

**PREDISPOSING FACTORS INFLUENCING DRUG AND SUBSTANCE ABUSE
AMONG SECONDARY SCHOOL STUDENTS IN KINANGO
SUB-COUNTY, KWALE COUNTY, KENYA**

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**THESIS SUBMITTED TO THE SCHOOL OF EDUCATION IN PARTIAL
FULLFILMENT OF THE REQUIREMENTS FOR THE AWARD OF THE DEGREE
OF MASTER OF EDUCATION IN GUIDANCE AND COUNSELLING OF MAASAI
MARA UNIVERSITY**

2021

DECLARATION AND APPROVAL

DECLARATION

This thesis is my original work and has not been submitted for examination for award of degree in this or any other university.

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DEDICATION

To my God who has been my strength and solace during the trying times, to my beloved wife Bancy Wangari and to my children Abigail Neema and Immanuel Amani for always being patient during my absence so as to pursue further studies.

ACKNOWLEDGEMENT

I thank God for giving me good health, wisdom, strength and peace that I needed to pursue this study. I would like to acknowledge the invaluable input from my supervisors; Dr. Mwaura Kimani and Dr. Naftali Rop, for their criticism and suggestions to ensure that I was always on track. Similarly I acknowledge the help of the following lecturers Dr. Adem, Prof. Ogola, Dr. M. Mvuria and Dr. Maithia. I note with appreciation the contribution of my school principal Mrs. Lilian Mwalekwa, my friends; Neville Onyimbo, George Muthumbi and Brian Mwangangi and my classmates Mr. John Ruto and Md. Caroline Njagi. Finally, I thank all the study respondents; students, guidance and counselling teachers and the deputy principals for their cooperation.

ABBREVIATIONS AND ACRONYMS

ADA	Alcohol and Drug Abuse
ATS	Amphetamine-Type Stimulants
CFS	Child Friendly Schools
DEO	District Education Officer
G & C	Guidance and Counselling
HOD	Head of Department
INCB	International Narcotics Control Board
KCPE	Kenya Certificate of Primary Education
KCSE	Kenya Certificate of Secondary Education
KEMI	Kenya Education Management Institute
KICD	Kenya Institute of Curriculum Development
KMTC	Kenya Medical Training Centre
KNEC	Kenya National Examination Council
MoEST	Ministry of Education, science and Technology
NACADA	National Campaign against Drug Abuse (Authority)
NGO	Non-Governmental Organisation
SPSS	Statistical Package for Social Sciences
SLT	Social Learning Theory
TSC	Teachers Service Commission
UK	United Kingdom
UNDCP	United Nations Drug Control Program
UNODC	United Nations Office on Drugs and Crime
WDR	World Drug Report
WHO	World Health Organisation
NACOSTI	National Commission for Science Technology and Innovation

ABSTRACT

A report of survey on drug and substance abuse by NACADA revealed that 32.4% of people aged between 18-28 years have consumed alcohol or other type of drugs and substances. Majority of secondary school students are in the age bracket 14-22 years, the group that is most affected. Drug and substance abuse is partly responsible for the riots, strikes, destruction and burning of property in secondary schools. The prevalence rate of drug abuse in Kinango Sub-County was 20.3%. The purpose of the study was to investigate predisposing factors that influence drug and substance abuse among secondary school students in Kinango Sub-County, Kwale County. The objectives of the study were; to establish the effect of parental influence on drug and substance abuse, to determine the influence of peer pressure on drug and substance abuse, to establish the influence of the media on drug and substance abuse and to determine the influence of age on drug and substance abuse among secondary school students. Erickson's theory on social development and Bandura's Social Learning Theory (SLT) helped in explaining the findings of the study. A survey research design was used to investigate the influence of the selected variables on drug and substance abuse among secondary school students. The study population comprised of all secondary school students, heads of guidance and counselling departments and deputy principals of secondary schools in Kinango sub-county totalling 4,964 people. 4 public secondary schools were selected through stratified random sampling to ensure gender balance. The sample size comprised of 4 deputy principals, 4 heads of guidance and counselling departments of the selected secondary schools and 384 students selected by random sampling. Data was collected through questionnaires for students and guidance and counselling teachers. An interview schedule was used to collect data from deputy principals. Validity of the instruments was ensured by using expert judgement of my supervisors. Reliability of the instruments was determined through a pilot study which was done to show the degree of consistence of the instruments, a Cronbach's alpha of 0.817 was obtained. Raw data was edited to correct errors and omissions. Both descriptive and inferential statistics were used to make inferences and draw conclusions. This was done with help of SPSS version 23. The study established, from hypothesis one, that there was statistically significant influence of parental influence on drug and substance abuse among secondary school students in Kinango sub-County, $p < 0.05$. Similarly, from hypothesis two, the study established that there was statistically significant influence of peer pressure on drug and substance abuse among secondary school students in Kinango sub-county, $p < 0.05$. The study established, from hypothesis three, that there was no statistically significant influence of media on drug and substance abuse, $p > 0$. From hypothesis four, the study showed there was no statistically significant influence of age on drug and substance abuse in Kinango sub-county, $p > 0.05$. Finally, the study found out that the age bracket 17-19 years had the highest number of students who have used drugs at least once. The researcher recommended that: parents should abstain from drugs because they are role models of their children; parents and teachers should guide students to avoid peers who abuse drugs; guidance and counselling should be strengthened in schools and all forms of drug advertising should be censored.

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CHAPTER ONE

INTRODUCTION

1.0 Introduction

In this chapter the researcher presents the background, statement of the problem, objectives of the study, hypotheses of the study, research questions, significance of the study, limitations of the study, delimitations of the study, assumptions of the study and operational definitions of terms.

1.1 Background to the Study

The United Nations Office on Drug and Crime estimates that 200 million people worldwide abuse drugs (Nations & Crime, 2010). This was an equivalent of 5% of the global population but now the number of those who abuse drugs could be high. Consequently, the percentage of those who abuse drugs could be much greater. According to UNODC, the global problem continues to spread in geographical terms as more countries reported increases rather than decreases in illicit drug consumption and abuse, this is a worrying trend. The most widely abused illicit substances worldwide are cannabis consumed by an estimated 160 million people, followed by the Amphetamine-Type Stimulants (ATS) consumed by around 34 million people, according to estimates provided by UNODC (Nations & Crime, 2010). These figures could definitely be much high now.

In one of European School Survey project, on alcohol and other Drugs, it was found that more than half of 15 - 16-year-old British teenagers admitted 'binge drinking'. Under -16s are drinking as twice as much as they were ten years ago (Arif & Rohrer, 2005). Among 16-24 year olds, 38% of men and 21% of women regularly drink twice, the recommended daily limit (Gross, 2016). That kind of drinking is bad for one's health leave along the economic and social implications.

Every country, developed or developing, incurs significant costs as a result of damages caused by alcohol or drug and substance abuse (Nations & Crime, 2010). Many accidents on our roads are caused by drunk drivers or drivers who are under the influence of some drug. Serious mistakes are made in hospitals and industries by workers who are under the influence of drugs. According to the World Health Organization (WHO), a third of the world population above the age of 15 years, use tobacco in the form of cigarettes. This translates to approximately 1.1 billion people, 800 million of these are males and 300 million are females. 700 million out of the 800 million males, live in developing countries (Organization, 2014). Kenya is a developing country and therefore was adversely affected by the problem of tobacco smoking. There was a significant decrease in the rate of tobacco smoking in the developed world, however on the contrary the opposite was happening in the developing countries. Over the last decade, the increase was alarmingly as high as 50%, in some regions, for example, Asia and the Pacific (Organization, 2014). There is a cause for alarm. Addiction to tobacco is a major problem in the developing countries. It causes approximately four million deaths annually. This is exclusive of prenatal morbidity and mortality (Organization, 2014). This figure is projected to rise to 16 million by the year 2025, 70% of which will occur in the developing world if current trends continue (“NCJRS Abstract - National Criminal Justice Reference Service,” n.d.). If we care about the future generations then concerted effort must be garnered to reduce tobacco use, principally in the form of cigarette smoking by educating all people about its harmful effects.

Despite eradication efforts in countries in Africa, the region still remains a major supplier of some drugs such as cannabis, which is one of the most widely abused drugs. Africa has been experiencing an escalating problem with drug abuse and trafficking since the early nineteen eighties. Data collected under the Eastern Africa Drug Information System / Global Assessment Programme (EADIS/GAP), country mission reports coupled with small-scaled

research activities conducted by governmental organizations all attest to this, although reliable information is scarce (Dahoma et al., 2006). Africa's role in the global drugs supply chain is increasing. Already the continent is the second largest region for cannabis production, trafficking and consumption, accounting for 26% of global seizures of this drug in 2001 (Nations & Crime, 2010). By country, the largest hauls in this period were in Kenya, Nigeria, and the Republic of South Africa, while Morocco is said to be one of the main producers of cannabis resin.

East African region has become a fall back for drug dealers. This is mainly because there is increased control of traditional routes, for example, through Netherlands and Spain (Nations & Crime, 2010). Cocaine worth 6.4 billion Kenya shillings was intercepted in Malindi and Nairobi on December 14, 2004 (Maithya, 2009).

According to an International study carried out by Doll, Peto, Boreham and Sutherland (2004), half of the long-term smokers will die prematurely, half of these in middle age (Doll, Peto, Boreham, & Sutherland, 2004). The study revealed that, smokers are four times more likely than non-smokers to suffer from a heart attack before age 40. In addition, the study showed that, the earlier young people start smoking and the more they smoke over their life time, the more likely they are to suffer from smoking-related diseases. The situation described above is true in developed countries that have been experimenting with such drugs for a long period. However, developing countries are not exempt from the dangers. All countries, Kenya included, are vulnerable.

Kenya is one of the developing countries in Africa that has lately been experiencing rapid increase in production, distribution and consumption of multiple drugs of dependence;(David Ndeti MBChB, Lincoln Khasakhala MBChB, Francisca Ongecha-Owuor MBChB, & Donald Kokonya MBChB, 2009); (Beckerleg, 2006). A heroin haul estimated to be worth 25 billion

shillings seized by the Australian Navy off the Kenya Coast, is by far the biggest found in Africa (Dimova, 2016). In his determination to fight drug abuse, the president of the republic of Kenya, Mr. Uhuru Kenyatta ordered the blowing up of a ship carrying 373.8kg of heroin worth 1.3 billion shillings off Mombasa (Syvertsen, Ohaga, Agot, Dimova, Guise, Rhodes & Wagner, 2016). There is intense global concern about the problem of drug abuse. Therefore, every nation, including Kenya, must take a firm stand in combating all aspects of drug and substance abuse. United Nations Drug Control Programme (UNDCP) was created by the United Nations general assembly based on the recognition of the need for an organization that would foster concerted international action against illicit drug production, trafficking and abuse. The formation of UNDCP was evidence of the determination of the governments of the world, working through the United Nations to put an end to the problem of drug and substance abuse. In order to comply with UN, the government of Kenya has ratified two major United Nations Conventions on narcotic drugs and psychotropic substances in its quest to protect its citizens from the ravages of the global drug abuse menace. Kenya government enacted a new anti-drug law in 1994, the Narcotics and Psychotropic Substances Control Act. In addition, Kenya Anti-Narcotic Unit was simultaneously formed.

A substance is considered abused if it is deliberately used to induce physiological or psychological effects or both for purposes other than therapeutic ones and when its use contributes to health risks, disruption of physiological functioning, adverse social consequences or some combination of these. Drugs may be prescribed for the specific therapeutic purposes but the same drugs may be abused by obtaining and taking them without prescription for the purpose of experiencing some wanted side effects. Not all abused chemicals are drugs. Abused substances other than drugs include; glue, cleaning fluids, petrol and other chemicals that can cause psychological and physiological effects. Drug and substance abuse among adolescents is a major public health problem and has been linked to

such adverse consequences as car crashes, suicide, delinquency, criminal behaviours, and psychological difficulties. The presence of drug and substance abuse problems during adolescence is the single most predictive factor for adult drug dependence (Gross, 2016). In secondary schools, discipline problems include all forms of disrespect, unruly behaviour, and use of bad / vulgar language, smoking, drinking alcohol, robbery, stealing school property gambling and bullying (Nyaga, 2004). Nyaga concentrated on discipline matters, although he mentions smoking and drinking of alcohol, he does not deal with the predisposing factors towards smoking and alcohol drinking. In Kenya maladjusted students exhibit numerous indiscipline symptoms like aggression, shyness, suspicion, tattling, bullying, cruelty, cheating, truancy, tardiness, stealing, profanity, boisterousness and all sorts of disorderliness (Nyaga, 2004). Again in his study, Nyaga is concerned with indiscipline in secondary school, but not predisposing factors to drug and substance abuse.

A more recent study by Karega showed that the more commonly occurring behaviour problems in schools are: boy/ girl relationship, poor response to bells, theft, faking sickness, fighting, noise making and destruction of property, refusal to complete assignments as well as riots and demonstrations were the most frequently cited indiscipline problems (Karega, 2012). In another research it was found that lateness, absenteeism, truancy, unattended duties, and wrong dressing and smoking were the commonly reported behaviour problems (Mutisya, 2008). These studies were on behaviour problems in general whereas this study specifically dealt with predisposing factors to drug and substance abuse among secondary school students in Kinango Sub-County, Kwale County, Kenya.

In a recent study on perceived factors influencing deviant behaviour among the youth in Njathaini community, Nairobi, Kenya, it was reported that the most common forms of deviant behaviour were alcohol and drug abuse, premarital sex, prostitution, gang fighting and rape.

The study targeted 395 youth aged between 15-35 years and used purposive sampling to ensure gender balance and was carried out in a slum located in Nairobi (Mbuthia, 2013). Although Mbuthia mentions drug and substance abuse he does not deal with predisposing factors. Mbuthia did not specifically research on secondary school students but youth in general. He used purposive sampling technique to collect his data. In Contrast, in this study, simple random sampling technique was used to select the students in each of the schools, stratified random technique was applied to select the schools to participate in the research and finally purposive sampling technique was use to select the guidance and counselling teachers as well as the deputy principals to be interviewed. Although the two studies are somehow related, different research designs were used.

Drug abuse has very serious consequences. It has negative effect on nearly all the national goals of education. The national goals of education have been the guiding pillars of education development and provision since 1964 (Mboya, 2015). What this implies is that all the national achievements that have been made since then are most likely to be negated unless urgent measures are taken to rest the situation. The problem of drug abuse among Kenya youth is of much concern to all responsible citizens. Drug abuse is spreading to rural areas especially Central, Western, Nyanza and Eastern parts of Kenya (NACADA, 2016). Drug abuse among the youth in secondary schools has endangered their lives. This is a cause of concern as the vice, has been identified as a major cause of the problems experienced in secondary schools in Kenya (Maithya, 2009). However, Maithya's study was concerned with ways of preventing drug and substance abuse in schools and did not focus on predisposing factors to drug and substance abuse among secondary school students in Kinango Sub County. In addition, Maithya's study scope was different from the scope of this study hence the gap which this study attempted to fill.

A report from criminal justice agencies showed that in 2005, the Probation Services supervised 3,588 offenders convicted of abuse and possession of drugs. 406 of these offenders were juveniles (“The History of NACADA,” 2009). On the same note, the National Agency for Campaign Against Drug Abuse asserted that crime and violence were escalating as a result of drug and substance abuse (“The History of NACADA,” 2009). The country is recognised as an important transit for southern African market. Mombasa port and the Jomo Kenyatta International Airport are alleged key entry points (“Kenya drug bust exposes heroin route - Daily Nation,” n.d.).

In an attempt to fight drug abuse in Kenya, there has been a campaign to ban smoking in public places. For example, in many public offices, ‘No smoking’ signs are prominently displayed. In addition, the ministry of Health has proposed a new bill prohibiting smoking in public. According to this bill, people who smoke in public would risk up to six months in jail, a fine or both (“Beyond Ratification: How Tobacco Industry and State Politics Affect the Implementation of Tobacco Control Bill in Kenya,” n.d.). However, the bill is yet to be gazetted. According to Ngilu, the most effective way of dealing with drug abuse is to sensitize people to the dangers posed by drugs to the user, his or her family and the society at large (NACADA, 2016).

In response to global warnings on the dangers posed by drug abuse, the National Agency for Campaign Against Drug Abuse (NACADA) has been pushing for the establishment of a national drug control authority to enforce all drug trafficking laws in Kenya (Cheloti & Gathumbi, 2016). According NACADA, drugs are likely to destroy the lives of the youth before they become adults. Many secondary school students today are experimenting with drugs (“The History of NACADA,” 2009).

The government of Kenya established the National Authority for the Campaign against Drug Abuse, in 2012. The functions of the Authority include: Carrying out public education on alcohol and drug abuse directly and in collaboration with other public or private bodies and institutions; facilitate public participation in the control of alcohol and drug abuse. The agency is now in a better position to wage war against drug and substance abuse (Marais & Maithya, 2015). Findings from a rapid assessment survey revealed that drug and substance abuse was a major social problem in Kenya (“The History of NACADA,” 2009). According to the Rapid assessment survey, 22% of all respondents aged between 15-65 years were current users of at least one substance of abuse albeit with huge variations based on gender and rural/urban population. The current users of cigarettes and miraa were 11% and 6% respectively. For sniffed /chewed tobacco products and bhang; the proportions for current use were 2% and 1% respectively. The survey revealed that 64% of men were leading drug-free lives compared to 91% of women respondents (“The History of NACADA,” 2009).

