

# American Journal of Public Policy and Administration (AJPPA)



## **How Social Environment Influence Alcoholism in Busia County, Kenya**

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## How Social Environment Influence Alcoholism in Busia County, Kenya

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Article history

Submitted 09.06.2024 Revised Version Received 10.07.2024 Accepted 20.08.2024

### Abstract

**Purpose:** The aim of the study is to examine the influence of social environment on alcohol consumption behaviour of individual and devise mitigation measures to curb the menace, a gap that this study sought to fill.

**Materials and Methods:** The study used a cross-sectional research approach. The study used primary data collected via structured questionnaires and interview guides. Regression and Content analysis were adopted, and results were presented in figures, tables, and narrations.

**Findings:** It was evident that there were determinants within the social environment that influenced alcohol consumption behaviours among individuals. The determinants included family dynamics, literacy level, peer influence and parenting style.

**Implications to Theory, Practice and Policy:** It was therefore recommended that to mitigate this problem, individuals ought to understand the effects of social environment on alcohol consumption behaviour and devise mitigation measures to curb the menace. The social environment determinants that influence alcohol consumption behaviour should be seen as a focal area of intervention in devising mitigation measures to curb the menace of alcoholism among individuals. The mitigation measures aim at minimising the effects of alcohol consumption by employing a number of strategies and interventions which might be at individual level, community level or policy makers' level.

**Keywords:** *Social Environment, Alcoholism, Determinants, Mitigation Measures*

## 1.0 INTRODUCTION

Alcohol has commonly been consumed in social settings such as weddings, funerals, and social gatherings, where it serves as a means of socialising and bonding among community members. Alcoholism entails the habitual and excessive consumption of alcoholic beverages, leading to recurring harm either to oneself or others (Eashwar, Umadevi, & Gopalakrishnan, 2020). Alcoholism is a widespread challenge affecting communities worldwide, transcending geographical and cultural boundaries. Globally, alcoholism has been viewed as a phenomenon which pose a threat to individuals, families, society, and global development. World Health Organization (WHO) estimates that over 3 billion people consume alcohol globally, and approximately 237 million adults experience alcohol use disorders (WHO, 2019). In 2022, WHO reported that alcohol-related harm is responsible for 3 million deaths each year, accounting for 5.3% of all global fatalities. This translated to significant health, social, and economic burdens. Alcoholism is a major risk factor for numerous health problems, including liver diseases, heart disease, cancer, mental health challenges, and injuries. It also contributes to increased healthcare costs and lost productivity. In addition, alcoholism disrupts families and communities, leading to domestic violence, child neglect, and increased crime rates. It also hinders social development and economic growth.

In a global context, the social environment surrounding alcohol consumption varies significantly across countries and cultures. Factors such as social norms, family dynamics, literacy levels, peer influence, and parenting styles all play a role in shaping drinking behaviours. For example, in Italy, alcohol—especially wine—is deeply embedded in the culture, being a key element of Italian cuisine and social life, frequently enjoyed during meals and gatherings (Beccaria & Rolando, 2016). Sharing wine is viewed as a gesture of hospitality and a means to strengthen social bonds and relationships. The widespread acceptance and normalisation of alcohol use, alongside economic and lifestyle factors, contribute to the intricate social dynamics related to alcohol in Italy. In a study by Sattarovna et al. (2021), the frequency of chronic alcoholism in the Republic of Uzbekistan was explored using a cross-sectional approach. The study found that excessive alcohol consumption often results from the influence of an individual's social environment.

In Africa, the social environment surrounding alcohol consumption is shaped by a complex interplay of cultural traditions, socio-economic conditions, and historical influences. In Namibia, alcohol especially beer made from local grains plays a significant cultural role, often being consumed during traditional ceremonies, rituals, and social gatherings (Dabija et al., 2021). Despite this cultural significance, Namibia faces significant challenges related to alcohol abuse and addiction, which contribute to challenges such as family disintegration, crime, and poverty. The widespread availability and affordability of alcohol, combined with limited access to healthcare and addiction treatment services, exacerbate these negative impacts on individuals and communities. Addressing alcoholism in Namibia involves community-based initiatives, policy interventions, and public health campaigns aimed at promoting responsible drinking and reducing alcohol-related harm.

