

# The Nature and Extent of Alcoholism in Communities in Vihiga County, Kenya

Valentine Cheron<sup>1</sup>, Professor Jacob W. Wakhungu<sup>2</sup>, Dr Simiyu Ruth, Ph.D.<sup>3</sup>

<sup>1</sup>(MSc. Disaster Management and Sustainable Development), Masinde Muliro University of Science and Technology

<sup>2</sup>Department of Agricultural Land use Management, Masinde Muliro University of Science and Technology

<sup>3</sup>Department of Peace and Conflict Studies, Masinde Muliro University of Science and Technology

**Abstract:** Drug abuse is one of the top problems confronting nations and communities today. The study problem was the lack of a comprehensive approach that yields significant impact in addressing specific socio-economic challenges of alcoholism on the welfare of communities. The study objective was to determine the nature and extent of alcoholism in communities in Vihiga County. Social learning theory by Albert Bandura guided the study. Cross-sectional survey research design was employed. The sample size was 400. Primary data collection utilized questionnaires, interview guides, observation checklists and Focus Group Discussion guides. Secondary data collection utilized alcohol related resources. Cluster, proportional stratified and snow-ball sampling were used for household members. Census and purposive sampling were used on key informants. Quota sampling was conducted for business community. Quantitative data was analyzed using descriptive statistics specifically frequencies, percentages and mean. Qualitative data analysis and interpretation utilized data coding and narrative analysis. Results indicate that 50% believe that social factors lead to alcoholism while 20% alluded unemployment as the main reason making Vihiga County a potential market for alcohol. The study concluded that, it will be easier to achieve positive results if government policies and laws are effectively implemented. The study recommends that; There is need to enhance discipline for the law enforcers to ensure they effect the Alcoholic Drinks and Control Act 2010 effectively without being corrupted or favoring/fearing anybody in the community. Justification of this study was that, alcoholism menace has social effects in the community which includes family breakages, domestic violence among others. Thus, alcoholism effects play a critical role in negatively affecting the communities' economic welfare.

## I. BACKGROUND TO THE STUDY

The consumption of alcohol is not a new concept; it's a problem all over the world. The World Health Organization (WHO) estimates that there are about 2 billion (33%) people worldwide who consume alcoholic beverages and 76.3 million with diagnosable alcohol use disorders (WHO, 2016). Making alcohol the most widely used and abused substance world over (Basangwa *et al.*, 2006). The widespread use of alcohol is fueled by ease of its production process (a plain process of fermentation achieved by yeast acting on sugar) and multiple daily usages for recreation, curative and religious purposes (Basangwa *et al.*, 2006). Alcohol use, however, has serious health and social effects making its prevention and control a public health priority.

In Australia alcohol intoxication is responsible for 30% of road accidents, 44% of fire injuries, 34% of falls and drowning, 16% of child abuse cases, 12% of suicides, 10% of industrial accidents and 67% of the years of life lost from drinking (G.S. A, 2010). In a study of alcoholism in a crowded slum area of Nairobi by Wanjiru (2001) found an astonishing prevalence of alcoholism: 46% of males and 24% of females could be classified as alcoholics according to the criteria of the World Health Organization. Due to the high prevalence of alcohol abuse in the country, the government enacted the Alcohol Control Act in 2010 (GoK, 2012). The object and purpose of the Act is to provide for the control of the production, sale, and use of alcoholic drinks. Vihiga County Education Statistics (2012) indicate that women consume local liquor like 'Busaa' and 'chang'aa' at a rate of 87% as compared to beer brands. The supply of illicit brew is majorly at large in Kakamega County. Emuhaya Sub-County in Vihiga County records the highest incidents of alcohol consumption (68%) (NACADA, 2011). Measures undertaken by the County Government of Vihiga to prevent alcoholism menace include the seconding by the County governor to the declaration of alcohol and drug abuse as a national disaster in 2014. Also, Vihiga County Assembly passed a bill to legalize illegal brews and alcohols (Vihiga County, 2014 Alcohol ACT).