According to the Report of survey on Drugs and substance Abuse in Coast province, Kenya, Mombasa had the highest proportion of persons currently consuming alcohol or other drugs with 29.5% followed by Malindi with 27% and Lamu was ranked third with 23.7% of its population consuming alcohol and other types of drugs. In Kwale the prevalence rate of alcohol and drug use is 20.3% (Kinoti, Jason, & Harper, 2011). Kinango Sub-County is in Kwale County, therefore the prevalence rate of drug and substance abuse is 20.3% (NACADA, 2012). These were general results for people aged between 15-65 years in Kwale County. A prevalence rate of 20.3% is quite high and calls for concern. However, the results were not specifically for secondary school students whose ages range between 14-24 years. In another report it was observed that drug and substance abuse, both licit and illicit are forming a sub-culture in Kenya among the students (NACADA, 2007). Although many studies have been done on drugs and substance abuse, such as prevention and intervention (Maithya, 2009), none

of these specifically investigated factors that could predispose secondary school students to drug and substance abuse in Kinango Sub-County. There could be many factors that predispose secondary school students to drug and substance abuse in Kinango Sub-County. It was against this background that the study was undertaken to investigate some of these factors to establish whether they predispose secondary school students to drug and substance abuse. The study investigated the following factors; parental influence, peer pressure influence, media influence and age, to establish whether they predisposed secondary school students to drug and substance abuse, in Kinango Sub- County, Kwale County, Kenya.

1.2 Statement of the Problem

The government of Kenya has invested heavily in secondary education. It has, through Constituency Development Fund (CDF), built many secondary schools across the country and expanded existing ones, in order to improve the transition from primary school to secondary school (Republic of Kenya, 2013). In the year 2018, when the KCPE results were released, the president declared that his government will ensure that there will be 100% transition from primary school to secondary school, that is, all the students who sit for KCPE would be absorbed in secondary schools regardless of what they scored (Republic of Kenya, 2018). The government has made deliberate effort to have students in school by subsidising secondary school education; however there are problems that prevent learners from proceeding to secondary school and completing secondary school education. The main problems hindering 100% transition and 100% completion rate are; early marriages, poverty and drug and substance abuse. Further, drug and substance abuse among secondary school students has affected effective learning in schools significantly (Republic of Kenya, 2014). Drug abuse is linked to riots, strikes, burning and destruction of school property. Students who abuse drugs lose interest in studies are indiscipline, perform poorly in examinations and eventually drop out of school (Republic of Kenya, 2012). Therefore, despite the effort by the government of

Kenya to eradicate drug and substance abuse, the problem of drug and substance abuse among secondary school students has persisted.

The study identified that, in Kenya, despite having a clear policy on alcohol and drug abuse for schools (Education Act, 2013), the problem of drug and substance abuse among secondary school students exist and is in fact worsening. This study therefore sought to investigate selected predisposing factors to drug and substance abuse among secondary school students in Kinango Sub-County, Kwale, Kenya. The prevalence rate of alcohol and drug abuse was estimated to be 20.3% in Kinango sub-county (Kinoti, Jason & Harper, 2011). This percentage is for the general population comprising people aged between 15-65 years. A prevalence rate of 20.3% is high enough to be a cause for concern. Therefore, there was a need for a study, specifically tailored, for secondary school students in Kinango Sub-County. Furthermore, the problem of drug and substance abuse, among secondary school students, in Kinango Sub-County, needed to be understood well, so that appropriate interventions, tailor-made for the Sub-County, could be formulated. When this is done, we would expect fewer cases of drug and substance abuse and probably high retention rate and higher completion rate of secondary school education.

1.3 Purpose of the Study

The purpose of the study was to investigate selected predisposing factors that influence drug and substance abuse among secondary school students in Kinango Sub-County, Kwale County.

1.4 Objectives of the study

The objectives of the study were:

- i. To establish the parental influence on drug and substance abuse among secondary school students in Kinango Sub-County.

- ii. To determine the influence of peer pressure on drug and substance abuse among secondary school students in Kinango Sub-County.
- iii. To establish the influence of the media on drug and substance abuse among secondary school students in Kinango Sub-County.
- iv. To determine the influence of age of student on drug and substance abuse among secondary school students in Kinango Sub-County.

1.5 Research Hypotheses

The study was guided by the following research hypotheses;

- i. Hypothesis One

- H₀₁: There is no statistically significant relationship between Parental influence and drug abuse among secondary school students in Kinango Sub-County.

- H_{0A}: There is statistically significant relationship between Parental influence on drug abuse among secondary school students in Kinango Sub-County.

- ii. Hypothesis two

- H₀₁: There is no statistically significant relationship between peer pressure influence and drug abuse among secondary school students in Kinango Sub-County.

- H_{0A}: There is statistically significant relationship between peer pressure influence and drug abuse among secondary school students in Kinango Sub-County.

- iii. Hypothesis three

- H₀₁: There is no statistically significant relationship between media influence and drug abuse among secondary school students in Kinango Sub-County.

- H_{0A}: There is statistically significant relationship between media influence and drug abuse among secondary school students in Kinango Sub-County.

- iv. Hypothesis four

- H₀₁: There is no statistically significant relationship between age and drug abuse among secondary school students in Kinango Sub-County.

- H_{0A}: There is statistically significant relationship between age and drug abuse among secondary school students in Kinango Sub-County.

1.6 Significance of the Study

The findings of the study would be of use to parents who need to be aware of factors that predispose their children in secondary schools to drug and substance abuse. Then they will be able to help their children to avoid the vice. Guidance and counselling teachers would benefit from the findings of the study by understanding how certain factors influence students to drug and substance abuse and therefore they would know how best to counsel and guide the students. Secondary school administrators on the other hand would benefit from the findings of the study in that by using the knowledge produced, they would be in a better position to involve students, parents, and the community in the fight against drug and substance abuse among students and the local community in general. Teachers would benefit from the study because the findings would help them handle students with better understanding of what the students might be going through due to drug and substance abuse.

The Ministry of Education Science and Technology would equally benefit from the study by gaining better understanding of the needs of the students in secondary schools as far as drug and substance abuse is concerned. MoEST will be able to come up with policies and programs that better address the problem of drug and substance abuse in secondary schools. These could include; seminars for principals, deputy principals and guidance and counselling teachers. MoEST could also introduce a practical and realistic syllabus which will address the need for learners to have first-hand knowledge of drugs and substances of abuse. Forewarned is forearmed.

On the other hand, Ministry of internal security would benefit because the findings of the study would guide them to know how students get drugs and therefore come up with strategies of how to arrest those involved and seal up routes used by drug traffickers. The ministry would tighten security around schools to ensure drugs do not reach students. The Ministry of internal

security should also close down premises selling drugs near schools. County commissioners, Assistant county commissioners, chiefs and assistant chiefs are administrators under the office of the president who ensure that government policies are implemented up to the grass root level. These government officers would use the findings of the study to educate the general public on the dangers of drug and substance abuse. They would urge parents to be good role models to their children, especially those in secondary schools.

NGOs play a very important role in the society; therefore, they can use the findings to assist in the fight against drug and substance abuse in secondary schools. Researchers could build on the findings to carry out further research. Similar research could be carried out on a larger scale. Research on other predisposing factors influencing drug and substance abuse among secondary school student, for example; excess pocket money, removal of the cane from school and broken marriages. Students would benefit from the finding of the study because by knowing the predisposing factors influencing drug and substance abuse, they would be having knowledge which they can use to overcome temptations towards use of drugs. Further if the recommendations of the study are implemented, the students would be taught about drugs in class and therefore they would be able to make informed decisions as far as drug abuse is concerned. Finally, the study findings would fill gaps in research and would prompt other researchers to do similar studies in other regions or levels of education in Kenya.

1.7 Limitations of the Study

The major limitation of the study was the students' questionnaire and the guidance and counselling teacher's questionnaire. Respondents may have been shy to disclose their drug taking habits while others may have been reluctant to respond to certain items in the questionnaire thinking that the exercise would be fault finding. The researcher presented an introduction letter obtained from Maasai Mara University to the school management and this

helped to reduce suspicion and enable the students and G&C teachers to disclose much of the information sought by the study.

1.8 Delimitations of the Study

- i. The study confined itself to students and teachers in public secondary schools who are directly under the ministry of education. Private schools were excluded.
- ii. The students and teachers included in the sample were those in session in the respective schools by the time of the study. Those absent or who completed examinations were not included in the sample even though they would have had interesting inputs.
- iii. There were several other factors that could have been predisposing secondary school students to drug and substance abuse, however the study only focused on parental, peer, age and the media influence, and not the environment, excess pocket money, academic challenges at school or any other.

1.9 Assumptions of the Study

The study was guided by the following assumptions:

- i. The responses given were honest to permit their use in data analysis.
- ii. Those students who were involved in drug use would be there and would readily avail the information needed.

1.10 Operational Definition of Terms

The following was operational definition of terms that were used in the study.

Alcohol: Liquor that contains ethanol and has the potential to intoxicate drinkers. It is addictive if taken in large amounts over some period.

Bhang: A mild preparation from young leaves and stems of the Indian hemp plant, *Cannabis sativa*, which, when used, produces hallucinogenic effects. It is often drunk with milk or water as a fermented brew or smoked. It is illegal to possess or grow bhang in Kenya.

Cigarette: A product of tobacco that has been cured by the process of drying and fermentation that is manufactured in form of sticks packed in branded packets for smoking

Drug: A drug is any chemical substance which when taken into the body will modify or alter the way the body functions from its normal state or from the abnormal to normal state. Drugs can be orally administered, injected, chewed, sniffed, smoked or applied. Drugs can be classified as legal or illegal but this may vary from country to country. Alcohol, cigarettes, tobacco (sniff) and miraa are classified under drugs.

Drug abuse/ Substance abuse: The two expressions mean the same thing, but when used together it is for the purpose of clarifying and emphasizing the practice of drinking too much alcohol or of taking illegal drugs.

Kuber: A highly addictive and intoxicating substance assumed to have libido-enhancing properties. It is often disguised as a mouth freshener and packed in sachets similar to tea leaves pouches. Originally from India, in Kenya the street name for kuber is *ndovu* or *sukari*.

Miraa (Khat): Is a stimulant drug derived from a shrub (*Catha edulis*) that is native to East Africa and parts of Yemen. Khat contains a mind –altering chemical known as cathinone. The

leaves of this shrub are chewed and held in the cheek to allow for the slow release of their stimulant chemicals.

Parent: Father, Mother, Step-parent or guardian.

Peers: These are students of the same age who are friends and are in secondary school. They learn, talk, compare ideas and do things together.

Predisposing factors: These are factors that expose the students to drugs before they begin using them. These are parental influence, peer influence, media influence and age of student.

Prevalence: Refers to the magnitude of drug use among a particular age population

Public Secondary schools: They are schools owned by the government by provision of resources and their management and which admits learners who have successfully completed primary education.

Shisha: Flavoured tobacco which is inhaled by passing it through water using a stemmed instrument that vaporizes the tobacco before it is inhaled.

Student: Refers to a male or female learner in form 1-4 in public schools in Kinango Sub County, Kwale County.

The Media: It comprises of the print (newspapers, periodicals and posters), radio, and television.

Tobacco (chavis/ ugoro): dried leaves of the tobacco plant that undergo the process of drying and fermentation and then ground into fine powder which are packed in sachets and used as snuff or for licking.

CHAPTER TWO

LITERATURE REVIEW

2.0 Introduction

This chapter presents a review of the literature related to the research area. The review was done according to the objectives of the study. The section includes; drugs and drug abuse, the effect of parental influence on drug and substance abuse, influence of peer on drug and substance abuse, effect of age on drug and substance abuse, effect of media on drug and substance abuse, theoretical framework and conceptual framework.

2.1 Parental Influence on Drug and Substance Abuse

Drug and substance abuse by young people, and problems associated with this behaviour have been part of human history. What is different today is increased availability of a wide variety of substances and the declining age at which experimentation with these substances take place (Nations & Crime, 2010). Drug abuse affects the children of the rich as well as those from poor families (Bahr, Hoffmann, & Yang, 2005). Drug abuse is caused by a combination of environmental, biological and psychological factors (Shoemaker, 2010). There are various factors that cause young people to abuse drugs and even become addicted (Schaefer, Vito, Marcum, Higgins, & Ricketts, 2015); (Muigai, 2012). These include family networks, interactions and home environments. Adolescents with substance abusing parents experience a higher rate of parental problems than do adolescents whose parents do not abuse substances (Muigai, 2012). This may cause poor parent-child attachment, which may in turn lead to a lack of commitment to conventional activities thereby at times leading to adolescent drug taking. These findings show how drug and substance abuse affect adolescents. However, they do not reveal how secondary school students were exposed to drugs before they started abusing them. There was therefore a need to find out how certain factors predisposed secondary school

students to drug and substance abuse. This study investigated how parental influence could predispose secondary school students to drug and substance abuse.

In another study it was found that youths with poor home support tend to seek support and understanding elsewhere. Many find this affection, understanding and support in the lifestyle of a drug abusing subgroup (Weinberg, Rahdert, Colliver, & Glantz, 1998). The concepts of family and self-identity are certainly closely related. Interactions within the family unit play a major role in the adolescent's personality or self- concept formation. In addition, the exposure to cultural norms through the family, as well as individual adaptations, lays the foundation for influential modelling and acceptance of social orientations. The family was often viewed as the basic source of strength, nurturing and supporting its members, as well as ensuring stability and generational continuity for the community and its culture (Kandel, Kessler, & Margulies, 1978). From the traditional point of view, it was the duty of the family to protect and sustain both strong and weak members, helping them to deal with stress while nurturing its younger and more vulnerable members, the children.

Families can have a powerful influence on shaping the attitudes, values, and behaviour of children (Maithya, 2009). During socialization, parents and family members' direct young people's conduct along desired channels, and in so doing succeed in enforcing conformity to social norms. In traditional African society, socialization began with the birth of a child and progressed in stages to old age, building on preceding socially recognized achievements. Socialization involved being taught all the things one needed to know in a particular context. The child was integrated into the community by being taught discipline, social roles and skills so that he/she became part of the family. The child would feel that he/ she was needed, wanted and depended upon. In such setting socialization was often not planned; children learnt from

watching and imitating what adults said and did. As they grew, they were likely to pick up both positive and negative habits from their parents.

The environment in which children grew up played a great role in shaping their character (Maithya, 2009). The claim was that children socialized in the bar culture by their parents during family entertainments would tend towards use of alcohol later in life. This would impact negatively on the development of the children in the long term. It was difficult for parents to sensitize their children about the dangers of alcohol consumption when they spend long hours imbibing in the company of the very people whose character they were expected to mould. Although Maithya's study was not about predisposing factors, it is clear from his study that parental influence is a predisposing factor to drug abuse.

Due to the church and interaction with different people, secondary school students are acquiring values that go beyond those of their immediate localized culture (Maithya, 2009). Therefore, the family is becoming less involved in socialization of the young, very little is communicated to the young in the way of values and customs. As a result the traditional value system has been eroded leading to moral decadence. In school, children spend most of their time with the peer group. However, peers have a high degree of influence only when parents have abdicated their traditional supervisory roles (NACADA, 2016). Hence, active and involved parents may be able to limit the influence of peer groups on young people attitudes towards drug use, and therefore be crucial influence on children's behaviour.

Generally, parents are role models for their children. NACADA carried out a survey in 2012 covering all the counties in Kenya. In their survey they found out that about 7.2% of the children who have ever taken alcohol have either, father, mother or close relative using one drug or the other. These findings are a generalization from 47 counties and therefore may not be specific to secondary school students. This study sought to find out the effect of parental

influence on drug and substance abuse among secondary school students in Kinango sub county, Kwale.

Poor parenting is linked to alcohol abuse as well as abuse of other substances. In a study of 542 middle school students from the Birmingham Youth Violence Study in Alabama, USA, poor parenting practices (e.g. less nurturance and harsh and inconsistent discipline) was found to be strongly related to school- level alcohol and cigarette use (Mrug, Gains, Su & Windle, 2010) they concluded in line with earlier studies that poor parenting could increase susceptibility to school- level substance use through greater deviant affiliations or impaired ability to withstand negative peer influence (Mrug & Windle, 2009; Simons-Morton, 2002) . Although parental guidance in parenting is the norm, peer guidance and approval become increasingly powerful and valued during the period of adolescence. Rather than seeking parental guidance, they often seek role models outside the family who may be characters or personalities. Nonetheless, these shifts in influences shape numerous aspects of adolescents' behaviour, including ADA (Wills, Sandy and Yaeger, 2001). Family variables still continue to exert a strong influence not only because most adolescents continue to value their family members as models of behaviour, but also because these factors encompass such a wide range of influences. Therefore, parental influence is a significant predisposing factor to adolescent drug abuse that deserves to be studied.

2.2 Influence of Peer on Drug and Substance Abuse

Adolescent friendships are normally embedded within the wider network of peer groups. The group set norms, provide comparisons and pressures to conform to 'expected' behaviours. Peer groups reaffirm self-image, and enable the young person to experience a new form of intimacy and learn social skills (such as discussing and solving conflicts, sharing and self-assertion). They also offer the opportunity to expand knowledge, develop a new identity, and experiment

away from the watchful eyes of adults and family (Coleman & Hendry, 1999). Therefore, if the peers are involved with drug and substance abuse, then in order to identify with the group and to belong, one must start using drugs.

Generally, peers become more important as providers of advice, support, feedback and companionship, as models for behaviour and as sources of comparison with respect to personal qualities and skills (Coleman & Hendry, 1999). The social environment plays a major role in drug and substance abuse. Individuals develop relations within social networks where peer pressure plays a critical role in influencing group behaviours (Morojele, Brook, & Brook, 2016; Mayberry, Espelage, & Koenig, 2009; Jaccard, Blanton, & Dodge, 2005). Due to desire to act within the norms of a social setting, an environment which makes it easy to access alcohol and other substances will encourage the use. Just as the social environment can negatively influence, it can also lead to positive changes by driving current users into stopping or those not using, not to start (Morojele, Brook, & Brook, 2016). The studies carried out by Morojele, Brook and Brook was to find out the effect of social environment on general behaviour and not on predisposing factors to drug and substance abuse hence leaving a research gap for the study. To contribute to closure of the gap this study considered peer pressure as a factor that predisposes secondary school students to drug and substance abuse in Kinango Sub County.