In Uganda, van der Zwaluw et al. (2008) used a three-wave longitudinal study to assess the impact of parental problem drinking on various parenting behaviours, including behavioural control and support. The study found no direct link between parental problem drinking and parenting habits but suggested that parenting and modelling behaviours significantly influence adolescents' drinking patterns. Similarly, in Kenya, Gitatui et al. (2019) explored factors contributing to harmful alcohol consumption in Kenya's urban slums, revealing that older, educated, and higher-income individuals from dysfunctional families consumed more alcohol, while younger, unmarried people, often introduced to alcohol by friends, exhibited higher drinking rates. Masaba (2017) also conducted a cross-sectional study in Busia, Kenya, identifying that individuals aged 22-27 were the most active alcohol consumers, with peer pressure and

family history being key factors. Kendler et al. (2017) found that divorced women tend to drink more than married ones, and those who remarry drink less than those who do not, suggesting that marriage may reduce stress and increase life satisfaction, thereby lowering alcohol consumption (Yang et al., 2018).

Therefore, in Kenya, various cultural traditions, socioeconomic factors, and policy interventions have shaped the social context of alcohol use. Alcohol is often consumed during social events like weddings, funerals, and gatherings, where it facilitates socializing and bonding among community members. However, the prevalence of alcohol abuse has led to significant social challenges, including domestic violence, road accidents, and health complications. These challenges are further complicated by disparities in access to education, employment opportunities, and healthcare services, which can intensify alcohol-related inequalities and contribute to broader social disparities.

Busia County, located in western Kenya along the Kenya-Uganda border, is known for its diverse socioeconomic landscape and rich cultural heritage. The county is a crucial hub for cross-border trade and commerce, significantly influencing regional dynamics. It is home to various ethnic groups, each with distinct cultural norms regarding alcohol consumption. Despite its natural beauty and cultural richness, Busia County faces socioeconomic challenges that exacerbate issues related to alcoholism. Traditional alcoholic beverages like Busaa and Chang'aa hold cultural significance in Busia, particularly during social gatherings, ceremonies, and community events (Okedi & Wakoli, 2023). These beverages are often brewed and consumed as symbols of hospitality and communal bonding. Chang'aa, an illicit and potent brew made from grains and often laced with harmful additives, is widely consumed despite its illegal status. The production and consumption of Chang'aa continues to persist due to poverty, unemployment, and limited access to regulated alcohol (Takahashi et al., 2017).

In Busia, many communities, brewing and offering alcohol are seen as signs of generosity and social status (Okedi & Wakoli, 2023). Additionally, alcohol production and sales provide essential income sources, especially in rural areas with limited formal employment opportunities (Njoroge, 2019). However, the economic benefits derived from alcohol must be weighed against the social and health consequences of alcoholism, highlighting the complex interplay between cultural traditions, socioeconomic conditions, and public health challenges in Busia County. With the evolving social norms and shifting economic conditions in Kenya, alcoholism has increasingly become a normalised socialisation practice, as highlighted in a NACADA (2022) report. The report indicates that Western Kenya has the highest alcohol use at 23.8%, followed by the Coast region at 13.9% and Central Kenya at 12.8%. Busia, one of Kenya's four western counties, reflects this trend with a notably high prevalence of alcoholism, standing at 23%. This high rate of alcohol use in Busia County is intricately linked to the socioeconomic conditions of its population. Despite ongoing efforts to combat this challenge, the persistent prevalence of alcoholism continues to pose significant social, economic, and health challenges, undermining the overall well-being and development of the region. Thus, this research sought to investigate the effects of social environment on alcoholism in Busia County, Kenya.

