adventure. Thus, curiosity leads to experimentation with drugs (Ndu, et al, 2009). Repeated experiments lead to excitement. Because these alcohol give a feeling of excitement, such youths find it difficult to do without them.

Consequences of Alcohol Consumption among youths

The consequences of alcohol consumption by youths may be particularly important for several reasons. Cook and Moore (2002) cited in Cnossen et al, (2009) singled out three serious concerns. First, young adults often have particularly high rates of binge drinking. As a result, young people are considerably more involved in related-violent crimes and accidents. Second, drinking at young ages may lead to habituation, establishing patterns for future consumption. Finally, an early initiation of drinking may have adverse consequences for subsequent development.

Adverse Consequences of Drinking Alcohol for Young People

Cook and Moore (2002) stated further that there are potentially adverse consequences for young people who misuse alcohol. The evidence suggests that:

- * Adolescents who misuse alcohol are more likely to suffer from side effects including appetite changes, weight loss, eczema, headaches and sleep disturbance
- * The most common impacts of alcohol intoxication are vomiting and coma
- * Young people are not immune to chronic diseases and conditions associated with excess alcohol consumption in adults, and deaths from liver diseases are now occurring at younger ages
- * Adolescents and young people who drink and drive, or allow themselves to be carried by a drunk driver are more likely to be involved in a car accident
- * Youths who drink alcohol are more likely to sustain injury, often as a result of an assault
- * Alcohol abuse in adolescence, during a developmentally sensitive period, poses a particular danger to the emerging brain faculties of executive functioning and long term memory
- * Youths are likely to be more vulnerable than adults to both subtle brain damage and long lasting cognitive deficits following alcohol exposure
- * Alcohol may increase feeling of depression
- * Stress/anxiety based drinking is associated with long-term and more severe negative outcomes
- * There is a relationship between adolescent alcohol use and mental health problems, so it is important that all young people with alcohol problem should have mental health assessment
- * Alcohol consumption during an evening may affect a child's performance at school on the following day, since it takes times to metabolize alcohol and this process varies depending on the dose of alcohol that was consumed and differing metabolic capacity
- * The evidence shows that there are associations between alcohol consumption and subsequent behavior with peers and friends. Indeed, excessive alcohol use can be detrimental to a young person being able to maintain friendships, particularly if the consumption levels are higher than among the peer group generally.

While alcohol can have a very temporary positive impact on our mood, in the long term it can cause big problems for our mental health.

Four ways to help prevent alcohol affecting one's mood.

- > Use exercise and relaxation to tackle stress instead of alcohol.
- > Learn breathing techniques to try when feel anxious.
- > Talk to someone about your worries. Don't try and mask them with alcohol.
- > Always be aware of why you are drinking. Don't assume it will make a bad feeling go away, it is more likely to exaggerate such.

Alcohol is linked to suicide, self-harm and psychosis. It can make people lose their inhibitions and behave impulsively, so it can lead to actions they might not otherwise have taken-including self-harm and suicide. Observation made was that anxiety and depression are more common in heavy drinkers.

Relationship between social norms and Alcohol consumption

The role of social drinking motives in the relationship between the social norms and alcohol consumption. Social norms are key predictors of college student consumption of alcohol: social norms are key determinant of young adult drinking, yet little research has evaluated potential interactive effects among different types of norms.

Few studies have examined the association between reasons for not drinking and social norms among abstinence college students. Research suggests that drinking motives are associated with perceived injunctive norms and drinking. Therefore, it seems likely that reasons for not drinking may also be associated with perceived injunctive norms and abstinence.

Are social norms the best predictors of outcomes among heavy-drinking Youths? The report of a study conducted by the National Institute of Alcohol Abuse and Alcoholism (2007) on underage drinking evaluated the relative contribution of social norms, demographics, drinking motives and alcohol expectancies in predicting alcohol consumption and related problems among heavy-drinking youths.