### Statement of the Problem

According to NACADA (2012), 5.8% of Vihiga County residents are abusing alcohol and another 5.5% are dependent on alcohol use. Published studies on alcohol and drug abuse and violence indicate that, the percentage of violent offenders who were drinking at the time of the offences follows up to 86% of the homicide offenders 37% of the assault offenders 60% of sexual offenders, up to 775 men and 20% of women involved in marital violence and 13% of child abuses in a community (Roizon, 2007).

Drinking alcohol is a social and cultural practice that is carried out in many parts of the world. In Vihiga County, specifically, alcohol drinking has been as a tool of social engagement, where certain categories of persons meet to share their social issues and trends as they unfold. Though alcohol drinking is a matter of personal choice, in Vihiga most consumers are trapped into these engagements by social classes they form early in their lives. With current competition

in production of these drinks by a number of producers, there is likelihood of having more young adults in the race. Though alcohol consumption ought to be an activity that is used beneficially by the consumer, there are trends where young adults aged between 15 years to 25 years consume alcohol in a bid to maintain their companions or otherwise belong in a peer group.

Despite government and NGO interventions towards alleviation of the problem of alcoholism, there are inadequate strategies to help mitigate specific socio-economic challenges of alcoholism (Kwamanga, 2003). In Vihiga County, interventions on alcoholism for Household heads by government have been reactive rather than preventive. Although governmental raids on alcoholism keep mushrooming the socio-economic effects of alcoholism is also on the rise. The study problem was the lack of a comprehensive approach that yields significant impact in addressing specific socio-economic challenges of alcoholism on the welfare of communities.

#### *Research Objective*

To determine the nature and extent of alcoholism in rural communities of Vihiga County, Kenya

#### *Research Question*

What is the nature and extent of alcoholism in rural communities of Vihiga County, Kenya?

## II. LITERATURE REVIEW

Drug abuse is one of the top problems confronting the world today. Incidences of drug and alcohol abuse and related anti-social behavior have tremendously increased in recent years. This has become a matter of concern to the government, parents, teachers, non-governmental organizations and all other relevant agencies (Brown *et al.*, 2004). Alcoholism is more prevalent than authorities suspect. World Health Organization (WHO) normally estimates the scale of alcohol consumption on the basis of recorded alcohol data, which refers to licensed liquor and unrecorded alcohol data that refers to unlicensed liquor (Honik *et al.* 2002) The unrecorded alcohol in Kenya constitutes traditional and illegal beverages (like *chang'aa*) that are poorly monitored for quality and strength and often contain impurities and adulterants. For instance, *kumi kumi* is illicit liquor made from sorghum, maize or millet but contains methanol and is adulterated with car battery acid and formalin (Spear, 2004). This study therefore sought to establish the effect of these local brews on the socio-economic welfare of communities in Vihiga.

#### *Theory Relevant to the Study*

This research was guided by Social Learning Theory by Albert Bandura (Bandura, 1986). According to the Social Learning Theory everything we do has been learned. Much learning in humans, results from observing the behavior of others and from imagining the consequences of our own actions. Often people in the society copy the behavior they

have observed from others. Social learning Theory therefore, explains alcoholism life as a coping mechanism learned through observation or experience. Modeling is a contributory factor to learning alcoholism as well. This theory maintains that the likelihood of repeated deviant behavior is contingent upon reinforcement. Intergenerational transmission of violence is one component of social learning theory (Colby, 2004). This aspect maintains that individuals who witness or experience alcoholism in their immediate social and physical environment are more likely to integrate into the alcoholic life through behavioral socialization. This theory is relevant to this study because, the principles of observational learning, imitation and intergenerational transmission of alcoholic behavior will be used as a guide in understanding the causes and situation of alcoholism on communities' welfare. The social interactions that have the greatest influence are with the people who mattered to us as we grew up. This includes parents and other family members. It might also include a neighbor or teacher. Maybe we noticed our parents only ever relaxed and had fun when they gambled (perhaps playing cards with friends). In the absence of other healthier examples, it would seem those activities were good ways to relax, have fun, and reduce stress. We can attribute this to social learning. (MentalHelp.net, 2015)

