

Socio-Demographic Factors Associated with Alcohol Abuse among Egerton University Students in Njoro-Kenya

Richard Kimuge Boitt, Monicah Lydia Boitt, Caleb Othieno, Anne Obondo
 University of Nairobi, College of Health Sciences, School of Medicine, Department of Psychiatry, P.O Box
 19676 – 00202 KNH, Nairobi, Kenya

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Abstract

The main objective of higher institutions of learning in Kenya is to provide education and growth experiences for its students but alcohol abuse has continued to be a problem in the university campuses that is slowing down their progress and the Kenya vision 2030 that envisages a healthy population free from the impact of alcohol abuse through the reduction of the prevalence and the impact of alcohol abuse disorders in order to attain the highest possible level of physical, social and mental health. Despite the growing problems of global alcohol abuse, accurate information on the prevalence of alcohol abuse among university students in Kenya is still inadequate. The study therefore aimed to determine the socio-demographic factors associated to alcohol abuse among the Egerton University students. This was a cross sectional study among 355 students of Egerton university Njoro campus. Stratified random sampling was utilized to select the study sample and a questionnaire was used to collect the data. Both descriptive and inferential statistics were used to analyse the data with an aid of SPSS version 18.0. Data presentation was done using frequency tables, charts and in narratives. The study was cleared by the Kenyatta National Hospital and the University of Nairobi ethics board. The study found significant association between the prevalence of alcohol abuse and the year of study, marital status, family's economic status and the living arrangements (with whom). There was no significant association between the prevalence of alcohol abuse and age, programme of study undertaken and place of residence. It was concluded that alcohol is associated with year of study, marital status, family economic status and living arrangement. Based on the findings of this study, there is need to detect, strengthen various policies and programmes and accordingly make changes to address the factors that contribute to socio-demographic factors associated with alcohol abuse in the institutions of higher learning in Kenyan. The findings of the study will help Commission of University Education (CUE) to better understand the current situation and accordingly make changes to address the factors that contribute to alcohol abuse in these institutions.

Keywords: Alcohol, Prevalence, Alcohol abuse, Socio-demographic factors.

1. Introduction

The main objective of institutions of higher learning in Kenya is to provide education and growth experiences for its students but alcohol abuse has continued to be a problem in the university campuses that is slowing down their progress and the Kenya vision 2030 that envisages a healthy population free from the impact of alcohol abuse and reduction of the prevalence as well as the impact of alcohol abuse disorders in order to attain the highest possible level of physical, social and mental health (GOK, 2012). WHO (2010) stated that “mental health refers to the successful performance of mental function, resulting in production activities, fulfilling relationships with other people and the ability to adapt to change and to cope with adversity”.

It is evident that about 2 billion people globally take alcohol and 76.3 million are diagnosed with alcohol use disorders (WHO, 2004). But in many parts of the world alcohol is used as a socializing agent after work and is profoundly rooted in many cultures worldwide. Currently, changes are noticeable in drinking patterns worldwide that includes rates of alcohol abuse to excess in general population, with substantial sporadic alcohol abuse among young people (WHO, 2009), particularly between 15-24 years of age (Moreira, Smith, Foxcroft, & Moreira, 2009). Globally, 320 000 young people aged 15-29 years die annually, from alcohol-related causes, resulting in 9% of all deaths in that age group (WHO, 2011). Dantzer, Wardle, Fuller, Pampalone, & Steptoe. (2006) indicated that in USA 40% of adolescents take drugs and 60% consume alcohol while in Asia 48.9% of University students' use drugs, 24% being 1st years while 75.6% are final years and that Ireland had the highest proportions of male and female who abuse alcohol. Denzer and his colleagues further stated that peer pressure influence young people to use intoxicating substances with alcohol being the most abused which is a common feature among university students globally. In China, Cheng-Ye, Pei-Jin and Yi (2012), found out that alcohol abuse among university students was prevalent and that 80.8% were lifetime drinkers, 49.3% were current drinkers (drank alcohol in the past 30 days) and 23.5% were binge drinkers (drank five or more drinks in a period of 2 hours). Studies show that alcohol is the most frequently abused intoxicating substance among university students in Africa and it has been blamed for rapid economic, social, and cultural transitions that most countries in sub-Saharan Africa are experiencing which created a good medium for increased alcohol abuse (John-Lengba, Ezech, Guttella, Kumi.- Kyereme, & Neema, (2004).

A research done among University students in Ethiopia found that alcohol was the most abused substance, but there was little evidence available about the scale of substance use in the population (Fekadu, Atalay & Charlotte, 2007). In South Africa, a study among university students found that 75% of respondents abused alcohols with 50% of moderate to heavy drinkers being young men (Nkhoma & Maforah, 1994). In Malawi, the prevalence of alcohol abuse among university students showed that 54.1% were males and 16.5% were females (Zverev, 2008). Stafstrom and Agarth (2012) found out that almost half of the students in Mbarara University in Uganda were current alcohol users, and a quarter of them had engaged in heavy episodic drinking. Wakgari and Aklilu (2011) had earlier found that 31% of medical students of Addis Ababa University from first year to internship were life-time users of alcohol and 22% reported drinking alcohol in the past year.

