

**ALCOHOL INTAKE AMONG SECONDARY SCHOOL STUDENTS IN NDHIWA  
DIVISION, NDHIWA SUB COUNTY, KENYA.**

**BY**



**SAMWEL AGALLO OTIENO**

**A RESEARCH PROJECT REPORT SUBMITTED IN PARTIAL FULFILMENT OF  
THE REQUIREMENTS FOR THE DEGREE OF MASTER OF ARTS IN SOCIAL  
DEVELOPMENT AND MANAGEMENT**

**DEPARTMENT OF SOCIOLOGY AND ANTHROPOLOGY**

**MASENO UNIVERSITY.**

**©2015**

## ABSTRACT

Globally, alcohol intake among secondary school students has been recognized as a serious problem that needs quick government attention. For example in Netherlands, underage binge drinking rose from 700 teenage drinking cases in hospitals in 2009 to 900 cases in 2010 and the same problem has also been noted in Thailand, Ethiopia, Uganda and Kenya where drinking among adolescents is seen as a psychological and social problem. This is despite the fact that many cultures in globe prohibit alcohol taking among school going youths. In African traditional society, alcohol was a privilege only for the male elders and there was no social problem associated with it. Data is a bound to the realization that alcohol intake among school going students is high in the Kenya. This trend has caused concern to the Kenyan governments, parents and other stakeholders. The government has played a key role by forming NACADA a body which is mandated in fighting drug and alcohol abuse, they have reduced drinking hours and have also sponsored negative advertisements on drugs in order to reduce alcohol abuse but all in vain. Despite all the intervention by the government Ndhiwa police station still register high rate of offenders on drug related offences and the same problem is experienced by education department where most unrest and indiscipline originate from alcohol intake among the students. This study therefore examined alcohol intake among secondary school students in Ndhiwa division, Ndhiwa Sub County. Specifically, the study sought to find out the prevalence of alcohol intake among secondary students in Ndhiwa Division, Ndhiwa Sub county in Homabay County and to establish social factors leading to alcohol intake among secondary school students in Ndhiwa Division, Ndhiwa sub-county in Homabay County. The study was guided by social learning theory which can be traced back to the work of Akers and Sellers in 2004. The conceptualization of social learning theory embodies within its four fundamental premises that include differential association, definitions, differential reinforcement and imitation. The study used descriptive survey research design. The study population was 2454 students in the nine secondary schools in Ndhiwa division. Sample size of 338 students was calculated using Kothari's 2005 formula while 9 principals and 5 chiefs were used as key informants and identified by saturated sampling. The research used stratified and systematic random sampling techniques to get the respondents. Quantitative data were collected by use of questionnaires. Quantitative data were analyzed using descriptive statistics through the aid of Statistical Package for Social Sciences (SPSS) version 22 to derive percentages and averages and the findings were presented using tables. Qualitative data were collected through key informant interview and were analyzed thematically and presented in textual description and verbatim. The findings indicate that 57.4% of students had taken alcohol in the last one year and there is high level of alcohol intake noticed among male students. The research revealed that having parents, friends and role models who drink alcohol are strong predictors of alcohol use among the students. This study thus concludes that amidst other social factors availability of alcohol also plays key role in alcohol intake among secondary school students. The study recommends that there is need for effective societal structures to be properly integrated to help reduce the extent of alcohol intake among secondary school students in the society.

## CHAPTER ONE: INTRODUCTION

### 1.1 Background of the Study

Alcohol consumption continues to be one of the most risk behaviors engaged in by the adolescents (Arata, Stafford & Tims, 2003) and it is one of the common habits among peer groups that cause psychological and social problems. The world over, alcohol consumption is increasingly becoming a social problem of phenomenal proportion (Hewitt, 1988) and about 54% of all adolescents have drunk an alcoholic beverage at least once in their lifetime (Buddy, 2008). Alcohol consumption is also seen as an important risk factor for morbidity, mortality and social harm worldwide leading to 2.5 million deaths each year (Rehm et al., 2003; WHO, 2011). The use of alcohol during teenage and young adulthood years is a common problem in many societies. According to UNODC (2005), 5% of the total world population aged 15 to 64 years had consumed alcohol at least once in the previous 12 months, an increase by 15 million from 2004. These global statistics show how alcohol intake is a problem and its early initiation among young people.

In the Netherlands, young people's alcohol consumption has attracted recent media attention. Underage binge-drinking rose in the country from 700 teenage drinking cases in hospitals in 2009 to 900 cases in 2010 (Trimbos instituut, 2010). The prevalence of alcohol consumption is high, especially among 15-17 year olds (Trimbos instituut, 2010). Reducing teenage drinking is one of the key government priorities. As a result of the findings of the Trimbos Instituut and Medical Research the attitude of the Dutch ministry of Health, Welfare and Sports changed from viewing alcohol use as a citizen's responsibility to a government's responsibility (Van der Sar, Brouwers & Van der Gor, 2011). The same problem is also noted in Denmark where adolescents begin drinking alcohol at an early age. For instance among 15 years old adolescents in Denmark 57% of the males had experienced taking alcohol while 56% of the females had drunk alcohol (Curie et al, 2008). According to Henry (1996) America is not exceptional where 84% of the students report having drunk alcohol within the previous month and 3.6% on daily basis. An Australian survey by Hewitt (1999) carried out in 1998 to inform the

development of a national alcohol campaign, also found that teenagers aged 15-17 years reported key influences on their drinking as wanting to try new experiences (79%), wanting to socialize with peers (77%), peer group influence (68%), wanting to drown their problems (66%) and not feeling good about themselves (66%).

The consumption of alcohol is woven into the social fabric of the culture of South Africans, and many of them enjoy the social and cultural connections of sharing a drink together (Dlamini, 2012). Alcohol is the most abused substance among secondary students in South Africa and this caused the ministry of Social development to raise the age of alcohol intake from 18 years to 21 years (Modiba, 2011). According to Towl (2004) alcohol consumption has been described as a core component of students' culture in South Africa and is seen as a defining feature of tertiary education lifestyle. A research was carried out in a rural area in Mankweng District in Limpopo province in South Africa with intention to compare alcohol intake among secondary school students in urban and rural areas after several studies indicated high alcohol intake in urban areas and it documented differences in the patterns of alcohol consumption among adolescents in rural and urban areas (Onya & Flisher, 2008).

In Uganda, alcohol consumption among students is on the increase and becoming a major concern (Nakamyuka, 1982). According to Mukama (2010) students who engage in alcohol intake in Uganda are usually undisciplined and use abusive language towards teachers and fellow students; they engage in sexual promiscuity which may lead to unwanted pregnancies and these students are often involved in thefts, strikes, destruction of school property and hooliganism.

A study carried out in Harar town, a rural area in Eastern Ethiopia, to investigate alcohol use among secondary school students indicated high prevalence of alcohol use at 22.2% while about 10% had drunk alcohol in the past 30 days. The research also identified having male gender, having friends who take alcohol, and living with people who take alcohol as strong predictors of drinking among the students (Reda, Moges, Wondmagen & Biadgilgin, 2012). A similar study was done in Addis Ababa by Reda et al. and it

indicated alcohol drinking prevalence of 45% among the male students and 26.7% among the female students showing higher alcohol intake. This shows that there is high alcohol intake in urban areas than in rural areas in Ethiopia.

A number of academic research and law enforcement reports indicate that, in the last ten years Kenya has had to deal with an increase in alcohol and drug abuse for example according to a world bank report, majority of Kenyan youths including students are into theft, violent crime and drug abuse and many are likely to suffer from HIV/AIDS (Muganda, 2003). This means that alcohol intake among the youths in Kenya has become a serious problem that affects all people in the country including students. A baseline survey on drug and substance abuse commissioned by NACADA in the year 2001 and 2002 revealed that more than a fifth of primary school pupils in Kenya have taken alcohol and the figure rises to more than three –fourths for university students (NACADA, 2011)

According to Simatwa (2014) over 400,000 students in secondary schools in Kenya were addicted to drugs and out of this number, 16,000 are girls and the rest are boys. The study reported variation in type and frequency of drug use from province to province. When it came to alcohol, the prevalence among students is highest in western Kenya (43.3%), followed by Nairobi (40.9%), Nyanza (26.8%), Central (26.3 %), Rift valley (21.9%), Coast, Eastern and North Eastern at 21.3%, 17.2% and 1.6% respectively . A similar research was done in Nakuru by Muma (2008) and it indicated 62% high alcohol intake among students in Nakuru town and in Kisumu a study by Otieno (2005) indicated 57.9% of students had consumed alcohol at least once in their lives. The same research in Kisumu by Otieno indicated 2.1% abuse alcohol due to the influence of relatives ,8.7% due to influence of friends ,38.2% due to curiosity and 47% said they abused alcohol due to enjoyment. Another research was done by (Simatwa, Odhong, Juma, and Choka( 2014) in Kisumu East Sub County and found out that 37.4% of public secondary students had consumed alcohol. Other similar researches were commissioned by NACADA in Nairobi city, Nyeri town and Mombasa city showing high alcohol intake among secondary students (NACADA, 2011)

The drinking of alcohol is an integral of many societies throughout the world and is a significant part of rites of passage exercised in various festivities from birth to death. Alcohol has been widely used throughout history and has been an important part of cultural ceremony (Parry & Bennetts, 1998). Historically, adolescents' alcohol use was highly regulated, with adolescents only allowed to consume alcohol on traditional religious occasions and other traditional events (Onya, 2012). In many African societies alcohol was seen as a central part of social life and it was taken mostly during celebrated events (Akyeampong, 1996). Alcohol was only taken by male elders and in Egypt they only allowed male aged 70 years and above (Charles, Patrick, & Durham, 1952). Changes in the drinking pattern were noted, with adolescent alcohol use extending beyond these traditional boundaries and the frequency and the quantity of alcohol consumption increasing in recent years. Drinking of alcohol was a social life of the people especially during the wedding and initiation ceremonies, and settling of disputes (Colson, Elizabeth, & Thayer, 1988). The Gwembe District in Zambia, used beer during rituals such as washing of burial implements, birth of the first child and this was done only by the old people. Among the Nandi in Kenya, alcohol was used during ceremonies such as weddings, initiation, and/or a good harvest.

