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**RELATIONSHIP BETWEEN ALCOHOLISM AND FAMILY  
COHESION: A GENDER ANALYSIS OF KIGIO LOCATION,  
GATANGA DISTRICT, KENYA.**



**ALICE WAMBUI MWANGI**

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Mwangi, Alice Wambui  
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## **DEDICATION**

This study is dedicated to my family, my mother the only living parent, my husband Joseph Mwangi Thuo and my dear children Thuo, Wainaina and Njeri for the patience support and tolerance they accorded me during my period of study.

## DECLARATION

This project is my original work and has not been presented for a degree in any other university.

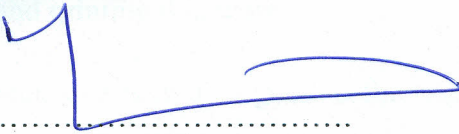
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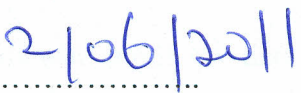
Date.....

Alice Wambui Mwangi

C50/CE/11914/07

This project has been submitted with our approval as University supervisors.

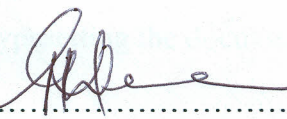
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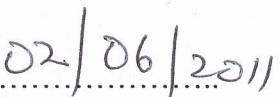
Date.....

Professor Wangari Mwai

Department of Literature

Kenyatta University

Signature.....

Date.....

Dr. Grace Wamue Ngare

Department of Gender and Development studies

Kenyatta University

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## ABSTRACT

The purpose of this study was to examine the effect of alcoholism on family cohesion in selected households in Kigio Location in Gatanga District. The study sought to establish the effect of alcohol on family income as well as the relationship between parents alcohol intake and children's education levels and how it impacts on husband and wife relationship in the family. The study further sought to establish the influence of alcohol on the distribution of resources in female headed and male headed households and finally the effect of alcohol on family stability.

The study utilized a descriptive survey research design with a target population of 1790 parents. Utilizing simple random sampling procedures, 30 households were selected. A total of 179 subjects were selected to participate in the study. The study used a questionnaire and interview schedule to collect data. Before the data was analyzed, it was cleaned to remove outliers. Data was then coded and entered into the computer for analysis using the Statistical Package for Social Sciences (SPSS) version 11.5 for windows. Descriptive statistics i.e. frequencies and percentages were used to analyze quantitative data. The results are presented in form of tables and graphical illustrations.

The study did find an association between parental alcohol involvement and the education of the children. Parental alcoholism had a negative impact on the education of the children as it may be contributing to the low education levels of the children. Most of the families were involved in subsistence farming with low returns and therefore were low income earners. A majority 60% of the households obtained an average income of Ksh 1000-5000. About 43% used about three quarters of the family income on alcohol. Alcohol therefore was found to deplete family income in a very significant way. There were more fathers (70%) than mothers (30%) who stated that they were alcoholics. Alcohol abuse affected husband-wife relationships in a variety of ways including intimate partner violence, increased conflict and low relationship satisfaction, nagging, blame, complaints, emotional and physical abuse to majority wives of alcoholics, poor sexual relationship and guilt.

Men controlled the valued resources in the family such as income, wealth land, and income-generating activities. Women had lesser access to paid employment, and were facing severe constraints in terms of ownership of resources. A relatively large degree of gender inequality in favor of men in resource distribution existed within households. There was impaired cohesion and low family stability in families of alcoholic parents as indicated by 37% responses.

The findings of this study should form a basis for appropriate gender mitigation by key community development agencies such as non-governmental organizations, faith based organizations and the ministry of gender and sports. These bodies can use the data to inform policy and decision on proactive action for alcohol vulnerable groups.

## DEFINITION OF TERMS

The following key concepts are defined operationally as used in this study:

**Alcoholism:** In this study the term alcoholism is used to describe a condition characterized by loss of control over drinking alcohol which results in serious problems in any of the following areas: job, school, or financial affairs, relationships with family or friends or physical health.

**Alcohol Abuse:** In this study the term alcohol abuse is used to refer to the consumption of alcoholic beverages in such a way as to harm or endanger the well-being of the user or those with whom the user comes into contact with, by causing accidents or physical abuse or disharmony.

**Dysfunction:** This term is used to refer to breakdown in cognitive, emotional and behavioral functioning

**Family Cohesion:** In this study family cohesion is defined as the emotional bonding that exists between family members.

# CHAPTER ONE

## INTRODUCTION

### 1.1 Background to the Study

Alcoholism in family systems refers to the conditions in families that enable alcoholism, and the effects of alcoholic behavior by one or more family members on the rest of the family. Mental health professionals are increasingly considering alcoholism and addiction as diseases that flourish in and are enabled by family systems. Family members react to the alcoholic with particular behavioral patterns. They may enable the addiction to continue by shielding the addict from the negative consequences of his actions. Such behaviors are referred to as codependence. In this way, the alcoholic is said to suffer from the disease of addiction, whereas the family members suffer from the disease of codependence (Webb & Baer, 1995).

When focusing on alcoholism world statistics, it is apparent that there is an alarming rate of alcoholism and alcohol abuse worldwide. According to statistics on alcohol abuse and alcoholism by the World Health Organization, about 140 million people throughout the world suffer from alcohol related disorders. The prevalence of alcoholism varies in different countries. In the United States, for instance, approximately 15% of the population experiences some sort of problem that is associated with their consumption of alcohol. Alcoholism affects roughly 4% of the overall population, or 12.5 million men and women. According to United States alcohol statistics, men are 3 times more likely than women to become dependent on alcohol.

Alcoholism and alcohol abuse statistics reveal that in Canada, for example, an estimated 4% of the population over the age of 15 is dependent on alcohol and there are twice as many male alcoholics as female alcoholics. The highest rate of alcoholism occurs in people between the ages of 22 and 24.

Alcoholism and alcohol abuse statistics in Kenya reveal that about 20% of the current and former drinkers stated that their alcoholic drinking negatively affected them, usually affecting their jobs, family relations or their finances. Statistics further reveal that alcoholism and alcohol abuse have reached dangerous levels in Kenya, where it is estimated that approximately one-third of all deaths are related, either directly or indirectly to alcohol abuse

or alcoholism. Ironically the attempts by the Kenyan government to control drinking by arresting brewers and pouring thousands of litres of illicit brew have not yielded much but instead they have created an extensive black market for alcohol as well as a nation of individuals who have become proficient at hiding their alcohol problems as highlighted in the media between July and October 2010.