Alcohol abuse in the institutions of higher learning in Kenya threatens the achievement of vision 2030 and holistic wellbeing (GOK, 2012). According to NACADA (2007), the practice of alcohol abuse has developed to a point where it has become a culture and tradition rooted in every level of university environment and that practice is handed down through cohorts of alcohol abusers strengthen students' expectation that alcohol is a necessary factor for social success. Hagembe & Simiyu (2006) indicated that in Kenya, the society does not take alcohol abuse as a major problem in spite of the fact that many people suffer from conditions associated with alcohol abuse.

Odek-Ogunde & Pande-Leak (1999) in a study reported a high rate of alcohol abuse among students at a Kenyan private university at 84%. Egerton University has no alcohol and drug policy. JKUAT (2011) policy on alcohol and other substances in their institution showed that alcohol is readily available and accessible owing to the number of alcohol selling premises within its community with use of alcohol during staff and student functions.

The widespread of this problem resulted in the creation of NACADA by the government of Kenya which formed a policy to manage the problem. This may not be achieved very soon considering the porous boundary that Kenya has and the Police officers who are prone to corruption and can easily be bribed for illicit brew and contra band drugs which slip under their watch. Despite the growing problems of alcohol abuse more broad studies with organized approaches in the world, needs to be revised to produce representative results on socio-demographic factors associated with alcohol abuse in university settings. Hence the study sought to determine the socio-demographic factors associated with alcohol abuse among Egerton University students with the ultimate aim to improve mental health and to increase pass rate and completion rate among the students.

2. Methodology

The population of this study were 9,588 undergraduate students in year 1, 2, 3 and 4, both residents and non-resident students at Egerton University in Njoro-Kenya. Purposive and stratified random sampling techniques were used to select the sample in the study. The institution for the study (Egerton University) was purposively selected. Using Steins method the sample size of 355 respondents was determined. The study sample was selected using stratified random sampling technique based on records of those students in session at the Registrar Academic Affairs office. Students who consented were stratified into year of their study then proportionately sampled them according to their gender. The socio-demographic information related to alcohol abuse among Egerton University students was obtained by use of a questionnaire with seven items which included gender, age, year of study, programme undertaken, place of residence (i.e. living arrangements with whom), family socio-economic status, and marital status. Descriptive statistics namely frequencies, percentages was used to analyse the data. Frequency tables represent the most commonly used method in presenting data in descriptive research (Kathuri & Pals, 1993). Associations between selected variables were tested using Chi square. The test of significance was set at $\alpha = 0.05$ significance level. The analysis was done using Statistical Package for Social Sciences (SPSS) version 18.0.

3. Results

3.1 Socio-Demographic Factors Associated with Alcohol Abuse among students.

The study sought to examine the socio-demographic factors associated with alcohol abuse among students. The participants included 112 students in year 1, 101 students in year 2, 80 students in year 3 and 162 students in year 4 from Egerton University.

Gender of Respondents

The researcher first sought to establish the gender of the respondents for the study. Gender of the respondents determined how certain issues affecting different gender of the students are appreciated by the school administration. The distribution of the respondents by gender shown in figure 1 below was that 40% respondents were females, while 60% were male.

