

Alcohol Abuse and the Family: A Case Study of the Nandi Community of Kenya

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Abstract

This study investigated factors that have led to alcohol abuse among the household heads and its contemporary socioeconomic effects on family life in Kenya. The main objective of the study was to find out the socio-economic impact of alcohol abuse among the Nandi Community. A survey research was used to conduct the study, employing purposive and proportionate stratified sampling to determine the sample size. The target population was the heads of households (mostly male). In female headed households, the female was interviewed. Key informants: the chief; assistant chief; a teacher; village elders, and a pastor were purposively selected. The study also used five case histories which were purposively selected. This comprised families who narrated the stories on how alcohol has adversely affected them (Five family heads were purposively chosen,) this helped the researcher to observe and even quote verbatim). The tools for collecting data included a questionnaire, semi-structured interview guides and direct observations. The findings of the study indicate that: harsh economic conditions have contributed to alcohol abuse; socio-cultural changes have played a role, whereby religious and traditional regulations that used to guard the misuse of alcohol have broken down; marriage stability and emotional wellbeing of the children have been adversely affected and, lastly, that the family has resorted to brewing changaa and busaa for sale. The study recommended that; alternative sources of income should be introduced in order to curb the problem; counselling and rehabilitation centres should be established in the district, and that awareness should be created on the impact of alcohol abuse on the family.

Keywords: Alcohol abuse, socio-cultural changes, emotional well-being, family, alcohol consumption, Kenya

Introduction

The consumption of alcohol is not a new concept; it's a problem all over the world. In the United States of America, the per capita consumption of alcohol in 1993 has been estimated at 1.9 gallons, roughly equivalent to 2/3 of an ounce of alcohol per day (Palmer, as cited in Stephen, 1997). Riley and Marden (as cited in Muchanga, 1988, p. 140) conducted a study in the United Kingdom and Scandinavia and found that 75% of the males drunk compared to 56% of the female who drank. In 1975, the expenditure on alcoholic beverages for the United Kingdom was established at 13.1 million pounds per 100,000 of the population (Ibid.). In Kenya, the consumption of alcohol dates back to prehistoric times but the abuse was not as pronounced as it is today. Alcohol was consumed during special occasions like weddings, initiation ceremonies and meetings of elders (Acuta, 1985). There were regulations as to who could drink and the age factor was also taken into consideration. For example, women, young men and children were not allowed to drink (Acuta, 1980). Today in Kenya, alcoholism is widespread.

In a study of alcoholism in a crowded slum area of Nairobi, Wanjiru (1979) 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 and Experts' Committee on Mental Health in 1972.

Due to the high prevalence of alcohol abuse in the country, the government enacted the Alcohol Control Act in 2010 (National Council for Law Reporting, 2012). The object and purpose of the Act is to provide for the control of the production, sale, and use of alcoholic drinks, in order to;

- a) Protect the health of the individual in the light of the dangers of excessive consumption of alcoholic drinks;
- b) Protect the consumers of alcoholic drinks from misleading or deceptive inducements and inform them of the risks of excessive consumption of alcoholic drinks;
- c) Protect the health of persons under the age of eighteen years by preventing their access to alcoholic drinks;
- d) Inform and educate the public on the harmful health, economic and social consequences of the consumption of alcoholic drinks;
- e) Adopt and implement effective measures to eliminate illicit trade in alcohol including smuggling, illicit manufacturing and counterfeiting;
- f) Promote and provide for treatment and rehabilitation programmes for those addicted or dependent on alcoholic drinks; and
- g) Promote research and dissemination of information on the effects of alcoholic drink consumption, in particular the health risks that may arise there from

Alcoholism can be defined as a chronic disability manifested by persistent drinking. It is a chronic illness characterized by habitual drinking of alcohol to a degree that it interferes with physical and/or mental health or with normal social or occupational functioning. Among the Nandi community, alcohol was brewed mainly at home for family consumption and, occasionally, for celebrations or ceremonies like weddings, initiation and even during naming of children where beer had a symbolic function, that of blessing. It was drunk at home and only after work, apart from special occasions. It was most unusual for people to drink in the morning. When taken in the morning, one's judgment is impaired, reducing productivity and interfering with efficiency because an inebriated person is whimsical and incapable of sustained attention and concentration. Women, young men and children were not allowed to consume alcohol. But, today, this has changed: the once valued abstinence among women and men has decreased dramatically.