### **Problems Statement**

Alcoholism remains a public wellness challenge within Busia County, Kenya, with far-reaching implications for individuals, families, and communities. Despite concerted efforts to address this problem, the prevalence of alcoholism continues to pose social, economic, and health-related challenges, undermining the overall well-being and development of the region. Social environment encompasses the interpersonal relationships, social networks, and community dynamics that individuals encounter within

their social contexts. It plays a role in shaping individuals' beliefs, behaviours, and experiences, influencing various aspects of their lives, including health, well-being, and socioeconomic outcomes.

With the changing social norms and the economic status of individuals in Kenya, Alcoholism has become a normal socialization phenomenon as affirmed by NACADA (2022) report. Western Kenya had 23.8% alcohol use, followed by Coast at 13.9% and Central at 12.8%. Busia is one of Kenya's four western counties. The high prevalence of alcoholism, at 23.8% in Busia County, has a direct relation with the social environment of the population in the county. Despite efforts to address this challenge, the prevalence of alcoholism continues to exert a significant toll on individuals, families, and communities within the county.

The social environment factors dictate likelihood of an individual becoming alcoholic. Peer pressure and family history of alcoholism drove Busia people' alcohol usage (Masaba, 2017). The study discovered a positive link between familial alcohol consumption, the quantity of friends who consume alcohol, and attitudes towards alcohol consumption, with both the current status of alcohol consumption and the use of alcohol in a hazardous or high-risk manner. (Takahashi, et al., 2017; Wangui, Mariene, & Wamalwa, 2017).

Researcher in this field focused on prevalence of alcoholism (Takahashi, et al., 2017), effects of alcoholism (Patel, et al., 2020) and some narrowed to secondary school Students (Njoroge, 2019), slum dwellers (Gitatui, Kimani, Muniu, & Okube, 2019), and Busia residents' alcohol abuse (Masaba, 2017) which this study expounds to a whole county and all residents within Busia County. Therefore, this called for research to examine the social environment that influence high rate of alcoholism in Busia County, Kenya, as it is part of the larger Western region of the republic of Kenya.

## 2.0 LITERATURE REVIEW

A study by Ndirangu, Mwangi and Murenga (2021) focused on the effects of social perception on alcoholism, on alcoholics' participation in development projects in Laikipia County, Kenya. The study employed qualitative research design, and they concluded that alcohol use was locally embraced and symbolized elevated social and economic status. Their study focused on social perception on alcoholism and on alcoholics' participation in development projects in Laikipia county a gap that the current study sought to fill by focusing on alcoholism in Busia County and used cross sectional research design.

Ssebunnya et al. (2020) conducted research where they focused on social acceptance of alcohol use in Kamuli District, Uganda. The study used qualitative research design which concluded that alcohol was readily accessible, and the consumption was both legally and socially condoned within the district, with minimal social consequences despite legal controls. Their study was based in Uganda, they used a different methodology from the current study and their focus was on social acceptance of alcohol use. The current study focussed on alcoholism in Busia County and used cross sectional research design.

In another study, Brooks-Russell, et al. (2014) conducted a study on association between peer drinking and adolescent alcohol use in the USA. The study used structural equation modelling research design where it concluded that descriptive norms have a paramount mediating role in the relationship between peer drinking and alcohol use. While their study dwelled on youths at America, the current research focused on Busia County population by using multiple regression research design.

In addition, Gitatui, Kimani, Muniu, and Okube (2019), did research on Factors contributing to detrimental alcohol consumption among adults in urban slums in Nairobi, Kenya. The study employed cross-sectional research design where they concluded that younger, unmarried individuals, and those employed in casual labour, were introduced to alcohol by friends. Parents play a paramount role in

influencing the drinking behaviour of children. While their study dwelled on urban slums, the current focused on the effect of social environment on alcoholism in Busia County, Kenya.

Masaba (2017) conducted research on alcohol abuse practices among residents of Busia town by using both qualitative and quantitative approach. The study conclude that individuals aged 22 years and above accounted for 48% of those actively engaged in alcohol abuse. Peer pressure and a family history of alcoholism emerged as the primary causative factors. His study was restricted to Busia town residents, while the current study focused on the effect of social environment on alcoholism in Busia County using cross-sectional quantitative approach.