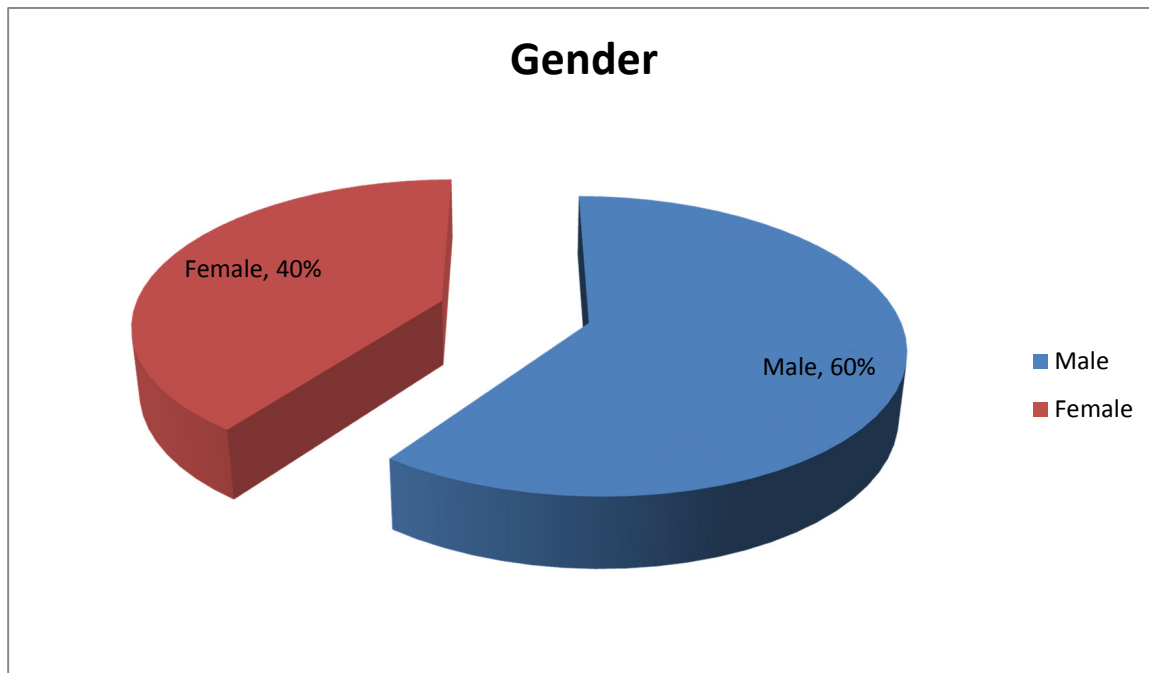


Figure 1: Gender Distribution

Age of the Respondents

In the analysis of the age of respondents, it reveals that majority of the students are between 19 - 24 years at 84.2% as shown in figure 2 below. This was possible since majority of university students in Kenya fall within this age bracket having joined at 19 or 20 years old and complete at 24 years of age.

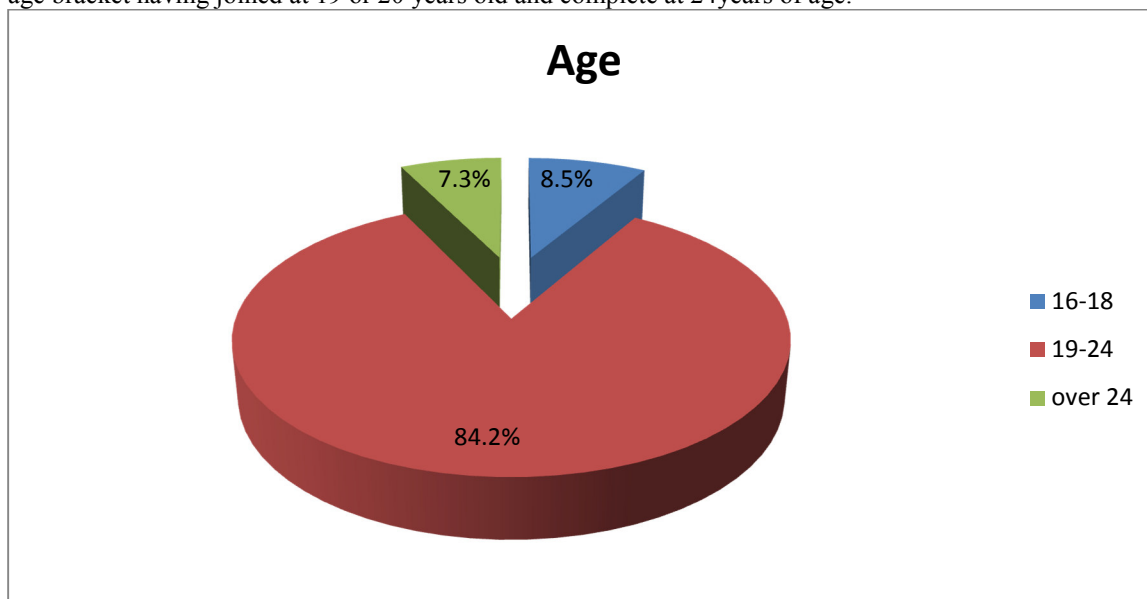


Figure 2: Age

Year of study

Figure 3 below shows that the 31.5 % of the respondents were in first year.