In another study it was found that peers become increasingly important as socialization agents as children mature. Peer conformity pressures peak at mid-adolescence, when teenagers are highly susceptible to peer-group norms, including those that endorse misconduct. Strong cross-pressures are not a problem for most adolescents who have established warm relations with their parents and have generally internalised many of their parents' values. What is more, peer-group values are often very similar to those of parents, and peers are more likely to discourage

than to condone antisocial conduct. So adolescent socialization is not a continual battle between parents and peers; instead, those two important influences interact to affect one's development (Shaffer, Wood & Willoughby, 2005). According to Shaffer, Wood & Willoughby, peer pressure is mostly positive. However in this study the interest was in finding out how peer pressure influenced secondary school students towards drug abuse.

One of the most consistent findings in studies of how adolescents spend free time is that spending free time with peers in unstructured activities in the absence of adult supervision is associated with increased problem behaviour (Mahoney, Schweder & Statin, 2002). Several recent studies indicate, however, that spending time after school with friends in unsupervised settings is more problematic under some circumstances than under others. One study found that it was not simply spending unsupervised time with peers that increased an adolescent's likelihood of alcohol and drug abuse, but it was the combination of low supervision, having friends who liked to party and use drugs, and being an adolescent who is especially susceptible to peer pressure that was most damaging (Steinberg, 2005). Therefore, the findings of these studies are in agreement by showing that peer pressure is a significant predisposing factor to drug and substance abuse. However, these studies were not done in Kinango Sub County hence leaving research gap. Therefore, to contribute to closure of gap, this study investigated the influence of peer pressure on drug and substance abuse among secondary school students in Kinango Sub County.

According to a survey by NACADA, about 10% of children who have ever consumed alcohol have friends who take alcohol compared to only 5% of those whose friends did not take alcohol (Marais & Maithya, 2015). It was evident from the survey that a relatively bigger proportion of children who think that drugs are readily available in school are likely to have ever used alcohol. While the studies by Marais & Maithya show either a positive or negative relationship

between peer influence and drug and substance abuse, none of them was specifically about secondary school students. There was therefore a need for a study to investigate the influence of peer pressure on drug and substance abuse among secondary school students in Kinango Sub County.

Students obtain drugs and substances of abuse mostly from fellow students who bring them to school. Responses from students show that use of drugs and other substances of abuse by schoolmates closely mirror use of those substances by close friends. The top four substances that schoolmates and friends use are alcohol (41.4%, 40.1%), miraa (34.1%, 32.2%), cigarettes (31.0%, 27.5%) and prescription drugs (30.0%, 27.6%). These are followed by raw/ chewed tobacco use, *shisha*, *kuber* and sniffed tobacco/ *chavis* (NACADA, 2016). According to another survey by NACADA, students are fairly knowledgeable on the different drugs and substances of abuse. Alcohol, cigarettes, miraa and tobacco are well known with at least 80% of the students identifying them as drugs (NACADA, 2016). Whereas the survey carried out by NACADA in 2016 sought to determine, among other factors, the prevalence of drug and substance abuse among secondary school students in Kenya, this study however, sought to determine how certain factors predispose secondary school students to drug and substance abuse.

A study by Kiiru (2004) agrees with the one done by Maithya (2009) by arguing that peer pressure in school is a strong influencing factor among the youth to use substance under the false impression that some drugs stimulate appetite for food, increase strength and give wisdom as well as courage to face life. However, Kiiru was concerned with the youth in general but in this study the concern is specifically on secondary school students in Kinango Sub-County, Kwale County, Kenya.

2.3 Influence of Media on Drug and Substance Abuse

This section focuses on advertising of alcohol and tobacco products in both print and electronic media.

Research conducted by the Australian Medical Association (2012), show that adolescents are particularly susceptible to advertising messages. Although alcohol products are supposed to be advertised and promoted to people aged 18 and above, adolescents are exposed to significant levels of alcohol marketing and advertising, and in many situations, at levels equivalent to adults. The alcohol industry maintains that alcohol marketing is not being intentionally targeted to adolescents, but it is clear from the evidence that the messages contained in alcohol advertising are reaching children and adolescents below the legal purchasing age and that this advertising is having an influence on behaviour (Roche et al., n.d.). The international research is very much similar to the Australian given the globalization of alcohol companies and their adoption of transnational marketing practices. Therefore, it follows that the situation in Kenya on alcohol advertising is not different.

There is evidence that certain biological and psychosocial attributes make children and adolescents more vulnerable to advertising strategies than adults. A report by Australian communications and Media Authority (ACMA) into Australian television advertising to children concluded that repeated exposures are necessary to communicate advertising messages to children (Brand, 2007). Research has found that adolescents are particularly susceptible to advertising messages. For example, Australian Medical Association notes that the neurological changes during adolescence increase young people's susceptibility to marketing and that adolescence is characterized by novelty seeking, impulsive, social adaptation, emotionality (self-consciousness and self-doubt during the transition into adulthood) and risky behaviour.

Adolescents are more receptive to some forms of advertising than adults or children, as they look for adult-only products and activities that help them project mature and positive self-image to boost their self-esteem (Roberts, Henriksen, & Foehr, 2009). The authors argued that adolescents are prone to making poor decision, overweighing benefits versus costs when emotionally aroused, and noting that digital marketing techniques, in particular, take place in circumstances that produce high emotional arousal among adolescents: namely, social or peer-to-peer interactions. In their study Roberts, Henriksen, and Foehr, showed that adolescents responded more to advertising of alcohol compared to adults, but they did not specifically investigate the influence of age on drug and substance abuse among secondary school students leaving a research gap for the study. To contribute towards the closure of the gap, this study considered age as a predisposing factor to drug and substance abuse among secondary school students in Kinango sub county, Kwale County.

People are exposed to alcohol promotions through a range of media channels, both directly (television and print media, official brand websites and alcohol sponsorship of sports and cultural events) and indirectly (product placement in films, music videos and television programs, social media and in-store promotions). The adolescents are the major consumers of this advertising, simply because they are very curious at that stage of development. They follow-up everything they are exposed to and will want to sample out the drinks advertised immediately (Smith & Foxcroft, 2009). The study by Smith & Foxcroft clearly shows that advertising influence adolescents to abuse drugs however it did not show how they are influenced across the ages, that is, from age 13 to 19 leaving a research gap for the study. Their study was about adolescents in general and not secondary school students. To contribute towards the closure of the gap, this study investigated the influence of age on drug and substance abuse among secondary school students in Kinango Sub County.

It has been found that tobacco advertising, promotion and sponsorship entice teenagers to use tobacco, encourage smokers to smoke more and decrease smokers' motivation to quit (Andrews & Franke, 2020). Advertisement by the tobacco industry effectively target non-smoking youth contrary to their claim that they target adult smokers and non-smokers (Cavazos-Rehg, Krauss, Spitznagel, Grucza, & Bierut, 2014). Children are exposed to tobacco advertising, promotion and sponsorship through paid media, paid sports sponsorships and at retail stores. A recent study by Henriksen, Schleicher, Dauphinee, & Fortmann revealed that tobacco advertising, promotion and sponsorship foster positive attitudes towards tobacco use among youth which effectively motivates youth to smoke (Henriksen, Schleicher, Dauphinee, & Fortmann, 2012). Therefore, a comprehensive ban on tobacco advertising, promotion and sponsorship is necessary to reduce tobacco use among the youth. This is because advertising, promotion and sponsorship entice young people to use tobacco, encourage smokers to smoke more, and decrease smoker's motivation to quit. It has been proved that voluntary regulations are not effective as the tobacco industry often fails to comply (WHO, 2013; Ke et al., 1986; Andrews & Franke, 1991). Similarly, partial bans have little to no effect on tobacco consumption (Kelly, Ireland, Alpert & Mangan, 2015). Only comprehensive and enforced ban on advertising, promotion and sponsorship reduces tobacco use, especially among youth (WHO, 2013). A study carried out in India revealed that, sports sponsorship creates false perceptions about athletic excellence and smoking, especially among the youth (Vaidya, Naik, & Vaidya, 1996). The youth are fooled to believe that, smoking contributes to the success of the athletes or successful athletes take pleasure in smoking or both.

While the study by Henriksen, Schleicher, Dauphinee, & Fortmann and the one by Vaidya, Naik, & Vaidya were on the effects of media on drug and substance abuse among the adolescents and teenagers, they were conducted in Europe and India respectively, where access to the media is greater than in Kenya, leaving a research gap for the study. To contribute to

closure of the gap, this study investigated the effect of media on drug and substance abuse among secondary school students in Kinango sub county, Kwale County, Kenya.

Koome and NACADA carried out a study on the role of school environment on alcohol and drug abuse among students in Nairobi (“The History of NACADA,” 2009). Their research was limited to Nairobi which is an urban centre as well as cosmopolitan. In their study, data was collected using a standard questionnaire. The purpose of their study was to investigate the effect of factors within the school on alcohol and drug abuse among students in secondary schools in Nairobi. While the study by Koome and NACADA was on alcohol and drug abuse it was carried out on students in Nairobi County and was limited to factors within the school environment leaving a research gap for the study. To contribute to closure of the gap, this study investigated the effect of media on drug and substance abuse among secondary school students in Kinango sub county, Kwale County, Kenya.

Alcohol and tobacco use are ubiquitous in the mass media to which adolescence are exposed. Alcohol, tobacco and or illicit drugs are present in 70% of prime time network dramatic programs, 38 out of 40 top-grossing movies, and half of all music videos. Nearly 10% of the commercials that young people see on television are for beer or wine. For every public service announcement discouraging alcohol use, teenagers will view 25 to 50 ads for alcoholic beverages.

The tobacco industry spends approximately kshs. 100,000,000 each year on advertisement and the alcohol industry spends more than ksh.1 000 000 000 in traditional advertising and additional ksh.1 000 000 on internet ads (Roberts, Henriksen & Foehr\, 2004). Adolescents are also exposed to alcohol and tobacco through films, which frequently depict actors smoking and drinking. Teenagers are more likely to smoke if their favourite film star is a smoker (Roberts, Henriksen & Foehr\, 2004). The findings of the study by Roberts, Henriksen and

Foehr show that advertising has significant influence on drug and substance abuse, however the study was not specifically done on secondary school students leaving a research gap for the study. To contribute to closure of the gap, in this study the researcher investigated the influence of media on drug and substance abuse among secondary school students in Kinango Sub County.

2.4 Influence of the Age of student on Drug and Substance Abuse

According to a report by the NACADA director in 2004, availability of illegal drugs such as heroin, cocaine and Mandrax, together with availability of legal substances such as cigarettes and alcohol may lead to drug abuse (“The History of NACADA,” 2009). This encourages the use and eventually abuse of substances by the youth. According to the report, availability of most drugs appears to be the most important cause of the prevalence of substance use and abuse amongst Kenyan youth. The report also established that two widely used substances are grown in the country. They are bhang, which is grown in secret because it is illegal and Khat, which is cultivated, used and exported openly because Kenya legalized it in 1997. Other drugs easily available are heroin, cocaine and Mandrax which find their way into Kenya illegally and consequently, to students.

The earliest age of first use of alcoholic beverages in the community ranges from 4 to 6 years depending on the region. The main factor contributing to the use of alcohol at this age is its availability at home. Thus, in families which produce alcoholic drinks, one is likely to find individuals trying alcoholic drinks at a younger age. The environment is seen as being a negative factor for these children. It has been shown that delayed alcohol initiation is predicted by parental modelling, limiting availability of alcohol to the child and parental monitoring among other variables (Ryan, Jorm, & Lubman, 2010). These findings point to the important role played by parents in their children’s initiation into alcohol or lack of it.

According to a survey on drug and substance abuse 12% of the children aged between 12-17 years old are currently engaged in either drinking of alcohol or consuming of other types of substances and drugs. This implies that approximately one out of every 12 children is currently consuming alcohol and or consumed alcohol or other type of drugs and substances. Majority of secondary school students are in the age bracket 14-22 years, the group which is most affected by drug and substance abuse (Kahuthia, Gathu, Okwarah, Gakunju, & Thungu, 2013). The study by Kahuthia, Gathu, Okwarah, Gakunju, & Thungu gave general information on drugs and substance abuse of Kenyans aged between 15-65 years old. The study did not specifically show how age of students predisposes them to drug and substance abuse leaving research gap for the study. To contribute to the closure of the gap, this study therefore investigated the influence of age on drug and substance abuse among secondary school students in Kinango Sub County.

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. Alcohol appears to be 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. At least 30% of Kenyan aged 15-65 years have consumed alcohol in their life, 13.3% of Kenyans currently consume alcohol, that is, at least 4 million people (Kahuthia, Gathu, Okwarah, Gakunju, & Thungu, 2013). Again the study by Kahuthia, Gathu, Okwarah, Gakunju, & Thungu was done on people aged between 15-65 years whereas this study only considered secondary school students, in public schools, whose ages ranged from 14-24 years.

Traditional liquor is still more likely to be consumed by rural children than urban children. More children in rural areas and urban slum areas are likely to consume chang'aa than those in urban middle income and high income residences. According to the survey, 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. The national survey was concerned about general consumption of drugs across the country by persons of all ages; it did not therefore give detailed information about drug and substance abuse among secondary school students. This study was specifically confined to investigating the effect of age on drug and substance abuse among secondary school students in Kinango Sub County.

2.5 Theoretical Frame work

The research will be guided by two theories;

2.5.1 Erikson's Theory:

The focus of the study is on the secondary school youth whose ages range between 14 years to 22 years. The youth at that age are undergoing what Erikson called Identity crisis (Erikson, 1963). Erikson believed that it is human nature to pass through a genetically determined sequence of psychosocial stages, spanning the whole lifespan. Each stage involves a struggle between two conflicting personality outcome, one of which is positive (or adaptive) while the other is negative (or Maladaptive). Healthy development involves the adaptive outweighing the maladaptive.

The major challenge of adolescence is to establish a strong sense of personal identity. The dramatic onset of puberty combined with more sophisticated intellectual abilities makes adolescents particularly concerned with finding their own personal place in adult society.

Failure to integrate perceptions of the self into coherent whole, results in role confusion, which according to Erikson can affect several areas of the teenager's life. The teenager may engage in abnormal or delinquent behaviour such as drug and substance abuse to identify and belong to a group of peers that approves such behaviours. The theory was very useful to the study in helping to explain the factors under investigation therefore it was useful in all the 4 objectives.

According to Erikson establishing a sense of identity is consciously felt achievement. It is experienced as a sense of well-being, a feeling of "being at home in one's body", a sense of knowing where one is going, and an inner assuredness of recognition from those who count. It is a sense of sameness through time - a feeling of continuity between the past and the future. When this is achieved, an individual will live a purposeful life and is not likely to be involved in drug and substance abuse. In this study students who did not take drugs were dimmed to have a sense of identity.

2.5.2 Social Learning Theory (SLT)

Observation learning (modelling) takes place without any reinforcement (Bandura, 1977). The mere exposure to the model is sufficient for learning to occur. Social learning theorists say that all behaviour is learned. They emphasize observational learning or modelling (learning through watching the behaviour of others called models). This occurs spontaneously, with no deliberate effort by the learner, or any intention by the model to teach anything. The social learning theory is based on the idea that adolescents acquire their beliefs about antisocial behaviours from their role models, especially close friends and parents. According to the theory Drug and substance abuse is learnt. This study sought to find out the influence of parents, peers and the media on drug and substance abuse among secondary school students. Social Learning Theory was very helpful in explaining the influence of parents, peers and the media on drug and substance abuse.

2.6 Conceptual Framework.

The study was guided by the variables indicated in the conceptual model below.

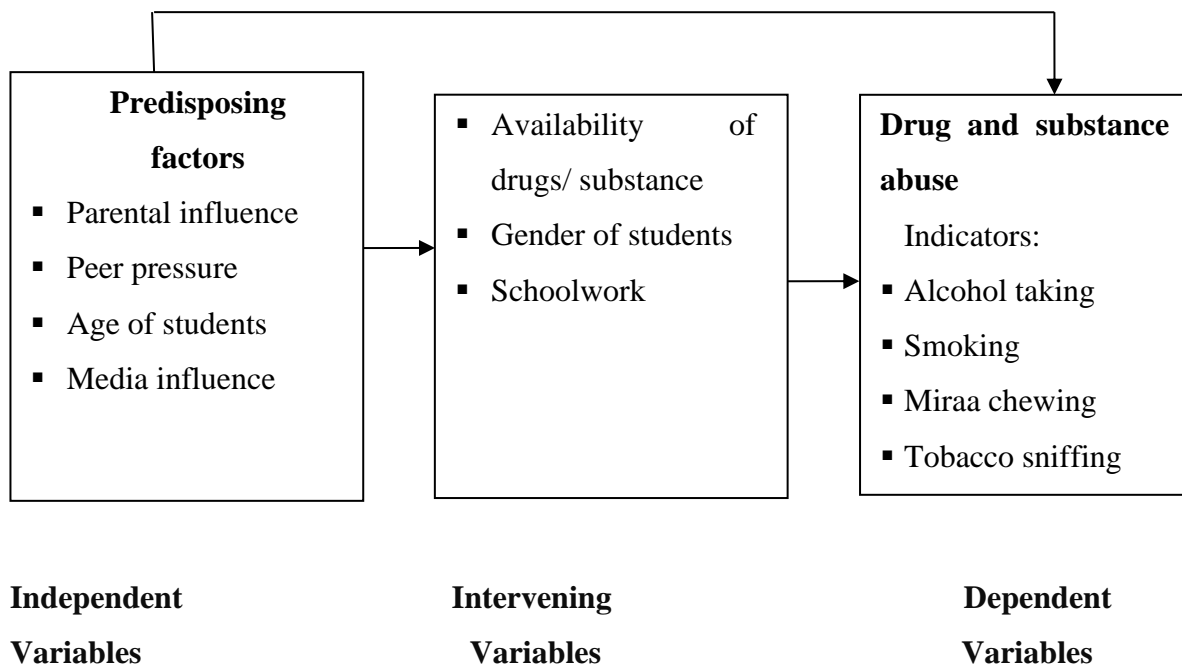


Figure 1: Predisposing factors to drug and substance abuse among students in secondary schools

Source: Self-Developed, 2013

Figure 1 shows conceptual framework on predisposing factors that influence drug and substance abuse among secondary school students. The framework suggests that the independent variable is conceptualised into four elements that predispose secondary school students to drug/substance abuse, namely; parental influence, peer pressure, age and the media influence. The dependent variable, that is, drug/substance abuse is conceptualised as the degree of drug/substance abuse and the indicators were; alcohol drinking, smoking and miraa chewing. The parent may influence the student either to involve themselves with drug abuse or not to be involved. Similarly, peers and the media may influence students to abuse drugs or not to abuse drugs. When the students reach a certain age, they may feel that they are old enough to try drugs used by adults, such as alcohol. According to Erickson's theory all students

in secondary schools are undergoing identity crisis. Those who involve themselves in drug and substance abuse are dimmed to have received negative influence from parents, peers, media, age, a combination of any of these or other factors not included in this study. Similarly those students who do not involve themselves in drugs are said to have received positive influence from parents, peers, media, age or a combination of these or other factors not included in this study.