## **Theoretical Framework**

### **The Social Integration Theory**

The Social integration theory, championed by sociologists Durkheim in 1951 (Durkheim, 2005), posited that individuals' level of integration within their social networks, communities, and broader society significantly influences their behaviours, attitudes, and overall well-being. Durkheim believed that people were subjected to a strong influence from the society. In this research, the social integration theory offered a valuable conceptual understanding how the social environment influence alcoholism in Busia County, Kenya. By examining individuals' level of integration within their social networks and communities, the study sought to explain how social environment (social bonds, relationships, and community cohesion) influenced alcohol consumption behaviours and vulnerability to alcoholism in Busia County.

### **The Social Learning Theory**

Albert Bandura's social learning theory implies that learning takes place via observing, imitating, and receiving reinforcement within social situations. This learning process is governed by aspects like as attention, motivation, attitude, and emotions (Rotter, 2021). This theory is based on the principles of behavioural psychology and focuses on how social reinforcement, vicarious learning, and cognitive processes influence people's behaviours and attitudes towards alcohol consumption (Akers & Jennings, 2019). In this study, the social learning theory offered a prism through which to examine the how social environment influence alcoholism in Busia County, Kenya. By exploring how individuals learn about alcohol consumption through observation, social networks, and reinforcement within their social environments, the theory shaded light on the function of social influences, peer networks, and societal norms in generating alcohol consumption behaviours and vulnerability to alcoholism in Busia County, Kenya.

## **3.0 MATERIALS AND METHODS**

The study used a cross-sectional research approach, which enabled the collection of data from a wide sample within the target population at a single point in time (Kesmodel, 2018). This approach allowed the study to capture a snapshot of alcohol consumption behaviours and social environment characteristics among respondents at a specific moment. The study was conducted in Busia County, located in the western part of Kenya, bordering Uganda to the west. Positioned along the shores of Lake Victoria, which forms part of its southern boundary, Busia County is home to a diverse population comprising various ethnic groups, including the Luhya, Teso, and Luo. The county's population is predominantly rural, with agriculture serving as the primary source of livelihood for many residents. Traditional brewing and consumption of illicit brews are cultural practices passed down through generations. Additionally, the influx of relatively cheap alcohol from neighbouring Uganda, facilitated by porous borders and the expanding business activities in the major towns of Busia and Malaba, has led to a proliferation of liquor

sale points across various regions in Busia County. The target population comprised residents of Busia County, Kenya, spanning diverse socioeconomic backgrounds, aged 19 years and above, from various geographic locations within the county. This population specifically included individuals aged 19 years and above who consume alcohol, exhibited signs of alcohol dependency or addiction, or are vulnerable to developing alcohol-related problems. According to the 2019 population census, Busia County had a population of 396,801 persons aged 19 years and above, with 189,259 males, 207,530 females, and 12 individuals identified as intersex.

The sample size of this study was adopted from Slovin’s formula, as shown:

$$n = \frac{N}{1 + N(e)^2}$$

$$n = \frac{396,995}{1 + 396,995(0.05)^2} = 399.5974 \cong 400$$

Where, n – Is the desired sample size

N – Is the population size and

e – Is the margin error desired (.05)

The target population and the distribution of the calculated sample are as depicted in **Error! Reference source not found.**

**Table 1: Target Population and Sample Distribution**

| Category  | Sub-category                                  | Population     | Sample     |
|---|---|----------------|------------|
| Residents   | All sub-county residents (19 years and above) | 396,801        | 206        |
| Administrative officials  | County administrators                         | 2              | 2          |
|   | Sub-county administrators                     | 14             | 14         |
|   | 35 ward administrators                        | 35             | 35         |
|   | Chiefs and sub-chiefs                         | 120            | 120        |
| Rehabilitation centre officials                                 | In charge of rehab centres                    | 2              | 2          |
| NACADA representatives  | Busia county office                           | 3              | 3          |
| Anti-drug and substance abuse stakeholders/ NGO/advocacy groups | NGOs and advocacy groups (9)                  | 18             | 18         |
| <b>Total</b>  |   | <b>396,995</b> | <b>400</b> |