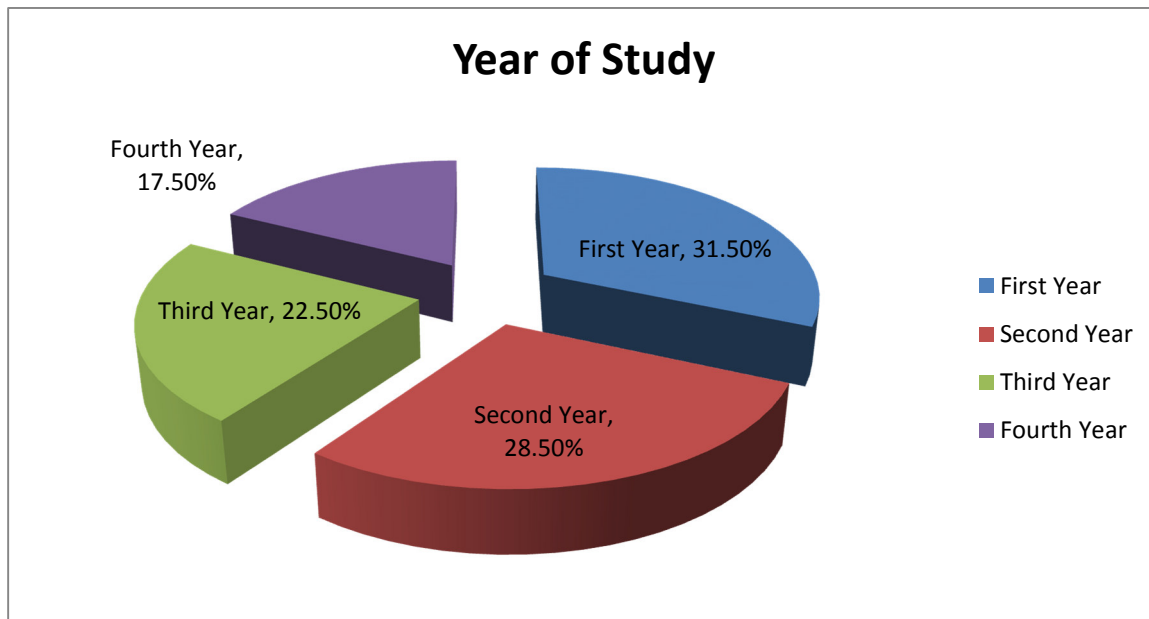


Figure 3: Year of Study Programme undertaking

Figure 4 below shows that majority (63.1 %) of the respondents were under JAB sponsorship.

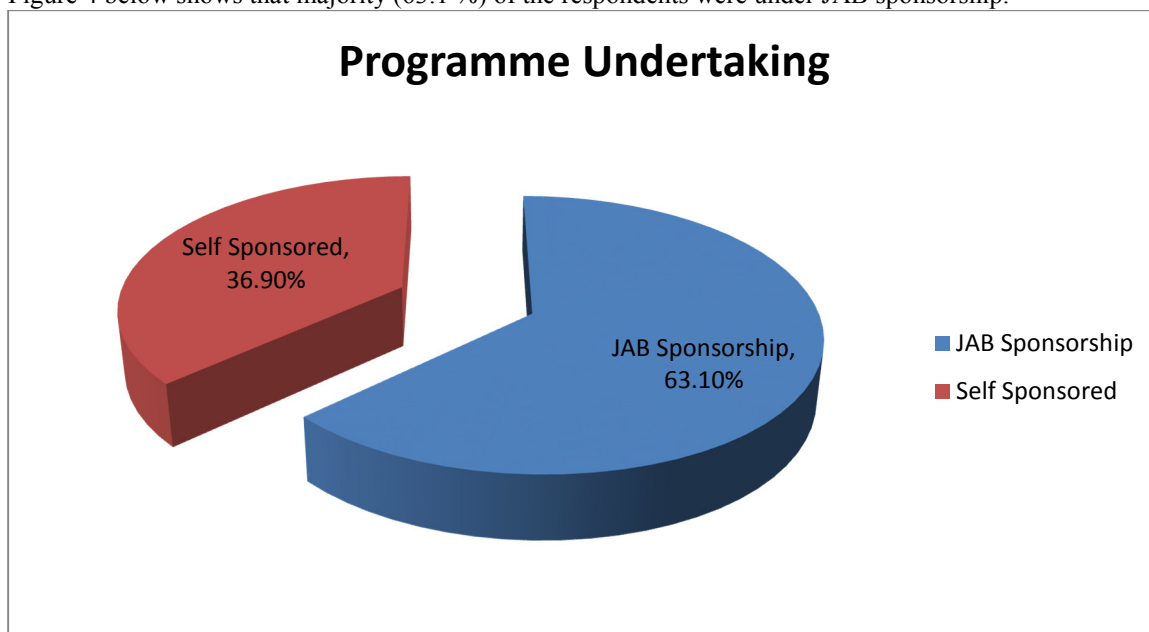


Figure 4: Programme Undertaking

Place of residence

Figure 5 below indicate that a majority (63.4%) of the respondents resided in school.