Harm reduction approaches may benefit from research extending the exploration of predictors of alcohol use per se to those components most directly related to alcohol-related harm. This investigation evaluated the relationship between perceived injunctive norms of alcohol use (level of approval of drinking behaviorism specific situation) and the experience of the alcohol related consequences as a function of typical student reference groups at increasing levels of similarity to the respondent; based on race and gender, parental status and combinations of these dimensions, as well as parents, close friends, and the students' own attitudes.

Effects of Parental Alcohol involvement on youths drinking behavior

An extensive body of evidence shows that parental substance use and family history of substance use are predictive of adolescent substance use (Zucker, & Fitzgerald, 1997; Hawkins, Catalano, & Miller, 1992; Scheier, 2001; Sher, Grekin, & Williams, 2005; Wills & Yaeger, 2003). For example, Sher, Walitzer, Wood, and Brent (1991) examined the concurrent effects of parental alcoholism on adolescent alcohol involvement. They found that children of alcoholics (COAs) reported higher levels of alcohol involvement (e.g. quantity-frequency of consumption, heavy drinking, and alcohol dependence symptoms) compared to non-COAs, although the extent to which alcoholic parents were actually drinking during the child's earlier years were not evaluated. Similar findings have been obtained with sample of younger adolescents. For example, working with a sample of alcoholic and nonalcoholic families from the community, Chassin, Rogosch, and Barrera (1991) examined the concurrent effects of parental alcoholism on the alcohol involvement of the adolescent offspring.

Furthermore, parental effects are not always observed as shown in another cross-sectional study by Cooper, Peirce, and Tidweil (1995). They found no consistent associations between maternal or paternal drinking and youth substance use. Similarly, Yu (2003) showed that parental alcohol use was related to lifetime but not current alcohol use of their adolescent children (age ranges 15-18).

Mediators of the Effects of Parental Drinking on Youths Drinking

Thus far, this review has indicated some linkages between; (a) parental and adolescent drinking and b) adolescent AEs and adolescent drinking. Models of alcohol expectancies emphasize their role as mediators of the effects of more distal risk factors (Goldman et al, 1999; Petraitis et al, 1995). Tests of social learning theory explanation of adolescent alcohol use have shown that exposure to parents who use alcohol has a direct relationship to alcohol expectancies (Zucker, Kincald, Fitzgerald, & Bingham, 1995). This in turn predicts alcohol involvement. The hypothesized mediational effects of AEs have been elaborated by a number of alcohol researchers (Goldman et al, 1999; Scheier & Botvin, 1997; Sher et al, 1991)

However, direct tests of the meditational role of the alcohol expectancies, based on the assumption that alcohol expectancies are among the most proximal correlates of drinking behavior, have yielded conflicting findings. For example, the effect of family history of parental alcoholism on youth alcohol involvement was mediated by the youths' own level of behavioral under-control as well as their (positive) alcohol expectancies level. Colder, et al (1997) found that parental alcoholism had a direct effect on increases in adolescent heavy drinking.

Relationship between Alcohol Consumption and Youth attitudinal Character Changes Caused by Addiction

Much has been written about the changes which take place in alcoholics as the disease progresses (Jelinek, 1960; Polish et al, 1981; Royce, 1981). These researchers and others have found a number of psychological and biological changes, which appear to be associated with alcoholism. There is growing evidence of a relationship between alcoholic drinking and a reduction in neuro-transmitter levels of dopamine, serotonin and norepinephrine (Blum & Trachtenberg, 1987).

Ethanol has the capacity to displace enkephalins and endorphins at binding sites which decrease three levels in the brain and pituitary, thus resulting in alcohol craving (Blum & Topel, 1986). At the psychological level they have developed a recognizable cluster of personality traits associated with alcoholism, including a low tolerance for stress, feeling of inadequacy, impaired impulse control, isolation and a negative image of self.