Source: KNBS (2019), NACADA (2022), County Government of Busia (2024)

Further, the research used purposive, stratified, simple random, and snowball sampling methodologies. Purposive sampling was used to identify and select key informants, community leaders and administrative personnel, who were deemed essential for the study. Stratified sampling involved dividing the target population into distinct subgroups with similar characteristics, as detailed in **Error! Reference source not found.** Samples were then drawn from each subgroup, ensuring fair and proportional representation of different population segments. Finally, simple random sampling was employed to

randomly select participants from these subgroups, providing each individual within the subgroup an equal chance of being included in the sample. Data collection involved administering structured questionnaires and interview guides to respondent. Key informants, including rehabilitation centre officials (RCOs), administrative officers (AOs), NACADA representatives (NRs), and NGO officials (NAGs), completed the structured interview schedules. Residents of Busia County, on the other hand, responded to the structured questionnaires.

#### **4.0 FINDINGS**

Based on the analysis of data collected and the study findings, the effects of social environment on alcohol consumption in Busia County, Kenya and their mitigation measures are presented below:

##### **Demography**

The total target population of 396,995 individuals, out of whom a sample of 400 permanent residents of Busia County, aged 19 years and above, who consume alcohol, exhibit signs of alcohol dependency or addiction, or are vulnerable to developing alcohol-related problems, were sampled. From the data collection, the study realised a 94.25% response rate. In terms of the demographic characteristics of the respondents, the study found a higher proportion of males (58.89%) compared to females (41.11%), suggesting a gender imbalance among the respondents. Most participants were between 35 and 44 years old (58.62%), indicating a predominance of middle-aged individuals. Younger (18-24 years) and older (55+ years) age groups were less represented. Nearly half of the respondents either currently consume alcohol (21.95%) or have done so in the past (27.18%), with a combined total of 49.13%. This was slightly higher than Uganda's alcohol consumption rate of 21.8% (Burnhams et al., 2019). Despite this, 41.11% of respondents abstain from alcohol, possibly due to social, cultural, or personal reasons. Regarding marital status, most were single (59.15%), followed by married individuals (22.02%), with fewer being divorced/separated (9.55%) or widowed/widowers (4.77%).

Additionally, the respondents had varied educational backgrounds, with the majority having primary (37.40%) or secondary (20.95%) education, while fewer had higher education degrees (Bachelor's, Master's, or Doctorate). Nearly half of the respondents were unemployed (48.81%), while a smaller proportion were employed (20.16%) or self-employed (18.83%). Most respondents had lived in Busia County for over 10 years (64.19%), and 15.38% had resided there for 6 to 10 years. This long-term residency suggests that respondents had a good understanding of the county and its factors influencing alcohol consumption.

##### **Determinants of Alcoholism in Busia County, Kenya**

In the descriptive analysis, the study inquired on the factors that influence alcohol consumption, and the points at which most of the consumers of alcohol accessing alcohol. As has been depicted in the pie chart and bar graph below, the proportions (percentages) are presented.