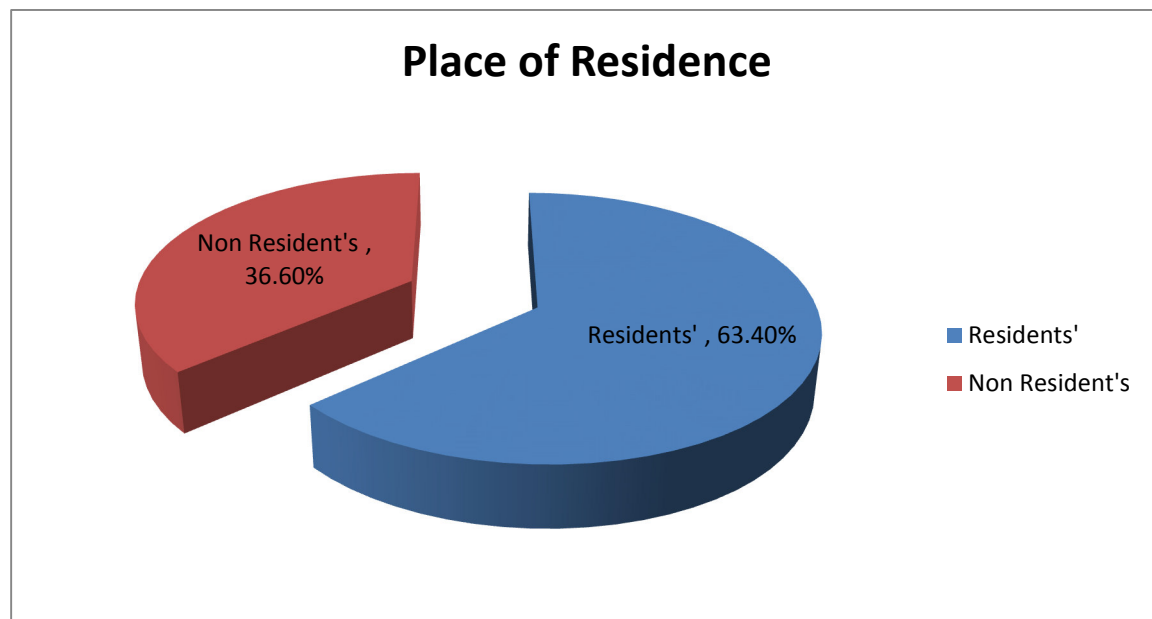


Figure 5: Place of Residence

Living arrangements - with whom

Figure 6 indicate that a majority (77.6%) of the respondents resided with their room-mates. with the least being those living with their parents as shown in figure 6 below.

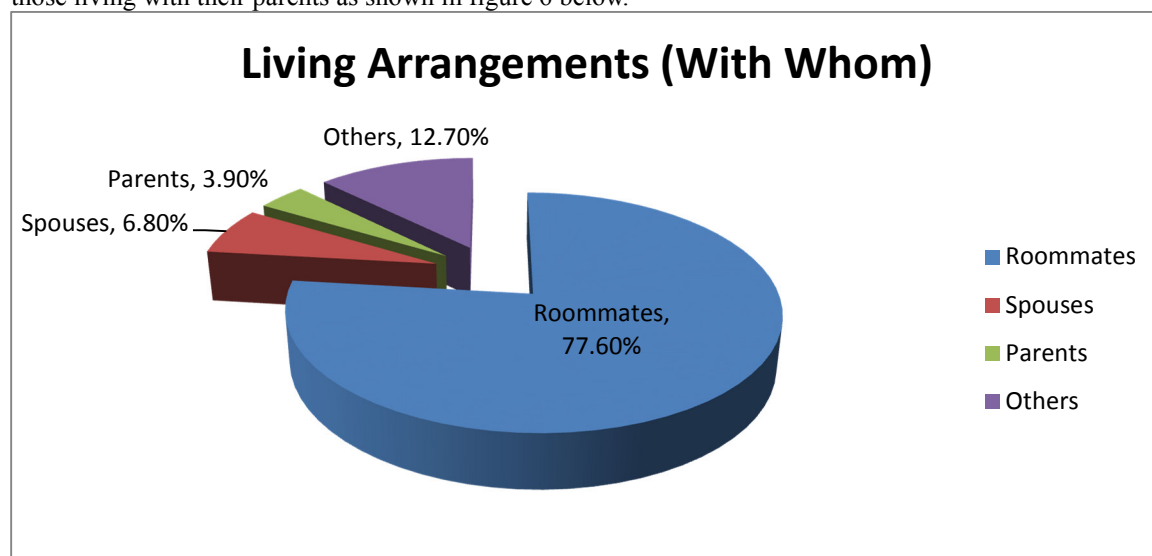


Figure 6: Living Arrangements (With Whom)

Family's economic status

Figure 7 indicates that the majority of the students are from the middle economic status at 76.9% as shown in figure 7 below.