According to research done by NACADA in Coast Province, Central Province and Western Province between the period of May to October 2010 and January to May 2011, alcohol is associated with a substantial proportional of gender based violence, for example, alcohol is a key factor in 68% of manslaughter, 62% of assaults, 54% of murders and attempted murders, and 48% of robberies and burglaries. Relationship between parental alcoholism and child abuse, incest, homicide, rapes and family violence are indicated in a large proportion of the Kenyan population. There have been reports of high rates of alcoholism among the parents of incest victims.

Adult males and females including boys and girls from alcoholic families experience higher levels of state and trait anxiety and lower levels of differentiation of self than those raised in non-alcoholic families. Additionally adult children, boys and girls of alcoholics have lower self-esteem, excessive feelings of responsibility, difficulties reaching out, higher incidence of depression, and increased likelihood of becoming alcoholics (Lacono, 2004).

Alcoholism is one of the leading causes of a dysfunctional family. Alcoholism does not have uniform effects on all families. The levels of dysfunction and resiliency of the non-alcoholic adult males and females, boys and girls are important factors in effects on the family cohesion. Children of untreated alcoholics score lower on measures of family cohesion, intellectual-cultural orientation, active-recreational orientation, and independence. They have higher levels of conflict within the family, and many experience other family members as distant and non-communicative. The cumulative effect of the family dysfunction may affect the children in families with untreated alcoholics' ability to grow in developmentally healthy ways (Fisher & Harrison, 2000).

Scientific endeavour is gradually elucidating the influences and pressures that shape a child's functioning, and it is clear that there is a wide range of these, from genetic (Rutter, 1999) through to social environments (Place, 2002). One of the most enduring of influences, especially in the earlier phases of life, is the family. Since the 1960s when work began in

trying to understand the complexities of family functioning, many theories and approaches have been explored. Their origins have often been from psychological theories, or adaptations of therapeutic approaches which could be applied to families. One of the more initially robust ways of conceptualizing families was to describe them using the dimensional constructs of cohesion and adaptability, which was termed the Circumflex Model by its authors (Olson, 1989). Cohesion is defined as the emotional bonding that exists between family members, whereas adaptability is the family's ability to change its power structure, role relationships and rules to respond to situational or developmental needs (Olson, 1989).

An alcoholic family's home environment and the manner in which family members interact may contribute to the risk of the problems observed among children of alcoholics. Although alcoholic families are a heterogeneous group, some common characteristics have been identified. Families of alcoholics have lower levels of family cohesion, expressiveness, independence, and intellectual orientation and higher levels of conflict compared with non-alcoholic families (Clair & Genest, 1986). Some characteristics, however, are not specific to alcoholic families. Impaired problem-solving ability and hostile communication are observed both in alcoholic families and in families with problems other than alcohol (Billings, 1989). Moreover, the characteristics of families with recovering alcoholic members and of families with no alcoholic members do not differ significantly, suggesting that a parent's continued drinking may be responsible for the disruption of family life in an alcoholic home (Moos & Billings, 1982). Studies comparing boys and girls of alcoholics with those of non-alcoholics have also found that parental alcoholism is linked to a number of psychological disorders in children. Divorce, parental anxiety or affective disorders, or undesirable changes in the family or in life situations can add to the negative effect of parental alcoholism on children's emotional functioning (Moos & Billings, 1982).

A number of influential clinicians (Black, 1982) have described children of alcoholics as victims of an alcoholic family environment characterized by disruption, deviant parental role models, inadequate parenting, and disturbed parent-child relationships. These family-related variables are thought to undermine normal psychological development and to cause distress, disharmony and impaired interpersonal functioning, both acutely and chronically in families. In a study conducted on the effects of alcohol on parents' interactions with children, it was found that parents are unable to respond appropriately to a child's improper behavior.

- i) To establish the effect of alcohol on family income and family income.
- ii) To find out the relationship between parents' alcohol intake by gender and children's education levels and how it impacts on husband and wife relationship in the family.
- iii) To establish alcohol influences on the distribution of resources and cohesion in female headed and male headed households.
- iv) To find out the effect of alcohol on family cohesion and stability.

#### **1.4 Research Questions**

This study sought to answer the following questions:

- i) What is the effect of alcohol on family income and cohesion?
- ii) What is the relationship between parents' alcohol intake by gender and children's education levels and how does it impact on husband and wife relationship in the family?
- iii) How does alcohol influence the distribution of resources and cohesion in female headed and male headed households?
- iv) What is the effect of alcohol on family cohesion and stability?

#### **1.5 Assumptions**

This study was based on the following assumptions:

- a) Alcoholism and alcohol abuse affects the family income and cohesion.
- b) There is a relationship between female headed households and male headed households and alcoholism in Kigio location.
- c) There is a relationship between parents alcohol intake by gender and education levels of boys and girls selected households in Kigio location.
- d) There could be varying levels of family cohesion in selected households between boys and girls of alcoholic and non-alcoholic parents of Kigio location.

#### **1.6 Justification and Significance**

The study as an intervention strategy was motivated by observations that young boys and girls are getting increasingly exposed to alcoholism in their families. Many families have

broken up due to alcoholism as well as escalating cases of family conflicts and violence. Reports on both print and electronic media have consistently indicated that many alcoholics have died from alcohol related problems, while others have been left blind (refer to adapted pictures in the appendices), impotent, or suffer from diseases such as liver cirrhosis and risks of contracting STI's and HIV/AIDS.

The magnitude of the problems arising from alcoholism and alcohol abuse have been amplified by women who have occasionally protested and demonstrated against the vice claiming that alcohol has left their men impotent or maimed. There have been reports of high school dropouts in order to brew and sell alcohol to earn a living especially when family resources continue to diminish. Gender Based Violence especially rape, homicide, and incest are high. It is also a common phenomenon to meet so many drunkards by the road side including young boys and girls. Very recently, cases of people having drowned in river Chania while preparing illicit brews were aired on television during the long rains of October 2010. The government seems not to understand the bottom line of alcoholism. Involving the police to arrest brewers and pouring thousands of litres of illicit brew as witnessed on television will not solve the problem as this has created an extensive black market for alcohol. If nothing is done to intervene on these issues resulting from alcohol abuse, then, the family unit will break and moral decadence will permeate in our society. The researcher wanted to look into the root causes of alcoholism in Kenya especially in Central province, where the health and demographic survey report 2010 asserts that about 8.46% of the population abuse alcohol.