According to the social learning theory behaviour is learned by observing the models therefore in this study the students' behaviour, that is whether they are involved in drug and substance abuse or not, can be explained by what their models do.

The intervening variables are conceptualised as availability of drugs, gender and school work. These variables can alleviate or magnify student's drug / substance abuse. Availability of drugs could encourage their usage and vice versa. A student's gender could more or less predispose the student to drug and substance abuse depending on prevailing circumstances. Challenges posed by schoolwork could encourage students to seek solace in drugs and substance abuse.

In this study, policy and legal framework of alcohol and drug abuse could be considered as an intervening variable whereby it restricts availability of drugs and their usage. This is important because it has a bearing on the 4 objectives of the study.

The Government of Kenya enacted the Narcotic Drugs and Psychotropic Substances Control Act in 1994. This paved way for the implementation of the terms and conditions of the 1988 UN convention, to which Kenya is a party. The act makes provision with respect to the control of, the possession of, and trafficking in, narcotic drugs and psychotropic substances and cultivation of certain plants; to provide for the forfeiture of property derived from, or used in, illicit traffic in narcotic drugs and psychotropic substances and for connected purposes.

The Government of Kenya established National Authority for the Campaign against Alcohol and Drug Abuse (NACADA) by an Act of Parliament in 2012. The functions of the authority include to: Carry out public education on alcohol and drug abuse directly and in collaboration with other public or private bodies and institutions; Coordinate and facilitate public participation in the control of alcohol and drug abuse; Coordinate and facilitate inter-agency collaboration and liaison among lead agencies responsible for alcohol and drug-demand reduction; In collaboration with lead agencies, facilitate and promote the monitoring and surveillance of national and international emerging trends and patterns in the production, manufacture, sale, consumption, trafficking and promotion of alcohol and drugs prone to abuse; In collaboration with other lead agencies, provide and facilitate the development and operation of rehabilitation facilities, programs and standards for persons suffering from substance use disorders; Subject to any other written law, license and regulate operations of rehabilitation facilities for persons suffering from substance use disorders; Coordinate and facilitate, in collaboration with other lead agencies and non-state actors on control of alcohol and drug abuse and facilitate their implementation, enforcement, proactive co-operation with regional and international institutions in areas relevant to achieving the authority's objectives; Develop and maintain proactive co-operation with regional and international institutions in areas relevant to achieving the authority's activities; In collaboration with other public and private agencies, facilitate, conduct, promote and coordinate research and dissemination of findings on data on alcohol and drug abuse and serve as the repository of such data; In collaboration with other lead agencies, prepare, publish and submit an alcohol and drug abuse control status report bi-annually to both houses of Parliament through the Cabinet Secretary; Assist and support County governments in developing and implementing policies, laws and plans action on control of drug abuse and Carry out such other roles necessary for the

implementation of the objectives and purpose of this Act and perform such other functions as may, from time to time, be assigned by the Cabinet Secretary.

The establishment of NACADA by the Government of Kenya was a major step in the right direction towards the fight against drug and substance abuse. However drug abuse is on the increase especially among the secondary school students (NACADA, 2016). It is therefore of paramount importance that factors that predispose the teenagers to drug and substance abuse be studied so that ways to defeat the vice can be found.

Drug and substance abuse in schools is on the increase, with age of first use steadily dropping to age eight. Most cases of anti – social behaviour are linked to this vice, hence the need to develop and integrate substance abuse prevention education into the curriculum. This in turn demands empowerment of teachers to enable them handle this subject.

The measures taken towards substance abuse prevention has been the in servicing of teachers in guidance and counselling and ensuring that G&C units in schools work with the National Authority for the Campaign Against Alcohol and Drug Abuse (NACADA) and other partners to sensitize teachers and parents.

NACADA was established by an Act of Parliament in 2012. The Authority's main focus is on demand reduction, which involves providing preventive education, public awareness, life skills, treatment, rehabilitation and psycho- social support to the general public. It also contributes towards supply suppression through policy formulation and capacity building. Studies carried out by NACADA were not done in Kinango Sub County hence leaving a research gap. To contribute to closure of this gap this study investigated parental influence, peer influence, media influence and influence of age on drug and substance abuse among secondary school students in Kinango sub county, Kwale.

2.7 Summary of Literature Review

In this chapter, literature was reviewed according to the objectives of the study. The following were discussed; Theoretical framework (Erickson's theory, Social learning theory) and Conceptual framework, parental influence on drug and substance abuse, influence of peer on drug and substance abuse, influence of media on drug and substance abuse, influence of learners age on drug and substance abuse. Findings of previous related studies were discussed and research gap identified. There was justification for the study. The study was carried out to contribute towards the closure of the identified gaps.

CHAPTER THREE

RESEARCH METHODOLOGY

3.0 Introduction

This chapter describes the research design, location of study, study population, target population, sampling procedure and sample size, data collection instruments, questionnaires and interview guides, pilot study, validity of research instruments, reliability of research instruments, data collection procedure and data analysis that was used in the study.

3.1 Research Design

The study used survey research design. Survey research design is a method of collecting information by interviewing or administering a questionnaire to a sample of individuals (Orodho, 2003; Kombo & Tromp, 2006). It can also be used to collect information about people's attitude, opinions, habits or any of the educational or social issues (Orodho & Kombo, 2002). Therefore, this study used this design to investigate students' drug abuse habits by selecting samples to analyse with respect to certain selected variables. The design was appropriate because the study required collection of information from respondents through questionnaires and an interview guide.

This design enables rapid data collection. The design is not restricted to fact finding, but the result can be used in formulation of important principles of knowledge and solution of significant problems (Olive & Abel, 2003). It provided quantitative data on students', peers' and parents' drug abuse. Finally, the design allowed the participation of several secondary schools from Kinango Sub-County making comparison possible. A total of 4 deputy principles, 4 guidance and counselling teachers and 384 students were sampled, to serve representation from which generalization were drawn.

3.2 Location of the Study

The study was carried out in Kinango Sub-County, Kwale County. The ideal setting for any study should be easily accessible to the researcher and should be that which permits instant rapport with the informants (Singleton, Straits, & Straits, 2017). The area is a hardship zone, population density is low and schools are far from each other. In addition, the area is not very accessible due to very poor road network. The roads are passable only during the dry season. Transport is mainly by motorbikes. Further the area experiences low student turn-up in schools, low completion rate in secondary schools and poor performance in national examinations (Republic of Kenya, 2013). Transition from primary to secondary is below 90% against the government's policy of 100% transition (Republic of Kenya, 2019) Although NACADA has done research in Kwale County, it did not carry the research in Kinango Sub-County which is in Kwale County. It carried its research in Ukunda and Kwale town (NACADA, 2016). Drug and substance abuse affects people in all parts of the country. Therefore, a study touching on drug and substance abuse was appropriate for the area.

3.3 Target Population

The target population of the study was 4,964 people consisting of 4,936 students, 14 guidance and counselling teachers and 14 deputy principals of 14 secondary schools in Kinango Sub County, Kwale County, Kenya. It consisted of 2,687 male students and 2,249 female students as shown in table 1.

Table 1: Target Population of the Study

Name of Secondary School		Number of Students		
		Male	Female	Total
1	Bofu	75	60	135
2	Kinagoni	70	54	124
3	Kinango	260	160	420
4	Macknon Road	130	120	250
5	Matumbi	70	50	120
6	Mazeras High	640	-	640
7	Mazeras Girls Memorial	-	525	525
8	Mnyenzeni	187	173	360
9	Moyeni	160	143	303
10	Mwavumbo	486	445	931
11	Ndavaya	101	82	183
12	Samburu	198	169	367
13	Taru	206	172	378
14	Vigurungani	104	96	200
15	G & C Teachers	7	7	14
16	Deputy Principals	7	7	14
Total		2,701	2,263	4,964

Source: Kinango DEO's office, 2013

3.4 Sampling procedure and Sample Size

The study employed stratified, simple random and purposive sampling techniques. Stratified sampling technique was used to ensure there was gender balance, that is, girls and boys in secondary schools had each, equal representation. Schools were classified into 4 strata namely; Boys' Boarding, Girls' Boarding, Mixed Day/Boarding and Mixed Day Secondary schools. A school was selected from each stratum by simple random sampling.

It is generally considered that 30% of the target population is large enough to serve as a fair representation from which generalization can be drawn (Best & Kahn, 2013). There are 14 secondary schools in Kinango Sub-County, with students in all the forms, form 1 to form 4. Therefore 30% translates to 4 secondary schools. The 4 secondary schools were selected using stratified random sampling technique.

The formula that was used for determining the sample size was, $n = \frac{(z^2 p q)}{d^2}$

Where: n= the desired sample size (if the target population is greater than 10,000),

z = the standard normal deviate at the required confidence level,

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

$$q = 1 - p$$

d = the level of statistical significance set (“Research designs for family planning field studies. | POPLINE.org,” n.d.); (Olive & Abel, 2003).

If there is no estimate available of the proportion in the target population assumed to have the characteristics of interest, 50% should be used (“Handbook for family planning operations research design. 2nd ed. | POPLINE.org,” n.d.); (Olive & Abel, 2003).

If the proportion of a target population with a certain characteristic is .50, the z- statistics is 1.96, and we desire accuracy at the .05 level, then the sample size is;

$$n = \frac{(1.96)^2 (.50) (.50)}{(.05)^2} = 384$$

If the target population is less than 10,000, the final sample estimate (n_f) is calculated using the formula:

$$n_f = \frac{n}{1 + \frac{n}{N}}$$

Where: n_f = The desired sample size if the target population is less than 10,000

n = the desired sample size when the target population is greater than 10,000

N = the estimate of the population size.

$$\text{Therefore, } n_f = \frac{384}{1 + \frac{384}{4936}} = 357$$

The four schools selected were expected to yield a total of 357 students selected by simple random sampling technique; however, for convenience 384 students were selected. It followed that 96 students were selected per school by simple random sampling technique. Similarly, 24 students were selected per stream in each of the schools selected. Selection of the 4 deputy principals was done using purposive sampling technique whereby the deputy principles of the selected schools were automatically chosen. In the same way selection of the guidance and counselling teachers was done by purposive sampling technique whereby those of the selected schools were automatically selected.

3.5 Data Collection Instruments

Two different questionnaires were used for collecting data, one for students and the other for teachers. Selection of these tools was guided by the nature of data to be collected, the time available as well as by the study objectives. The use of questionnaire in data collection was preferred because it was free from bias of the interviewers and it was also cost effective (Kothari, 2004). It allowed respondents adequate time to give well thought answers. The target population was largely literate so it did not have difficulties responding to questionnaire items. Finally, collection of data by use of questionnaires was good because the respondents were free to give information without fear of being known. In addition, an interview guide was used to gather information from the deputy principals.

3.5.1 Students and Guidance & Counselling Teachers Questionnaires

There were two different questionnaires for data collection; one for students and the other for the guidance and counselling teachers. The questionnaires were designed to probe on certain selected factors to determine their effect on drug and substance abuse. They were suitable for students and teachers because they could read and write. The questionnaire items included a

five point Likert scale, open and closed ended questions. The respondents were required to give the most suitable response to given questions. A total of 384 students and 4 guidance and counselling teachers were sampled out to complete a questionnaire each. Further the questionnaire for the guidance and counselling teachers consisted of three sections. Section A sought for general information, section B sought for information on drug and substance abuse whereas section C sought for information on what is being done to prevent, minimize or stop the vice. The instruments were self-administered because the respondents could read and interpret the questions.

3.5.2 Deputy Principals Interview Schedule

The deputy principals are in charge of discipline in their respective schools. Therefore, they handle most of the discipline issues in their schools. Some of these issues involve drug and substance abuse. An interview guide was used to collect data from the deputy principals of the 4 selected schools. The interview guide consisted of four sections. Section A sought general information about the school, section B sought information about students' drug habits, section C sought information about teachers and non-teaching staff drug habits whereas section D sought information about what was being done to prevent, minimize or stop the vice.

3.6 Pilot Study

A pilot study was conducted before the main study in one public boys' secondary school in Mombasa County. One out of the 14 schools amounted to 7% of the sample which was sufficient for piloting because it was well above the recommended 5% proportion of the sample (Olive & Abel, 2003). A questionnaire was administered to 96 students consisting of; 24 form one, 24 form two, 24 form three and 24 form four students selected by simple random sampling technique. A questionnaire was also administered to the guidance and counselling head of department and an interview with the deputy principal of the same school. The data collected

from the students using questionnaires was then coded and analysed using SPSS statistical software. The piloting exercise helped the researcher to identify deficiencies in the data collection instruments, such as vague or ambiguous questions or items. It helped in improving the questionnaires by rephrasing such questions which would otherwise be open to different interpretations by respondents, and so enhanced both validity and reliability of the instruments. The school used for piloting was not part of the final sample that was used for the study.

3.7 Validity of Research Instrument

Validity is the extent to which research instrument measure what they are intended to measure (Oso & Onen, 2009). The instruments were scrutinised by experts, the researcher's supervisors, to ascertain whether the instruments measured the concept under study. Content validity is usually established by several experts' analysis of the items to determine whether it is true representation of the concept being studied (Mutahi, 2015).

3.8 Reliability of Research Instrument

Reliability is the degree to which an assessment tool produces stable and consistent results (Kothari, 2004 & Orodho, 2008). Reliability of research determines whether the research instrument truly measures that which it was intend to measure or how truthful the research results are. Pilot study was thus conducted to detect weaknesses in design and instrumentation and to provide accurate data for selection of a sample.

Reliability of the students' questionnaire was evaluated through administration of the questionnaire to the pilot group. Reliability is the degree to which an assessment tool produces stable and consistent results. The Cronbach's Alpha Test of Reliability was used to test the reliability of the constructs describing the variables of the study. According to Mugenda, a score exceeding 0.7 indicates high internal reliability (Mugenda, 2008). The pilot study had a score of 0.817 which was acceptable level of reliability.

3.9 Data Collection Procedure

A letter of introduction was obtained from Maasai Mara University which was presented to relevant officers of all the institutions that the researcher visited either to seek permission or to carry out the research. Permission to carry out the research study was obtained from the National Commission for Science, Technology and Innovation (NACOSTI) and sought clearance from the county Director of Education. The researcher proceeded to seek permission from Sub-County Education Office to conduct research in the Sub-County and permission was granted. Finally, the researcher sought permission from the 4 principals of the selected schools for the study and was allowed to carry out the study. The sources of data were students from the 4 sampled public secondary schools in Kinango Sub County, the guidance and counselling teachers, and the deputy principals of the selected schools. This was through use of questionnaires and an interview guide. A total of 384 students and 4 guidance and counselling teachers were sampled out to complete a questionnaire each. In addition, 4 deputy principals were interviewed.

The student's questionnaire captured five sections. The first section captured student's background information, second section captured parental information, third section captured information on availability of drugs, fourth section captured information on peers and the fifth section captured information on the media. The questionnaires were distributed to the selected students who were given time to complete them as the researcher and his assistants supervised the whole exercise. Respondents (Students) were not allowed to discuss, however they were allowed to ask for clarification where they did not understand. Completed questionnaires were collected immediately and counted to ensure that all of them were returned. Variables were coded and measured. The questionnaire for guidance and counselling teachers consisted of three sections. Section A sought general information, Section B sought information on drug and substance abuse whereas section C sought information on what is being done to prevent /

minimize / stop, drug and substance abuse in their institutions. The deputy principals' interview schedule consisted of 4 sections. Section A gave general information about the school, section B gave information about students' drug habits, section C gave information about teachers and the non-teaching staff drug habits and section D gave information on the strategies put in place to prevent / minimize / stop the vice.

The researcher ensured that the work presented was original and the data presented was true information collected from the field. Extracts from any persons was acknowledged accordingly. Confidentiality of all Information provided by respondents in the study was guaranteed. However, if there was any need to divulge any information given by the students, G & C teachers and deputy principals, the researcher would seek the consent of the respondents before doing so.

3.10 Data Analysis

The researcher used both quantitative and qualitative analysis. Descriptive statistics in form of frequency counts, percentages and means were used to analyse the data collected. The responses to the questionnaires administered to the students were coded, tabulated and tallied to get frequencies which were converted to percentages. Qualitative data was mainly to clarify information, give explanations and opinions that may have not been captured in the student questionnaires. Qualitative approach emphasizes oral communication and gives the respondents a chance to state their problems the way they perceive them and participate in seeking solutions to these problems as well as in effecting such solutions (Olive & Abel, 2003). Information was then generated and presented in the form of tables indicating frequencies and percentages. Data was entered and analysed using SPSS version 23 statistical software. The use of SPSS was considered appropriate because of the researcher's standard questionnaire. Quantitative research technique was used to code qualitative data (McCormick, 2001).