Beer that used to be taken in moderation is now taken in excess.

In the community, there are three types of alcohol being consumed: *changaa* (distilled alcohol); *busaa* (a traditional brew, fermented from maize and millet), and beer (commercially produced and sold in bars). The most commonly abused is *busaa* and *changaa*. The consumption is increasing and it is taken any time: in the day or at night. This excessive taking of alcohol is affecting family life. This is especially so because the bread winners are the ones who spend most of their time drinking hence neglecting their family responsibilities and duties.

The sudden increase in alcohol abuse is caused by change in social and cultural factors whereby rules and regulations that guarded its abuse have broken down. Other possible causes are the harsh economic conditions that face the community and high inflation rates as the prices of commodities are rising. In the past two decades, Kenya has been experiencing an economic decline. The situation has continued to deteriorate and the country is now among the world's poorest countries (Obondo, 1996). This deterioration is caused by among other things oil crisis, volatile world prices for the exports and the implementation of Structural Adjustment Programmes (SAPS).

The socio-economic costs of these adjustments show major concern for many Kenyans as the number of people living below the poverty line has consistently remained high (World Bank, 2000). The community is equally affected as it mainly depends on agricultural produce, like milk and maize, whose prices keep on fluctuating. Due to these harsh conditions, there's a possibility that the affected are stressed and are forced to indulge in alcohol so as to reduce stress. According to Campbell (1988), alcohol is medicine for stress. Many people who suffer from depression may take alcohol to lift up their spirits. The overindulgence in alcohol has led to domestic violence (Campbell, 1988). It has also affected emotional development of children, as the children whose parents are alcoholics will show signs of emotional disturbances such as anxiety, feelings of insecurity and they also suffer disorder behaviours such as trances (Ibid.).

This is mainly manifested during adolescence when they develop withdrawal attitudes towards the parent and identify with the peer group leading to deviant behaviour. The government, and other civic bodies, has tried to curb the problem by enacting laws that prohibit the sale of illicit liquor, especially *changaa* and *busaa*.

The government has also appointed the National Agency for the Control of Drugs and Alcohol (NACADA) in an attempt to fill a vacuum that exists in advocacy against alcohol abuse. The organization is charged with the responsibility of coordinating activities of individuals and organizations in a campaign against drug abuse.

The religious leaders, on their part, have played a role in trying to curb the problem. Rehabilitation centres have been put up to assist those affected. A case in point is the Asumbi Rehabilitation Centre in Nyanza Province by the Catholic Church among others, but, in spite of these attempts, the problem still persists. This study sought to establish the socio-economic impact of alcoholism on family life among the Nandi community. Past studies in Kenya have only concentrated on urban areas and the family in general (Obondo, 1996; Wanjiru, 1979). The fact that families have unique challenges that need immediate attention has been overlooked. Hence, there's urgent need to highlight the problems the Nandi Community is experiencing as a result of alcoholism.

The main objective of this study was to establish the socio-economic impact of alcoholism on the family among the Nandi Community. The specific objectives were to:

- a) Study the socio economic status of the household.
- b) Identify the causes of alcohol abuse by the families involved.
- c) Capture the effects of alcoholism on the families involved.
- d) Document the coping mechanisms employed by the affected families.

Literature Review

Research indicates that alcohol has been with civilization since the earliest recorded history. The fermentation of sugar occurs spontaneously. The earliest forms of alcohol were not particularly potent (Campbell, 1988). As far back as ancient Egypt and the code of Hammurabi, there's evidence that even this mild brew caused some disruption in society, but there were rules mandating who could drink, when and why. Drink was resorted to in times of war, recreation and festive occasions and when medical practitioners prescribed it to the patients. The purpose of the drink was to make soldiers more militant and zealous. Kings and nobles used it to regain lost energy as a result of continued long illness (Mamoria, 1981). With changes, and especially the industrial revolution, people crowded together in slums, working in factories under deplorable conditions, hungry, diseased and without any hope of bettering their situation, the people escaped from reality through alcohol.