The findings of this study illuminated some interesting aspects of the relationship between family cohesion and alcohol use among men and women. The data will form a basis for appropriate gender mitigation by key community development agencies such as non-governmental organizations, faith based organizations and the ministry of gender and sports. These bodies can use the evidence based data to build rehabilitation centres for alcoholics and alcohol vulnerable groups. Capacity building strategies can be developed using the data to empower Kigio men and women economically as high poverty levels are correlated with alcoholism. In spite of the limitations stated in this study, the findings should be important in the context of counselling for social workers and psychologists working in schools and agencies that serve Kigio families.

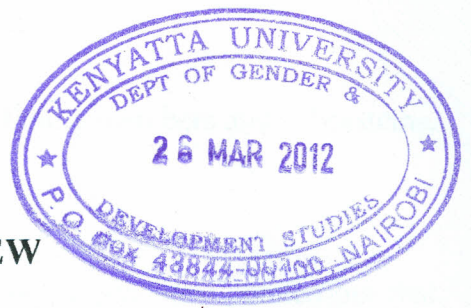
## 1.7 Scope and Limitations

The study involved parents and children of alcoholics and specifically determined the existing relationship between alcoholism and family income levels, household status, parent alcohol intake, and family cohesion in Kigio location, Gatanga District. The study took a period of three months.

There were certain limitations to this study, including that the researcher experienced difficulty in getting access to some respondents. Some respondents were not accessible and did not return the questionnaires. Confidentiality of data was another important barrier that was faced during the conduct of the study. Some respondents feared to divulge important details concerning their families but after reassurance that the information will be treated confidentially, they agreed to comply.

## CHAPTER TWO

### LITERATURE REVIEW



#### 2.1 Introduction

This chapter presents a review of related literature under the following sub headings: alcoholism and family systems, cohesion and family dynamics, alcohol and the family influences on child-parent relationship, the impact of alcoholism on family cohesion. It was guided by the gender intensification theory developed by Petersen, Sarigiani and Kennedy (1991).

#### 2.2 Alcoholism and Family Systems

Begun (1996) reveals that, the family can be conceptualized as a dynamic system that changes over time as membership changes, individuals change and develop, relationships change, and the family's context changes. A family system is interpretable only when its many multiple components are understood. The multiple components include: the individual family members, the relationships between them, the family's relationships with its ecological context, the family's history (multigenerational and experience of events), and the host of internal and external forces for developmental change.

According to Minuchin (1994), family systems are composed of interdependent members whose interactions, dynamics, rules, boundaries, and patterns each contribute to family behavior. Individual family members affect the system as a whole, and the system affects individual members. There is a considerable degree of "circularity of influence" involved. However, Falicov, (1996), in his book *Mexican Families*, suggests that when there are developmental or other changes in an individual family member, changes in the interaction patterns between individuals, new family members are added, or family members leave, the changes reverberate throughout the system. Some of the most common subsystems are the couple subsystem, parent-child subsystem, and sibling subsystem; family systems might also include grandparent-grandchild, step-parent and child, half-siblings, ex-partners and other extended family subsystems. Family subsystems do not operate independently of the whole system. Their character and nature are shaped by the overall culture of the family system. Family behavior may be enacted through subsystems rather than the system as a whole.

Interactions at the level of the subsystem may impact other family members and subsystems, as well-both directly and indirectly.

Davis and Berenson (1997) in their book on drug and alcohol dependence pointed out that family systems approach is an awareness of the fact that change in family systems is stressful and causes tension in the family. This applies to any change, positive or negative (e.g., death or other loss of a member, marriages, births, adoption, geographic moves, change in social status), because change requires families to dedicate resources and energy to adapt and adjust to their new circumstances. Family systems are sometimes described by therapists as being very difficult to redirect and resistant to change-once systems have achieved a level of stability or homeostasis, they apply concerted efforts to maintain their hard-earned balance. In fact, warnings have been offered about intervening to change an individual's alcohol abuse without adequately responding to the potentially destabilizing effect of an individual's recovery on the family system-the individual's drinking may represent a family system's homeostatic solution to otherwise distressed relationships. However, the researcher conceptualizes that it is the degree of change whether positive or negative and the impact it has on the family resources and stability that will maintain or destabilize family cohesiveness.

Zweben and Perlman (1983) in their study of dynamics of family cohesion point out that the areas and points of family functioning where difficulties are likely to appear during an individual's long-term recovery from alcoholism include: Challenges in family role adjustment as the previously alcoholic individual attempts to regain significant roles abandoned through drinking (e.g., involvement in family decision making, authority, sex, intimacy, and other reciprocal exchanges); Difficulties in parent-child relationships, especially around behavior management and communication involving adolescent children; Developmental changes of family members, family life cycle transition, or situational change events experienced by the family system - e.g., launching children, job loss, adult developmental changes of either partner. This study adds that the negative impact of alcohol is not only on the alcoholic but also spills over to the family members, community, and the nation at large. This is because undesirable cases of incest, homicide, HIV/AIDS and other STDs, impotence, incontinence, blindness and paranoia especially of heights that has left many alcoholics especially men sleeping on the floors are on the increase. Further, cases of

loss of appetite, general body weakness, and death due to ethanol poisoning have been highlighted by the media.

Zweben (2002) argues that the specific nature of family interactions may foster the continuation of problematic drinking. In others, this is a context that can facilitate improvement and recovery. Shoham (1998) states that in some cases, the social context of family relationships may be a factor that becomes compelling for the maintenance of the alcohol problems.

Epstein (1995) argues that it is virtually important to take into consideration an individual's family (and other social contexts) when exploring the development, maintenance, or treatment of alcohol use disorders. The family system is an important client context, in part because it is one of the interpersonal situations in which the problems occur. Harteman (1998) agrees with this argument as he points out that families are nested in, are shaped by, and interact with other social systems that affect and are affected by family system processes. Thus, the family system is subject to events that occur within the neighborhood, community, health care, school, and workplace, and service delivery, societal, economic, historical, and cultural systems. Social workers often rely on eco-maps in order to diagram and assess the nature of a family's complex interactions with its environmental context. Family systems are influenced by their histories, as well as by an awareness of their futures. Families may have four or more generations that are currently relevant at one time, and family members are affected by inherited qualities across generations, as well. Social workers often utilize genograms to map the intergenerational and family history influences on family systems

### **2.3 Cohesion and Family Dynamics**

Cloninger (1996) states that one central finding within the large body of research concerning the etiology of alcohol use disorders is that there exists multiple pathways to these outcomes. Further, Hesselbrock and Epstein (1999) suggest that there are complexly interacting contributions from genetics and other physiological forces, as well as influences from environmental contexts, including family, peer, workplace, neighborhood/community, and media. Alcohol use disorders are multiply determined.