Alcohol abuse has come about due to breakdown in religious and traditional regulations which were used to deter the young people from taking alcohol. Studies in Kenya indicate 25% of children with an alcoholic parent will develop alcohol abuse or dependence. The prevalence of alcohol intake among individuals with alcoholic parents or siblings is two and half times that of general population (Basangwa, 2006).

In response to high alcohol intake, the government of Kenya established NACADA to help in fighting alcohol and drug abuse. The government also passed laws that prohibit bars being close to learning institutions and age of alcohol intake at 18 years.

Abuse of alcohol is, therefore, a major social problem in secondary schools. It was therefore important to undertake this study in order to establish the extent of this problem and causing factors so that preventive measures can be undertaken. Several researches

have been done in Kenya some commissioned by NACADA and others done individually in the topic of research and it shows clearly that there is alcohol intake among secondary school students in urban areas. Statistics from the police station in Ndhiwa and education office revealed high alcohol intake among students in the area as the cause of school unrest and crime rate. Little research has been done in the area of study which is in a rural set up as reflected in the background and being that rural areas have different environment from that of the urban centre it was necessary to carry out this research since to help in giving a true picture of prevalence and social factors in Ndhiwa division.

## **1.2 Problem Statement**

In African tradition, consumption of alcohol was a privilege especially for male elders. The actual existence of alcohol as a social problem was rare because of the strong social structures that existed in form of traditions and taboos which were held to discourage the use of alcohol. However, currently the trend has changed and there is the habit of alcohol consumption among adolescents and other young adults and more particularly among secondary school students.

The government has tried to control alcohol consumption by the formation of NACADA which is mandated to fight drug abuse in Kenya but this has not reduced its intake. The government has also used the media to show the negative effects of the drugs but no serious positive results have been realized.

Although studies in Kenya have shown high rate of alcohol use among secondary school students nationally, these studies have concentrated in urban areas then generalized to students in rural areas. However, studies that were carried out in South Africa and Ethiopia indicated different results in researches done in urban and rural areas. This shows the need for the research to be carried out in this area since the situations in urban areas are not the same in the rural areas. Statistics from the police station indicate high alcohol intake among the students in Ndhiwa as most students are being charged by the offence of drunk and disorderly. The education office also reported high alcohol intake among secondary school students since most students expelled due to strikes and other offence blame the influence of alcohol.

**MASENO UNIVERSITY**  
**S.G. S. LIBRARY**

Alcohol intake among secondary school students is a social problem and has been linked to such adverse consequences as delinquency, criminal behaviors and psychological difficulties. Alcohol problems during adolescence are the single most predictive factor for adult drug dependence which is dangerous for the progress of youth development. The study therefore, tries to establish the factors leading to high alcohol intake so that precaution and preventive measures can be taken to save the country from producing alcoholics instead of skilled personnel. The factors that influence alcohol intake among secondary students are not the same in all areas those in rural areas might not be the same with those in urban areas. The study therefore aimed to determine the prevalence and factors associated with alcohol use among secondary school students in Ndhiwa division.

### **1.3 Research Questions**

- i. What is the prevalence of alcohol intake among secondary school students in Ndhiwa Division, Ndhiwa Sub -County, Homa Bay County?
- ii. Which are the social factors leading to alcohol intake among secondary school students in Ndhiwa Division, Ndhiwa Sub-County, Homa -Bay County?

### **1.4 Objectives of the study**

The main objective of the study was to examine alcohol intake among secondary school students in Ndhiwa Division, Ndhiwa Sub-County, Homa-Bay County.

#### **Specific Objectives of the Study**

- i. To find out the prevalence of alcohol intake among secondary school students in Ndhiwa Division, Ndhiwa sub county, Homabay county.
- ii. To establish the social factors leading to alcohol intake among secondary school students in Ndhiwa Division, Ndhiwa sub county, Homa Bay County.

### **1.5 Significance of the Study**

African communities will never address with satisfaction all Millennium development goals without being keen on factors that can interfere with the growth and development

of the youth. A country that does not produce human capital that is productive, healthy and skilled cannot eradicate poverty and hunger, achieve universal primary education, reduce child mortality, combat HIV/AIDS and also cannot ensure environmental sustainability.

Although studies show high rate of alcohol use among secondary students nationally (NACADA 2004), studies have concentrated in urban areas then generalized their findings to students in rural areas. This shows the need of the research to be carried out in this area since the situations in urban areas are not the same in the rural areas.

The findings of this study may provide knowledge on the prevalence of alcohol intake and the social factors leading to alcohol intake among secondary school students in the area of research.

Education policy makers, at both national and county level in the education sector and sports, school administrators and members of boards of governors may use the findings of this study to make guidelines and policies to help students to be more responsible and successful in school by setting rules and guidelines prohibiting the use of alcohol in school premises.

Churches may use the findings of the study to design programs that will help the youths to become responsible adults. Such programs could be getting involved in various religious associations and groups, and taking an active role in church activities like singing. This will have an influence on peer interactions, such that instead of spending time consuming alcohol, this time will be spent promoting church programs like religious movements.

Non-governmental organizations may also use the findings of this study to sensitize young people to avoid alcohol consumption through programs like behavior change program among adolescents and the youth.

The findings of this study might help future researchers to direct more research in related fields like to find out the effects of peer groups and alcohol consumption on secondary

school student's performance in school. And finally, this project report could act as a reference material for future researchers.

### **1.6 Scope and Limitations of the Study**

The study was limited to Ndhiwa Division and focus was on secondary school students and therefore caution was exercised when generalizing the results of this study to other students in colleges and universities and also to the whole district. The study was limited to social factors leading to alcohol intake.

The secondary school students served as the data source.

During the course of work the following difficulties were experienced:-

- 1) The nature of the topic "Alcohol intake among students" students were not comfortable in answering many questions related to the topic for fear of victimization by the teachers. It was overcome after explaining that this was an academic research and confidentiality was also assured.
- 2) The students were busy in class so the time of administering the questionnaires was short and there was long queue in meeting the principals. This was overcome by increasing the number days in carrying the research from two to three days

## LITERATURE REVIEW

### 2.0 INTRODUCTION

The chapter will review the work of other scholars in relation to the topic of research. The sections will be reviewed based on the objectives of the study. The first section is on the prevalence of alcohol intake among secondary students and the next section is on the social factors leading to alcohol intake among secondary students. The last part in this chapter is on theoretical framework.

### 2.1 Prevalence of Alcohol Intake among Secondary Students

The rate of alcohol consumption among young people has increased over the decades in the world WHO (2011). Significant increases were observed in the rate of current alcohol use in adults aged 18 years and older over three years in America. In 2001, finding of national household survey on drug abuse show that the rate of both current and past alcohol use increased in America among school going youths from the previous year. For people aged 18 to 25 years, the rate of alcohol use increased in 2001 from 64.3% to 75.4% in 2002. The same high intake among students has also been noted in Denmark as per Wechsler (1996), where 84% of the students report having drunk alcohol within last year, 68% within the previous month and 3.6% on daily basis. Nevertheless, adolescents in Denmark begin drinking alcohol at an early age and Danish adolescents have a high intake of alcohol compared to youth from other western European and North America countries (Curie et al, 2008). For instance, among the Danish 15-years-old, 56% of the girls and 57% of the boys have experienced feeling drunk and least twice (Muller, 1994). This trend of alcohol intake among the students has been noted in these countries as a problem that needs quick government attention.

According to self-reported surveys of adolescents students in Nova Scotia in Canada, carried out in 1991 and 1996, over 21.9% of the students reported to have used alcohol Poulin & Elliot (1997). The 1995 European Schools project on Alcohol and other Drugs revealed that, 61% of 10<sup>th</sup> Grade students in the study had consumed alcohol. The study concurs with the finding from

National studies (National Statistical Office, 2002, 2005, 2006) have indicated a significant increase in the use of alcohol among the 15-24-year-old age group; national surveys have found that the proportion of Thai youth using alcohol increased from 21.6% in 2001, to 23.5% in 2004, and to 23.7% in 2006. Moreover, 79.7 % of current Thai drinkers over 15 years old reported that they first tried alcohol at the age of 15-24 years old (National Statistical Office, 2005).