Qualitative data can be coded quantitatively without detracting from the qualitative information such as in ranking ordinal scale (Olive & Abel, 2003). Descriptive statistics examined the characteristics of the population. The descriptive statistics included age, gender and form. The questionnaires for students consisted of selected response items such as ‘not at all’, ‘don’t know’, ‘only once’, ‘few times’, ‘many times’ and other constructed response items. Data processing was done through editing, coding and tabulation. Regression analysis which is statistical relationship was used between one independent variable and one dependent variable. The null hypothesis was tested at 0.05 level of significance.

Qualitative data analysis consisted of citing the significance and implications of the findings. Different and similar findings were compared with the researcher’s expectations derived from literature review and from experience. The descriptions, analysis of relationships and explanations lead to hypotheses, grounded theory. Data collection and analysis in qualitative research go hand in hand and done simultaneously (Olive & Abel, 2003).

3.11 Ethical Considerations

The researcher conformed to the principle of voluntary consent so that no respondent was tricked or coerced to participate in the study. The researcher briefed the respondents by explaining to them the purpose and significance of the study to enable them make informed decision concerning their participation. There were no embarrassing questions asked to the respondents. The study was purely for academic purpose. Major ethical issues in this study included informed consent, respect for anonymity, confidentiality, and respect for privacy. All of them were adequately addressed. The respondents were requested to omit their names while filing the questionnaires. On the other hand, ethical issues that had to be adhered to include the researchers acknowledgement of used sources to prevent plagiarism and para-plagiarism and referencing of the resources used in the study.

CHAPTER FOUR

DATA PRESENTATION, RESULTS AND DISCUSSIONS

4.0 Introduction

This chapter presents the findings, interpretations and discussions of the hypotheses that were tested in the study. It will begin by presenting the general and demographic information, followed by presentation of the findings and discussions of the following hypotheses:

H_{A1}: There is statistically significant relationship between Parental influence on drug abuse among secondary school students in Kinango Sub-County.

H_{A2}: There is statistically significant relationship between peer pressure influence and drug abuse among secondary school students in Kinango Sub-County.

H_{A3}: There is statistically significant relationship between media influence and drug abuse among secondary school students in Kinango Sub-County.

H_{A4}: There is statistically significant relationship between age and drug abuse among secondary school students in Kinango Sub-County.

4.1 General and Demographic Information

4.1.1 General Information

The questionnaires were administered to the selected students of each secondary school at the same time in one room. The students were given enough time to complete the questionnaire. The researcher and his assistants collected the questionnaires from each student checking carefully to ensure it was properly filled before allowing a student to leave the room. Return rate was 100%. Similarly, the questionnaire for the guidance and counselling teacher was administered to the teacher and the teacher returned it immediately after completion. Return rate was also 100%.

4.1.2 Demographic Information

In this section, percentages were used to describe and summarize data in reference to demographic characteristics of the respondents. The demographic variables analysed were sex, class and age of the respondents. In addition, age was analysed in relation to drug and substance abuse. The other variables of the study which were parental influence, peer influence and media influence were also analysed in relation to drug and substance abuse. The information with regard to the analysis of the respondents' demographic data is presented in the following figures.

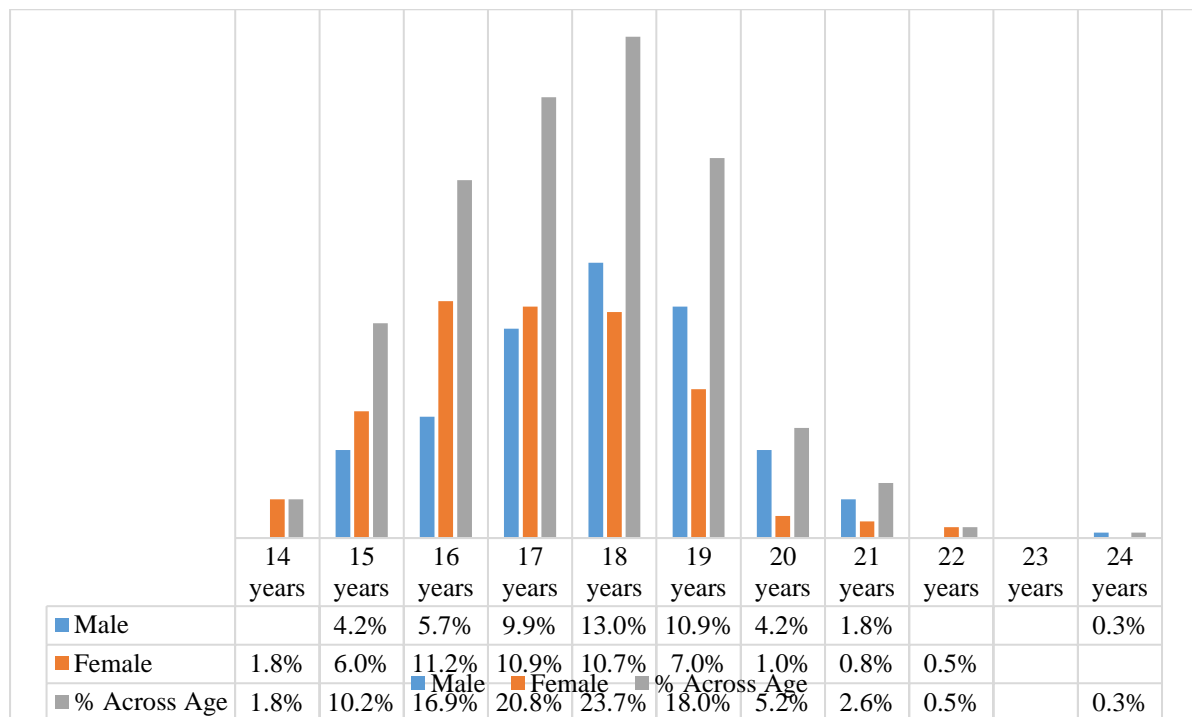


Figure 2: Students Gender and Age Distribution

Figure 2 show that the age bracket 14-19 years constituted 91.5% of the respondents. Few of the respondents were above 19 years old (8.6%). Therefore the majority of the respondents were teenagers. Equal number of respondents participated per class. The return rate of the students' questionnaire and the guidance and counselling teachers' questionnaire was 100%. This was possible because the researcher and his assistants administered the questionnaires to the respondents who were required to complete them and hand them back immediately. The

researcher also captured information on gender and drug abuse which is presented in Figure 4.2.

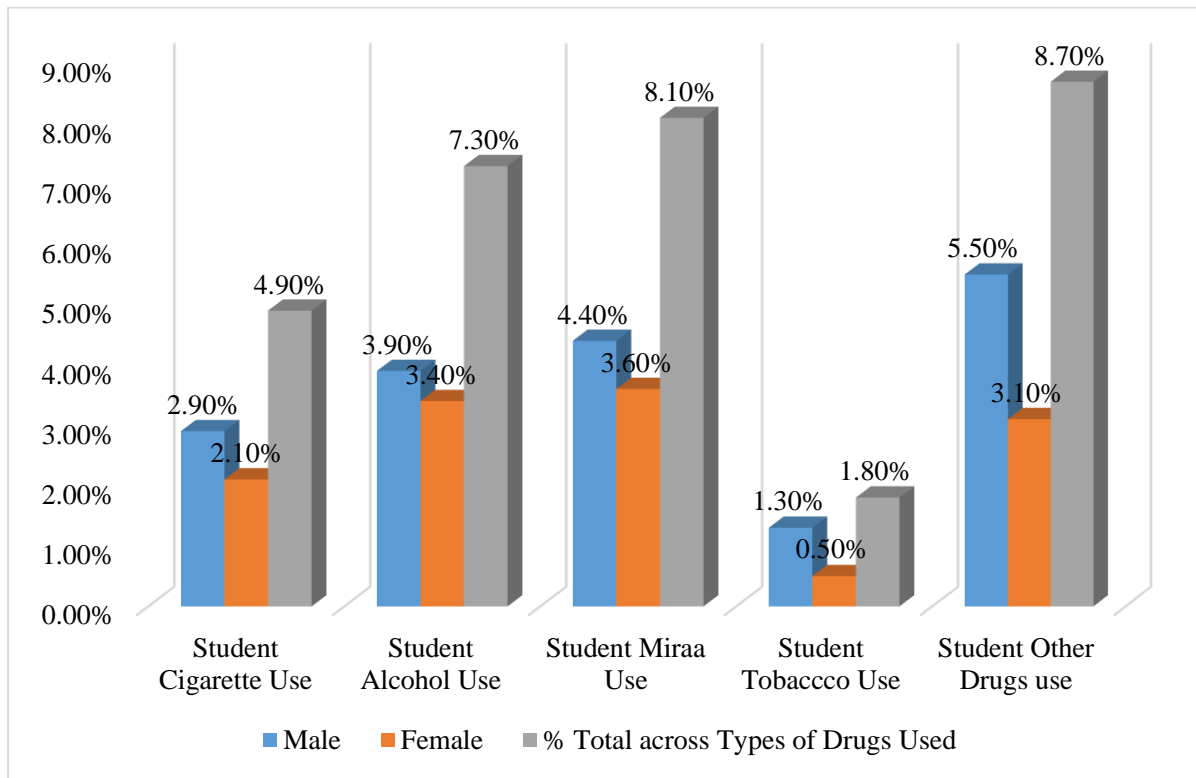


Figure 3: Students Gender and Drug Use

Drug abuse as the dependent variable in the study was described using 5 questions 4 of which were quantitative, that is, drug abuse by students (student drug abuse), drug abuse by father (father drug abuse), drug abuse by mother (mother drug abuse), drug abuse by guardian (guardian drug abuse). There was one qualitative question asking the respondents to give any other drugs they use. Responses were based on a likert scale from 1– 5 representing “Not at all”, “only once”, “don’t know”, “few times” and “always” respectively. According to Figure 3, of the 4 drugs considered in the study, alcohol and miraa were the most used drugs by the students. Sniffed tobacco was the least used by the students. However other drugs combined were used by a significant percentage of students. Generally, a higher percentage of male students in public secondary schools used drugs compared to female students, in Kinango Sub County.

According to Figure 3, the percentage of students who have ever smoked was 4.9%. This was the group the researcher was interested to find out what factors could have predisposed them to cigarette smoking. Similarly, the percentage of students who had drunk alcohol was 7.3%, the percentage of those who had chewed miraa was 8.1%, the percentage of those who had used tobacco was 1.8% and the percentage of those who had used other drugs was 8.7%. The researcher was interested in students who had used drugs at least once and to establish whether there were predisposing factors that influenced them to use drugs. The following factors were considered in the study: parental influence, peer pressure, media influence and influence of age.

4.2 Descriptive Statistics on Independent Variable, Parental Influence

The researcher gathered data on student drug abuse and parent drug abuse. The details of the findings are in Figure 4, Figure 5 and Figure 6. In this study the term parent was defined as; biological parent, step – parent or guardian.

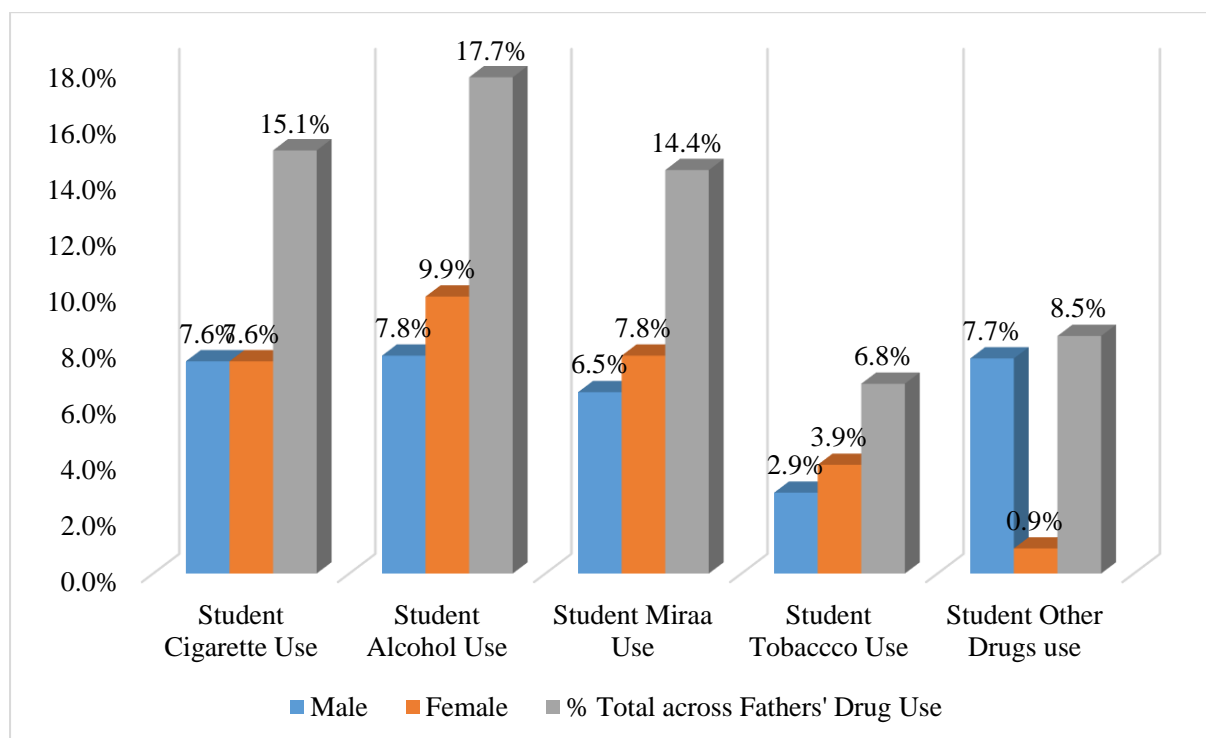


Figure 4: Students Gender and Parental Drug Use-Fathers

The findings in Figure 4 indicate that the fathers' influence on drug use by students is across the gender. Similarly Figure 5 and Figure 6, show that the influence of mother and guardian is also across gender. According to the findings in Figure 4, female students were influence by their fathers more in comparison to the male students.

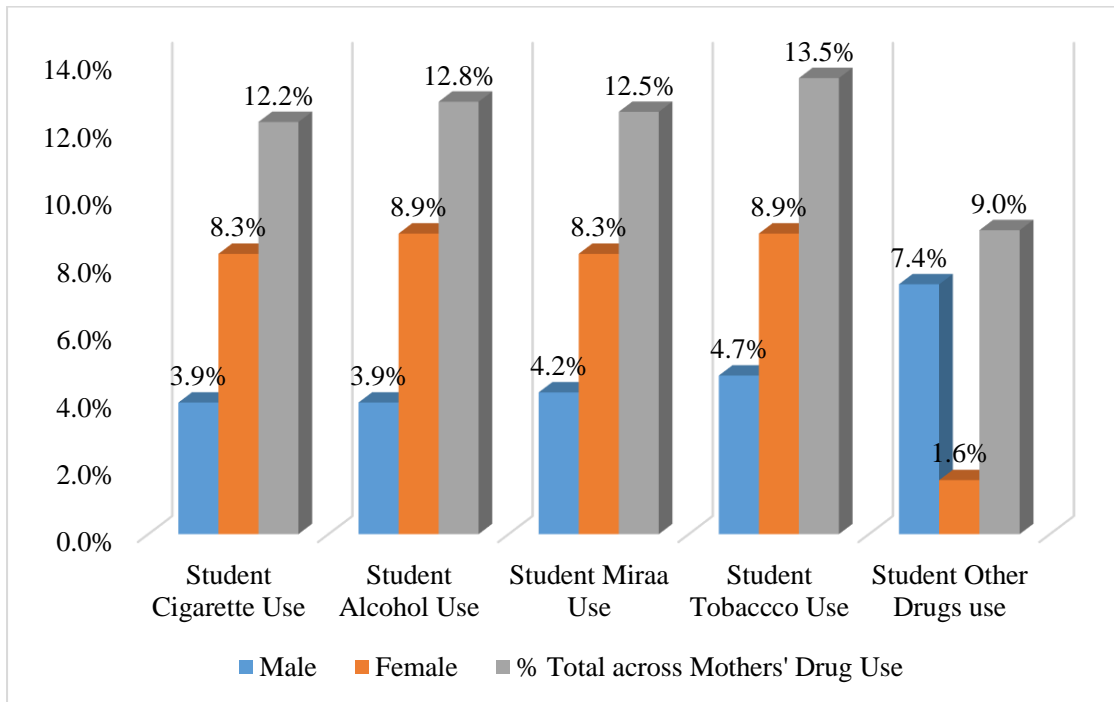


Figure 5: Students Gender and Parental Drug Use-Mother

Figure 5 shows mothers' influence on the students' drug use. The mothers' influence on the female students is clearly higher in comparison to the male counterparts. For example in the use of cigarettes, females were at 8.3% and the males at 3.9%. Similarly in the use of alcohol, females were at 8.9% whereas males at 3.9%.