#### *Study Site*

The study was carried out in Vihiga County, Kenya. Vihiga County is the largest rural urban county in Kenya (KNBS, 2009). Vihiga county is located in the western region of Kenya and lies along 34 30' and 35 0' east and latitude 0 and 0 15 north. The Equator cuts across the southern tip of the county. The county borders Kakamega County to the North, Nandi County to the East, Kisumu County to the South, and Siaya County to the West. The County covers a total land area of 531.0 Km<sup>2</sup> (MoD and P, 2013). The county has four sub-counties. Emuhaya Sub-County is the most expansive sub-county covering 173.5 Km<sup>2</sup>, followed by Hamisi (156.4 Km<sup>2</sup>), Sabatia (110.9 Km<sup>2</sup>) and Vihiga (90.2 Km<sup>2</sup>). The sub-counties are subdivided into nine divisions, 37 locations, and 129 sub-locations. Mbale Town is the administrative capital of the county. The County has five electoral constituencies, namely: Emuhaya, Luanda, Hamisi, Sabatia and Vihiga. The constituencies are further divided into 25 electoral wards as follows: Emuhaya -3 wards, Luanda-5 wards, Hamisi-7 wards, Sabatia-6 wards and Vihiga-4 wards (MoD and P, 2013).

#### *Research Design*

The study employed a cross-sectional research design. The rationale for using this design is based on the fact that cross-sectional research design is a type of observational study design in which an investigator measures the outcome and the exposures in the study participants at the same time. It is used to study what is happening in the society.

### Study Population

The study population comprised of 330,051 rural households in Vihiga County communities from 4 sub-counties, 169 Government departments OFFICES dealing with alcohol and drug issues, 10 Alcohol rehabilitation interventions including the governmental based and non-governmental based programmes in Vihiga County. The County Commissioner's office, County social development officers, County health officer, County NACADA coordinator, area chiefs and assistant chiefs and religious leaders were included in the study.

### Sampling Strategy

Sampling involved a combination of various methods; quota, purposive, systematic random, proportional stratified and snowball sampling methods.

The researcher determined the systematic random sample sizes as indicated in Fisher's formula.

$$n = Z^2pq/d^2$$

Where,

n = the desired sample size

Z = the standard normal deviate at the required confidence level (95 %) is 1.96

p = proportion in the population estimated to have characteristics being measured in study

$$q = 1-p$$

d = the level of statistical significance set for desired precision of variable estimate is 0.05

As guided by Fishers *et al.*, (1983), thus in a target population of 330,051 (KNBS, 2013) households in 4 sub-counties, If the proportion of a target population with certain characteristics is .50, the z-statistic is 1.96, and the desired accuracy at .050 levels.

$$\text{Then, } p = 0.5; q = 1-p = 0.5, d = q p, \text{ thus, } n = Z^2pq/d^2$$

$$n = (1.96)^2 (.50) (.50)/(0.05)^2 = 384 \text{ respondents}$$

### Data Collection and Analysis

Relevant data for this study were collected through primary and secondary sources. To effect primary data collection, four instruments were used; Questionnaires, FGD Guide, Interviews and Observation Checklists. The quantitative data was analyzed using descriptive statistics specifically measures of central tendency (percentages, frequencies and mean). On the other hand, qualitative data was analyzed using thematic content analysis which entailed coding, voice analysis and narrative analysis.