One study indicated that 37.3 % of Thai adolescents in Bangkok were alcohol users. Among them, 42.1% were lifetime alcohol users, 56.1% were frequent drinkers (1-20 days in the preceding 30 days of the survey), and 1.7% were heavy drinkers (more than 20 days in the preceding 30 days of the survey) (Guy, 1981). Between 1991 and 2004, the percentage of drinkers among young Thai females increased by 14% and 50% in the 15-19-year old and 20-24-year-old age groups, respectively (National Statistical Office, 2005). The two findings from Nova Scotia in Canada and Bangkok in Thailand show high alcohol intake among secondary students in urban areas though they are generalized in the whole country.

Fatoye and Marakinyo(2002) studied drug abuse amongst 567 secondary school students in rural and urban communities in south western Nigeria . They found that the most commonly abused drugs were salicylate analgesics (48.7%), stimulants (20.9%), antibiotics (16.6%) alcohol (13.4%), hypnotic sedatives (8.9%) and tobacco (3.0%). He also was found that the current and lifetime use of alcohol and tobacco was significantly more common among the males, and among those in the rural schools. For the majority of the students, initiation into drug use started at a very early age (under 14 years). The study differs with the findings from a study in Zambia which was done on students in schools in urban area which indicated high alcohol intake in urban schools and it also showed high intake among the male students at 58% and 57% among the female students (Guy, 1981).

**MASENO UNIVERSITY**  
**S.G. S. LIBRARY**

Another study conducted among high school adolescents in Ethiopia from 2001 to 2002 reported that about 8.9% drunk alcohol at least on a weekly bases (Kabede, et al 2005), where as other reports among students in southern Ethiopia and a private school in Addis Ababa found a prevalence of 57.7% and 19.2% respectively ( Alem & Kebede 2006).

In Kenya, studies show that more than a fifth (22.7%) of primary school children take alcohol, a figure that rises to more than three-quarters (68%) for university students. A large number of students across all age groups have been exposed to alcohol, tobacco, *miraa* (khat), glue sniffing, bhang (marijuana) and even hard drugs such as heroin and cocaine. According to a study by Siringi (2001) on drug abuse, 22% of secondary school students were on drugs and males had a higher exposure to alcohol.

Recent community researches done by NACADA 2007, 2009a, b, 2010 and 2011) indicate significant alcohol consumption among the students. A research done in Nairobi on the role of parents in prevention and control on alcohol and drug abuse among their children reported children in the age bracket of 10-14 years old having tasted alcohol and they found an increase of alcohol with increase in age. The research also noted variation in alcohol intake based on age, residence (rural-urban), gender, education and economic status. Another research carried in Nairobi by NACADA on alcohol consumption among students in high school found high alcohol intake among male students registering 23% as compared with their female counterparts and the research also found out that more boarders were taking more alcohol as compared to day scholars. The organization with the sole mandate of carrying research on alcohol and drug abuse (NACADA) commissioned another study in Nairobi on the role of school environment in alcohol and drug abuse among students evidence from public secondary school students. Based on that study alcohol was the most abused drug by students at 36.3%.

Drinking prevalence of up to 15% were found among secondary school students in Kenya in a research carried out in Kisumu ( Kuria ,1996). Similar studies had also been carried out by Muma(2008) in Nakuru that saw 62.0% of students acknowledged having abused alcohol, Kuria (1996) in Kisumu 57.9% secondary students had consumed alcohol ,

Otieno (2009) in Kisumu 68% had abused alcohol and Simitwa (2014) 37.4 % of the sampled students had consumed alcohol.

The literature review shows that it is true that there is high alcohol intake among the students in the world. The cited areas show early initiation of alcohol intake among the students as early in age as 11 years. The summary of researches carried out in Kenya show many researches by NACADA which is the body constitutionally mandated to carry out research on alcohol and drug abuse being done in Nairobi city, Mombasa town, Nyeri town and Kisumu city which makes it very difficult to be generalized in rural areas in the area of research. Other Scholars like Muma (2008) carried a similar research in Nakuru town and the other like Otieno, Simitwa and Kuria carried different researches on students' alcohol intake in Kisumu city. In a research carried by NACADA (2010) on the role of parents in prevention and control of alcohol and drug abuse among their children in Nairobi they found a lot of variation in alcohol intake among students based on gender, area of residence (rural –urban), education and economic status it therefore means that researches done in towns should not be generalized in rural areas. It therefore make sense for the research to be done in Ndhiwa division so that we exactly understand the prevalence in the area and the factors causing alcohol intake among the secondary school students.

## **2.2 Social Factors leading to Alcohol Intake among Secondary Students**

There is no single, simple explanation for why some individuals and groups develop problematic patterns of drinking and suffer disproportionately from alcohol –related harms. In all societies, patterns of alcohol and abuse are superimposed on the broader structure of a person's life activities. For this reason, indicators of variation between people's life, such as age and gender, socioeconomic status, and ethnicity have been useful markers in understanding variation in alcohol use and abuse (Bandura, 1977). Social learning theory as advanced by Bandura says that behavior is learnt from others and also reinforced by positive rewards towards the behavior. Students' alcohol intake is a behavior that can be imitated from the role models, learnt from others and also depending on what value societies give to alcohol.

Pervasive drinking by school going youths and the emergence of alcohol misuse in adolescents are closely intertwined with developmental processes (Dent ,Grube and Biglan ,2005) Drinking alcohol is looked upon in most African and Western countries as a transition marker, with drinking representing a symbolic expression of the status-transformation from adolescence to adulthood (Parry & Bennetts 1998).Thus ,alcohol consumption is seen as part of normal human development and is integrated part of socialization process. The same group believed that alcohol increases self confidence and confers adult status.

In an early, and subsequently widely cited, work on the impact of culture on alcohol use in South Africa, Gumedde (1995) assert that, as drinking behavior must be learned, it is therefore culturally determined and he emphasized that “the way people comport themselves when they are drunk is determined not by alcohol's toxic assault upon the seat of moral judgment, conscience, or the like, but by what their society makes of and imparts to them concerning the state of drunkenness”. In other words, it is aspects of society and culture that are the prime influences in shaping the ways in which people learn to drink and the patterns of behavior associated with drinking. It would be expected, then, that prevailing cultural norms regarding adolescent alcohol use would exert a powerful influence. Indeed, Bjarnason and colleagues (2002) found that in countries where there was a tolerant or permissive attitude towards youth alcohol use, rates of alcohol use among young people were higher than in countries where the social climate towards youth alcohol use was less favorable.

The study agrees with one of the tenets of social learning theory which is definitions .It states that alcohol intake among students depends on the beliefs and attitude of the community towards alcohol intake, if they support drinking students are likely to take alcohol.

Factors that influence alcohol intake among the secondary school students include peer pressure availability of alcohol, particularly in more disadvantaged communities;

ignorance; the falling price of certain kinds of alcohol products (e.g. malt beer and brandy) relative to the Consumer Price Index; chemical dependence on alcohol; poor social conditions and boredom; a lack of social controls to deal with those misusing substances; and societal attitudes in general (Parry & Bennetts, (in press; )(Rocha-Silva et al., 1996).

Fromme and Ruela (1994) found that although parents and peers were both influential in defining standards of drinking, peers were more influential in terms of affecting actual drinking behavior. The authors suggested that normative influences vary for college students depending on where they reside while attending school. They speculate that, in fact, students may seek out certain environments based on their expectancies of alcohol use.

Using statistical economic simulation techniques, Chaloupka (1993) found that increases in alcohol beverage prices would lead to substantial reductions both in the frequency of youth alcohol consumption and in heavy drinking among the young people in Thailand

In their study in Colombia, Clapp et al. (2000) found that parties, dates and socializing and being with friends were the most common situations where students reported their last heavy drinking event took place. (In addition, for males, playing drinking games increased the likelihood of experiencing alcohol-related problems in these settings by a factor of five.)

Similarly, in a broader national study of drinking contexts in Northern America, Harris (2000) reported that across all types of consumption patterns, the presence of coworkers, close friends and neighbors increased the amount of alcohol consumed.

According to Gruenewald (1999), research has shown that population growth leads to a greater number of alcohol outlets and greater numbers of outlets relate to greater alcohol use. His research among school going students in Bangkok found that, when outlet concentrations increased and multiple drinking venues existed, both long term and short-term drinking problems also increased.

During childhood, parents are indeed important facilitators of the socialization process through supervision and discipline practices and by providing examples of behavior (Newbury-birch, Walker, Bayer, Brown, Jackson, & Lock, 2009). The role the family plays in the development of alcohol use is therefore crucial and parental alcohol use has been shown to be an important determinant of adolescents' alcohol use, with adolescents being more likely to drink if their parents do so (Nash, McQueen, & Bray 2005). The theory of social learning fits in the thoughts of Newbury -birch when they said that students' alcohol intake is learnt and especially from people who are close to the students. Differential association is one of the tenets of social learning theory which the above finding agrees with.

A study of the relative contributions of a variety of core family environment variables on adolescent substance use and delinquent behavior done in Nigeria found that parenting style (as measured by parental warmth and hostility) and parental tolerance of alcohol use, most often explained variation in alcohol use among children. It was also found that alcohol use among the younger people aged 12-15 years old was more strongly determined by the use and attitudes of the same sex parent. In contrast, among older people between 18-21 years old, a father's alcohol use was more important to the offspring's use (Coggan & McKellar 1995).

In addition to parents, siblings, especially older siblings, can also act as role models and play an important role in influencing alcohol use by reinforcing certain attitude and behavior patterns, and by providing advice and information about alcohol (Coggan & McKellar 1995).