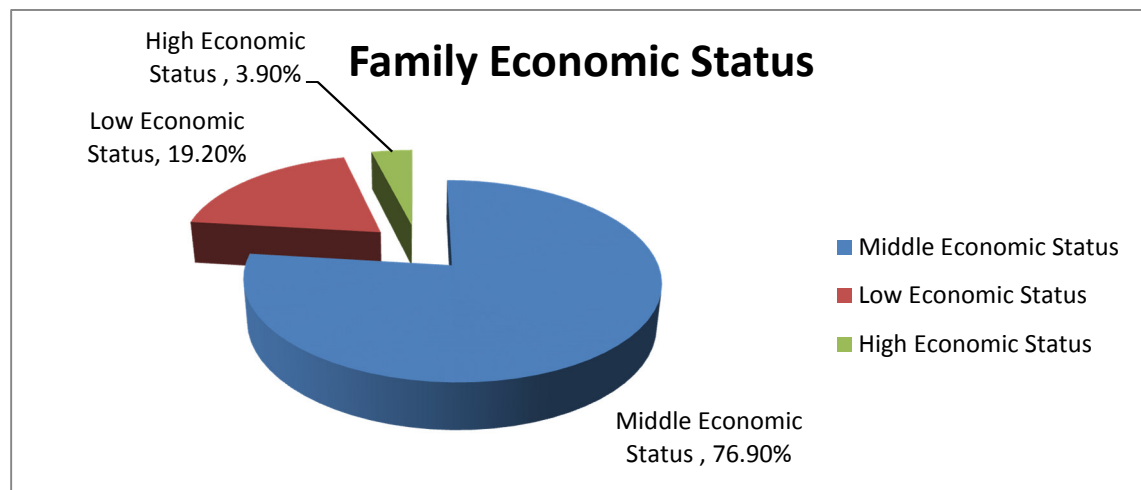


Figure 7: Family's Economic Status

Marital status

The majority (87.9%) of the respondents were single as shown in figure 8 below.

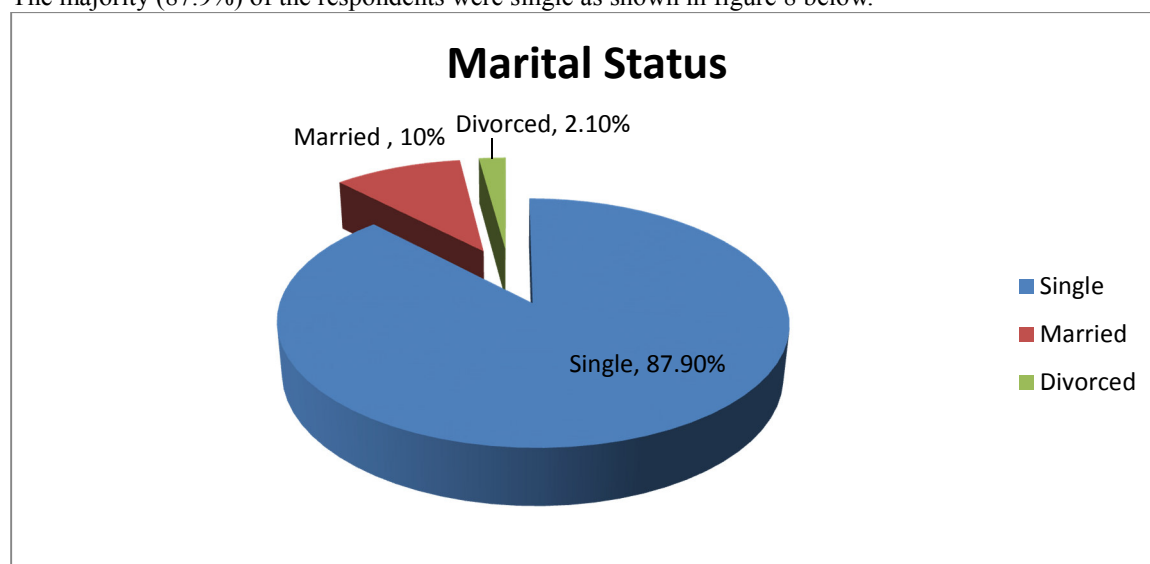


Figure 8: Marital Status

3.2 Association between Socio Demographic Factors and Prevalence of Alcohol Abuse among Egerton University Students

Table 1 below examined whether there was a significant association between socio-demographic factors and prevalence of alcohol abuse among Egerton university students. The findings are shown in Table 1.