Causal factors to Alcohol consumption

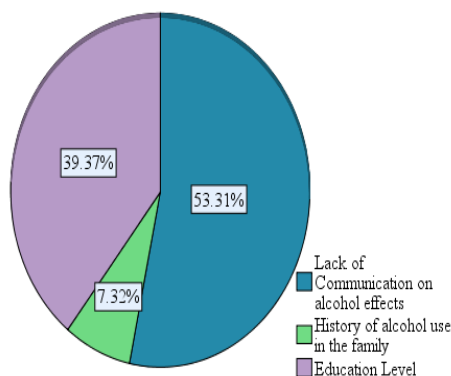


Figure 1: Causal Factors to Alcohol Consumption

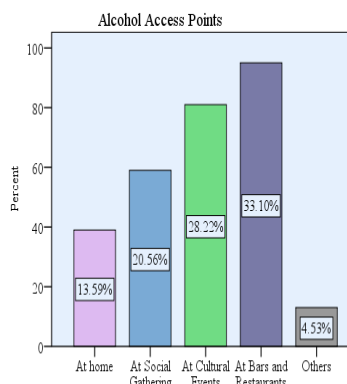


Figure 2: Alcohol Access Point

The main factors influencing alcohol consumption, as shown in **Error! Reference source not found.**, were a lack of communication about the effects of alcohol (53.31%) and an individual’s level of education (39.37%). Additionally, some respondents linked alcoholism to a family history of alcohol use, aligning with findings from Masaba (2017) and Gitatui et al. (2019), which noted that individuals with higher education levels and those from dysfunctional families tend to have higher alcohol consumption rates. Regarding alcohol access points, **Error! Reference source not found.** indicate that over a quarter of respondents obtained alcoholic beverages from bars and restaurants (33.1%) or cultural events (28.22%). Additionally, 20.56% reported acquiring alcohol at social gatherings, and 13.59% had access to alcoholic drinks at home. This is consistent with Chung et al. (2019), who found a link between the accessibility of alcohol and increased consumption.

**Social Environment**

The study assessed the level of agreement or disagreement with statements about the social environment in Busia County using a Likert scale. Table 2 presents the mean and standard deviation for various statements related to how the social environment affects alcohol consumption.

**Table 2: Descriptive Analysis of Social Environment**

| Statements  | Mean         | Std. Dev.    |
|---|--------------|--------------|
| Alcoholic parents have a tendency of passing alcoholism to their children in their adulthood. | 3.1951       | 1.46172      |
| Family history of alcoholism increases the risk of developing alcohol use disorders.          | 2.9129       | 1.41276      |
| Alcohol availability within homesteads increases use of alcohol.                              | 3.5645       | 1.40000      |
| Affordability of alcoholic beverages encourages alcoholism.                                   | 3.5519       | 1.53907      |
| Peer pressure and social circles increases the chances of alcohol consumption.                | 3.4042       | 1.34984      |
| <b>Aggregate score for social environment</b>   | <b>3.286</b> | <b>1.032</b> |

## Family Dynamics

Family dynamics are patterns of interactions among relatives, their roles and relationships, and the various factors that shape their interactions (Jabbari et al., 2024). Families' interpersonal relationships have long-lasting effects on a person's growth and wellbeing through behavioral, physiological, and psychological mechanisms. Therefore, family dynamics and the type of family interactions can influence individual's behavior towards alcohol consumption.

According to Table 2, respondents generally agreed that the availability of alcohol within homes (mean = 3.5645, SD = 1.4) and the affordability of alcoholic beverages (mean = 3.5519, SD = 1.53907) were factors that increased alcohol use in Busia County. However, they were uncertain about the effect of a family history of alcoholism on the risk of developing alcohol use disorders (mean = 2.9129, SD = 1.41276) and whether alcoholic parents tend to pass on alcoholism to their children in adulthood (mean = 3.1951, SD = 1.46172). Gitatui et al. (2019) supports the notion that a dysfunctional family contributes to higher alcohol consumption. On the qualitative responses, the study inquired on whether there exists family dynamics and modern parental styles in Busia County which influence alcohol consumption among residents. The responses highlighted that traditional family structures and dynamics often played a role in shaping attitudes towards alcohol. In many cases, familial practices and expectations around alcohol consumption were passed down through generations, creating a culture where drinking is normalised.

*“Yes, existing family dynamics and modern parental styles in Busia County do influence alcohol consumption among residents.” NR 3*

The findings were echoed by a study by Kendler et al. (2017) on family dynamics and alcoholism which indicated that women who are divorced drink more than those who stay in marriage and divorced women who remarries drink less than divorced who did not remarry. Marriage regulates stress and offers greater life satisfaction thus minimising alcohol consumption (Yang et al., 2018).