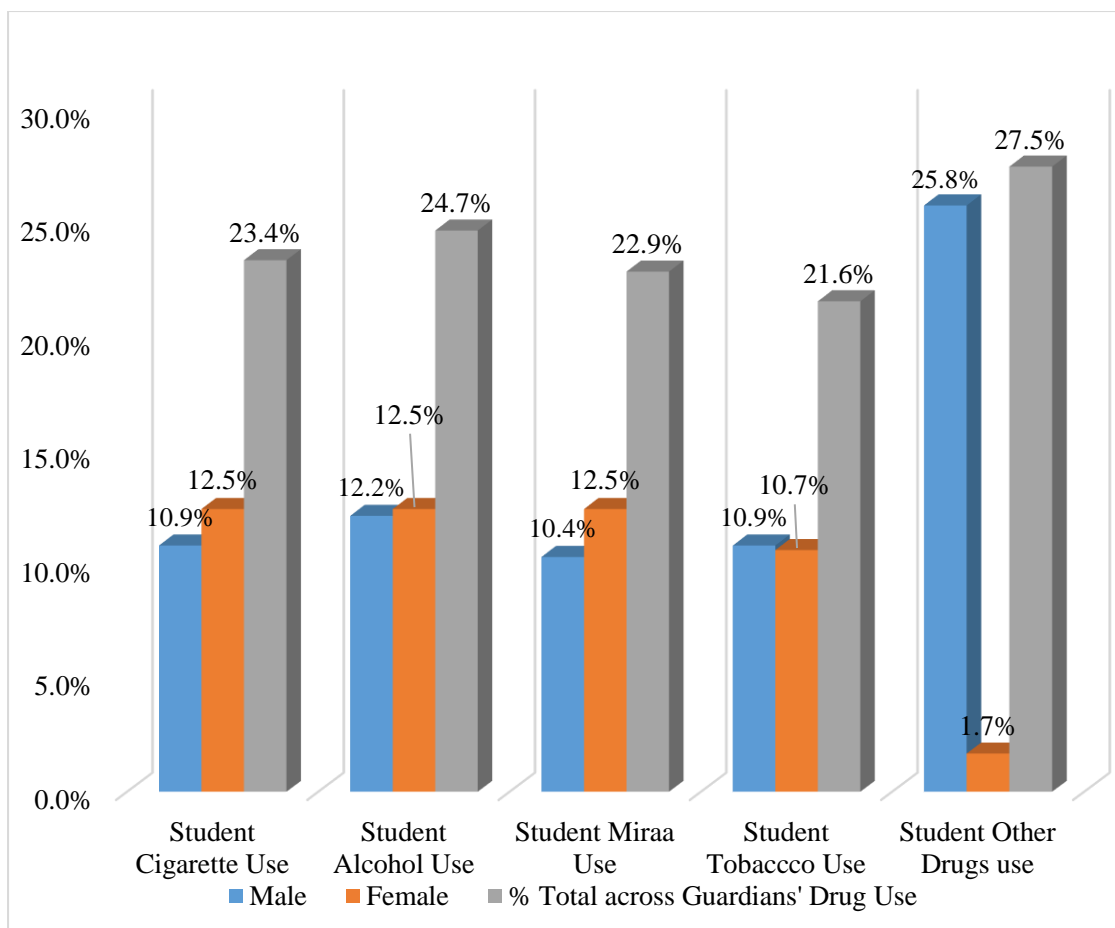


Figure 6: Students Gender and Parental Drug Use-Guardians

Figure 6 gives information on guardian's influence on students' drug use. According to the findings the guardian has approximately equal influence on both genders. However, when it comes to other drugs the male student was visibly influenced more, 25.8% compared to 1.7% for female students.

Figure 7 show that drugs were easily available in the home environment for both male and female students. Availability of drugs, in this study was considered as an intervening variable; it can either encourage the use of drugs or reduce the use of drugs. Alcohol, cigarettes, tobacco and miraa were readily available. What was worrying in Figure 4.6 was the availability of the other drugs in the home environment. The other drugs are readily available in the home environment. The student is therefore not safe from exposure to drugs in the home environment.

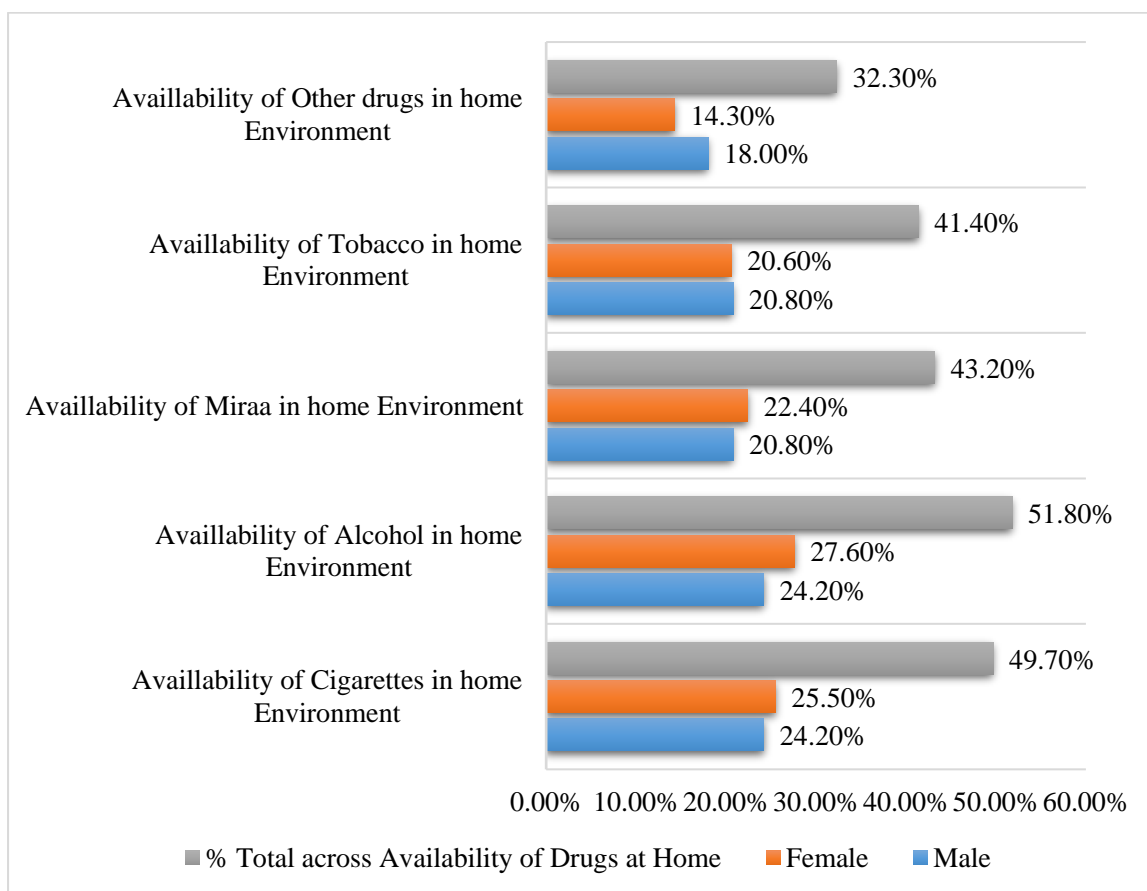


Figure 7: Students Gender and Availability of Drugs in Home Environment

4.3 Descriptive Statistics on Independent Variable, Peer Influence

The researcher gathered data on student drug abuse and peer drug abuse. The details of the findings are presented in Figure 8. According to the findings a larger percentage of female students were influenced to use drugs compared to male students. The findings show that the uptake of miraa by the female students was higher than the male students. Miraa has been mainly a man’s drug but it is clear in Figure 8 that a higher percentage of female students, 11.7%, had used miraa compared to 8.6% for male students in public secondary schools in Kinango Sub County.

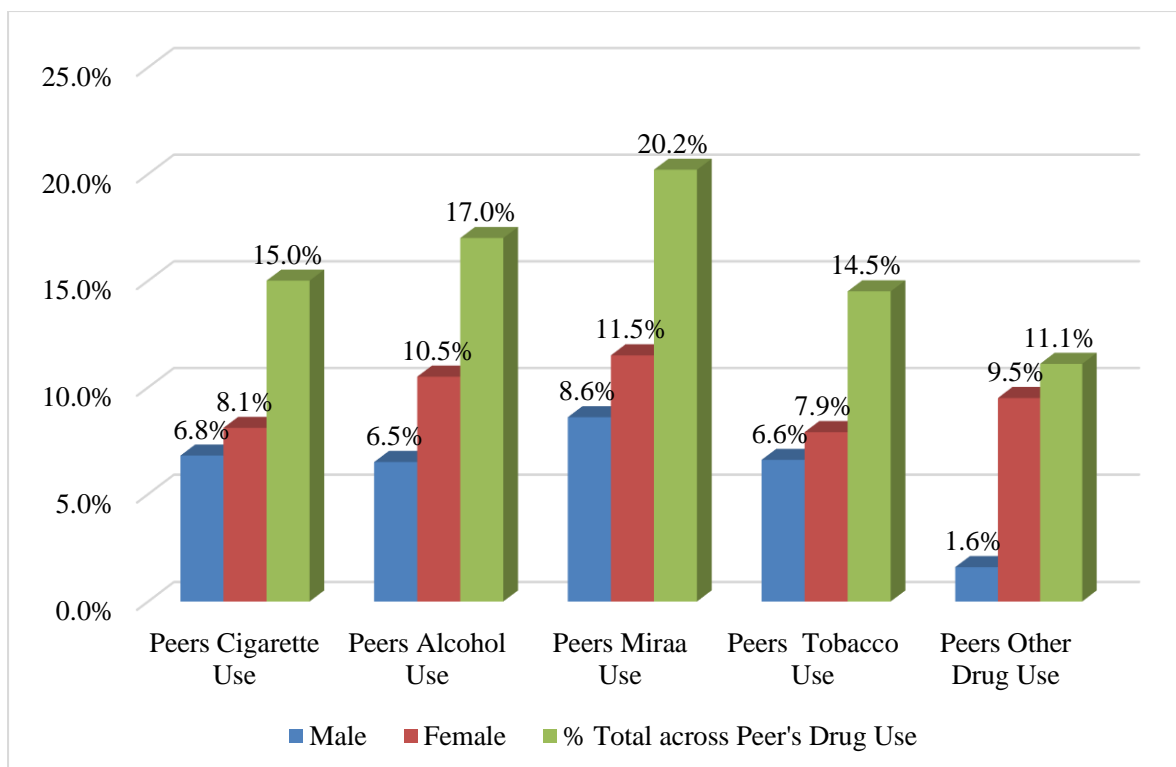


Figure 8: Students Gender and Peers Drug Use

According to the social learning theory, drug abuse is learnt. It is learnt through watching the behaviour of others, referred to as models. This occurs spontaneously with no effort of the learner or any intention by the model to teach anything (Bandura, 1977). The findings are in agreement with this theory. Parents, teachers and peers are the models that students learn from. The students watch what their parents and peers do. Then they go out to do the same. Apart from alcohol, tobacco and miraa students listed down the following as other drugs abused by themselves, their fathers, their mothers, their guardians or their peers; bhang, cocaine, heroin, inhalants (glue), madrax, chewed tobacco, sniffed tobacco, shisha and kuber.

Figure 8 presents the results of analysis of availability of cigarettes, alcohol, miraa, tobacco and other drugs in the school environment. The findings show that availability of drugs in schools in Kinango Sub County is low as indicated by the percentages. However it is clear in Figure 9 that the percentage for the availability of drugs in schools with female students was higher than in a school with male students.

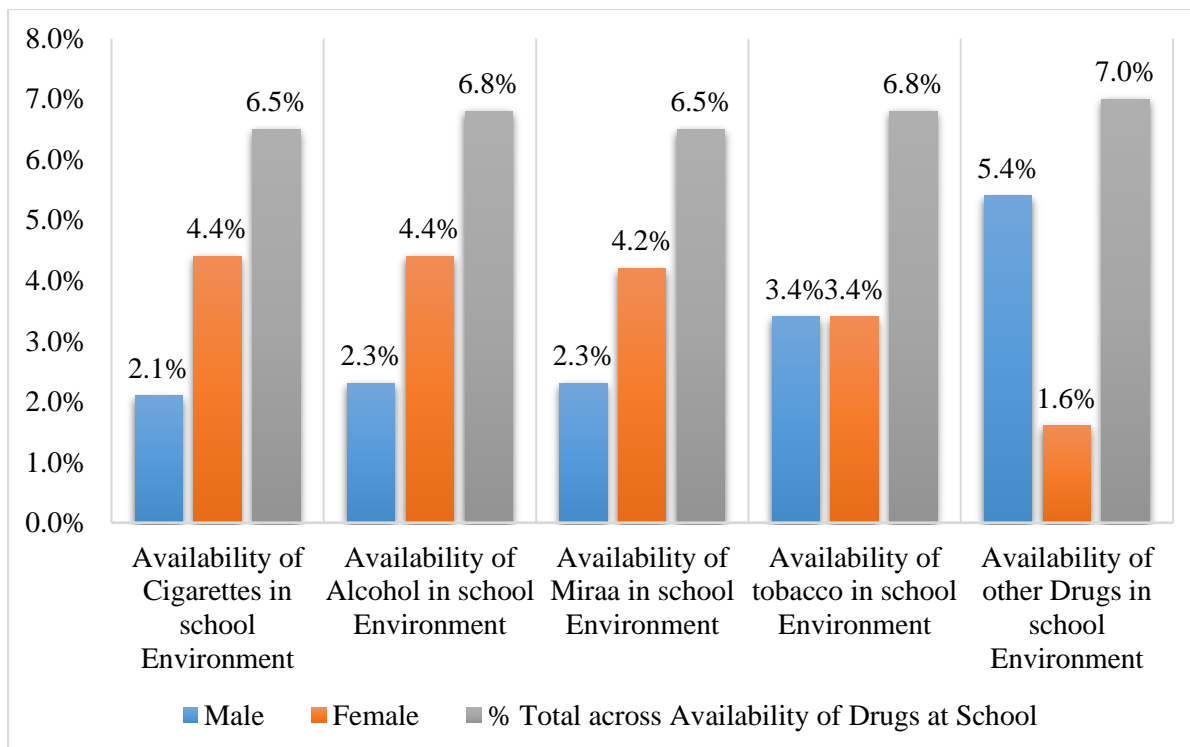


Figure 9: Students Gender and Availability of Drugs at School

4.4 Descriptive Statistics on Independent Variable, Media Influence

The researcher gathered data on influence of media alcohol advertising on student alcohol use. Similarly, data on cigarette advertising and student cigarette use was gathered. The findings were presented in Figure 10. According to the findings of this study, places advertising of cigarettes and alcohol captured the attention of both female and male students in Kinango Sub County in approximately equal proportions, 49.7% for females and 48.2% for males. Therefore, reaching 97.9% of respondents. Alcohol advertising on television reached 58.6% of the respondents. 33.1% of male students in Kinango Sub County were reached compared to 25.5% of female students.

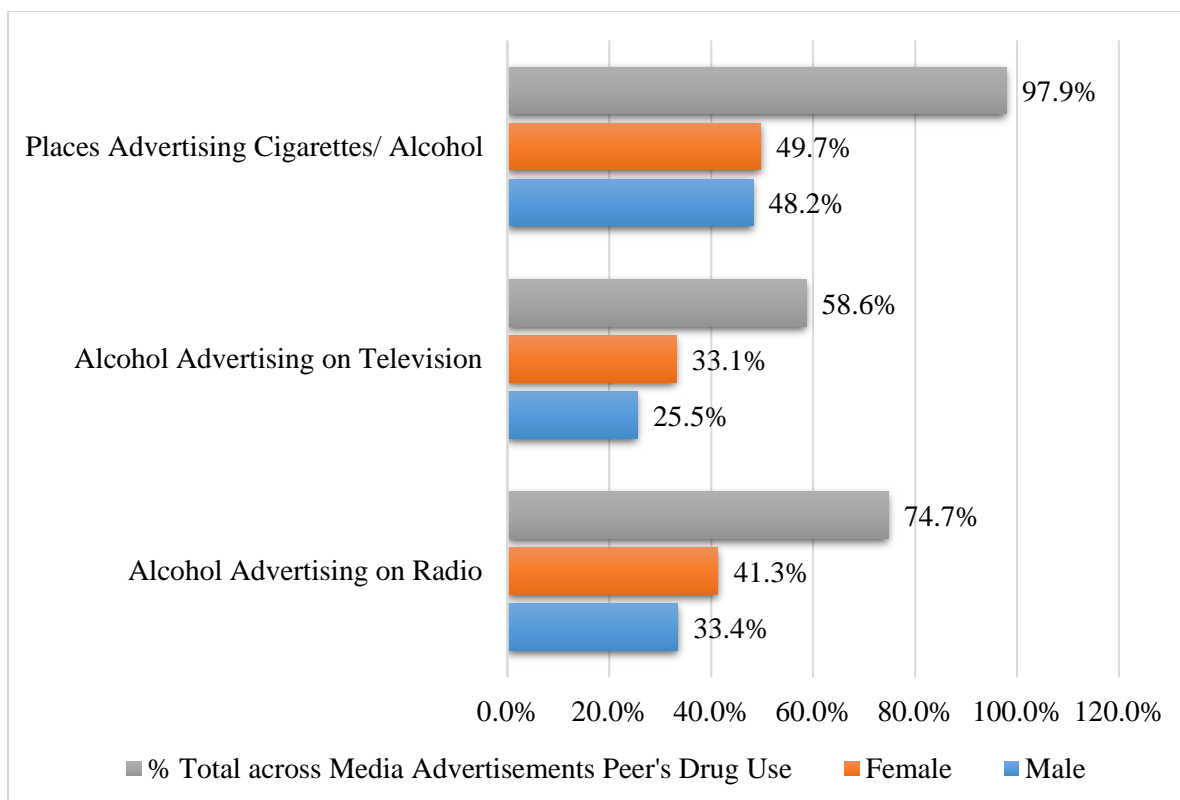


Figure 10: Students Gender and Media Advertisements

Therefore, alcohol advertising on television reached male students more than female students. Female students do most of the house chores and therefore have less time to watch the television compared to the male students. Advertising on television was the least effective in Kinango Sub County because most household had no electricity. The area is semi-arid and most families are poor. Very few families own televisions in Kinango sub county. Alcohol advertising on radio reached 74.7% of the respondents, females accounting for 41.3% and males accounting for 33.4%.