Some researchers like De La Rosa (2002), argue that personal and family factors account to a substantial degree for the association between acculturation with substance use as Gowers and North (1999), argue that there is no question that families exercise a great deal of influence on adolescent development. Estrada and Firpo (2000), assert that, problematic patterns of family functioning may contribute to negative youth behavior as has been witnessed in Kenya especially in Central Province where the outlawed “mungiki” sect has its roots.

Baerand Geetz (2002), in their book ‘Is family cohesion a risk or protective factor during adolescence development?’ suggested that cohesion is a global indicator of family functioning. This is in tandem with the subject of discussion on the relationship between alcoholism and family cohesion. This research found out that, alcoholism negatively affects family cohesion through the following indicators: misuse of family resources, high school dropout rates, increase of female headed households as opposed to male headed households due to increase in male deaths, breakdown of morals leading to incest, rape, HIV/AIDS and other STDs, leading to dysfunctional families thus affecting family cohesion.

Kuendig & Kuntsche (2006) state that, some studies of the general population have found that high family cohesion protects youth against substance use, while others like Vega and Sribney (2003) have reported that among Latino heritage adolescents, family cohesion had an inhibiting effect against alcohol and drug use. Other studies like that of Kelly (2002) have found no effect of family cohesion on alcohol use while yet others like Smith (2000) reported a positive link between high cohesion and high exposure to drugs.

One way of accounting for these divergent results is that family cohesion and youth substance use may be related in curvilinear fashion. Olson (1989) proposed a circumflex model of cohesion with four ranges: the two inner ranges indicate high family functioning (balance) and the outer two ranges indicate low functioning (extreme). Extreme high values of cohesion indicate enmeshment (family is too close) while extreme low values indicate disengagement (there is too little closeness in the family). The potential problem for youth in overly-cohesive, enmeshed families is emotional over-identification with family members to the exclusion of others, while youth in families very low in cohesion are emotionally isolated. In families that are overly-cohesive there is little to no separation between family members, and independence is discouraged.

Headman (2003) argues that conflict and poor communication are high in alcoholic families. Balanced families in the middle ranges of cohesion are believed to be functioning more effectively. According to Headman (2003) balanced families encourage independent development and provide support for family members. Baer and Getz (2000) suggests that, prevalence of alcohol use has been found to be usually higher among families that are non-cohesive or overly-cohesive but, since families are not static, they move through the cohesion ranges as they progress through the family developmental cycle.

Previous studies have shown different results concerning family cohesion. Some researchers viewed high cohesion as an indication of enmeshment, while low cohesion was conceptualized as disengagement among family members. With family cohesion perhaps neither extreme is desirable. Feldman and Gehring (1988) argue that as adolescents grow in age, their satisfaction with family cohesion decreases. While this is an issue for adolescents in general, both extremes of cohesion could be especially problematic among adolescents who are trying to move in two worlds. However, adolescents growing exposed to different societal values through school and friends may be seen differently, and may still include high bonding with, and responsibility towards family members. In this context, adolescents may view high family cohesion as a hindrance to their own independence. Adolescents who belong to families characterized by recurrent conflict between parents and children, and the absence or deficiency of affective ties are at risk of developing drug use and other problem behaviors. However, it is not unusual for parents to experience conflict with their adolescent children. This is a possible explanation of why high family cohesion surfaced as a risk factor for substance use.

#### **2.4 Alcohol and the Family Influences on Child-Parent Relationship**

Merikangas (1990) indicates that genetic factors may contribute to the development of alcoholism, and family pedigree is the context for this particular source. Family pedigree studies that compare individuals with and without diagnosable alcohol dependency typically show an increase in the lifetime prevalence among biological relatives. The increase in risk for first-degree relatives (brother/sister and parent/child) developing alcohol dependency ranges from four to seven times the risk within the general population. The same has been

observed in this research as cases of familial alcoholism are on the increase in Kigio location, Gatanga District, Central province.

Bohman (1981) states that children born of an alcoholic parent (usually the father) and reared by nonalcoholic adoptive parents developed alcoholism as adults at higher rates than did their counterparts. However, Kendler (1995) argues that it is important to note that, while genetic factors are implicated in the development of alcohol use disorders, the findings also indicate that the genetic factors are not deterministic. In other words, genetic factors interact with other biological and environmental context factors to produce the observed outcomes. Some factors relate to vulnerability and risk, others are protective or resilience factors. Genetics can explain an individual's vulnerability to alcohol use disorders, while environment and other biological factors contribute to their emergence or expression. In recent years, tremendous progress has been made in uncovering the specific biological mechanisms involved in these observed results.

Peterson (1995) notes that there is no specific gene or chromosomal "address" that determines who will and who will not develop alcohol use disorders. However, there is increasing evidence concerning the neurotransmitter activity and brain sensitivity that predispose and protect for these disorders. For example, some children of alcoholic parents demonstrate different physiological responses to the effects of alcohol when compared to other individuals. It is important to note that the very same parenting factors that appear to be linked to adolescent alcohol abuse (e.g., low levels of parental emotional support and a lack of control and monitoring of child behavior) are also linked to a host of other adolescent problem behaviours, such as smoking and early sexual activity. Children of alcoholics may have greater sensitivity to the stress-dampening effects of alcohol than do other individuals as clearly indicated in the research on the relationship between alcoholism and family cohesion.

Elkins (2004) observes that non-substance abusing adolescent children of parents with alcohol use disorders are more likely than others to experience negative emotionality, aggression, stress reaction, alienation, and low well-being. Chassin (1996) observed greater emotional reactivity among adolescent children of alcoholic parents than among other adolescents. "Hyperactivity" to stress may contribute to the emergence of future alcohol use disorders as these individuals attempt to modify their experiences of stress. Family contexts may provide exposure to key antecedents and consequences for alcohol abuse. For example,

Stewart (1999) argued that many alcohol-abusing individuals cite family arguments, poor family communication, inadequate family problem solving, and nagging at home as antecedents of a drinking episode. This according to the researcher generally contributes to dysfunctional families which result to low family cohesion.