### III. RESULTS AND INTERPRETATION

The study found out that the main factors that predispose people in the study area to alcohol consumption are: corruption (89%), peer pressure (85%), idleness (58%), unemployment (54%), poverty (52%), marital problems (37%), media influence (34%) and work-related stress (26%). However, Nery (2019) identified the repetition of the family history of alcoholism as the clinical picture of the alcoholic interfering with the relationship between the family members, bringing consequences for the whole family group; and the care provided to the alcoholic motivated by affective bonds, moral aspects, as well as by the fact that the alcoholic maintains a good social coexistence when sober. We noted the need for nursing to foster family participation in care actions, strengthening it to cope with the inherent difficulties of interactions, thereby contributing to healthy face-to-face relationships between alcoholics and their relatives.

Table 1: Factors Leading to Alcoholism in Vihiga County, Kenya

Factors that lead to excessive alcohol consumption	Frequency	Percent (%)
Corruption	150	89
Peer Pressure	143	85
Idleness	97	58
Unemployment	91	54
Poverty	87	52
Marital problems (disagreements between spouses, emotional and physical violence especially in front of children)	62	37
Media influence	57	34
Work Related Stress	61	26

Source: Researcher, 2019

In terms of corruption and its influence to alcoholism in Vihiga County, the study established that corruption was a contributing factor towards alcohol consumption in the study area. Respondents pointed out that law enforcers allowed selling of alcohol outside the stipulated hours as long as they were bribed. To compound the problem, respondents reported that there are well known liquor dens that sell methanol-laced liquor but they are untouchable because they give law enforcers hefty bribes (anonymous, 2018).

One of the respondents was quoted as saying:

“Our police are the source of all these problems. They take bribes from bar owners and put people's lives on the line. We have for example a popular den where methanol-laced liquor is sold. In fact the place is called 'Kwa XXX wa methanol'. The police know about it but they receive monthly cash tokens from the owner thus they cannot stop him. The police have failed our village' (Field data, 2018).

As pertains peer pressure the study found out that peer pressure was also a factor predisposing respondents to alcohol consumption. Having friends who abuse alcohol or consume alcohol excessively encourages the same behavior as one tries to conform. Overall study findings indicate that one of the main causes of high alcohol consumption in Vihiga, County is peer groups especially amongst the youth.

One of the household head was quoted as saying:

“My son works very hard the whole day, and he does not drink on his own. However, when his groups of friends pass by and go out with him in the evening, he comes back at home at 3.00 am in the morning drunk, making noise and even abusing his father. I think his friends encourage him to drink” (Field data, 2018).

This signify that peer pressure is affecting most household members especially the youths. Alcoholism makes sons disrespect their parents. These findings are in line with Wills *et al*, (2001) who argued that peer influence plays a big role in influencing alcohol abuse.

According to the study, idleness came second at 58% in terms of its ability to lead to alcohol consumption. During an interview with 3 out of 5 chiefs explained that with the high levels of unemployment in the study area, most people are idle. Note that the majority of respondents 200(50%) in this study were over the age of over 46 years and idleness due to lack of employment predisposes them to stress as this is the period in life when their families and society expect them to be responsible. To deal with this pressure from family and society, most of them turn to alcohol.

One of the respondents explained that:

“I am the first born in a family of four and my parents are farmers. They educated me so that I can help my siblings but after form four I still don’t have a job. I prefer going to sit with my fellow jobless friends all day drinking than to sit at home and watch my mother ‘die’ because of poverty” (Field data, 2018).

This qualitative data showed that lack of employment was one factor that led to idleness hence alcoholism in Vihiga county. During the study 61% (102) of the 168 respondents further indicated that high alcohol consumption in rural households is moderately influenced by the need to cope with stress and these findings are in tandem with Nasibi (2003) who argued that some people turn to drugs as a coping mechanism due to a lot of mental stress in society and unachievable expectations from family members and friends.

The study rated unemployment as the third factor contributing to alcoholism at 91(54%). This is related to factor number two above because, when there are no jobs opportunities, people are likely to be idle thus engage in deviant behavior. One of the area chiefs explained that with the high levels of unemployment in the area, most people are idle.