Table 1: Association between Socio Demographic Factors and Prevalence of Alcohol Abuse among Egerton University Students

Factors	Components	n=355	Prevalence	Test statistic	Df	P Value
Gender	Male	213	56(26.3%)	7.692	4	0.101
	Female	142	21(14.8%)			
Age	16-18 Years	30	2(6.7%)	14.172	8	0.086
	19-24 Years	299	66(22.1%)			
	Over 24 years	26	9(34.6%)			
Year of Study	1 st	112	16(14.3%)	32.331	12	0.001
	2 nd	101	27(26.7%)			
	3 rd	80	21(26.2%)			
	4 th	62	13(21.0%)			
Programme of Study	JAB	224	43(19.2%)	5.090	4	0.282
	Self-Sponsorship	131	34(26.0%)			
Living Arrangements	Residence	225	41(18.2%)	7.132	4	0.126
	Non Residence	130	36(27.7%)			
Living Arrangements (With Whom)	Room Mates	272	48(17.6%)	43.404	12	0.000
	Parents	14	2(14.3%)			
	Spouse	24	13(54.2%)			
	Others	45	14 (37.8%)			
Family Economic Status	High	14	8(57.1%)	37.830	8	0.000
	Middle	273	56 (20.1)			
	Low	68	14 (20.6%)			
Marital Status	Married	37	16 (43.2%)	54.994	8	0.000
	Single	312	57 (18.3%)			
	Divorced	6	4 (66.7%)			

The difference in gender had a $p > 0.05$ (p value is 0.101) hence, meaning that gender deference does not have any significant value with reference of alcohol abuse among the student. On age $p > 0.05$ (p value is 0.086). Hence age of the student did not have any significant association with drinking of alcohol. Furthermore on association of year of study and alcohol abuse $p < 0.05$ (p value is 0.001) meaning that there is significant difference between year of study and alcohol abuse, the 2nd year have association with prevalence of alcohol abuse than other students in the year of study. The students from high economic status contributed more to association of prevalence of alcohol abuse than the low and middle classes. In Marital status, the divorced contributed to the association of prevalence of alcohol abuse at 66.7% than the single and the married. Those with spouses contributed more with the prevalence of alcohol abuse at 54.2% than those living with their parents, room-mates and others. Moreover, the programme of study that the students were undertaking did not have any significant association with drinking of alcohol ($p > 0.05$ (p value is 0.282)). Association of living arrangements and how often the student had a drink containing alcohol showed no significant association at $p > 0.05$ (p value is 0.126), family's economic status was significantly associated with alcohol abuse ($p < 0.000$) and finally on marital status and alcohol consumption indicated $p < 0.05$ (p value is 0.000). This means that there is significance difference between marital status and alcohol abuse.

4.1 Discussion

4.1.1 Socio-Demographic Factors Associated with alcohol abuse.

The study found a significant association between the prevalence of alcohol abuse and the year of study, marital status, family's economic status and the living arrangements (with whom).

This therefore implies that there is a great association between some demographic factors and the prevalence of alcohol abuse. The association between the year of study and the prevalence of alcohol abuse could be attributed to environmental adjustment and the new found freedom from home as well as exploration experience and society acceptability to take alcohol. This implies that there is a need to create awareness through giving information and education on alcohol abuse as many students during second year of study increase use of alcohol intake thus need to continue holding talks not only during orientation. The study also shows that by the fourth year majority of the student who abuse alcohol could have dropped from university.

The study also found an association between the prevalence of alcohol abuse and marital status. The students who were married abused alcohol more than those who were single this could be due to influence from the spouses, the ability to afford alcohol as they could be due to having a source of income or stress that come with multi-tasking experience and the feeling that they are stable and stressed. This finding is supported by Gezahegn

& Mitiku, (2014) who in a Cross-Sectional Study of alcohol use and associated factors among University Students in Ethiopia, found that married students were more likely to use alcohol. In contrast Sahraian *et al.* (2010) in a study of prevalence of alcohol abuse among the Medical Students in Southern Iran, indicated that prevalence of alcohol use was significantly lower in the married students than in single students and students who lived with their family had lower rate of alcohol abuse. According to Hassan (2013) the percentage of single students that use alcoholic drink was significantly higher than those that are married. This shows the need to also target those students who are married and those who are divorced by the counselling team as the study shows that they are more predisposed to alcohol abuse and might be are not benefit with the talks and programmes that are given to the other students or they are thought it's alright for them to drink.

The study further found a significant association between the prevalence of alcohol use and the family economic status. The middle income students want to gain status and therefore associate alcohol use with status and also university drinkers reinforce students' expectation that alcohol is a necessary ingredient for social success. According to Karama (2007) alcohol abuse was related to high socioeconomic status and living with the family. This study shows the need for the students to be educated on issues related to self-esteem and social status and its association with alcohol use.

However the study found no association between ages, place of residence, programme of study and the prevalence of alcohol abuse. This could be because the students share the same demographic factors of age, place of residents and programme of study. In agreement Hassan, (2013) who found that there is no difference between the students who were found in the various colleges with regards to age, gender and place of residence. In contrast Hassan (2013) found that there is no difference between the students who were found in the various colleges with regards to year of study.

4.2 Conclusion

The study was successful in addressing its objectives. Given the foregoing, the study arrived at the following conclusions:

There is a significant association between the year of study of the students, marital status, family's economic status and the living arrangements (with whom) and the prevalence of alcohol abuse. There is no significant association between the age of the students, the programme of study undertaken and place of residence and prevalence of alcohol abuse. However, high significant association was found among the middle income, divorced, living with spouses, and finally being on second year.