In the traditional African society, drinking was a social life of the people especially during the wedding and initiation ceremonies, and settling of disputes (Acuta, 1985). The Ndebele of Bulawayo, Zimbabwe, used beer during rituals such as washing of burial implements, birth of the first child. Beer was also important in terms of nutritional value (Hagaman, 1980). Among the Nandi, it 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 (Acuta, 1988). In the developing countries rapid changes in the structure of society, and urbanization in particular, have meant that old social and religious controls over drinking have broken down at exactly the same moment as economic forces have led to brewers being established within the borders. Findings from a National Survey on Alcohol and Drug Abuse conducted by NACADA in 2012 shows that 13.3% of Kenyans are currently using alcohol, 9.1% tobacco, 4.2% *miraa*, 1.0% bhang and 0.1% heroin. Overall, bhang is the most easily available illicit drug in the country at 49% followed by cocaine while heroin is the least available illicit drug in the country.

Alcohol is the most commonly abused substance in the country and poses the greatest harm to Kenyans as evidenced by the numerous calamities associated with excessive consumption and adulteration of illicit brews. Among the different types of alcoholic drinks, traditional liquor is the most easily accessible type of alcohol followed by wines and spirits and lastly *chang'aa*. In general, 30 % of Kenyans aged 15-65 have ever consumed alcohol in their life; 13.3% of Kenyans currently consume alcohol totalling to at least 4 million people. Traditional liquor is still more likely to have been consumed by rural children than urban children. More children in rural areas are likely to have ever consumed *chang'aa* than those in urban areas. The current use of all intoxicating substances is higher among men than women; for instance, the current usage of tobacco and *miraa* is largely limited to males except in North Eastern Province. Comparatively, the survey showed that 17% of men smoke tobacco while only 2.1% of women use tobacco products (NACADA, 2012).

On the contrary, a person in the traditional society had a few choices to make. His mode of living, code of conduct and role in that society were well defined. Today, family ties have broken down. Social attitudes towards drinking have changed; today everybody is free to drink. Traditionally, people drank communally while, today, it's individually. In essence, this breakdown in cultural ties, coupled with economic factors, has left a gap because a substitute that regulates people's behaviour in society has not been developed. It has even been worsened by the influence and adoption of western cultures. Other causes, like loneliness, stress and anxiety, have attributed to the cause of alcohol abuse (Mamoria, 1981; Levinger, 1965; Wanjiru 1979). Alcohol abuse has had a negative impact on marriage and the emotional wellbeing of the children (Rosalind, 1988; Maritim, 1992; Greenfeld, 1998). Thus, it is evident from various studies that alcohol abuse leads to marriage instability and affects negatively the relationship between the parents and children.

Methodology

Nandi District is situated in the Western part of Rift Valley Province. It borders Kakamega District to the North West, Uasin Gishu District to the North East, Kericho District to the South East, Kisumu District the South West and Vihiga to the West. The district has nine divisions and occupies a total area of 2,873 km². The study was done in Kilibwoni Division, Kaplamai location, one of the largest locations in the division. The district is politically divided into four constituencies, namely: Aldai, Mosop, Tinderet and Emgwen. Nandi has a cool climate and, on average, the district receives between 1,200 mm and 2,000 mm of rainfall per annum. The long rains start in March and continue up to the end of June. The short rains start from September to December. The whole district is ideal for dairy farming and residents also plant crops such as maize, tea, practice horticulture, plant pyrethrum, cereal and fruit trees, owing to adequate and reliable rainfall. Mixed farming is practiced. As the reviewed literature illustrates, there are possible factors for alcohol abuse and its effects such as harsh economic conditions, breakdown in social and cultural factors, responsible for regulating the use of alcohol, negative impact on marriage and children has also been highlighted. In Kaplamai location, alcohol abuse is prevalent, but no study has been done on the area thus the lack of statistics.

Sampling and Data Collection

The study benefited from a combination of primary and secondary data. Probability and non-probability was used to arrive at the number of households required for the study. A total of one hundred and twenty five households were sampled and interviewed out of 332 households in the location. This was done proportionally to ensure that a sample of households proportionate to those in the location was selected. After distributing the households proportionally, systematic random sampling was used to select households from every sub location. This method consists selecting every Kth case from a complete list of population starting with randomly chosen case. Survey method was used to collect primary data. A questionnaire was used to interview the households' heads. An interview schedule was used to get information from the key informants. To allow for observation and assessment, the household heads were mainly interviewed at home. The male household heads were the target except in single-parent and surrogate families. The head of the households were targeted because they are the bread winners and where they overindulge in alcohol it affects the family. The key informants included local administration such as the chief, Assistant Chief and a village elder. A teacher and a pastor were also chosen. They were able to give information especially on how alcohol abuse has affected the family negatively.