Note that the majority of respondents in this study (55%) were aged between 20-35years and idleness due to lack of employment predisposes them to stress as this is the period in life when their families and society expect them to be responsible. What these findings point at is that, unemployment leads to idleness predisposes one to peer influence which in turn may encourage excessive alcohol consumption.

The area chief explained that:

“Majority of the people who drink excessively in my location are from poor families. They have no jobs, and even when they get little income from casual jobs such as in construction sites, they get excited and use all the money on alcohol to forget their problems” (Field data, 2018).

The other factor reported to contribute to alcohol consumption was marital problems at 37%; where 62 of the 168 respondents explained that disagreements between spouses, emotional and physical violence especially in front of children resulted in stress for the family members who later resulted to excessive alcohol consumption for stress management. Further, from the study findings majority of the respondents (59%) agreed that families that are characterized by issues of immorality, spiritual emptiness, lack of direction and purpose in life among other problems are more likely to engage in high alcohol consumption and 79% of the respondents also agreed that youths from disrupted families tend to get involved in substance abuse. The respondents stated that excessive alcohol consumption helped them feel good and relaxed by enabling them forget their problems and relieve anxiety even if for a short while. In addition, individuals who were abused as children have a higher risk for substance abuse later in life. The study findings are in tandem with Swadi (1999) who stated that psychological factors such as coping skills when stressed among others may cause individuals to develop alcohol and drug abuse problems.

Media influence came second last possibly because the study focused on a community setting whose inhabitants have minimal access to the Internet, Television and Print media which mostly contains advertisements that portray alcohol consumption as trendy. During an interview, one chief alluded that, the media adverts branded alcohol as a good thing, thus promoting its consumption especially amongst the youth generation. In Kenya, alcohol consumption is not only legal but socially acceptable. Gradually men and women have been reported to indulge in alcohol abuse, a practice that has become an issue of concern to the government and local communities (Chesang, 2013). Generally, the media through advertisements is purported to pose a great influence of alcoholism in Kenyan families. It has also become a common practice for people to hold social meetings in bars and clubs, hence encouraging drinking. Further, reports on alcohol abuse among people living in urban households come with other moral issues like socially unacceptable sexual adventures and parents – children conflict, which is brought about by the

permissiveness that parents bring up their children and exposure to technology. The misconception about the medicinal value of alcohol is one of the reasons for drinking. Some research suggests that moderate intake of alcohol prevents heart attack (WHO, 2005).

Communication media uses the power of advertising, which if well used can enhance stability of families, societal integration, and appreciation of human dignity. With the advancement of technology which includes the internet, social networking and cellular phones, access to information has become even easier. The youth are even more vulnerable to negative publicity today than in any other period in History. When used negatively both print and electronic media can be very destructive. This is especially with regard to promotion of alcohol and substance abuse among the youth. Alcohol marketing is one of the major risk factors for alcohol use (Monica et al 2011). Exposure to alcohol advertising and ownership of alcohol promotional items, such as t-shirts, lighters, matches, hats, or sunglasses with an alcohol brand name on it, increase the risk of alcohol use among adolescents. Alcohol marketing influences youth's attitudes and perceptions about alcohol, which are related to expectancies and intentions to consume alcohol beverages. In general, liking alcohol advertisements, such as displays of alcohol products in retail stores, retail store discounts, price specials, and coupons, is associated with an increased likelihood to use alcohol. Bagnall (1986), found that exposure to alcohol advertising in youth predicts youth's intentions of alcohol consumption up to two years later. Another study by American Psychiatric Association (1994) found that ownership of alcohol-branded merchandise was associated with a range of high-risk behaviours, poor academic performance, and early alcohol use initiation among youth. Mass media has become an avenue for publicity and a lot of advertisement has

Work-related stress has minimal contribution towards excessive consumption of alcohol in the study area. This is possibly because unemployment levels are high in the area with 54% of the respondents stating that unemployment is a major factor that leads to excessive alcohol consumption.