References

- Cheng-Ye, J., Pei-Jin, H., & Yi, S. (2012). The Epidemiology of Alcohol Consumption and Misuse among Chinese College Students. *Alcohol and Alcoholism*, 47(4), 467-472
- Choudhrey, V., Agardh, A., Stafstrom, M., & Ostergren, P. (2014) Patterns of Alcohol Consumption and Risky Sexual Behaviour: a cross sectional among Uganda university students. *BMC Public Health* 2014, 14:128 doi:10.1186/1471-2458-14-128
- Dantzer, C., Wardle, J., Fuller, R., Pampalone., & Steptoe. (2006). *International study of heavy drinking: attitudes and socio-demographic factors in university students*. *Journal of American College Health*, 55: 83–89.
- Fekadu, A., Atalay, A., & Charlotte, H. (2007), "Alcohol and drug abuse in Ethiopia: past, present and future," *African Journal of Drug & Alcohol Studies*, vol. 6, no. 1, pp. 39–53.
- Gezahegn, T. A., & Mitiku, T. H. (2014). Substance Use and Associated Factors among University Students in Ethiopia: *Journal of Addiction* Volume 2014, Article ID 969837, 8 pages <http://dx.doi.org/10.1155/2014/969837> Hindawi Publishing Corporation. Harar, Ethiopia
- GOK. (2012). *The Mental Health Policy*, Ministry of Medical Services. The Government Printing Press, Nairobi.
- Hagembe, O. N. B., & Simiyu, S. (2006). *Programme Coordinator of Public Awareness NACADA*. Nairobi, Kenya.
- Hassan, M. (2013). Factors Associated With Alcohol Abuse among University of Nairobi Students. Unpublished thesis, University of Nairobi.
- JKUAT. (2011). *Policy on Alcohol, Drug, and Substance Abuse*, WI-2-2-5-1. Nairobi.
- Karama, E. B. C., Kypros, K. E., & Salamoun, M. (2007). Alcohol Use among College Students: An International Perspective. *Article on Current Opinion on Psychiatry*, 20 (3):213-221.
- Kathuri, N, J., & Pals, D. A. (1993). *Introduction to Education Research*. Njoro, Kenya: Egerton University Press.
- John-Lengba, J., Ezech, A., Guttella, G., Kumi-Kyereme, A., & Neema, S. (2004). "Alcohol, drug use, and sexual-risk behaviours among adolescents in four sub-Saharan African countries," Los Angeles, California, USA.
- Moreira., Smith, LA., Foxcroft, D., & Moreira M, T. (2009). *Social norms interventions to reduce alcohol misuse in university or college students*" *Cochrane Database of Systematic Reviews* (3): CD006748.
- NACADA. (2007). Rapid situation assessment of drug and substance abuse. Nairobi, Kenya.
- Nassiuma, D. K. (2000). *Survey Sampling: Theory and Methods*, Nairobi University Press.

- Odek-Ogunde, M., & Pande-Leak, D. (1999). Prevalence of Substance Use among Students in a Kenyan University: *A Preliminary Report*. East Afr Med J. 76(6):301-6.
- Sahraian, A., Sharifian, M., Omidvar, B., & Javadpour, A., (2010). *Prevalence of Substance Abuse among the Medical Students in Southern Iran*. Shiraz E-Medical Journal Vol.11, No. 4, Department of Psychiatry, Hafez Hospital, Shiraz, Iran.
- Stafstrom, M., & Agarth, A., (2012). Socio-economic determinants for alcohol consumption and heavy episodic drinking in a Ugandan Student Population: Int. J Alcohol Drug Re 1(1): 57-67.
- Wakgari, D. & Aklilu, A. (2011). Substance use and its predictors among undergraduate medical students of Addis Ababa University in Ethiopia. BMC Public Health. 11,660. doi:10.1186/1471-2458-11-660
- World Health Organization, (2004). Global Status Report on Alcohol. 20 Avenue Appia, 1211 Geneva, Switzerland.
- World Health Organization. (2009). Mental Health, resilience and inequalities. Publications WHO Regional Office for Europe Scherfigsvej 8DK-2100 Copenhagen, Denmark. (<http://www.euro.who.int/pubrequest>).
- World Health Organization. (2010). Equity, social determinants and public health programmes, ISBN 978 92 4 156397 0 (NLM classification: WA 525) Avenue Appia, 1211 Geneva 27, Switzerland.
- World Health Organization., (2011). Global Status Report on Alcohol and Health; WHO: Geneva, Switzerland.
- Zverev, Y., (2008). *The Problem of Drinking among University Students in Malawi*. Coll. Anthropol. 32, 27–31.