Kushner (1995) observes that even very young children (aged 3-6 years) begin to formulate expectancies concerning the effects of alcohol, at an age when their primary socialization agents are family members and expectancies may help to predict later drinking choices. Parenting and other family functioning factors may influence the development of alcohol problems during adolescence or early adulthood. For example, in families with an alcoholic parent, children and adolescents may find that they have easy access to alcohol. Furthermore, Dawson (2000) states that alcoholic parents may present older children and adolescents with a set of norms that tolerate heavy drinking, as well as an absence of parental monitoring for drinking and other potentially harmful behaviours. Since the alcoholic's cognitive ability is affected by alcohol, it is paramount to note that such a parent lacks the ability to guide and monitor the growth of his or her children as has been the case in the area of study.

Bray (2001) observes that, parent-adolescent conflict has also been identified as a family variable that places adolescents at risk for alcohol while Villar (2006) observes that adolescent alcohol use may be either a cause or a consequence of family conflict. Adolescents who don't have positive coping strategies may resort to alcohol and other drug abuse as an inappropriate mechanism to reduce emotional distress caused by family tensions and/or other difficulties.

Williams (2000) states that during adolescence it is normative to experience some level of conflict with parents; however, among immigrant families this may be aggravated by the process of acculturation, and the linguistic and cultural gaps that may occur between parents and children who acculturate at different pace. Kuendig and Kuntsche (2006) argue that the problem is that during this developmental stage when youth are trying to define themselves, a positive parent-adolescent relationship takes special importance. When the parent-adolescent relationship is poor, adolescents often reject the parent's values and stop emulating healthy behaviors, doing the exact opposite as a form of rebellion.

## **2.5 The impact of Alcoholism on Family Cohesion**

Eden (2004) examined the transactional nature of parent-child interactions over time among alcoholic and non-alcoholic families. Eden found that long-term alcohol intake was predictive of negative parental behavior and had a great influence on the tenets of family cohesion. Leonard (2008) suggested that boys and girls raised in alcoholic families may carry the problematic effects of their early family environment into their adult relationships. Hence, parent-child relationship is very important while working with children of alcoholic parents. Keeping this point in view, the present study aims to assess the relationship between alcoholism and family cohesion comparing males and females, boys and girls of alcoholic and non-alcoholic parents. Little effort has been devoted to understand how family factors influence cohesion. This study therefore hypothesizes that family disharmony and parental alcohol use are correlated. This study posits that low levels of family cohesion are a risk factor for alcohol use and that parent-child conflict predicts lifetime use of alcohol. An unresolved conflict seems to be connected to children's problem behaviors and alcohol misuse could be utilized by youth as a mechanism to reduce emotional distress caused by family tensions.

Roberts and Linney (2000) argue that drinking and family functioning are linked although the relationship may be causal, reciprocal, interactive, or incidental to other causes. There are several family problems that are likely to co-occur with an individual's alcohol abuse, including intimate partner violence, conflict and low relationship satisfaction, economic and legal vulnerability, and child risks. According to Reilly (1992) members with substance problems may be characterized as highly critical, involving considerable amounts of nagging, judgments, blame, complaints, and guilt. This affects family cohesion as envisioned in this study. Connors (2001) supports this by stating that families of individuals with alcohol use disorders are often characterized by conflict, chaos, communication problems, unpredictability, inconsistencies in messages to children, breakdown in rituals and traditional family rules, emotional and physical abuse.

According to Halford and Osgarby (1993) alcohol problems are common among couples, and marital problems are common among those who present for alcohol treatment. Donovan (2001) states that alcohol abuse affects couples' relationships in a variety of negative ways, including communication problems, increased conflict, nagging, poor sexual relations, poor

distribution of resources and domestic violence. Individuals married to persons with alcohol use disorders have higher rates of psychological, stress-related medical problems, and greater use of medical care systems, than other individuals. It is on this premise that this study will establish alcohol influences on the distribution of resources in female-headed and male-headed households.

Reilly (1992) observes that parenting functions performed by individuals who are alcohol-impaired may be characterized as inconsistent, unpredictable, and lacking in clear rules and limits while Blanton (1997) observes that children of alcoholic parents frequently experience chaotic parenting and poor quality home environments during significant developmental periods. Webb and Baer (1995) posit that the children of alcoholic parents may be exposed to high levels of family conflict, as well. Lacono (2004) states that parents with a history of substance abuse, compared to other parents, show lower constraint, control, harm avoidance and traditionalism in relation to their families. In essence, children born to and living with a parent experiencing an alcohol use disorder are exposed to both biological and environmental forces that may contribute to developing alcohol problems themselves.

Begun and Zweben (1990) state that children of alcoholics have higher rates of challenges than do children of non-alcohol impaired parents-even as adults. Children of alcoholic parents may have behavioural and school difficulties, including negative self-concepts, fearfulness, loneliness, and difficulties in concentrating, attendance, and work completion. Fisher and Harrison (2000) indicate that some difficulties may be attributed to chaotic home environments where basic needs are erratically met (sleep, food, hygiene, supervision). The environments experienced by adolescent sons and daughters of alcoholic parents tend to be characterized by greater stress than those of other adolescents.

Chassin (1996) in his study on the Children of Alcoholics Screening Test (CAST), indicates that the scores on this instrument are associated with greater degrees of family dysfunction and disruption, less family cohesion, less family support, inconsistent child care, increased family conflict, and less intimate parent-child relationships. It is clear that tremendous heterogeneity exists among the population of children whose parent(s) have alcohol use disorders, although there is currently an incomplete understanding of this heterogeneity. It is not always clear how the developmental outcomes are affected by alcohol per se or by having experienced a stressful childhood environment (e.g., parental disability/mental illness, parents' divorce, parental death).

A long-term Danish study on the developmental outcomes for the cohort of children born in 1966 demonstrated that a parent's alcohol abuse during childhood and adolescent years may affect increased mortality, self-destructive behaviors (suicide attempts, drug abuse), experiences of violence requiring hospitalization, teen pregnancy rates, and unemployment among young people in the 15-27 year age range. While it is clear that some risks exist for children growing up exposed to a parent's alcohol abuse, it is also clear that considerable amounts of resiliency also exist. For example, no significant problems are demonstrated by as many as 44% of adult children of alcoholics (Fisher & Harrison, 1994). Research suggests that there are multiple determinants of children's degree of vulnerability to adverse events: the nature of the event, the duration of the event, the dosage or intensity of the event, the presence of mitigating or compensatory factors in the environment, intrinsic and acquired resiliencies, interpretations of the events, and resources for coping with the events

Werner and Johnson (2000) states that resilient children of an alcoholic parent very often had a non-alcoholic mother/step-mother who served as the "mainstay" of the family-94% of daughters and 80% of sons leading successful adult lives, compared to only 60% and 33.3% respectively of daughters and sons who experienced coping problems. A child living with an alcoholic parent may also be living with a non-alcoholic parent who may provide many of compensatory parenting functions. A supportive non-alcoholic parent or other care giving adult (i.e., grandparent, aunt/uncle, elder mentor, and adult friend) provides nurturance, protection, and guidance which optimize the development of a child with an alcoholic parent. In short, if the child's home environment involved the presence of a functional, central, "buffering" parent, the negative developmental impact of a father's alcoholism was somewhat mitigated; children had more problems when their family lives did not include a person that could be described in this way.