**MASENO UNIVERSITY**  
**S.G. S. LIBRARY**

Along with parents and family, peers are also a major source of influence, socialization and development for adolescents (Webb, Ashton, Kelly & Kanali, 2002). In fact, it has been estimated that older adolescents may spend approximately twice as much time with their peers as they spend with parents or other adults (Bonnie & O'Connell, 2004).

According to Bonnie and O'Connell (2004), perceived use of alcohol by one's peers independently predicts self-reported alcohol use, with peers having a greater influence on adolescent drinking than parents, especially among slightly older adolescents.

Furthermore, the effects of parents' and friends' substance use may be synergistic, with studies in Africa showing that the highest substance use rates were found among adolescents who had both friends and parents who used substances (Coggan & McKeller 1995)

Marketing also plays a key role in influencing drinking among young people by promoting glamorous and positive images about alcohol consumption (Babor, Caetano, Casswell, Giesbrecht & Graham, 2003). For example, a study of 3rd, 6th, and 9th graders in the United States found that those who viewed alcohol advertisements as desirable were more likely to view drinking positively and to want to purchase products with alcohol logos (Austin & Knaus 2000 in National Institute on Alcohol Abuse and Alcoholism, 2006).

There are many factors leading to alcohol intake among the secondary school students as per the literature and they differ with place, economic status, gender, area of residence and country. Before any research is carried out it is difficult to know the exact factors that influence students into taking alcohol hence the need for this research to unravel the truth in the area of research. There is no documented research that had been carried out in Ndhiwa division on alcohol intake among secondary students so it was imperative to carry out this study to help in coming up with specific factors that lead students into taking alcohol.

#### **2.4 Theoretical Framework**

This study was guided by social learning theory developed by Robert L. Burgess and Ronald L. Akers in 1966. Social learning theory accounts for conforming behaviour to the extent that the greater the number of definitions favourable to conventional norms, the less likely an individual is to engage in alcohol intake. Social learning theories can be broadly understood as a social behavioural approach that emphasizes the “reciprocal interaction between cognitive, behavioral and environmental determinants” of human behavior (Bandura, 1977). In the study of alcohol intake, social learning theory is generally applied and understood as it was conceptualized by Ronald L. Akers in 1973.

The theory as proposed by Akers is centered on the idea that “the same learning process in a context of social structure, interaction, and situation produces both conforming and deviant behavior. Social learning theory is best summarized by its leading proponent, Ronald L. Akers (1998): The probability that persons will engage in alcohol intake increase and the probability of their conforming to the norm is decreased when they differentially associate with others who take alcohol. The conceptualization of social learning theory embodies within it four fundamental premises that include differential association, definitions, differential reinforcement and imitation (Akers & Sellers, 2004). One of the social learning theory tenets says a person’s actions are in part determined by what they perceive the consequences of their action or lack of action will be. “Whether individuals will refrain from taking alcohol at any given time and whether they will continue or desist from doing it in the future depends on the past, present, and anticipated future rewards and punishments for their actions” (Akers & Sellers, 2004). Students will either stop or continue taking alcohol depending on whether the society rewards or praise students who take alcohol or they rebuke or punish them. Reinforcement of attitudes, beliefs, and values occurs through both differential association and imitation and can be either positive or negative. Positive reinforcement occurs when actions are rewarded through positive reactions to the behaviour as well as through positive outcomes. Positive reinforcement can increase the likelihood of students continuing to take alcohol through these rewards. Negative reinforcement, on the other hand, involves the removal of negative consequences or responses, and this may also increase the likelihood of taking certain actions.

The people or groups with who an individual is in social contact, either directly or indirectly are seen as providing the social context under which each of the four premises of social learning theory functions. That is, within this social context, individuals are exposed to varying definitions of acceptable and unacceptable behaviours, as well as a variety of behavioral models that may differentially reinforce alcohol intake.

These models may also serve as a source for the imitating of behaviour. The people or groups with whom an individual associates are broken up into primary and secondary sources by social learning theorists. Primary associations include those with immediate

family and friends. Secondary sources of social learning include a much wider range of people and would include, for example, teachers, neighbours, and church groups. Each of these groups is thought to contribute to the attitudes and values an individual adopts, as well as to how that person behaves in various social contexts. From a social learning perspective, then, associations made early on with family would arguably play an important role in shaping one's behaviour.

The extent to which behaviours are imitated is determined in large part by the "characteristics of the models, the behavior observed, and the observed consequences of the behavior" (Akers & Sellers, 2004: 88). The literature has indicated that witnessing the actions of others, in particular people that are close to students can affect their participation in both conforming and non-conforming behaviours. Imitation has also been found to be "more important in the initial acquisition and performance of novel behavior than in its maintenance or cessation of behavioral patterns once established" (Akers & Sellers, 2004).

Social learning theory is relevant in this study for it assumed that alcohol intake among the students can be acquired through the agents of socialization process. The tenets of social learning theory which are imitation, differential association, Differential reinforcement and definition saw clearly how students can take alcohol because the role models are taking, because those they are close to are taking alcohol, because the community reward alcohol taking and also because values and beliefs in the community favour alcohol intake. This study thus used social learning theory to explore the specific objectives in this study.

## **CHAPTER THREE: RESEARCH METHODOLOGY**

### **3.1 Introduction**

This chapter describes the research procedure and methods used in the study. It provides an explicit description of study area, the research design, study population, sampling procedures, Pilot study, validity and reliability and instruments of data collection.

### **3.2 Study Design**

The study adopted descriptive survey design. Orodho (2003) states that descriptive survey design allows the researcher to gather information summarize it, present and interpret for the purpose of clarification. Descriptive survey is that method that involves asking a large group of people questions about a particular issue. Descriptive survey design was selected for the study because it would establish opinions, attitudes and knowledge on alcohol intake among secondary school students and also helped in establishing the views of the principals and chiefs on alcohol intake among the students.

### **3.3 Study Area**

The study was carried out in Ndhiwa Division, Ndhiwa Sub County, and Homa Bay County. Ndhiwa lies on the South Western part of Kenya and is located in Nyanza region at  $-0^{\circ}43'43''$  north of the equator and  $34^{\circ}21'53''$  east of the Prime Meridian. Ndhiwa Sub County borders Mbita Sub County to the North, Suba Sub County to the West, Nyatike Sub County to the South West, Awendo and Uriri Sub Counties to the South and finally Homa Bay to the North East. The division with an area of  $136.6\text{km}^2$  borders Ruma National Park to the North, Kobama Division to the West, Riana Division to the East and Kobodo to the North East. Ndhiwa Division has four administrative locations namely West Kanyamwa, Kayambo, East Kanyamwa and Central Kanyamwa (KNBS, 2009)

According to the 2009 Population and Housing Census Report, Ndhiwa division has a total population of 32,958 with 52% females, 48% males and 75% s between 0-29 years. The Division has a total of nine secondary schools. It is largely inhabited by the Luo speaking community and a few immigrants from other tribes such as Gusii and Luhya who are either workers or traders.

The choice of Ndhiwa area was based on the existence of many brewing dens and high crime rate among school going students where 20% of cases reported were related with alcohol intake (Ndhiwa police station statistics, 2012) high school dropout and school unrest among secondary school students which was caused by alcohol intake (Ndhiwa Education office data, 2012).

### 3.4 Study Population

The study population consisted of 2454 students gotten from the register in all the 9 secondary schools in Ndhiwa division Kenya (Ndhiwa District Education office data, 2012). The study also involved nine principals and five chiefs as key informants.

### 3.5 Sample and Sampling Technique

The sampling frame consisted of a list of 2454 students studying in 9 secondary schools in Ndhiwa division. From the sampling frame, the most conservative sample size for students in secondary schools in Ndhiwa division was determined at 95% confidence level and within 5% of the true value using Kothari's (2005) formula given as:

$$n = \frac{z^2 \cdot p \cdot q \cdot N}{e^2 \cdot (N-1) + z^2 \cdot p \cdot q}$$

Where: n = sample size, z = the value of standard variate at a given confidence level, p = sample proportion of successes, q = 1 - p, N = size of population and e = acceptable error (*the precision*).

Therefore the most conservative number of students to be interviewed will be:

$$n = \frac{z^2 \cdot p \cdot q \cdot N}{e^2 \cdot (N-1) + z^2 \cdot p \cdot q} = \frac{1.96^2(0.5)(0.5)(2454)}{0.05^2(2454-1) + 1.96^2(0.5)(0.5)} = 338.125835 \approx 338$$

The study employed stratified and systematic random sampling methods in the process of selection of students. Stratified method was necessary in mixed schools where the population was heterogeneous and there was need to group the population into girls and boys since it was proportionate number of boys and girls they had equal chance in being represented in the research. Stratified sampling was also used when grouping schools in forms with intention of giving equal opportunity to all students in these forms.

The next sampling method used was systematic random sampling method which determined which unit in the strata was used for the research and thereafter the method was also used to determine the individuals in the chosen schools to be interviewed. Having identified the sample size as 338 from 2454 students using Kothari's formula, using systematic sampling design I calculated the sampling interval by dividing the number of elements in the list (2454 by 338) and in every school a register of students was used to identify the seventh (7th) on the register for interview. A sampling frame was prepared for each school and form. Sample size in each school and form was determined based on their population in girls and boys schools. In mixed school the students were stratified into form and gender then a sampling frame is developed. For example in form 1 we had a sampling frame for female and males differently and this applied in all the forms and then a sample size is calculated based on the population in each form and gender. The study used systematic sampling technique to get the respondents whereby every seventh name on the class list in the schools was selected until 338 names of students were realized.