There seems to be an agreement that at a point in the progression of the disease, people cross into alcohol addiction. It is at this time that alcohol becomes the organizing core around which everything else in the alcoholic's must relate. When this happens, alcoholics can no longer predict their behaviour while drinking, or even when not drinking. They therefore need help. Hence the need for this study.

Methodology

This study examined alcoholism and mental health among selected youths in Oyo State and the counseling implications. The samples consisted of 100 youths (50 Male and 50 Female), randomly selected from five (5) local government areas of Oyo state in Western, Nigeria. Relevant data for the study were generated through questionnaires constructed by the researcher to establish the causes and effects of alcoholism among youths in Oyo town.

Data were analyzed using Mean, Standard Deviation, simple percentages, Pearson's Product Moment Correlation Co-efficient and t-test. All hypotheses were tested at 0.05 level of significance. The results obtained are presented below.

Descriptive Analysis of data

This aspect of the study presents the result of the descriptive analysis of the respondents' bio-data. The tables below show the distribution of respondents based on gender, age, and local government.

Distribution Based on Gender

Table 1: Distribution of Respondents by Gender

Sex	Frequency	Percent	Cumulative Percent
Male	50	50.0	50.0
Female	50	50.0	100.0
Total	100	100.0	

One Hundred youth were drawn for this research, out of which fifty youth were male constituting 50% of the respondents, while the same were female.

Distribution of Sample Based on Age

Table II: Age Distribution by Age

Age	Frequency	Percent	Cumulative Percent
15-20 years	40		
21-25 years	30		
26-30 years	30		
Total		100	

The table above shows that out of the 100 sample respondents, 40 fell between the age range of 15-20 years constituting 40% of the population, also 30 respondents fell within the age range of 21-25 years constituting 30% of the population, while 30 respondents fell above 26-30 years thus constituting about 30% of the total population.

Testing of Hypotheses

The five null hypotheses formulated were tested at 0.05 level of significance as follows:

Hypothesis I: There is no significant relationship between religious background and alcohol consumption among youths.

To test this hypothesis, Pearson Product Moment Correlation Coefficient was used and the result obtained is shown in the table below.

Table III: Relationship between religious background and alcohol consumption among youths.

Variable	N	Mean	Sd	Df	r-cal	r-crit	Decision
Religious background	100	64.67	4.28	98	0.12	0.19	Ho is accepted
Alcohol Consumption	100	57.01	9.41				

Significant level at 0.05: d.f = 98: r-crit = 0.9 r-cal= 0.12

Evidence given in table 1 based on hypothesis 1 tested showed that the calculated r was less than tabulated r (i.e. $0.12 < 0.19$) given 98 degree of freedom at 0.05 level of significance, thus indicating that null hypothesis which states that there is no significant relationship between religious background and alcohol consumption among youths should be accepted.

Hypothesis II: There is no significant difference between gender and alcohol consumption among youths.

To test this hypothesis, t-test was used and the result obtained is shown in table IV below:

Table IV: Gender difference and alcohol consumption among youths.

Variables	N	X	Sd	Df	t-Cal	t-Crit	Decision
Male	50	60.67	4.28	98	0.48	1.65	Ho is accepted
Female	50	57.01	6.98				

Significant level at 0.05: d.f = 98: t.tab = 1.65 t-cal = 0.48

Result obtained on table above shows no significant gender difference in alcohol consumption as t-cal is less than t-crit of 1.65 at 0.05 level of significance.

Hypothesis III: There is no significant relationship between parental involvement and alcohol consumption among youths.

To test this hypothesis, Pearson Product Moment Correlation Coefficient was used and the result obtained is shown in table 5 below:

Table V: Parental involvement and alcohol consumption among youths

Variables	N	X	SD	DF	r-cal	r-crit	Decision
Parental involvement	100	51.37	12.61	98	0.89	0.19	Ho is rejected
Alcohol consumption among youths	100	57.01	9.99				

Significant level at 0.05: d.f = 98 :r-crit =0.19 r-cal =0.89

Results in this Table based on hypothesis three showed that the calculated r was greater than the tabulated r (i.e. 0.89 > 0.19) given 98 degree of freedom at 0.05 level of significance, thus indicating that the null hypothesis which states that there is no significant relationship between parental involvement and alcohol consumption among youths should be rejected. This therefore means that parental involvement has a significant relationship with alcohol consumption among youths in Oyo state.