## **2.6 Theoretical Framework**

This study was guided by the gender intensification theory developed by Petersen, Sarigiani, and Kennedy (1991). The theory postulates that the physical differentiation between men and women, boys and girls is accompanied by increasing socialization pressures to conform to gender roles. Thus, boys may be socialized into valuing agency, exploration, independence, and risk taking, whereas girls may be socialized into valuing communal, interpersonal relationships with significant others. Since increased emotional autonomy has been

associated with susceptibility to peer pressure and affiliation, one possible pathway is that middle-adolescent boys may be more apt to comply or accept normative peer behavior and values endorsing alcohol use and delinquency. By contrast, to the extent that girls increasingly assume traditional female roles, greater affiliation with the family and wariness of novelty may buffer or, at least delay, their involvement in alcohol and substance use experimentation and escalation in the peer group.

In addition to providing a useful foundation for explaining the origins of gender differences in alcohol involvement, the gender intensification theory may also provide evidence of gender differences in socialization pathways in alcoholic families (e.g., gender as a mediator). For example, although greater concern and caring in harmonious family relationships among girls may serve adaptive functions, greater concern and sensitivity in the face of discordant family conditions that commonly accompany parental alcoholism may lead to greater psychological burden and symptomatology, including depressed affect and alcohol problems. Although the literature reviewed show inconsistent findings, gender socialization may also shape the form of problems exhibited by adolescent girls, as they may be especially susceptible to the development of internalizing symptoms. Thus, although speculative, pathways between family histories of alcoholism, family discord and adolescent outcomes may very well be stronger (or at least qualitatively different) for adolescent girls than boys.

Recent historical trends have increased the number of adolescent girls who use alcohol and engage in binge drinking episodes, thus fostering the notion that there is a convergence in drinking behavior between boys and girls, men and women in their life time. However, more careful scrutiny of the data indicates that boys and men, relative to girls and women, drink more frequently and in larger quantities and have more alcohol related problems (Husely, 1997). Although little is known about the origin of gender differences in many alcohol related behaviours, there are several hypotheses that can be advanced from a developmental psychopathology framework. For example, it may be a by product, in part, of the disproportionate risk among males to exhibit antisocial trajectories to alcoholism characterized by the persistent problems.

Guided by the salience of this theory, this study conceptualizes parental alcoholism as accompanied by a network of problems. Thus, parental alcoholism predicts subsequent family cohesion. Although researchers have yet to test explicitly the mediating role of evolving alcohol schemas in the intergenerational linkage of alcoholism and family cohesion,

According to this framework, alcoholism is being investigated under the following intervening variables to establish its effect to family cohesion: diseases, mis-use of family resources, gender based violence, maladjusted youth, school dropout, divorce and separation.

This illustrates the nature of the kinds of questions that may be posed from a developmental psychopathology perspective with regard to multiplicity of influences, the multiplicity of outcomes and the speculation of theoretically driven intervening process. The risk factor such as family history of alcoholism may impact levels of marital conflict and financial strain that increase the probability of disharmony thereby compromising family cohesion. This study conceptualizes that alcoholism and alcohol abuse leads to diseases such as HIV/AIDS and STIs, misuse of family resources, gender based violence such as homicide, rape, incest and murder, divorce and separation, impotence, and school dropouts.

## **CHAPTER THREE**

### **METHODOLOGY**

#### **3.1 Introduction**

This chapter outlines the methodology that was used in the study. The chapter covers the research design, variables, study location, population and sample, instruments, validity and reliability, data collection, data analysis, data management and ethical considerations.

#### **3.2 Research Design**

This study utilized both the descriptive survey and exploratory research designs during the research process. These designs were chosen for the study because they allowed the researcher to study phenomena that did not allow for manipulation of variables.

#### **3.3 Variables of the study**

##### **3.3.1 Independent Variables**

The independent variable that the study sought to manipulate was alcoholism. The study explored the relationships between alcoholism and family cohesion. This analysis provided basic information concerning how alcohol use and family cohesion varied across the selected households in Kigio location.

##### **3.3.2 Dependent Variables**

This study investigated the relationship between alcoholism (independent variable) under the following dependent variables: Divorce/separation, Gender Based Violence (i.e. homicide, rape and incest), misuse of family resources, and maladjustment of children, school dropouts, family income and family stability.

#### **3.4 Study Location**

The study was conducted in Kigio location in Gatanga District in Central Province, Kenya. Singleton (1993) notes that the ideal setting for any study should be the existence of a

problem that the study seeks to intervene. The study location was chosen because it is apparent that there is an alarming rate of alcoholism and alcohol abuse in Kigio location. Unlike other parts of Central province, in this particular village many young men and women, boys and girls are alcoholics with the larger population of men being affected. Alcoholism in this area has affected roughly 8.46% of the overall population occasionally leading to Gender Based Violence, divorce, deaths, and school dropouts among others. Also, no similar research to the best knowledge of the researcher has been carried out in the location. Reports of many men being knocked down and others having been run over by vehicles as they staggered home or as they lay on the roadside, illicit brewers drowning in River Chania during the year 2010 long rains were highlighted in the media. The deaths of many men including students and teachers as evidenced by the death of a Kimiti secondary school (not the real name) teacher in 2010 and a student from the same school in the year 2009 is an indicator of a problem. It is against the backdrop of these problems that this study is being undertaken.

### 3.5 Population and Sample

The target population for this study was 1790 women and men, boys and girls in Kigio location. Mugenda and Mugenda (2003) recommend a representative sample of 10% for descriptive research design. The sampling frame was a list of households whose parents were alcoholics. The researcher wrote numbers onto small pieces of papers and put them into a small container. The researcher then picked randomly 30 papers and households whose numbers were picked constituted the sample. A total of 179 subjects that included 56 parents and 123 children were sampled in the 30 households to participate in the study.