Analysis of Data

Statistical package for the social Sciences (SPSS) was used for analysis of data. Descriptive statistics were the main method of analysis. The inferential statistics were also used. This was to establish whether relationships exist or not within the variable of interest. The presentation and analysis of data focused on frequencies, percentages, cross tabulations, measures of associations (Chi-square).

Results and Discussions

Characteristics of the sampled household heads

Age, Education and Religion of the respondents

The survey covered one hundred and twenty four respondents. Most respondents (46%) were in the category of 36-45 years; 38.7% were in the category of 46 years and above while 15.3% were in the category of 25-35 years. The majority of the respondents were male (82%) while female stood at 17.7%. The study targeted the head of the household who in most cases were male except families which were single or surrogate. The analysis shows that those who take alcohol most are the in the category of 36-45 years of age and that of 46 and above. This relationship could be attributed to the fact that most people in that group are married and faced with the challenges of family life and therefore pushed to alcohol abuse. The age of the respondents has an influence on the rate of abuse of alcohol. In terms of religious persuasion, and specific denomination, it was found that most of the respondents were Catholics in terms of religious affiliation. They were followed by the Anglican, Pentecostal, African Inland Church and other groups.

These results are displayed in Table 1. From the study, it was established that most of the Catholics take alcohol as their liberal beliefs do not condemn it. This explains why use of alcohol is prevalent in the area. In terms of education level, most of the respondents attained the level of primary which stood at 41.9% whereas those who attained secondary and tertiary stood at 29.8% and 9.7% respectively. The respondents were fairly educated. The majority of those who take alcohol are also in the group of upper primary and secondary education. Most of the respondents (96.7%) were married. The study established that 9.7% were single, 9.7% widowed, 2.4% divorced and 1.6% separated. The study also established that most of the respondents who take alcohol are married. This was attributed to the challenges they face. During the interviews the respondents confessed that they drink so as to forget problems. It was also established that the majority of single parents take alcohol due to frustrations.

Occupation and income levels of the respondents

Most of the respondents were small scale farmers. The farmers made up 48.4% while the employed were 37.9%. The study found that those employed are primary teachers, drivers, few police officers and others are technicians in the nearby schools. The self-employed were 12.1% and some have shops in the nearby shopping centres while others are tailors. The majority of the respondents earned below Ksh. 3,500 a month. From the study findings, 58% earned between Kshs. 1,000-3,500 whereas 41.9% earned Kshs. 3,500 and above. This can be attributed to the fact that the community relies on agricultural products and they are small scale farmers with small farms. Based on the findings, taking of alcohol directly related with the salary scale with 44% of those taking alcohol in that category of Kshs. 1,500-3,500 while those at Kshs. 1,000-1,500 stood at 24%.

They cite stress due to harsh economic conditions. Their sources of livelihood, mainly from milk production and maize, are no longer sufficient to meet their family needs. One of the key informants expressed concern that the community is living under harsh circumstances because the milk that is available is sold to middlemen who buy very cheaply. This has caused stress because they are not able to pay fees for the children. As a result of these frustrations most household heads have resorted into alcohol abuse in order to drown their problems. It was established that the most popular drink is *changaa* and *busaa* (local brews). It's affordable and available and, echoing Stephen (1988), the availability and affordability of the drug contributes to drug abuse. It was established that there's a relationship between taking alcohol and harsh economic conditions.

Alcohol abuse and marital instability

It was established that alcohol abuse has negatively affected marriage. The most prominent reasons were fights and quarrels among couples which stood at 57.3%. The emotional wellbeing of the children has also been affected with 89.5% of children dropping out of school due to alcohol related reasons. .

Socio-cultural changes and alcohol abuse

The socio-cultural factors here include beliefs, attitudes and values. Rules that used to guard against the use and misuse of alcohol, like age, sex, time, occasion, amount and frequency, are no longer applicable.

All the informants agreed that the breakdown in religious and traditional regulations has led to the community to abuse alcohol. According to a key informant (an elder), beer was brewed during harvest seasons so as to obtain labour to work on the farms. Beer was also used during initiation and wedding ceremonies: it was seen as a sign of blessing when sprinkled on the couple while grass was tied to symbolize permanence in marriage (Nandi traditional marriage). In most cases beer drinking was done communally and it acted as a source of social unity in the community. According to a key informant, elders used to meet to discuss the behaviour of errant members and come up with a way of rectifying such behaviour since it was their responsibility to instil discipline on those who misbehaved in the community. There was order and oneness in the community. It was emphasized that, during these meetings, women, young men and children were not allowed to drink. It was strictly meant for elders. The elder observed that, after some time, beer was sold and everybody started taking part in the buying. The community has moved away from communalism to individualism.