Hypothesis IV: There is no significant difference between social norms and alcohol consumption amongst youths. To test hypothesis, t- test was used and the result obtained is shown in table 3 below

Table VI: social norms and alcohol consumption amongst youths

Variables	N	X	SD	DF	t-cal	t-tab	Decision
Social norms	100	48.32	10.00	98	2.65	1.65	Ho is rejected
Alcohol consumption	100	48.10	9.70				

Significant level at 0.05: d.f = 98; t-tab 1.65, t-cal = 2.65

Evidence given in table 6 based on hypothesis four tested showed that the calculated t was greater than the tabulated t (2.65 > 1.65) given 98 degree of freedom at 0.05 level of significant, thus rejecting the null hypothesis which states there is no significance difference between social norms and alcohol consumption amongst youths. This therefore means that there is a significant difference between social norms and alcohol consumption amongst youths.

Hypothesis V: There is no significant difference between adolescents' alcohol consumption and attitudinal change.

To test this hypothesis, t-test was used and the result obtained is shown in the table below.

Table VII: Difference between adolescents' alcohol consumption and attitudinal change.

Variables	N	X	Sd	Df	t-cal	t-crit	Decision
Male	50	60.67	4.28	98	0.48	1.65	Ho is accepted
Female	50	57.01	6.98				

Significant level at 0.05: d.f =98: t-tab = 1.65 t-cal = 0.48

Evidence given above showed that the calculated t was less than the tabulated t ($0.48 < 1.65$) given 98 - degree of freedom at 0.05 level of significance. Hence the hypothesis is retained which means that there is no significant difference between adolescents' alcohol consumption and attitudinal change.

Discussion of the findings

The finding from hypothesis one revealed that there is no significant relationship between religious background and alcohol consumption among youths. From the analysis of the data, the null hypothesis is accepted. This is, because the calculated r -value of 0.12 is less than the critical r -value of 0.19 given 98 degree of freedom at 0.05 level of significance. This is in line with Beeghley et al, (1990) and Spilka et al, (2003), when they conducted similar study. The mediating and moderating mechanisms underlying the protective effect of religion on alcohol use are still being investigated, but likely mediators include increased social, non-drinking norms, socialization of norms and relieving of suffering.

It was discovered in hypothesis two that there was no significant difference between gender and alcohol consumption among youths. The hypothesis was accepted because the calculated " t " value of 0.48 is less than the critical " t " value of 1.65 given 98 degree of freedom at 0.05 level of significance. This finding is also in line with Hingson and Howland (2002) who opined that heavy episodic drinking done by boys aged 13 is one of the strongest predictors of heavy episodic drinking later in life. It shows also that males in college and non-college samples have a higher prevalence than females of more serious drinking patterns such as binge drinking and daily drinking.

It was observed that hypothesis three which stated that there is no significant relationship between parental involvement and alcohol consumption among youths was rejected because the calculated r -value of 0.89 is greater than the critical t -value of 0.19 degree of freedom at 0.05 level of significance, which implies that parental involvement has a significant relationship with alcohol consumption among youths in Oyo state. This finding was in agreement with Williams (2014) who opined that parents who experience greater economic stress also experience greater involvement in alcohol consumption.

It was also discovered that hypothesis four which stated that there is no significant difference between social norms and alcohol consumption among youth was rejected. This was because the t -calculated value of 2.65 is greater than the t -critical value of 1.65 given 98 degree of freedom at 0.05 level of significance. This indicated significant difference between social norms and alcohol consumption among youths. This finding is in line with some earlier studies, Clayton Neighbors, Christine M Lee, Nicole Fossos, Mary E Larimer, and Melissa A Lewis, (2007). The result shows that social norms of youths has vital role to play in alcoholic consumption among young people.