**Table 3.1: Target Population**

Category	Frequency	%
Parents	560	31
Children	1230	69
<b>Total</b>	<b>1790</b>	<b>100</b>

From the target population, the researcher obtained a sample size of 179 subjects. Table 3.2 shows the distribution of the sample size.

**Table 3.2: Sample Size**

Category	Frequency	%
Parents	56	31
Children	123	69
<b>Total</b>	<b>179</b>	<b>100</b>

### 3.6 Research Instrument

The instrument for this study was a questionnaire. Participants were given the choice to answer the questions on their own or to have the researcher read the questions to them by way of interview.

### 3.7 Data Collection

The researcher visited all the respondents to administer the questionnaire. The researcher recorded all the group responses so as to answer the research questions. In addition, Focus group discussions (FGD), interview schedule and observation methods were used. In FGD, the researcher organized a group of eight respondents and engaged them in a discussion based on the research questions. The researcher recorded their responses. For Interview schedule, the researcher asked individual respondents questions that had been prepared earlier and recorded the answers. The researcher went to the brewing den in River Chania and recorded the data using a digital camera.

### 3.8 Data Analysis

Once the data was collected, a code book was created to facilitate data entry into the SPSS computer programme. Further, the data was organized, edited and cleaned to remove any outliers present. This study employed descriptive statistics to analyze the data.

### 3.9 Logistical and Ethical Considerations

During the study, the researcher focused on certain ethical issues, which were considered during the data collection phase. First, the researcher sought permission from the area chief. The researcher kept the identity of the subjects anonymous and the information provided by the respondents was treated as confidential.

## CHAPTER FOUR

### RESULTS AND DISCUSSION

#### THE EFFECTS OF FAMILIAL ALCOHOLISM ON FAMILY COHESION AND STABILITY

##### 4.1 Introduction

This chapter covers the analysis of data and results presentation. The data presented includes the demographic data of respondents that includes gender, age household family head, and household education status. The chapter presents the results and discussion of the study of objective.

##### 4.2 Data Analysis, Presentation and Interpretation

The study sought to answer the following research questions:

- i) What is the effect of alcohol on family income?
- ii) What is the relationship between parents' alcohol intake and children's education levels and how it impacts on husband and wife relationship in the family?
- iii) How does alcohol influence the distribution of resources in female headed and male headed households?
- iv) What is the effect of alcohol on family cohesion and stability?

##### 4.2.1 Response Rate

The study administered questionnaires to the subject and the response rate is shown in Table 4.1.

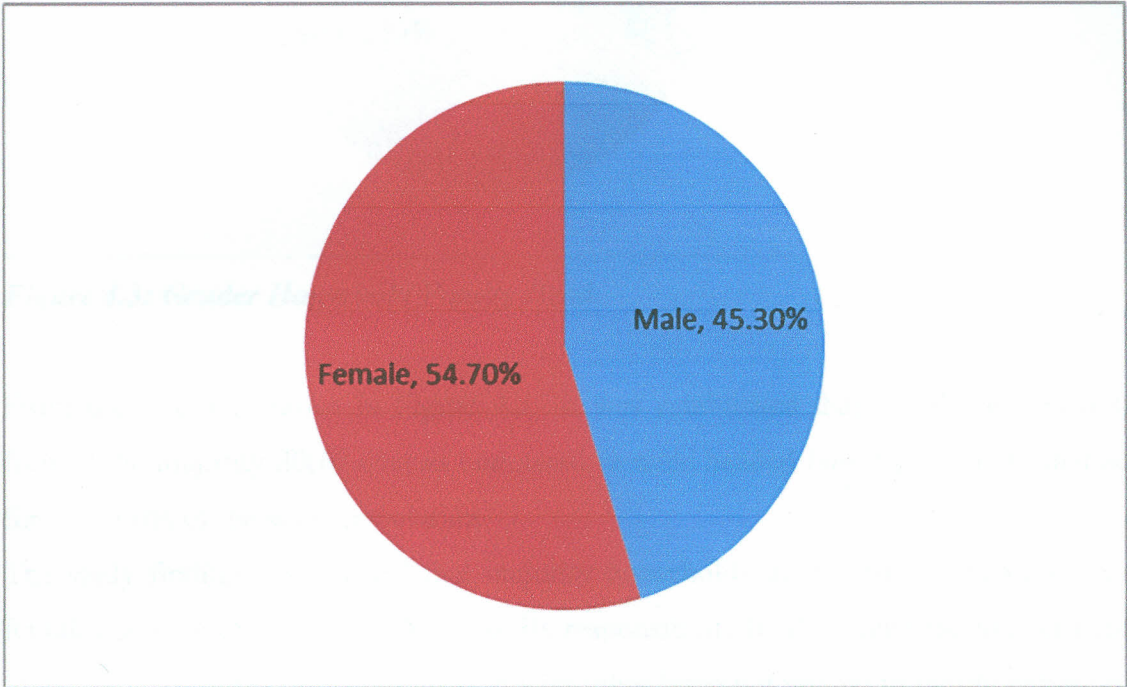
**Table 4.1: Questionnaire Response**

Category	Frequency	%
Number returned	167	93
Number not returned	12	7
<b>Total</b>	<b>179</b>	<b>100</b>

Table 4.1 indicates that the research was popular in that 167 (93%) of the respondents returned the questionnaire and only 12 (7%) did not return the questionnaires. Therefore 93% was a good response and quite representative.