4.5 Descriptive Statistics on Independent Variable, Influence of Age

The researcher gathered data on drug abuse and the age of respondents. The details of the findings are in Figure 11.

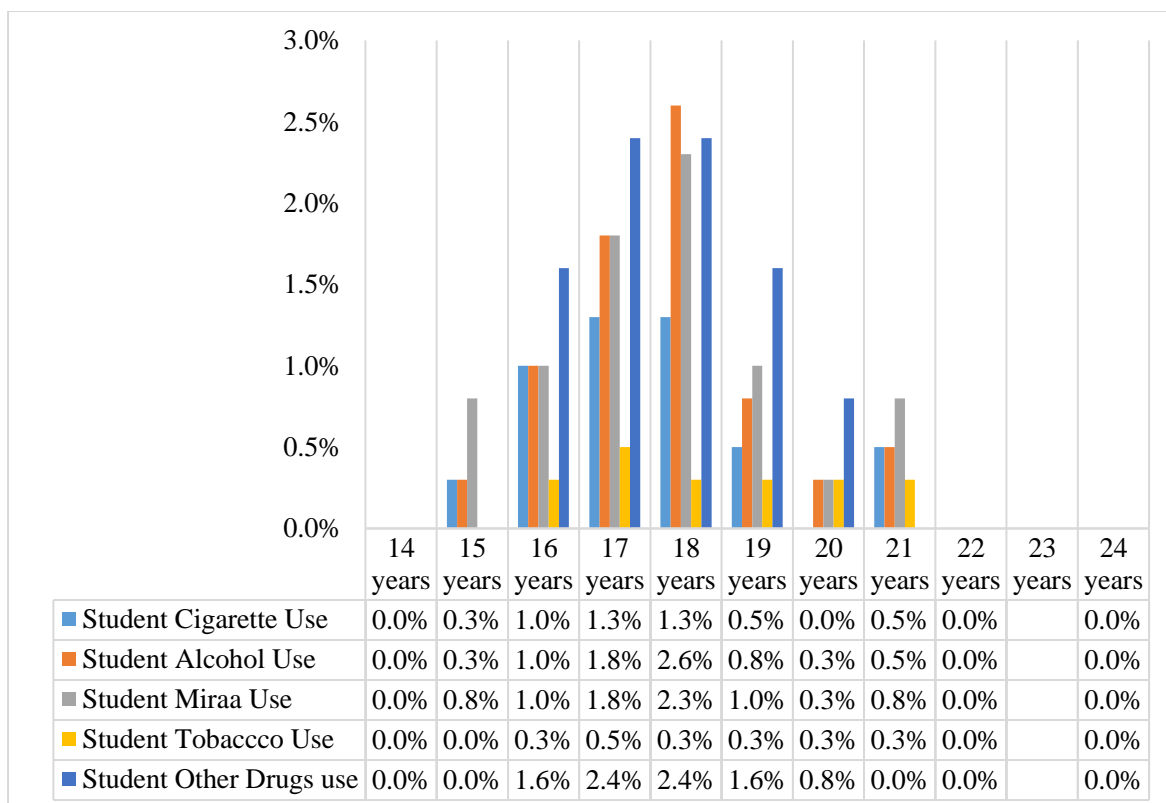


Figure 11: Students Age and Drug Use

It can be deduced from Figure 4.10 that students ages 17 and 18 years were leading in drug substance use among secondary school students in Kinango Sub County. In Kenya anyone who is 18 years and above is allowed by the law to purchase and consume alcohol and probably the 18-year-old respondents were out to exercise their constitutional rights.

Figure 11 show how age of a student influenced miraa chewing. The study findings differed from Maithya’s findings to some extent because in Maithya’s study there were more drug abusers in the age bracket 20-24 years (Maithya, 2009). However, in this study the same age bracket, 20-24 had the fewest number of students who had abused drugs. Majority of students who had abused drugs were in the age bracket 17-19 years. In Kenya when an individual attains the age of 18, that person should go for identity card, popularly referred to as ID. The person is considered mature, he or she can marry, they can go to a bar and take alcohol and they can seek for employment. Therefore, when students in secondary schools attain the age of 18 they

want to be recognized as grown-ups. They will go to any length to prove that they are grown-ups including; taking to drinking, smoking and casual sex. This change in behavior could explain why the age bracket 17-18 had the highest number of students who abuse drugs. If not handle properly by both parents and teachers' students in this age group can be rebellious, they can ran away from home or school.

4.5.1 Data from Guidance and Counselling Teachers' Questionnaire

Schools were placed into 4 categories as shown in Table 2.

Table 2: Number of students abusing drugs

Category of school	Number abusing drugs
W	Above 15
X	Above 10
Y	6-10
Z	6-10

The schools were placed into 4 categories; W, X, Y and Z. Category W represented boys' boarding school, X girls' boarding school, Y mixed day / boarding school and Z mixed day school. The data given by the guidance and counseling teachers showed that there was evidence of drug abuse by students in all the 4 categories of schools. Therefore, there is evidence to enable us to generalize and state that drug and substance abuse is a major problem in secondary schools in Kinango sub-County.

Item 6 on the guidance and counselling teachers' questionnaire required the G & C teachers to arrange the classes in ascending order starting with the class with the least number of students abusing drugs. Comparing the responses given by the G & C teachers of the 4 categories of schools, the order was as follows; form 1, form 2, form 4, form 3. Therefore, form 3 was

leading with highest number of cases of drug and substance abuse whereas form 1 class had the least number of students involved in drug and substance abuse.

Social learning theory advanced by Bandura was used to explain students' drug and substance abuse behavior. According to this theory the form ones who have just joined secondary school, are very naïve, innocent and curious. They learn by observing what the form 2s, form 3s and form 4s do. When they get to form 2 they start getting some confidence to try out on drugs. By the time they get to form 3, they have perfected the habit of drug and substance abuse. According to the findings of the study the habit seems to decline slightly in form 4, that is, form 4s were ranked below form 3s in drugs abuse. There were two possible explanations for this. One, those students who became notorious in drug and substance abuse were expelled from school. They could not cope with schooling due to absenteeism or were involve in strikes, burning of school property or some form of gross indiscipline. The other reason is that as soon as they get to form 4; some of those who had taken to drugs realize that their time in school is almost over and they have to sit for Kenya Certificate of Secondary Education examination (KCSE) at the end of the year. They drop their drug taking habits and concentrate on their exams. In many schools, extra attention is given to form 4 classes. They are counselled and guided so that they can settle and concentrate on their studies.

According to Eric Erikson's theory, a human being goes through a sequence of psychosocial stages, spanning the whole lifespan. The students in secondary schools are at the stage involving 'identity verses confusion'. According to Erikson identity is experienced as a sense of well-being, a feeling of "being at home in one's body", a sense of knowing where one is going, and an inner assuredness of recognition from those who count. When this is achieved, an individual will live a purposeful life and is not likely to resort to drugs. However the opposite is true for those individuals who do not achieve, they become confused and end up

maladaptive. They end up in what Erikson called, role confusion; engage in abnormal and delinquent behavior such as drug and substance abuse.

4.5.2 Data from Deputy Principals Interview Schedule

As part of qualitative approach to the research design, interviews were conducted with four deputy principals to get firsthand information on drug abuse in their schools. When asked whether there were students in their schools who abuse drugs, the responses of the deputy principals were captured in Table 3.

Table 3: Deputy Principals’ responses on substance abuse in schools

Do you have cases of drug abuse?	Frequency	Percent	Valid percent
Yes	3	75.0	75.0
No	1	25.0	25.0
TOTAL	4	100.0	100.0

According to Table 19, there were 3 deputy principals (75%) who said students in their schools abuse drugs. Only one teacher (25%) said there was no drug and substance abuse in her school and this teacher was a deputy principal of a girl’s boarding school (school category X). The counseling and guidance teacher from the same school had already given information revealing that the school had over 6 to 10 students who are known to abuse drugs (Table 18). Probably the deputy principal was trying to protect the image of her school.

The general perception among the four interviewees was that drug and substance abuse was a problem in all the schools. Item 10 of the interview guide asked for the sources of drugs (Appendix V). The responses given by the deputy principals seem to agree that there is indeed a problem of drug and substance abuse in the schools. The deputy principals listed the following as the sources of drugs that find their way in their schools: shops and kiosks near

school, got from relatives, bought from drug peddlers, bought from supermarkets, bought from non-teaching school workers, stolen from the stock parents bring at home and bought from teachers or from school canteen.

In-depth interview with the four deputy principals also revealed the following; teachers as well as non-teaching school employees' abuse drugs sometimes in fully view of students, there is no pro-active strategy to contain drug and substance abuse in secondary schools. Students can easily access drugs within and outside the school environment and drug and substance abuse is rampant among secondary school students in Kinango Sub-County. According to the findings, in 75% of the schools, guidance and counselling teachers only get involved when cases of drug and substance abuse have been reported. The three top drugs available to students in school are cigarettes, alcohol and khat. The other drugs that the study exposed that were used by secondary school students are; bhang, cocaine, heroin, inhalants (glue), madrax, chewed tobacco, sniffed tobacco, shisha and kuber.

The study found that students get involved with drugs mostly during school holidays and on their way home. Within the school environment, students frequently engage in drug and substance abuse during the weekends, during inter-school meetings, during school outings, during entertainment in school, during games, during school trips and for those in boarding schools, on their way home during mid-term break and when schools close. These findings are in agreement with Karega, (2012) who found out in his study that problem behaviors do exist among students in secondary schools. According to Karega, the frequency of occurring of problem behavior among students is low. This could be attributed to the fact that in the self-evaluation report questionnaire each student wanted to cover up and portray good. In addition, this reveals that during counselling process it is not easy to get the truth of those students as they would always try to coil around especially if the counsellor is not patient and tactful

enough to address the issue. This calls for administrators to allow majorly teachers who have the passion for counselling to occupy those docket in schools. The workloads of such teachers should be reduced to enable them have enough time to ponder over and know the best ways to handle students' issues, especially drug and substance abuse (Karega, 2012).

The interview with the deputy principals also revealed that guidance and counselling teachers have training needs on issues of drug and substance abuse. The teachers are not well equipped to handle cases of drug and substance abuse and therefore ill prepared to guide and counsel students. It was also established that the guidance and counselling teachers work within a time-constrained environment due to other competing demands and responsibilities such as covering the prescribed syllabus of other subjects that they teach. Finally, the study found out that schools use the following strategies to deal with students who are found with drugs and other substance of abuse in the school; the culprits are given suspension, parents are summoned in schools and expulsion for extreme cases.

The following sections present the findings of the null hypotheses that were formulated and tested in this study.

4.6 Parental Influence and Students Drug Use

Objective one was to establish parental influence on drug and substance abuse among secondary school students in Kinango Sub County. The Pearson product moment test at 0.05 level of significance was used to test the null hypothesis that: There is no statistically significant influence of parental influence on drug and substance abuse among secondary school students in Kinango Sub County. Table 4 presents the results of the analysis.

Table 4: Pearson product moment correlation test for the relationship between parental drug use and student drug use

Correlations				
		Father scale	Mother scale	Guardian scale
Students scale score	Pearson Correlation	.550**	.490**	.286**
	Sig. (2-tailed)	0.000	0.000	0.000
	N	384	384	384
**. Correlation is significant at the 0.01 level (2-tailed).				

The results in Table 4 show that fathers, mothers and guardians drug use relationships with students' drug use were all positive and significant at 0.05 level of significance. The strength of the relationship was greatest with the father (0.550) then the mother (0.490) and least with the guardians (0.286). Therefore, the null hypothesis which stated that, 'There is no statistically significant influence of parental influence on drug and substance abuse among secondary school students in Kinango Sub-County, was rejected. The alternative hypothesis was not rejected. Therefore, it can be concluded that there is statistically significant influence of parental influence on drug and substance abuse among secondary school students in Kinango Sub County. The findings in Table 4 show that parental influence and drug and substance abuse among secondary school student has a significant positive strong relationship. This implies that students whose parents use drugs tend to abuse drugs more than those whose parents do not abuse drugs.

4.7 Peer Influence and Students Drug Use

Objective two was to determine the influence of peer pressure on drug and substance abuse. The coefficient of determinant was a weak positive (0.244). Nevertheless, the positive association is an indication that peer pressure has an influence on student use of drug. From Table 5, the null hypothesis should be rejected wherever the p value is less than 0.05 the

specified level of significance. From the results in Table 5, the p value is .000 which is less than 0.05 the set level of significance. Therefore, the null hypothesis was rejected. The alternative hypothesis was not rejected. Therefore, there is statistically significant influence of peer pressure influence on drug and substance abuse among secondary school students in Kinango sub-County. Peer pressure influence has significant influence on the students' decision to abuse drugs.

Table 5: Pearson Product Moment Correlation Test for the Relationship between Peer Drug Use and Student Drug Use

Correlations			
		Students scale score	Peer scale
Students scale score	Pearson Correlation	1	.244**
	Sig. (1-tailed)		0.000
	N	384	384
**. Correlation is significant at the 0.01 level (2-tailed).			

4.8 Media Influence and Students Drug Use

Objective three was to establish the influence of the media on drug and substance abuse among secondary school students in Kinango sub-County.

Table 6: Pearson Product Moment Correlation Test for the Relationship between Media influence and Student Drug Use

Correlations			
		Students scale score	Advertise scale
Students scale score	Pearson Correlation	1	-0.027
	Sig. (1-tailed)		0.299
	N	384	384

The findings in Table 5 show that there was a weak negative and not significant correlation between media influence and student drug use. From Table 5 the null hypothesis should be

rejected wherever the p value is less than 0.05 the specified level of significance. From the results in Table 5 the p value is 0.299 which is greater than 0.05 the set level of significance. Therefore, the null hypothesis was not rejected. The alternative hypothesis was rejected. Therefore, there is statistically no significant influence of media on drug and substance abuse among secondary school students in Kinango sub-County. The findings are contrary to the findings of a study in Europe by Henriksen, Schleicher, Dauphinee & Fortmann which showed that tobacco advertising foster positive attitudes towards tobacco use among youth which effectively motivates youth to smoke. A possible explanation could be the low level of exposure to the media of students in Kinango Sub County as compared to their counter parts in Europe. Media influence on student drug and substance abuse in Kinango Sub County had insignificant influence on student drug and substance abuse possibly due to low exposure. However other studies elsewhere have shown that exposure to adverts of drugs encourages students to engage in drug and substance abuse.

4.9 Age Influence and Students Drug Use

Objective four was to determine the influence of age on drug and substance abuse among secondary school students in Kinango sub-County.

Table 7: Pearson Product Moment Correlation Test for the Relationship between age influence and Student Drug Use

Correlations			
		Students scale score	Age of Student
Students scale score	Pearson Correlation	1	-0.007
	Sig. (2-tailed)		0.886
	N	384	384

The findings in Table 5 show that there was a weak negative and not significant correlation between media influence and student drug use.

The null hypothesis should be rejected wherever the p value is less than 0.05 the specified level of significance. From the results in Table 7, the p value is 0.886 which is greater than 0.05 the set level of significance. Therefore, the null hypothesis was not rejected. The alternative hypothesis which stated that, 'there is statistically significant influence of age on drug and substance abuse among secondary school students in Kinango sub-County was rejected. Therefore, there is no statistically significant influence of age on drug and substance abuse among secondary school students in Kinango sub-County. The age of a student does not influence the student's decision to use drugs.

The study findings differed from Maithya's findings to some extent because in Maithya's study there were more drug abusers in the age bracket 20-24 years (Maithya, 2009). However, in this study the same age bracket, 20-24 were the fewest. Majority of students who had abused drugs were in the age bracket 17-19 years. When students in secondary schools attain the age of 18 they want to be recognized as grown-ups. They will go to any length to prove that they are grown-ups including; taking to drinking and smoking. This change in behavior could explain why the age bracket 17-18 years had the highest number of students who abuse drugs. Therefore age had an insignificant relationship with drug and substance abuse among secondary school student. Age doesn't affect the students' decision to use drugs.

CHAPTER FIVE

SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

5.0 Introduction

This chapter presents the summary of the study based on the respective research objectives. After the summary, conclusions are drawn and recommendations as well as suggested areas for further research are presented.

5.1 Summary

- Research objective one was to establish parental influence on drug and substance abuse among secondary school students in Kinango Sub-County. The percentages of students who abuse drugs from two categories of parents were determined and compared. The results generally indicated that the percentage of students who abuse drugs and whose parents abuse drugs is greater than the percentage of those who abuse drugs and whose parents do not abuse drugs.
- From hypothesis one, it was established that there is a statistically significant influence of parental influence on drug and substance abuse among secondary school students in Kinango Sub-County. These findings were in agreement with NACADA 2012 survey whose findings showed that 7.2% of the children who have taken drugs have a parent who takes one drug or another (NACADA, 2012). Similarly, they also agree with the study by Will's, Sandy and Yaeger whose findings revealed that the family has strong influence on the adolescents (Will's, Sandy & Yaeger, 2001). The findings of this study also agree with Muigai's study whose findings showed that adolescents with substance abusing parents have a higher rate of drug abuse (Muigai, 2012).
- Research objective two was to determine the influence of peer on drug and substance abuse among secondary school students in Kinango Sub-County. The percentages of

students who abuse drugs from two categories of peers were determined and compared. The results generally indicated that the percentage of students who abuse drugs and whose peers abuse drugs is greater than the percentage of those who abuse drugs and whose peers do not.

From hypothesis two, there is statistically significant influence of peer pressure on drug and substance abuse among secondary school students in Kinango Sub-County. The findings of this study agrees with the findings of the studies by Morojele, Brook and Brook; Mayberry, Espelage and Koenig; Jaccard, Blanton and Dodge(Year) whose findings showed that peer pressure plays a critical role in influencing drug and substance abuse among adolescents (Morojele, Brook, & Brook, 2016; Mayberry, Espelage, & Koenig, 2009; Jaccard, Blanton, & Dodge, 2005).