Rapid changes in the structure of society and, urbanization in particular, has meant that old social and religious controls over drinking have broken down. Edwards (1980) attributes alcohol abuse to breakdown in religious and traditional regulations. It was also observed that boys are circumcised early. This was not acceptable in the traditional society. Now, once they are initiated, they change their attitude and want to feel like men. As a result, they indulge in taking alcohol at an early age. After initiation, many drop out of school, they marry unlike in the traditional society where they ensured one was mature and would be vetted socio-culturally before joining a drinking group. Consequently, they start indulging in alcohol in the morning before engaging in any useful activities such as tending the farms. It was observed that this had affected development and brought about poverty in the area. The amount and frequency of alcohol intake is not regulated. One can take as much as he can so long as he can afford. This has brought about drunkenness. One of the key informants (an elder) reminisced about the days when the community was close knit with nostalgia. He stated that, if these rules were brought back the community would be better. He was, however, quick to emphasize the need for self-discipline and responsibility on the part of the adults.

Coping Mechanisms

The study found that the families affected by alcohol abuse have resorted to various ways for survival. 50% of wives whose husbands drink have resorted to selling illicit brew like *changaa* and *busaa*, in order to meet their basic needs. They use this money to pay school fees, buy food and other necessities. It was also established that the majority of those who brew it also take the alcohol. The children whose parents drink have also resorted into drinking alcohol so as to relieve stress.

It was also established that 6.2% of the respondents had medical problems due to drinking. When they are given medication, they did not finish the dose. From observation, most of those who take alcohol looked haggard and thin. Some women have resorted to prayer, seeking divine intervention from God to help their husbands stop taking alcohol.

Conclusion

This study sought to find the impact of alcohol abuse on the family. It focused on the reasons that make people abuse alcohol, the consequences of alcohol abuse on marital stability and the emotional well-being of the children. It was also aimed at establishing the coping mechanisms employed by the affected.

- a) The study concluded that harsh economic conditions and socio cultural changes have mainly contributed to the abuse of alcohol.
- b) It also concluded that marriage stability and the emotional well-being of the children have been adversely affected by alcohol abuse.
- c) It was concluded that this situation can be alleviated if the households' heads and policy makers adopted the following recommendations.

Recommendations

- a) Awareness should be created on the impact of alcohol abuse on the family. This can be done through *barazas*, workshops and seminars. This should be a joint effort between the church, administrators, youth groups and women groups.

- b) Rehabilitation and counselling centres should be established in the location. Those who abuse alcohol need professional help; they need to be counselled and treated.
- c) The existing laws on illicit liquor have not deterred people from abusing it. The laws should be revised and penalties on those who abuse alcohol to be harsher. The country's economy needs to be improved so that farmers have a place to sell their produce at reasonable prices. This would stop unscrupulous middle men from exploiting the farmers. The Kenya Cooperative Creameries and National Cereals and Produce Board should be strengthened to alleviate the farmers' problems.
- d) Alternative ways of earning income should be sought. This would assist the families to stop brewing illicit liquor. The women should be encouraged to keep poultry, bees and many more. This can be enhanced through forming women groups in the area.
- e) Those who abuse their wives should be punished by law, this will discourage domestic violence. The society should appreciate that women have feelings like any other human being and therefore respect their dignity.
- f) The parents should learn to be responsible. When parents become alcoholics, their relationship with the children is affected, as they do not have time to discuss issues with regard to sexuality among others. Educating children on issues of sexuality is thus central in reducing unwanted pregnancies, sexually transmitted diseases and in enhancing self-efficacy among young adults.
- g) Parents should give love and attention to their children. This would help the children get a good self image. More importantly, parents should be role models to their children.
- h) Counselling services be strengthened in schools. The teachers need to be trained in this field. This would enable them to confidently and professionally help the affected.

Table 1: Denomination against frequency of alcohol abuse

Denomination	Frequency
The Catholics	45.5%
The Anglican	18.5%
The Pentecostal	4.8%
AIC	17.7%
Others	13.7%

Source: Author's Findings

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