## Peer Influence

Peer influence can be defined as instances where one person affects, or is affected by, one other or multiple others who are similar in age (Laursen & Veenstra, 2021). Peer pressure has a major influence on individuals' alcohol consumption behaviour in a variety of age groups. People tend to learn from their peers and end up experimenting variety of alcohol beverages which might lead to addictions. According to Table 2 respondents showed neutrality towards the influence of peer pressure and social circles on alcohol consumption (mean = 3.4042, SD = 1.34984), although Masaba (2017) highlights peer pressure as a key factor in alcoholism. Furthermore, Brooks-Russell et al. (2014) found that social norms mediate the relationship between peer drinking and individual alcohol consumption. Overall, respondents could not definitively determine whether the social environment influences alcohol consumption (mean = 3.286, SD = 1.032).

## Parenting Style

Parenting style, as defined by Baumrind is the attitudes parents have about childrearing and the practices they employ to socialize their children. Depending on the parental style chosen, the style tends to shape individuals' behaviour and overall perception concerning alcohol consumption behaviour. Modern parental styles also impact alcohol consumption, as changing family dynamics and evolving parental approaches can either mitigate or exacerbate drinking behaviours. For instance, in families where there is less supervision or a more permissive attitude towards alcohol, young people were more likely to engage in drinking. Conversely, families that adopted more restrictive or strict approaches had lower

levels of alcohol consumption among their members. This finding was also supported by Masaba (2017) and Gitatui et al. (2019) that parents have a major impact on influencing the drinking behaviour of their children.

### Literacy Level

On the questions of illiteracy level in Busia County, and whether they can dictate alcohol consumption behaviour among residents, the qualitative responses elucidated that the illiteracy level in Busia County was relatively high compared to national averages. However, Gitatui et al. (2019) disagrees and alludes that higher levels of education were positively associated with increased alcohol consumption rate. The qualitative findings further demonstrated that illiteracy influenced alcohol consumption behaviour among residents in several ways. Limited education often was associated to reduced awareness about the health risks associated with excessive drinking and less access to information on alcohol abuse prevention. Further, illiteracy affects economic opportunities, leading to financial stress that might increase the likelihood of using alcohol as a coping mechanism.

Additionally, in communities with high illiteracy rates, traditional practices and norms around alcohol consumption were more entrenched, as education levels influenced the openness to innovative ideas or changes in behaviour. Consequently, the interplay between illiteracy and alcohol consumption behaviour can create a cycle where limited education reinforces traditional drinking practices and reduces opportunities for intervention and change.

### Effects of Social Environment on Alcohol Consumption

A correlation analysis was conducted to examine the relationship social environment and alcoholism in Busia County, Kenya. The correlation coefficient, denoted by Pearson "r", ranges from -1 to +1, where +1 indicates a perfect positive relationship, -1 indicates a perfect negative relationship, and 0 indicates no relationship, as indicated in Table 3.

**Table 3: Correlation Analysis**

| Variables          | Alcoholism in Busia County |                    |
|--------------------|----------------------------|--------------------|
|                    | Pearson r                  | P <sub>value</sub> |
| Social environment | 0.798                      | (.000)             |

From Table 3, the correlation analysis of social environment with alcoholism in Busia County is presented. The results indicated a strong positive correlation between social environment and alcoholism, reflected by a correlation coefficient of 0.798, that was also statistically significant (p-value = .000). This indicates that a social environment that supports or facilitates alcohol consumption was strongly associated with higher levels of alcoholism. In examining the effects of social environment on alcoholism in Busia County, a simple linear regression model was developed. Table 4 summarises the results of the regression analysis, as the model summary, and the independent variables' coefficients is presented.

From the results in Table 4, a strong linear relationship exists between the independent variable (social environment) and the dependent variable (alcohol consumption). This linear relationship was significant, as indicated by an  $F_{\text{statistic}}$  of 499.554 and  $P_{\text{value}}$  of .000, implying that the model was statistically significant. The model's high explanatory power, R-squared value of 0.637, indicated that 63.7% of the variation in alcohol consumption was explained by the social environment. The R-squared indicated that the included variables reliably predicted alcoholism in Busia County.