The key informants who were 9 principles and 5 chief were identified by use of saturated sampling.

**Table 3.1. Showing the population in each school and the sample size**

**KEY: F=Female M=Male**

| Strata (schools) |   | Population Size | % of total population Per school | Sample size |
|------------------|---|-----------------|----------------------------------|-------------|
| Mirogi Boys      |   | 664             | 27.1                             | 91          |
| Mirogi girls     |   | 450             | 18.3                             | 62          |
| Ojode unga       | F | 80              | 6.2                              | 21          |
| Mixed            | M | 73              |                                  |             |
| Ojode pala       | F | 180             | 15.3                             | 52          |
| Mixed            | M | 195             |                                  |             |
| Kome mixed       | F | 95              | 7.3                              | 25          |
|                  | M | 85              |                                  |             |
| Osuri mixed      | F | 30              | 3.5                              | 12          |
|                  | M | 57              |                                  |             |
| Nyamanga         | F | 198             | 14.8                             | 50          |
| Mixed            | M | 165             |                                  |             |
| Dut girls        |   | 70              | 2.9                              | 10          |
|                  |   |                 |                                  |             |
| Ndhiwa           | F | 68              | 4.6                              | 15          |
| Mixed            | M | 44              |                                  |             |
| Total            |   | 2454            | 100                              | 338         |

### **3.6 Instrument of Data Collection**

The instruments used in primary data collection were student's questionnaire and interview schedule.

#### **3.6.1 Student's Questionnaires**

This study collected primary data by use of standardized questionnaires. Borg & Gall (1993) observe that questionnaires are often used to collect basic descriptive information from a large sample.

Questionnaires contained both open ended and closed ended items and they were 338 in number. Closed ended questions are used in research because they are easy to use, score, and code for analysis while "open ended" questionnaires allow for individualized response.

Questionnaires are used to gather data over a large sample (Gall 2005). The use of questionnaire in this study is justified by the fact that it can be administered to a large number of respondents in a short time and guarantees a high response rate with a diversity of information.

#### **3.6.2 Key Informant Interviews**

The key informants who were interviewed include 9 school principals and 5 local Chiefs in Ndhiwa Division. This was mainly to understand deeper on the prevalence of alcohol intake and social causes of alcohol intake among the secondary students.

#### **3.6.3 Secondary Data**

The secondary data was necessary to establish the intake of alcohol among secondary students. Secondary data was obtained through desk reviews from appropriate publications such as journals, academic reports both published and unpublished and papers presented at conferences. The study also used internet as source of secondary information.

### **3.7 Pilot Study**

Before the data collection, a pilot study was conducted in Riana division to explore on the planned research design and the tools. This enabled the researcher to test the reliability of the instruments and refine the overall data collection.

### **3.7.1 Validity**

An instrument is valid when it does what it is intended to do.

Validity of the research was also done by the assistance of my supervisor whose supervisory role was instrumental in achieving accuracy in the research process. His suggestions and recommendations were used to improve on the instruments until an acceptable level of validity is achieved.

### **3.7.2 Reliability**

Reliability is the proportion of variance attributable to the true measurement of a variable and estimates of consistency of such measurement over time. It is a measure of the degree to which a research instrument would yield the same results or data after repeated trials.

The instruments proved to be reliable after being used in Riana division.

### **3.8 Data Analysis and presentation.**

Data collected were sorted, edited, classified, coded and tabulated ready for analysis.

Quantitative data were analyzed using descriptive statistics aided by SPSS and presented in forms of percentages and frequencies. Qualitative data were analyzed on an on-going process as themes and sub-themes and presented in textual description and verbatim.

### **3.9 Ethical Considerations**

A number of ethical issues arose from the research process and in anticipation, precautions were taken and correctional mechanisms were employed to avoid and or mitigate objectionable consequences. According to Diener and Crandall (1978) transgressions of ethical principles in research recur in the four main areas, namely whether there has been harm to participants, lack of informed consent, invasion of privacy and deception. Avenues in the study were related to; the permit to conduct the research was acquired from the relevant department and copy of the provided prior to visiting the field. At the local level, the district administration and district education office were informed and the specific divisional officer notified. The purpose of the study was explained to rule out false expectations and confusion as an avenue to conflict. This too served in establishing a foundation for arbitration in case subsequent misunderstandings arose in the process of engagement with respondents. It was

understood that the proposed respondents are a busy lot. Components being part and parcel of the project package for the purposes of ascertaining progress and outcomes, the design of the data gathering process of the study had inbuilt measures to avoid evoking undue emotive reactions. It is explained from the beginning what the exercise will be all about, be spelt out that there will be no forthcoming further assistance due to the undertaking to avoid creating false hope and what the finding will be used for, as research. The subject of confidentiality was observed regardless of the presupposed level of risk associated to participating in the interview.

**MASENO UNIVERSITY**  
**S.G. S. LIBRARY**

## CHAPTER FOUR: FINDINGS AND DISCUSSIONS

### 4.1 Introduction

This chapter presents the results of the study under the following sub-headings:- socio-demographic characteristics of the study population; the prevalence of alcohol intake among secondary school students and social factors leading to alcohol intake among secondary school students.

### 4.2 Socio-Demographic Characteristics of the Respondents

Table 4.1 below shows respondents' distribution by gender. The study had equal number of male and female students to get their views in relation to alcohol intake in secondary school. This was necessary in order to give comparison on alcohol intake among female and male students.

#### 4.2.1 Gender of the Respondents

**Table 4.1: Gender of the students**

| Gender | Frequency | Percent |
|--------|-----------|---------|
| Male   | 169       | 50.0    |
| Female | 169       | 50.0    |
| Total  | 338       | 100.0   |

From the study findings in table 4.2 below, it is evident that most of the students were in age bracket 16-20 years, and this was about 83.1 % of the study sample while about 14.8% of the students sampled were in age bracket of 13-15 years; 2.1% were in 21-25 years. This shows that most of the participants could give their consent before being interviewed. Findings by Trimbo's Institute (2010) indicated that prevalence of alcohol consumption is high, especially among 15-17 year olds and another study in Thailand carried out on university students by National statistical office(2002,2005,2006) indicated high alcohol consumption within the age bracket of 15-24 years. This age bracket was the majority for this study.

#### 4.2.2 Age of the Respondent (Student)

**Table 4.2 Age of the Student**

| Age   | Frequency | Percent |
|-------|-----------|---------|
| 13-15 | 50        | 14.8    |
| 16-20 | 281       | 83.1    |
| 21-25 | 7         | 2.1     |
| Total | 338       | 100.0   |

From table 4.3 below it indicates that majority of the students interviewed were in form 3-4, this was approximately 51.5% of the study population. An estimate of 48.5% of the students was in form 1-2. The essence of this was to establish the class at which most students were likely to take alcohol. The study showed that those in form three and four have the highest alcohol intake.

#### 4.2.3 Class of the Respondent (Student)

**Table 4.3 Class of the Student**

| Form  | Frequency | Percent |
|-------|-----------|---------|
| 1-2   | 164       | 48.5    |
| 3-4   | 174       | 51.5    |
| Total | 338       | 100.0   |

A finding from the table 4.4 was necessary to gauge the rate of alcohol intake among students who are not staying with the parents and those who stay with the parents. This helped the research to know whether strict supervision offered by the parents can deter one from alcohol intake. The study was in line with that of NACADA (2007) which also saw a guardian as a factor that can influence alcohol intake among the students.

#### 4.2.4 Guardian of the respondent

**Table 4.4 who the student was staying with**

|         | <b>Frequency</b> | <b>Percent</b> |
|---------|------------------|----------------|
| Parents | 198              | 58.57          |
| Others  | 140              | 41.43          |
| Total   | 338              | 100            |

Table 4.5 show the alcohol intake among secondary school students based on gender, type of school and the person the students are staying with. Based on the findings from the table below 59.17% male students had taken alcohol in the last one year as compared to 55.60% female. The finding shows more male students consuming alcohol. The study concurs with that one of NACADA (2011) which was carried in Nairobi on alcohol consumption among secondary students which saw 60% males and 30% females having consumed alcohol and another research carried by NACADA(2007) saw high intake among male students at 79% while females at 14% in Central Kenya. The finding also has some similarity by a study done in South Africa in a rural area in Mankweng District where male students had higher alcohol intake more than female counterparts (Onya, 2010). The findings in the table show high alcohol intake among mixed day schools at 71.42%, boys boarding at 59.34% and girls boarding school at 41.66%. The findings differs with the one commissioned by NACADA (2011) in secondary schools in Nairobi which indicated high intake among students in boarding schools in which prevalence rate was at 23% while day schools is at 16% though it agrees with the findings with the same NACADA (2010) showing high rate of alcohol intake among the day scholars at 24.4% while boarding schools at 24%. The findings show the discrepancy that exist in the findings from different location with different environment in this case schools in rural area and those in urban centers. The findings from table 4.5 show high alcohol intake among students who were staying with guardians who are not parents at 70% while those staying with the parents at 44.44%. The findings concurs with a study carried out by NACADA (2007) on the role of school environment in alcohol and drug abuse in Nairobi

which saw 30% of the students who were staying with the guardian taking alcohol while 19.2% on students staying with the parents.