As one of the respondents stated,

“Work-related stress cannot be a contributing factor for me and most of my drinking mates because if we do not have work, how can we even talk about work-related stress? Our stress comes from lack of jobs” (Field data, 2018).

This imply that lack of employment is more significant to alcoholism menace in Vihiga county as compared to work-related stress. When residents don't have work engagements, they utilize their free time in cheap illicit alcohol dens. Alcohol contributes to short-term effects including loss of work productivity through absenteeism, lateness or leaving early, feeling sick at work, having problems with job tasks, accidents, and damage to co-worker and customer relations (Blum, Roman and Martin, 1993; Gordis,1999; Randerson, 2007). This further leads to organizational constraints in form

of high turn-over and subsequent recruitment, consumption of health benefits, for example, in case of illness or accidents that would result to compensation (Randerson, 2007). In the United States, alcohol and drug abuse by employees is estimated to contribute to company loss of \$100 billion a year (Buddy, 2003). Furthermore, alcohol abuse among employees can threaten public safety, for instance, in the case of neglect of essential duty as health/medical care, security or aggression among workers or with clients. Besides alcohol causes enormous psychosocial losses in terms of pain and suffering experienced by the users and their significant others as well as by the employer.

#### IV. CONCLUSION

This study conclude that alcohol abuse and particularly excessive alcohol consumption has adverse effects on communities' welfare in Vihiga County. This is evidenced by rampant excessive alcohol consumption despite the community's efforts at curbing the vice, regardless of the Alcoholic Drinks and Control Act 2010, and the adverse effects involved.

#### V. RECOMMENDATION

There is need to enhance discipline for the law enforcers to ensure they effect the Alcoholic Drinks and Control Act 2010 effectively without being corrupted or favoring/fearing anybody in the community.

#### REFERENCES

- [1] Anacker Allison M.J et al. (2010), Biological Contribution to Social Influences on Alcohol Drinking: Evidence from Animal Models.
- [2] Brown, S., A. and Tapert, S. F. (2004). "Health consequences of adolescent alcohol use".
- [3] In Reducing underage drinking: A collective responsibility, background papers. [CD-ROM]. Washington, DC: National Academies Press.
- [4] Brown, S.A, McGue, M., Maggs, J. Schulenberg, J., Hingson, R., and Swartzwelder, S. (2008). A development perspective on alcohol and youths 16 to 20 years of age paediatrics: USA
- [5] Chesang, R.K. (2013). Drug Abuse among the Youth in Kenya. International Journal of Scientific and Technology Research, 2(6):126 – 131.
- [6] Chebukaka, R. N. (2014). Drug Abuse among Students in Public Secondary Schools in Children and Adolescents: A Research-Based Guide for Parents, Educators, cigarette use among public day secondary schools' male student: a case of Nakuru
- [7] Fisher, C., and Lovell, A., (2009). Business Ethics and values: Individual, Corporate and International Perspectives, (3rd ed.). Edinburgh Gate, England: Pearson Education Ltd.
- [8] Foxcroft, D., R., and Lowe, G., (1997). "Adolescents' alcohol use and misuse: The from a study of U.K.teenagers". Journal of Substance Use, 8, 19–26.
- [9] Giannetti, V., J., Sieppert, J., D., and Holosko, M. J., (2002). "Attitudes and knowledge concerning alcohol abuse: Curriculum implications". Journal of Health and Social Policy, 15, 45–58. GSA, 2010 report on alcohol consumption, Government printer
- [10] Heath, D., B., (2000). Drinking Occasions: Comparative Perspectives on Alcohol and culture. Philadelphia, PA: Brunner/Mazel
- [11] Simiyu, R (2011). Illicit Brew Consumption in Kenya: Influence on Socio-economic Status of Households and Intervention Challenges.