- Research objective three was to find out the influence of the media on drug and substance abuse among secondary school students in Kinango Sub-County. The findings showed that there was statistically no significant influence of media on drug and substance abuse among secondary school students in Kinango Sub County.
- From hypothesis three, there is statistically no significant media influence on drug and substance abuse among secondary school students in Kinango Sub-County. The findings of this study did not agree with the findings of studies previously conducted by; Kelly, Ireland, Alpert and Mangan; WHO; Henriksen, Schleicher, Dauphinee and Fortmann whose findings showed that advertising foster positive attitude towards tobacco and alcohol use among the adolescents which motivates them to smoke and drink alcohol (Kelly, Ireland, Alpert, & Mangan, 2015; WHO, 2013; Henriksen, Schleicher, Dauphinee,& Fortmann, 2012). The possible reason was that advertising in Kinango Sub County is not effective mainly due to lack of electricity and poverty.

- Research objective four was to determine the influence of age of student on drug and substance abuse among secondary school Students in Kinango Sub-County. The study results showed that in the age bracket 14-16 years there were few students that abused drugs. Similarly, in the age bracket 20-24 years there were fewer students that abused drugs. However, the results showed that students in the age bracket 17-19 years were leading in drug abuse. The students in this age bracket possibly feel they are now grown-ups and therefore want to do things that they see grown-ups do, especially their parents. Generally, the findings revealed that over 50% of the drug abusers among secondary school students are in the age bracket 17-19 years.
- From hypothesis four, there is no statistically significant influence of age on drug and substance abuse among secondary school students in Kinango Sub-County. The age of a student does not influence the student's decision to use drugs. The study findings differed from the findings of Maithya's study in one aspect because in Maithya's study there were more drug abusers in the age bracket 20-24 years (Maithya, 2009). However, in this study the same age bracket, 20-24 had the fewest drug abusers. Majority of students who had abused drugs in this study were in the age bracket 17-19 years.

5.2 Conclusions

This section gives the conclusions from the summary based on research objectives.

- i) From research objective one, it was established that there is statistically significant influence of parental influence on drug and substance abuse among secondary school students in Kinango Sub-County. This implies that those students whose parents' abuse drugs are more likely to abuse drugs compared to the ones whose parents do not abuse drugs.
- ii) From research objective two, it was empirically found that there is a statistically significant influence of peer pressure on drug and substance abuse among

secondary school students in Kinango Sub-County. Therefore, students whose peers' abuse drugs are more likely to abuse drugs compared to those whose peers do not abuse drugs.

- iii) From research objective three, it was empirically established that there was statistically no significant media influence on drug and substance abuse among secondary school students in Kinango Sub-County. This is contrary to similar studies elsewhere. A possible reason being low exposure to media advertising due to poverty and lack of mains electricity in most households.
- iv) From research objective four, it was found that there is no statistically significant influence of age on drug and substance abuse among secondary school students in Kinango Sub-County. The age bracket 17-19 years had the highest number of students who abused drugs as compared to 14-16 years and 20-24 years' age brackets.

5.3 Recommendations

In this section, recommendations are given according to the significance of the study, limitations of the study and gaps in literature review.

- i) Parents should be made aware that they are role models to their children and therefore should abstain from drugs if they want their children to avoid the same. Under no circumstances, should parent abuse drugs in front of their children.
- ii) Parents and teachers should educate students to choose their friends wisely and to avoid peers who abuse drugs. Bad company destroys good morals. Schools should be drug free zones. No smoking. No alcohol. No drugs.

NACADA should support schools to come up with school-based alcohol and drug abuse policies that holistically address the aspects of promoting free drug environment within the schools.

- iii) Guidance and counseling should be strengthened in all schools so as to help students to understand themselves well, the changes in their physical and emotional development during adolescence and the negative effects of drug abuse. The guidance and counselling teachers reported training needs on issues of alcohol and other drugs of abuse. NACADA in collaboration with MoEST should support in the provision of relevant training to G & C teachers to empower them.
MoEST, TSC and KICD should come up and address the issue of overloaded G & C teachers in order to improve the quality of the services that they provide.
- iv) The government through the Ministry of Information, Ministry of Education Science and Technology and NACADA should censor all forms of advertising of drugs through media.

5.4 Areas for Further Research

Due to financial constraint, the study was narrowed to investigating only four predisposing factors that influence drug and substance abuse among secondary school students in Kinango Sub-County, Kwale County. However, there are other predisposing factors, for example, amount of pocket money given to students, school environment and school work that may also influence drug and substance abuse among secondary school students, so they need to be researched upon. Expanding the sample size in a similar research design will strengthen the findings of the study. Therefore, more studies should be carried out on a wide scale.

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APPENDICES

APPENDIX I: INTRODUCTORY LETTER

SCHOOL OF EDUCATION,

MAASAI MARA UNIVERSITY,

August, 2015

Dear Sir/Madam,

I am carrying out a survey on predisposing factors that influence drug and substance abuse among secondary school students in Kinango Sub-County, in partial fulfilment of the requirements for award of the degree of Master of Education in Guidance and Counselling of Maasai Mara University.

It is against this background that your school has been selected to participate in the research.

Through your office I request to be allowed to interact with the deputy principal, HOD Guidance and Counselling, class teachers and students of your school by administering a questionnaire to selected students. Please note that the information given by the students and teachers will be purposely for this study and will be treated with the confidentiality it deserves.

Your cooperation will be highly appreciated. Thank you.

Yours faithfully,

CHAPIA NATHAN

EMO1/2164/2010

APPENDIX II: THE INFORMED CONSENT FORM

I am a graduate student at Maasai Mara University, undertaking a research study on predisposing factors that influence drug and substance abuse among secondary school students in Kinango Sub-County. The study involves 357 students sampled from 4936 students of the Sub-County. The purpose of the research study is mainly academics. The study involves filling in of hard copies of questionnaires. The information you give in the questionnaire will be held strictly confidential and will not be divulged to anybody. No reference will be made in written report which could link you to any information collected and your name will not appear anywhere. No risks are anticipated as a result of taking part in this exercise. Your participation in this exercise is voluntary and you may refuse to fill the questionnaire. If you feel uncomfortable participating in this exercise, you may withdraw at any time without penalty. I have read and understood the above information and all questions pertaining to this project have been answered to my satisfaction.

Signature: **Date :**.....

APPENDIX III: STUDENTS' QUESTIONNAIRE

The purpose of this questionnaire is to gain insight on predisposing factors to drug and substance abuse among secondary school students. This questionnaire is not a test but merely an information exercise. Please answer the questions as honestly as possible. Remember that there is no right or wrong answers. Your responses will be processed by computer and will be treated as confidential. Please do not write your name or the name of your school on this paper.

Section A: Background of Student

Please help me classify your responses by supplying the following facts about yourself.

All the information given will be treated with the highest confidentiality. Do **NOT** write your name anywhere on this paper.

1. Your sex

Male Female

2. Your Form

Form One Form Two

Form Three Form Four

3. Your age in complete number of years. _____

4. For each of the following drugs, indicate honestly how you use them, by putting a tick (✓) in the appropriate column.

Student Drug Use

Drug	Not at all (1)	Don't know (2)	Only once (3)	Few times (4)	Many times (5)
Cigarettes					
Alcohol					
Miraa					
Tobacco					

5. Please add any other drugs that you use in the space provided in the table.

Section B: Parental Information

6. For each of the following drugs, indicate honestly how your father uses them, by putting a tick (✓) in the appropriate column.

Father Drug Use

DRUG	Not at all (1)	Don't know (2)	Rarely (3)	Moderately (4)	Very much (5)
Cigarettes					
Alcohol					
Miraa					
Tobacco					

7. If there is any other substance(s) of abuse your father uses, please add in the spaces left in the table.

8. For each of the following drugs, indicate honestly how your mother uses them, by putting a tick (✓) in the appropriate column in the table below.

Mother Drug Use

DRUG	Not at all (1)	Don't Know (2)	Rarely (3)	Moderately (4)	Very Much (5)
Cigarettes					
Alcohol					
Miraa					
Tobacco					

9. If there is any other substance(s) of abuse your mother uses, please add in the space left in the table

10. For each of the following drugs, indicate honestly how your guardian uses them by putting a tick (✓) in the appropriate column in the table.

Guardian Drug Use

DRUG	Not At All (1)	Don't Know (2)	Rarely (3)	Moderately (4)	Very Much (5)
Cigarettes					
Alcohol					
Miraa					
Tobacco					

11. If there is any other substance (s) of abuse your guardian uses, please add in the space left in the table.

Section C: Availability of Drugs

12. Put a tick (✓) in the appropriate column to indicate availability of the given drugs in your home environment.

Availability of Drugs in the Home Environment

DRUG	Not available (1)	Don't know (2)	Available from one source (3)	Available from a few sources (4)	Available from many sources (5)
Cigarettes					
Alcohol					
Miraa					
Tobacco					

13. Please add any other substances of abuse that are available in your home environment in the space left in the table.

Section D: Peers

14. For each of the following drugs, indicate honestly how your peers uses them by putting a tick (✓) in the appropriate column in the table.

Peer Drug Use

DRUG	Not at all (1)	Don't know (2)	Rarely (3)	Moderately (4)	Very much (5)
Cigarettes					
Alcohol					
Miraa					
Tobacco					

15. Please add any other substances of abuse your peers use in the spaces provided in the table.

Section E: Media

16. Tick (✓) the number of times alcohol is advertised on the television in any day as you sit watching.

Not at all Once

A few times Many times

17. Tick (✓) the number of times alcohol is advertised on the radio as you listen.

Not at all Once

A few times Many times

18. Tick(✓) against places you have seen advertising for cigarettes and alcohol:

Large billboards along roads

In the stadium

Shops

Newspapers

Magazines

Calendars

Tee-shirts

END

Thank you for participating in this study, may God reward you abundantly.

APPENDIX IV: GUIDANCE AND COUNSELLING TEACHERS

QUESTIONNAIRE

The purpose of this questionnaire is to gain insight on predisposing factors to drug and substance abuse among secondary school students. This questionnaire is not a test but merely an information exercise. Please answer the questions as honestly as possible. Remember that there is no right or wrong answers. Your responses will be processed by computer and will be treated as confidential. Please do not write your name or the name of your school on this paper.

SECTION A: GENERAL INFORMATION

Please help me classify your responses by supplying the following facts about yourself and your school. Put a tick (✓) in the appropriate box.

1. Type of school

- | | | | |
|--------------------------|------------------|--------------------------|---------------------|
| <input type="checkbox"/> | Boys Boarding | <input type="checkbox"/> | Girls Boarding |
| <input type="checkbox"/> | Mixed Day School | <input type="checkbox"/> | Mixed Day/ boarding |

2. Your gender

- | | | | |
|--------------------------|--------|--------------------------|------|
| <input type="checkbox"/> | Female | <input type="checkbox"/> | Male |
|--------------------------|--------|--------------------------|------|

3. How long have you been in the school?

- | | | | |
|--------------------------|-----------|--------------------------|--------------|
| <input type="checkbox"/> | 0- 1 year | <input type="checkbox"/> | 2- 4 years |
| <input type="checkbox"/> | 5-8 years | <input type="checkbox"/> | over 8 years |

4. Do you have some students in your school involved in drug and substance abuse?

- | | | | |
|--------------------------|-----|--------------------------|----|
| <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |
|--------------------------|-----|--------------------------|----|

If your answer is Yes, go to section B.

SECTION B: INFORMATION ON DRUG AND SUBSTANCE ABUSE

5. How many students have ever used drugs in your school?

None I don't know 1-2 3-5 over 5

6. Please arrange the classes (forms) starting with the one with the least number of students who take drugs to the one with the highest number in the space below.

Thank you for participating in this study, may God reward you abundantly.

APPENDIX V: INTERVIEW GUIDE FOR DEPUTY PRINCIPALS ON PREDISPOSING FACTORS TO DRUG AND SUBSTANCE ABUSE AMONG SECONDARY SCHOOL STUDENTS IN KINANGO SUB-COUNTY

The purpose of this interview is to gain insight on predisposing factors to drug and substance abuse among secondary school students. The knowledge gained will help in the fight against drug and substance abuse. The researcher is a student of Maasai Mara University, pursuing his master degree in education. Information gathered through this interview is purely for academic purpose. Therefore, you are kindly requested to provide the researcher with accurate information. Your responses will be treated as confidential.

1. Gender
2. Type of school
3. For how long have you served in the school?
4. How many students do you have in each form?

Form1 Form 2 Form 3 Form 4

5. Comment on the general situation of drug abuse in your institution
6. How does drug abuse in your school affect:
 - a) The individual student
 - b) The school in general
 - c) Society
7. What problems have you experienced as a result of drug and substance abuse in your institution?
8. Why do you think students abuse drugs?
9. Which are the commonly abused drugs?
10. Where do the drugs come from?

11. About how many of your students abuse drugs?

None 1 2 – 5 6 – 10 Above 10

12. Comment on the known drug abusers in the school: which classes, place of origin, conduct and home background.

13. What corrective measures has the school employed to curb the problem?

14. What challenges have you faced when dealing with drug abuse problem?

15. What measures do you take against drug abusers in your school?

16. How often teachers and non-teaching staff are seen smoking by students in the school or outside the school weekly?

Never Once Twice Always

17. How often teachers and non-teaching staff are seen drunk or drinking alcohol by students weekly?

Never Once Twice Always

18. What recommendations would you like to make in relation to the drug problems in secondary schools?

Thank you for your co-operation

END

**APPENDIX VI: MAASAI MARA UNIVERSITY
INTRODUCTION LETTER**



MAASAI MARA UNIVERSITY
(OFFICE OF THE DIRECTOR, POSTGRADUATE STUDIES)

TEL. No.0722346 419
Email: graduatestudies@mmarau.ac.ke

P. O. Box 861-20500
NAROK, KENYA

REF: MMU/AA0328/45/2016/VOL1 (16)

DATE: 20th April, 2017

Council Secretary,
National Commission for Science, Technology & Innovation
P.O. Box 30623-00100
NAIROBI-KENYA

Dear Sir/Madam,

**RE: APPLICATION FOR RESEARCH PERMIT: REG. NO. EM01/2164/2010 –CHAPIA
NATHAN MISANGO**

I wish to recommend the above candidate for a permit to enable him collect data for his research. He defended his proposal at the School of Education successfully and has made the necessary corrections. The title is "*Predisposing Factors that Influence Drug and Substance Abuse Among Secondary School Students in Kinango Sub-County, Kwale County, Kenya*" He therefore qualifies for a permit to conduct research.

Any assistance accorded to him will be highly appreciated.

Thank you.


Prof. Edward K. Tanui
Ag. **DIRECTOR POSTGRADUATE STUDIES**



APPENDIX VII: NACOSTI LETTER TO THE COUNTY COMMISSIONER AND COUNTY DIRECTOR OF EDUCATION, KWALE COUNTY



**NATIONAL COMMISSION FOR SCIENCE,
TECHNOLOGY AND INNOVATION**

Telephone: +254-20-2213471,
2241349, 3310571, 2219420
Fax: +254-20-318245, 318249
Email: dg@nacosti.go.ke
Website: www.nacosti.go.ke
When replying please quote

9th Floor, Utalii House
Uhuru Highway
P.O. Box 30623-00100
NAIROBI-KENYA

Ref. No. **NACOSTI/P/17/16863/16980**

Date: **2nd June, 2017**

Chapia Nathan Misango
Maasai Mara University
P.O.Box 861
NAROK.

RE: RESEARCH AUTHORIZATION

Following your application for authority to carry out research on "*Predisposing factors that influence drug and substance abuse among secondary school students in Kinango Sub County, Kwale County, Kenya,*" I am pleased to inform you that you have been authorized to undertake research in **Kwale County** for the period ending **2nd June, 2018.**

You are advised to report to **the County Commissioner and the County Director of Education, Kwale County** before embarking on the research project.

On completion of the research, you are expected to submit **two hard copies and one soft copy in pdf** of the research report/thesis to our office.

**GODFREY P. KALERWA MSc., MBA, MKIM
FOR: DIRECTOR-GENERAL/CEO**

Copy to:


The County Commissioner
Kwale County.

The County Director of Education
Kwale County.

APPENDIX VIII: RESEARCH PERMIT

THIS IS TO CERTIFY THAT:
MR. CHAPIA NATHAN MISANGO
of MAASAI MARA UNIVERSITY,
99912-80100 mombasa, has been
permitted to conduct research in Kwale
County
on the topic: PREDISPOSING FACTOR
THAT INFLUENCE DRUG AND
SUBSTANCE ABUSE AMONG SECONDARY
SCHOOL STUDENTS IN KINANGO
SUB-COUNTY, KWALE COUNTY, KENYA
for the period ending:
2nd June, 2018

Permit No : NACOSTI/P/17/16863/16980
Date Of Issue : 2nd June, 2017
Fee Received :Ksh 1000




Chapia Nathan Misango
Applicant's Signature


Phalawa
Director General
National Commission for Science,
Technology & Innovation

CONDITIONS

1. You must report to the County Commissioner and the County Education Officer of the area before embarking on your research. Failure to do that may lead to the cancellation of your permit.
2. Government Officer will not be interviewed without prior appointment.
3. No questionnaire will be used unless it has been approved.
4. Excavation, filming and collection of biological specimens are subject to further permission from the relevant Government Ministries.
5. You are required to submit at least two(2) hard copies and one (1) soft copy of your final report.
6. The Government of Kenya reserves the right to modify the conditions of this permit including its cancellation without notice



REPUBLIC OF KENYA



**National Commission for Science,
Technology and Innovation**
RESEACH CLEARANCE
PERMIT

Serial No.A **14269**
CONDITIONS: see back page

APPENDIX IX: MAP OF KINANGO SUB-COUNTY