### 4.3.0 Prevalence of Alcohol intake among Students

**Table 4.5. Alcohol intake by demographic characteristics**

| Characteristic                          | Taken alcohol in the last one year |           |         |
|---|------------------------------------|-----------|---------|
|   | Categories                         | Frequency | Percent |
| <b>Gender of the respondent</b>         | Male                               |           | 59.17   |
|   | Female                             | 100<br>94 | 55.60   |
| <b>Type of school</b>                   | Mixed Day School                   | 125       | 71.42   |
|   | Girls Boarding                     | 30        | 41.66   |
|   | Boys boarding                      | 54        | 59.34   |
| <b>A person the student stayed with</b> | Parents                            | 89        | 44.44   |
|   | Guardian                           | 98        | 70.00   |

Table 4.6 below shows students' responses whether some of them took alcohol past one year or not. Findings show that most of the students 57.4% took alcohol past one year from the time of the study while 42.6% of the students had not taken alcohol past one year. The study concurs with the research carried out in Addis Ababa which found prevalence of alcohol intake at 57.7% (Alem & Kabede, 2006), in Kisumu in Kenya which the prevalence was at 15% among secondary students (Kuria, 1996), where some private universities had rates as high as 84% (Odek & pande, 1999). A study in South Africa also reported an alcohol use prevalence of 39.1% among high school students (Madu & Matla, 2003).

### 4.3.1 Students' Alcohol Intake past One Year

**Table 4.6 past One Year Intake of Alcohol**

| Response | Frequency | Percent |
|----------|-----------|---------|
| Yes      | 194       | 57.4    |
| No       | 144       | 42.6    |
| Total    | 338       | 100.0   |

Most of the students 50.6% agreed that they took alcohol monthly majorly during mid-term breaks and even when there is an outing. About 27.2% of the sampled students said that they took alcohol 2-3 times in a month and 22.2% of the students said that they never took alcohol. The results are as shown in table 4.5 below.

### 4.3.2 Rate of Alcohol Intake by Students

**Table 4.7 How often is the Intake of Alcohol by Student**

| Rate              | Frequency | Percent |
|-------------------|-----------|---------|
| Monthly or less   | 171       | 50.6    |
| 2-3 times a month | 92        | 27.2    |
| Never             | 75        | 22.2    |
| Total             | 338       | 100.0   |

Findings shown in table 4.8 show that most students 92.3% could not stop drinking this could mean that majority of the students sampled agreed that there is addiction to alcohol. A 4.4% of the sampled students agreed that some students could not spend a month without drinking and about 0.9% of the students said that they could not spend less than a month before drinking.

### 4.3.3 Students' Addiction to Alcohol

**Table 4.8 Period Student could not stop Drinking**

| Response          | Frequency | Percent |
|-------------------|-----------|---------|
| Never             | 312       | 92.3    |
| Less than monthly | 3         | .9      |
| Monthly           | 15        | 4.4     |
| Weekly            | 8         | 2.4     |
| Total             | 338       | 100.0   |

### 4.4 Social Factors Leading to Alcohol Intake among Secondary Students

The results in table 5.1 below show the result on availability of alcohol to students either at home or school. Most of the students strongly agreed that they had alcohol back at home, this was not limited to neighborhood, and this was about 271 out of 338 which were 71.3%. Additionally, 73 out of 338 students sampled also agreed that alcohol was available at home and at times in the homes nearby the school, this was about 21.6% only 3 students out of 338 disagreed when asked about availability of alcohol at home and in school this was about 0.9% further, only 1 student strongly disagreed that there was alcohol at home and school neighborhood, this was about 0.3%. The results in Table 5.1 above concur with (Babor et al, 2003) research which indicated availability of alcohol as

a strong determinant of alcohol consumption among the students. Most of the students stated that they took alcohol because it was available and affordable back at home. Students interviewed some were day scholars and they agreed that alcohol availability at home made them take alcohol. Students who had easier access to alcohol around the community tended to drink alcohol. This is consistent with previous studies (Wechsler et al, 2003; Dent et al, 2005).

#### 4.4.2 Availability of Alcohol at Home and School Neighborhood

**Table 4.9 Availability of Alcohol at Home and School neighborhood**

| Response          | Frequency | Percent |
|-------------------|-----------|---------|
| strongly agree    | 241       | 71.3    |
| Agree             | 73        | 21.6    |
| Neutral           | 20        | 5.9     |
| Disagree          | 3         | .9      |
| strongly disagree | 1         | .3      |
| Total             | 338       | 100.0   |

Findings in table 5.0 show the responses from students in relation to learning to drink alcohol. Most of the students (62.7%) strongly agreed that they learnt drinking through imitating what their parents and teachers do. About 94 out of 338 (27.8%) students agreed that they majorly learnt alcohol drinking from their parents and teachers; 4.1% of the students were neutral; 5.0% of the students disagreed while only an estimate of 0.3% of the students sampled strongly disagreed. The result above concurs with Newbury-birch et al, (2009) research findings on the role of family members in the initiation of students

into alcohol intake. Most of the students noted that they learnt drinking from their parents and even from their teachers who drank alcohol. Nash et al., (2005) emphasized that adolescents with parents who strongly disapprove drinking are less likely to drink alcohol while students with parents who approve drinking are likely to drink alcohol.

According to Barnes and Welte (1986), when parents disapprove of drinking, students are less likely to drink and if they drink, they consume less alcohol. McDermott (1984) reported that parental drug attitudes, as perceived by the adolescent, have stronger effects on adolescent drug use than does parental drug use. Andrews, Hops, Ary, Tildesley, and Harris (1993) observed that both parental attitudes and behavior influenced adolescent substance use.

The result also concurs with Newburg (2009) research that shows that relationship in a family play a role in development of student's behavior. Good family relations work as protective factor while poor relations often lead to increased probability of early initiation with drinking and higher levels of alcohol abuse

For instance, a male student stated that:

Yes I take alcohol and the main reason is that I learnt from my father's daily drinking habit. I tried it once and found that I got steamed up...since my father never complained and a time I accompanied him to busaa den he praised me as the 'lion' and a real son (Male, Form Three Student).

Another key informant added that:

Most fathers in this area drink a lot and you know their children copy their behaviour. I know that behaviour such as drinking habits are learned and depends with the environment where the child was brought up. In some cases we have found children with their parents in the drinking dens taking busaa...they call it 'uji' porridge. However, students graduate from simple traditional brew to more refined brews (Chief, 45years old).

This statement shows that parents or any authority figure in the family can influence a child's behavior positively or negatively. Another female student attributed student's alcohol intake to teacher's behaviors back in the village. The student said:

You know some of students drink because they see teachers drinking after classes...some teachers drink in the students home thus the student tend to copy aspect of drinking from them (Female, Form Two Student).

Therefore, it emerged from this study that adults who associate with adolescents are likely to influence the attitudes and behaviors of the adolescents. If adolescents see their parents or other significant adults using drugs or if the attitudes of the adults are tolerant of drug use, adolescents may be inclined to experiment with drugs, acquire accepting attitudes toward drug use, and choose friends who use drugs. Often parents are significant adults for adolescents but other relatives, teachers, neighbors, and employers may also influence adolescent drug use. It is probable that adolescents acquire attitudes favorable or unfavorable to drug use through their interactions with parents and other adults as stated in one of the tenets in the social learning theory.

#### 4.4.3 Learning to Drink from Parents/Teachers who drink

**Table 5.0 Learning from Parents/Teachers who drink**

| Response          | Frequency | Percent |
|-------------------|-----------|---------|
| Strongly Agree    | 212       | 62.7    |
| Agree             | 94        | 27.8    |
| Neutral           | 14        | 4.1     |
| Disagree          | 17        | 5.0     |
| Strongly disagree | 1         | .3      |
| Total             | 338       | 100.0   |

Peer group acts as a secondary socialization agent and they make in turn influence child's attitude, behavior and morals hence it was important to find out whether student's peer

influence as a social factor leads to alcohol intake among them in school as it is in line with one of the tenets of social learning theory which is differential association which one adopts alcohol intake depending on his friends and the people he is close to. . From table 5.1 below it is very evident that most of the students (66.9%) strongly agreed that their peers influenced them to take alcohol. In addition, an estimate of (29.3%) agreed that their peer influenced them to take alcohol. An estimate of 2.4% of the students sampled were neutral to answer this question; about 0.9% of the students disagreed while an estimate of 0.6% of the students sampled strongly disagreed.

The results above supports Webb *et al.*, 2002 arguments that along with parents and family, peers are also a major source of influence, socialization and development for adolescents this is due to the fact that it has been estimated that older adolescents may spend approximately twice as much time with their peers as they spend with parents or other adults hence easily influence one another's behavior.

According to Fromme and Ruela (1994) although parents and peers were both influential in defining standards of drinking, peers were more influential in terms of affecting actual drinking behavior. Clapp et al. (2000) found that parties, dates and socializing and being with friends were the most common situations where students reported their last heavy drinking event took place. The arguments above were supported by most of the students interviewed in sampled schools in Ndhiwa division. For instance students stated that:

In school students form groups based on where one is coming from for instance a particular village. These groups a times consists of those who drink and they in turn influence other students who are in these groups hence could also take alcohol (Male, Form Four Student).