**Table 4: Linear Regression Model**

| Alcoholism               | Coefficient | Std. Error. | t-value | p-value                | 95% Confidence Interval | Sig     |
|--------------------------|-------------|-------------|---------|------------------------|-------------------------|---------|
| Social environment       | .703        | .031        | 22.35   | .000                   | .642 .765               | ***     |
| Constant                 | .948        | .108        | 8.75    | .000                   | .735 1.162              | ***     |
| Mean dependent variables |             | 3.260       |         | SD dependent var       |                         | 0.910   |
| R-squared                |             | 0.637       |         | Number of observations |                         | 287     |
| F-test                   |             | 499.554     |         | Prob > F               |                         | .000    |
| Akaike crit. (AIC)       |             | 472.872     |         | Bayesian crit. (BIC)   |                         | 480.190 |

\*\*\*  $p < .01$ , \*\*  $p < .05$ , \*  $p < .1$

The regression equation derived from this model was:

$$Y = .948 + .703X_1$$

Where:

Y = Alcoholism consumption in Busia County

$X_1$  = social environment.

From the simple linear regression analysis, social environment had a significant positive effect on alcoholism ( $\beta = 0.703$ ,  $p < 0.05$ ). The positive effect implied that, for every unit improvement in social environment score, alcoholism increased by 70.3%, indicating a positive relationship between social factors and alcohol consumption. From the qualitative analysis on Alcoholism in Busia County, the major factor affecting alcohol consumption among residents of Busia County was social interactions. The social environment also had a strong effect; individuals who were influenced by the drinking behaviours of their peers and family members, led to higher consumption if their social circles were drunkards. Families were often deeply affected by alcoholism, experiencing increased domestic violence, financial instability, and neglect of children. The social fabric of communities become strained as alcoholism contributed to reduced productivity and economic output. Alcoholism also places a heavy burden on healthcare services and law enforcement, diverting resources that could be used for other community needs.

## 5.0 CONCLUSION AND RECOMMENDATION

### Conclusion

In conclusion, the social environment had a positive effect on alcoholism, indicating that social interactions contribute to higher alcohol consumption rates. Thus, the determinants for alcoholism in Busia County included family dynamics, peer influence, parenting style and literacy level. To mitigate this problem, individuals should learn coping strategies that minimise the effects of social environment on alcohol consumption behaviour. The coping strategies should be seen as a focal area of intervention to curb the consumption of alcohol that is occasioned by the social environment of an individual.

The determinants included family dynamics, peer influence, parenting style and literacy level. To mitigate this problem, individuals ought to understand the effects of social environment on alcohol consumption behaviour and devise mitigation measures to curb the menace. The social environment determinants that influence alcohol consumption behaviour should be seen as a focal area of intervention in devising mitigation measures to curb the menace of alcoholism among individuals. The mitigation measures aim

at minimising the effects of alcohol consumption by employing a number of strategies and interventions which might be at individual level, community level or policy makers' level.

### **Recommendation**

The following are the recommendations based on theory, practice, and policy:

#### **Theory**

The major recommendation is to devise a comprehensive conceptual framework to integrate various social environment factors influencing alcoholism such as family dynamics, literacy levels, peer influence and parenting style. This approach is likely to give a broad view of how social environment influences alcohol consumption and allow scholars to understand the relationship between the variables and eventually how they contribute to formulation of coping strategies to curb alcoholism menace.

#### **Practice**

A practical recommendation is to establish an informative lesson for stakeholders involved in combating alcoholism menace. By linking the victim of alcohol abuse, the government, community-based organisation, and other agencies involved in eradicating alcoholism

#### **Policy**

A vital policy recommendation is to formulate and ensure there is implementation of laws and regulations that govern the production, distribution, selling and consumption of alcoholic beverages. The policies should be broad enough to include coping strategies that include individual, community and government intervention aimed at minimizing the effects of social environment on alcohol and subsequently curb alcoholism menace.

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