This study shows that there is a relationship between alcohol consumption and subsequent behavior with peers and friends, which means excessive alcohol use can be detrimental to a young person being able to maintain friendships, particularly if the consumption level is high among the peer group generally.

It was observed from hypothesis five tested that there was no significant difference between adolescent's alcohol consumption and attitudinal change. This was because the value of t -calculated 1.12 is less than the value of t -critical 1.65 given 98 degree of freedom at 0.05 level of significance.

The hypothesis was accepted which was not in conformity with Johnson, (2012) who posited that alcohol consumption is a major contributor to youth attitudinal change and mortality (e.g. automobile crashes, suicide) and with disruptions in significant contexts (e.g. school, work, family)

Epidemiological findings on adolescent and young adult alcohol use reveal several disturbing trends. National data revealed that many of them engage in drinking practices (e.g. binge drinking, daily drinking) associated with major contributors to youth mortality (e.g. automobile crashes, suicide) and with disruptions in significant contexts (e.g. school, work, family) that are important for healthy development. In addition to the rates of alcohol use among these youthful population, survey data demonstrate the common occurrence of additional health compromising behaviors (e.g. tobacco use, illicit drug use, risky sexual behavior) among heavier users. Interventions and social policies must be in place to incorporate this information to effectively modify alcohol use and its adverse primary and secondary consequences on college campuses.

Recommendations

Preventive Approaches to Mental Health Problems: Counselling Implications

As it is often said "prevention is better than cure". One of the critical mental health tasks of the school is to identify as early as possible children who are beginning to have mental health problems due to alcohol and to assist them and their families to take appropriate steps as follows:-

1. An ability to learn that which cannot be explained by intellectual sensory, health factors. It is the most significant one in spotting children with mental health difficulties.
2. An inability to build or maintain interpersonal relationships with peers and teachers.
3. An inability to act or feel appropriately under normal or stressful conditions.
4. An inability to shake the blues. They seldom smile.
5. A tendency to develop physical symptoms, pains or fears associated with personal or school problems.

Teacher's Role in Mental Health

Every teacher has a responsibility for shaping and influencing the child's attitudes. Teachers can help in many ways such as the following:

1. Teachers must have the knowledge of fundamental principles of human behavior to tackle the problems of his students.
2. Teachers must be emotionally stable and should have positive attitude towards teaching.
3. Teachers need to be sensitive, emphatic and understanding in dealing with students.
4. Students should not be criticized unnecessarily and no sarcastic remarks should be passed against any student.
5. Conducive social climate should be created in the class and the school e.g. Boy Scouts, Girls Guides etc.
6. Teachers should be a referral agent - he should always solicit help from mental workers to refine, confirm or reject observations and judgments about children.

Role of Parents in Mental Health

Parents also can help by taking the following steps:

1. Parents should provide adequate affection, love, direction and security for the child.
2. Parents should meet the legitimate needs of their child.
3. Proper and conducive environment should be provided in early childhood.

4. Parents should not reject or over protect the child.
5. Parents should not quarrel in the presence of the child.
6. Parents should not reduce the child to a nervous wreck by being over anxious about the future of the child.
7. Parents should build self-confidence in their child.

Conclusion

Alcoholism in Oyo metropolis has led to retarded economic development, education, health and social responsibilities in the town.

In order to change the drinking habit in Oyo town, the community should be able to embrace positive perception towards curbing the drinking habit especially among the young people. The synergy between teachers, parents, school counsellors and community at large cannot be over emphasized in monitoring the children and being good role models in terms of alcohol consumption in order to raise a healthy generation. Hence the role of counsellors as change agents can never be over emphasized in modifying the behavior of our youths.

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