During night discos that majority of day scholars attend, students tend to charge themselves (drink alcohol) and peers play a role here that is they determine the degree of drinking they even buy to their friends who do not have money (Female, Form Three Student).

Another key informant added that:

In a school set up, student group themselves in terms of villages and towns where they come from. These groups sometimes have a good or bad influence. For day scholars, they attend night vigils where they attend discos after burials 'disco matanga'. They behave in badly in those discos, the student in most occasions due to bad peer influence drink alcohol (school principal, 45 years old)

#### 4.4.4 Peer Influence

**Table 5.1 Peer Influence**

| Response          | Frequency | Percent |
|-------------------|-----------|---------|
| Strongly agree    | 226       | 66.9    |
| Agree             | 99        | 29.3    |
| Neutral           | 8         | 2.4     |
| Disagree          | 3         | .9      |
| Strongly disagree | 2         | .6      |
| Total             | 338       | 100.0   |

Findings from table 5.2 show the students responses whether alcohol taking is part of transition from childhood to adulthood. Most of the students 79.0% strongly disagreed with this and about 19.8% disagreed while about 1.2% of the students sampled for this study were neutral. The finding differs with Parry and Bennett's (1998) research in South Africa that regarded alcohol as the rite of passage from childhood to adulthood and that students have been made to believe that alcohol is woven into the social fabric culture. The

study also differs with the findings of Akyeampong (1996) which reported alcohol as being viewed as part of the social life and a cultural leitmotif among the Luo community.

#### 4.4.5 Alcohol as part of Transition from Childhood to Adulthood

**Table 5.2 Alcohol is part of Transition from Childhood to Adulthood**

| Response          | Frequency | Percent |
|-------------------|-----------|---------|
| Neutral           | 4         | 1.2     |
| Disagree          | 67        | 19.8    |
| Strongly disagree | 267       | 79.0    |
| Total             | 338       | 100.0   |

## **CHAPTER FIVE: SUMMARY, CONCLUSION AND RECOMMENDATIONS**

### **5.1 Summary**

Based on the study finding in objective one it emerged that there is high alcohol intake among secondary school students and male students are leading in alcohol intake. The study also reported day scholars as leading in alcohol intake due to availability of many brewing dens and also night discos in the villages.

From the study findings in objective two it emerged clearly that there existed a number of social factors that influenced intake of alcohol among secondary school students in Ndhiwa division. These factors ranged from the individual level to successively broader interpersonal, institutional, community, and societal levels. The major cited factors leading to alcohol intake among secondary school students in the area of research are peer pressure, imitation of alcohol intake from parents and teachers and availability of alcohol in the school neighbourhood or at home. The other noticed factors cited by key informants include alcohol being viewed as a transition from childhood to adulthood; lack of strict supervision by the significant others in the life of the students and positive marketing.

### **5.2 Conclusion**

It is evident from the study that students in the age bracket 16-20 were the majority who were interviewed. The finding from the study also reported high alcohol intake among the male students, day scholars and students who were staying with the guardians. The researcher concludes that there is high alcohol intake among the students in the area of research at 57.4% and also the rate of alcohol intake is high since students accepted taking alcohol monthly at 50.6% .The students cited outings, term breaks and discos as first places where they first tested alcohol. The findings reported students getting hard time to stop alcohol intake a sign of acceptance by the students that alcohol has some addiction.

The study findings reported that peer pressure, availability of alcohol and imitating behavior of teachers and parents are some of the main factors leading to alcohol intake

among the secondary students. It is also evident from the study that culture and pleasures associated with alcohol intake as some of the factors leading to alcohol intake among the students as evidenced by key informant comments. Laxity in implementation of school rules and parental guidance are also viewed in the study as some of others factors that lead to faster increase of alcohol intake among secondary students as reported by key informants.

While students continue to take a lot of alcohol at tender age when they are supposed to structure their future, the world will fail in its obligations to children; it will also fail to meet its development aspirations as laid out in such documents as the Millennium Agenda with its Millennium Development Goals.

### **5.3 Recommendations**

This study acts as a blue print for researchers interested in alcohol and drug abuse. This is because there is need for more research to be carried out in this field to know effects of other dangerous drugs like bhang among students which go hand in hand with alcohol.

There is need for effective societal structures to be properly integrated to help reduce the extent of alcohol intake among students in the society. This calls for involvement of all stakeholders inclusive of students from the beginning of decision and policy making and finally the implementation. The family as the fundamental group of society and the natural environment for the growth and well-being of all its members and particularly youths should be afforded the necessary protection and assistance so that it can fully assume its responsibilities within the community of bringing up responsible citizens.

Bars and brewing sites should be located away from learning institutions and residential homes for those who are licensed to operate the business while the unlicensed should be stopped from operation.

Parents and teachers must act as good role models if we are to protect our students from indulging in alcohol intake at an early age since most students emulate what they practice.

Creation of public awareness on the effects, factors leading to alcohol intake and possible control mechanisms to prevent student from over indulging in alcohol intake is necessary in rural areas.

Empowering rural people is an essential first step to eradicating poverty and reducing alcohol intake. This will reduce brewing dens and also stress in struggling to get basic needs. Community based preventive and response measures should be designed to reduce social risk and cultural influences towards alcohol intake. Comprehensive efforts are needed to eliminate socioeconomic and cultural values that encourage alcohol intake as a stage of passage from childhood to adulthood.

## REFERENCES

- Andrews, J. A., Hops, H., Ary, D., Tildesley, E., & Harris, J. (1993). Parental influence on early adolescent substance use: Specific and nonspecific effects. *Journal of Early Adolescence*, 13, 285–310.
- Akers, R.L. & Sellers, C.S. (2004). *Criminological Theories: Introduction, Evaluation, and Application* (4<sup>th</sup> ed.). Los Angeles: Roxbury Publishing.
- Akers, R.L., & Silverman. A.L. (2004). Toward a Social Learning Model of Violence and Terrorism. In M. Zahn, H. Brownstein and Shelly Jackson (Eds.), *Violence: From Theory to Research* (pp. 19–35). Cincinnati: LexisNexis and Andersen Publishing.
- Akyeampong, E. (1996) ; *Drink, power, and cultural change: A social history of Alcohol in Ghana, C.1800 to recent times* Oxford: James Currey.
- Alem, A. & Kebede, D. (2006). Alcohol and substance abuse. In Epidemiology and ecology of health and diseases in Ethiopia. Addis Ababa: Ethiopian Public Health Association (EPHA)
- Arata, C.M., Stafford, J., & Tims, M.S. (2003). High School Drinking and its consequences. Retrieved from <http://findarticles.com>
- Austin, E.W. & Knaus, C. (2000). Predicting the potential for risky behavior among those too young to drink as a result of appealing advertising. *Journal of health communications* 5:13-27.
- Babor, R., Caetano, S., Casswell, G., N., Giesbrecht, P., & Graham, I. (2003). *Alcohol :No ordinary commodity-Research and public policy* .England: Oxford University Press.
- Bandura, A. (1977). *Social Foundations of Thought and Action: A Social Cognitive Theory*. Englewood Cliffs, NJ, Prentice-Hall.
- Barnes, G. M., & Welte, J. W. (1986). Patterns and predictors of alcohol use among 7–12th grade students in New York State. *Journal of Studies on Alcohol*, 47, 53–62.

- Basangwa, D. (2006) Prevalence of substance use among students in Kampala Secondary Schools, Unpublished work, MA Dissertation Makerere University at Kampala.
- Bjarnason, T., Anderson, C., Choquet, M., Elkes, Z., Morgan, M., & Rapinett, G. (2003). Alcohol culture, family structure and adolescent alcohol use; Multilevel modeling of frequency of heavy drinking among 15-16 years old students in 11 European Countries. *Journal of studies on alcohol*, 64(2); 200-209.
- Borg, R.W., & Gall, M.D. (1993). *Educational Research; An Introduction. (6th Ed.)*. Columbus, OH: Merrill Publishing Company.
- Buddy ,T. (2008) .Majority of Adolescents Drink alcohol. ,Retrieved from [http://alcoholism about .com/6/2008/04/16/ majority-of-adoloscents-drink-alcohol.htm](http://alcoholism.about.com/6/2008/04/16/majority-of-adoloscents-drink-alcohol.htm).
- Chaloupka, F. J., Centers, P., & Tauras, J. (2010). *Economic models of addiction and applications to cigarette smoking and other substance abuse. Policy*. Chicago, IL. Available at: <http://tigger.uic.edu/~fjc/Presentations/Slides/rational.addiction.pdf>.
- Charles, H., Patrick., & Durham,NC,(1952): Alcohol ,Culture, and Society: Duke University Press.
- Clapp,J .D., Shillington, A.M. & Segards,L.B. (2009). Deconstructing contexts of binge drinkers among college students. *Amer.J.Drugs Alcohol Abuse* 26:139-154.
- Coggens, N.,and McKeller,S.(1995).The facts about Alcohol Aggression and adolescence,London ;Cassel.
- Curie., C, Molcho M, Boyce W,Holstein B,Torsheim T., & Richter M. (n.d). Researching health inequalities in adolescents: the development of the Health Behaviour in School-Aged children (HBSC) family affluence Scale –Soc -Sci Med 2008;66(6): 1429-36.
- Dent.,C, W,Grube & JW,Biglan,A: Acommunity level alcohol availability and reinforcement of possession laws as predictors of youth drinking .Prev med 2005;40:355- 62.
- Diener, E. & Crandal, R (1978). *Ethics in social and behavioral research*. Chicago: University of Chicago Press.

- District Education's Office (2012). Annual Report. Unpublished report. Ndhiwa District
- Fatoye FO & O Marokimyo Substance use amongst Secondary School Students in rural and urban Community in South western Nigeria. *EAMJ*; 2002; 79(6) 299-305.
- Fromme, K.ANS Ruela, A Mediators and Moderators of young adults, drinking. *Addiction* 89:63-71, 1994.
- Gall, M.D. *et al.* (2007). *Educational Research; An introduction.* (8<sup>th</sup> Ed.). Boston: Pearson Education Inc.
- Global status report on alcohol (2004). World Health Organization .Geneva:
- Gruenewald.,P,J;A,;Ponicki,W.R & Brinkley,G. Physical and economic access to alcohol.
- Gumede,M.V (1995). Alcohol use and Abuse in South Africa .A socio-medical problem.Pietermaritzburg: Reach of publishers
- Guy LR. Educational Research competences for analysis and application Charles Mairill publishing Company.
- Harris.,M.M.,& Fennell,L.(n.d.).A multivariate Model of jobs stress and alcohol consumption ,*Sociological Quarterly* ,29 (3) ,391-406.
- Hewitt,.A.(1988). Understanding alcoholism. San Francisco; Harpet and Row.
- Jernigan, D. H. (2001). *Global Status Report : Alcohol and Young People.* New York: World Health Organization.
- Johnson, L. D., O'Malley, P. M., & Bachman, J. G. (2000). *National survey results on drug use from the monitoring the future study, 1975-1999 Volume 1: Secondary School Students.* Ann Arbor, MI. United States of America: University of Michigan.
- Kebede. D., Alem. A, Mitike, G., Enquesslassie, F., Berhane, F., Abebe, Y., Ayele, R., Lemma W., Assefa, T., & Gebremichael, T. (2005). Khat and alcohol use and risky sex behaviour among in-school and out-of-school youth in Ethiopia. *BMC Public Health* 2005, 5:109.
- Kothari C.R (2005). *Research Methodology; Methods and techniques* (3<sup>rd</sup> ed) New age international (P) LTD Publishers .New Delhi.

- Kuria, M.W. (1996). Drug abuse among urban as compared to rural secondary schools students in Kenya: a short communication. *East Afr Med J.* 73(5):339-349.
- Madu, S.N., & Matla, M.Q. (2003). Illicit drug use, cigarette smoking and alcohol drinking behaviour among a sample of high school adolescents in the Pietersburg area of the Northern Province. *South Africa. J Adolesc,* 26(1):121-136.
- Mason, W.A. & Windle, M. (2001). *Family ,religious ,school and peer influence on adolescent alcohol use: A longitudinal study. . East Afr Med J.* 73(5): 44-53.
- McDermott, D. (2011). The relationship of parental drug use and parents' attitudes concerning adolescent drug use to adolescent drug use. *Adolescence,* 73, 89–97.
- Modiba ,I .2011.Rise the legal drink age. The new Age .<http://thenewage.co.za/12553-1015-53-%E2%80%9898-Raise-the-legal-drink-age-%E2%80%99>.(Accessed 14 March 20110.
- Muganda C. (2003 October 27) Alarm over substance unrest in schools blamed on substance abuse Daily Nation; p6.
- Mukama, J.W. (2010) .The effects of strikes on academic performance in selected schools in Jinja district, unpublished work, BA Dissertation, Makerere University Kampala.
- Muller, S., Piontek, D., Pabst, A; & Kraus ,L.(2011). The relationship between alcohol consumption and perceived drunkenness a multilevel cross –national comparison in samples of adolescents. *Alcohol and alcoholism*
- Muma, HM. (2008). Influence of Substance Abuse on discipline amongst students of public secondary Schools in Nakuru municipality, Kenya. Master of Education Thesis Maseno University.
- Nash, S.G., McQueen, A., & Bray, J.H. (2005). Pathways to adolescents alcohol use,family environment ,peer pressure, and parental expectations. *The journal of adolescents health: Official publication of the Society for adolescents medicine,*37(1) 19-28.
- Nakamyuka, B. (1982). A study of attitudes of boarding and day secondary students towards alcohol and problem drinking. Unpublished work, BA Dissertation, Makerere University at Kampala.
- Ndhiwa police station (2012). Annual Report. Unpublished report. Ndhiwa District.

- National Campaign against Drug Abuse (NACADA) & Kenya institute of public policy research and Analysis (KIPPRA) (2010). National Education Institutional Survey on drugs and substance in Kenya. Nairobi, Kenya: NACADA.
- National Campaign against Drug Abuse (NACADA 2011). Alcohol and Drug abuse in Kenya National Baseline Survey on substance abuse in Kenya, Government Printer Nairobi; Kenya.
- National statistical office .The cigarette Smoking and alcohol drinking behavior survey 2004.Bangkok: National Statistical office, 2005(in Thai).
- Newbury-birch, D.,Walker, J., Beyer, F., Brown,N.,Jackson,K., & Lock ,C.A.,(2009). Impact of alcohol consumption on young people. A systematic review of Published reviews. Nothngam.
- Orodho, A.J. (2003). Essentials of Education and Social Science Research Methods. Nairobi:Mazola Publishers.
- Odek-Ogunde, M., & Pande-Leak, D. (2009). Prevalence of substance use among students in a Kenyan University: a preliminary report. *East Afr Med J.* 94-100.
- Onya HE, Flisher AJ & Mashambe TJ. Cultural orientation and homebrewed alcohol use among high school students in a rural South African community. *J Psycho Afr* 2006; 1:65-76.
- Otieno A (2005). Drug abuse in secondary school students, Kisumu city western Kenya. Master of Public Health thesis, Maseno University, Kisumu.
- Parry ,C.D.H., & Benetts ,A. (1998). Alcohol policy and public health in South Africa.Cape Town: Oxford university Press.
- Peltzer K. & Cherian L. Substance abuse among urban and rural secondary school pupils in South Africa .*Psychol Reports* 2000;87 (2) : 582-584.
- Presley,C.A.,Mellman,P.W., Cashin,J.R. & Lyeria ,R. (1996). *Alcohol and Drugs on American college campus use, consequences and perceptionof the campus environment.* Carbonate, IL: Core institute, Southern Illinois University.
- National Council for Population and Development (2011). Facts and Figures for Population and Development

- Poulin C.& Elliot D. Alcohol, Tobacco and Cannabis use among Nova Scotia ,adolescents; Implication for preventive and harm reduction .Can.Med. Assoc. J..1997;156(10): 1387-1393.
- Rehm J,Room R, Monteiro M,Gmel G,Graham K,Rhn N,Sempos CT & Jernigan D: Alcohol as a risk factor for global burden of diseases.Eur Addict Res 2003,9(4) : 157-164.
- Reda ,Moges ,Wondmagegn & Biadgilign: Alcohol drinking patterns among high school students in Ethiopia: a cross-sectional study. BMC Public Health 2012 12:213.
- Republic of Kenya (2004) .Youth in peril; Alcohol and Drug abuse in Kenya, Nairobi: Government printer.
- Republic of Kenya (2009).Statistical Abstract. Nairobi: Government printer
- Schulenberg, J., Bachman, J.G.,Wadsworth, K.N., & Johnson, L. (1996). Getting drunk and growing up: Trajectories of frequent binge, drinking during the transition to young adulthood .*J study alcohol*, 57(3): 289-304
- Simatwa E.M.W, Odhong S.O; Juma S.L.A. & Choka G.M ( 2014). Substance abuse among public secondary school student's prevalence, strategies and challenges for public secondary school managers in Kenya; a case study of Kisumu East Sub county.Educ.Res. 5(8): 315-330.
- Siringi, S. (2003). *Kenya: Alarm Over Drugs: Nacada Study Cites Rampant Drug Abuse*. Daily nation (Kenya) Monday, 27<sup>th</sup>. October 2003
- Trimbos-Instituute. (2010). *Nationale Drug Monitor,jaarbericht 2009*.Utrecht;Trimbos-instituut.
- Towl, D.2004. Alcohol use and Tertiary Students in Aotearoa-New Zealand .ALAC Occasional publication No.21: 1-40.
- United Nations Drug Control Programme. Report on the Drug Situation in Kenya ,1998-2001.
- Van der Sar, R., Brouwers, E.P.,M.,& Van der Goor,I.A.M. (2011). The opinion of adolescent and adult on Durch restrictive and educational alcohol policy measures .
- Webb,E., Ashton,C.H., Kelly,P. & Kamali, F.(2002).*Alcohol and drug use in UK*

*University students*. London: Lancet.

Wechsler., H. Dowdall., G.W., Darenport, A., & Castillo, S. (1996). Correlates of college student binge drinking. *American journal of Public Health*. 55(3): 289-299.

White, A.M., Jamieson–Drake, D.W., & Swartzwelder, H.S. (2002). Prevalence and Correlates of alcohol–induced blackouts among college students: Results of an e–mail survey. *Journal of American College Health* 51:117–131.

World Health Organization (2004) .Global Status Report on Alcohol .Geneva: WHO Publishers

World Health Organization (2011).Global Status Report on Alcohol .Geneva: WHO publishers.