#### 4.2.2 Gender Distribution of Household Family Members

The study sought to establish the gender distribution of parents and children in the households' alcoholics' parents. This information enabled the researchers to establish the relationship between gender and alcoholism and particularly determined who among the members of the family alcoholics were. The data that was elicited is shown in Figure 4.2

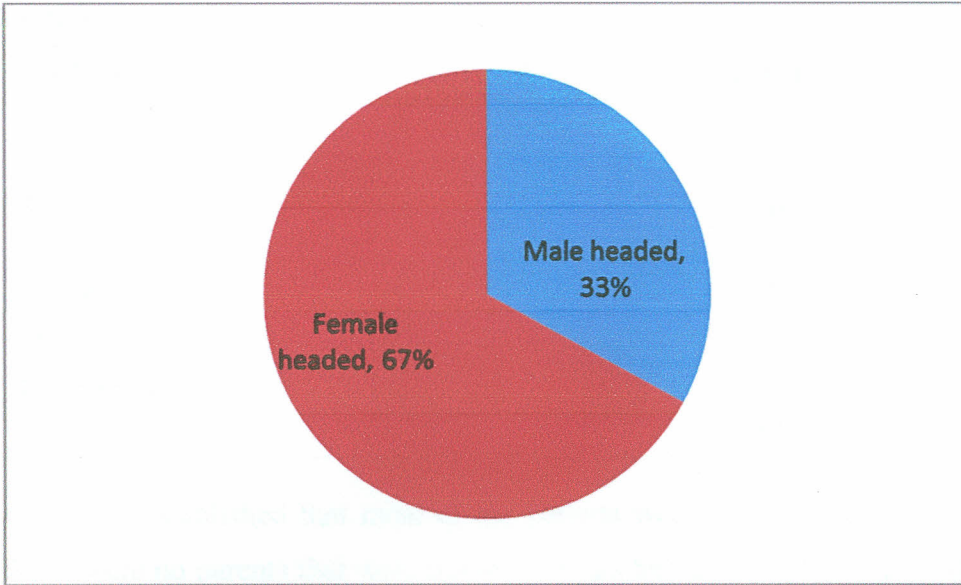


**Figure 4.2. Gender Distribution of Parents**

The results indicate that most of the parents in the households studied were females 29 (54.7%) while the rest 24(45.3%) were males. This implies that there was gender disparity in the distribution of parents indicating that some households had single parents.

#### Figure 4.3: Gender Distribution of Children

The data further shows that boys were the majority accounting for (56%) while the girls formed 44%. The study further sought to establish the gender of the household family head and the results are shown in Figure 4.2



**Figure 4.3: Gender Household Family Head**

From the findings shown in Figure 4.3 it was established that female headed household formed the majority 20(67.0%) as compared to male headed family household that accounts for 10(33.0% of the study population.

The study findings thus reveal that majority households in the study area were headed by females as a result of lack of taking family responsibility by the males due to over indulgence in alcoholism or due to pre-occupation with other issue not related to family cohesion. It can therefore be concluded that women in the study area bore the burden of raising up their families more than their male counterparts. Resilient children of an alcoholic family very often had a mother who served as the main stay of the family (67.0%).

#### **4.2.3 Age Distribution of Household Family Members**

The demographic attribute of age has importance since it is linked to individual experience. Experience may differ across cohorts of age in relation to the study variables. These observations provide the basis for the argument that age differences may be a factor in the examination of alcoholism trends in families as well as providing a prognostic view of age drinking experiences within the sample. The age distribution of the subjects is shown on Tables 4. and 4.4

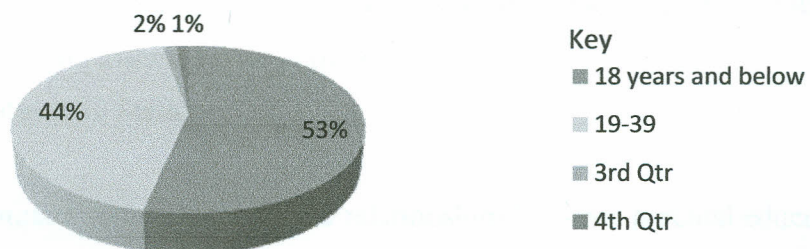
**Table 4.3: Age Distribution of Parents**

Age Interval	Frequency	%
Below 25 years	0	0
25-35	16	30.0
36-46	16	30.0
47-57	12	23.0
58-68	7	13.0
69-79	1	2.0
80 years and above	1	2.0
<b>Total</b>	<b>53</b>	<b>100.0</b>

The study established that most of the parents were aged between 25 years and 46 years. There were no parents that were below 25 years but about 23% were aged 47-57 years while those aged 58-68 accounted for 13%. Only 2% of the parents were aged between 69-79 years as another 2% was 80 years and above. The data therefore indicate that the youngest parents were aged 25 years and the oldest parents were aged 80 years. This implies that there is an age gap between the oldest and the youngest parents by about 55 years in the study area.

**Figure 4.4: Age Distribution of Children**

The findings further reveal that majority (50%) of the children in the sample were aged 18 years and below. 41% of the children were in the age bracket of 19-39 years and another 9% in the age bracket of 40-60 years. The study established a correlation between parents' age and that of the children. Households that had the youngest children had also young parents and vice versa. The information that is provided by this data can be used to draw the conclusion that alcoholism in families cut across age cohorts and that both young and older parents were abusing alcohol. A pictorial representation of this information is shown in Figure 4.4



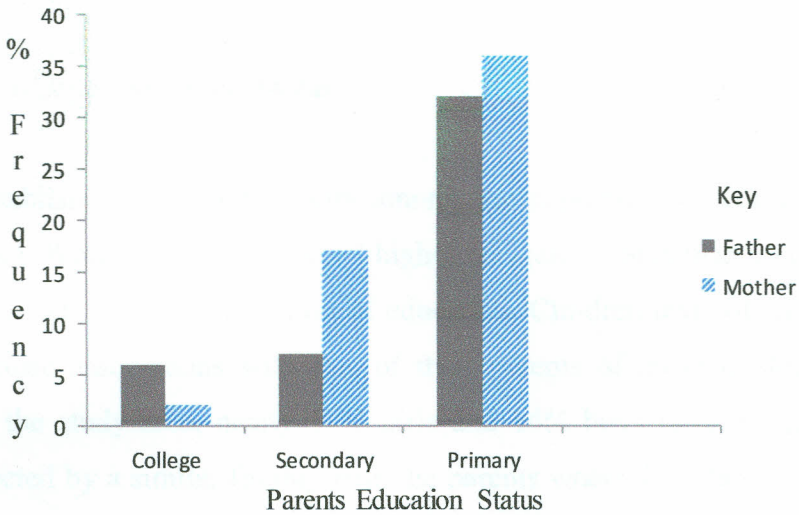
**Figure 4.4: Age Distribution of Children**

#### 4.2.4 Household Education Status

The study sought to establish the education level of members of the selected households of alcoholic parents. Figure 4.5 shows the parents' education status.

**Figure 4.5: Parents' Education Status**

Figure 4.5 shows the results of the highest education level reached and completed by parents. The study established that the highest education level of the majority fathers was college indicated by 6% respondents as compared to 2% mothers who had completed the same level of education. A category of fathers 7% had completed secondary education as compared to 17% mothers who reported having had completed the same level of education. Majority 32% fathers had primary level of education as compared to 36% mothers.



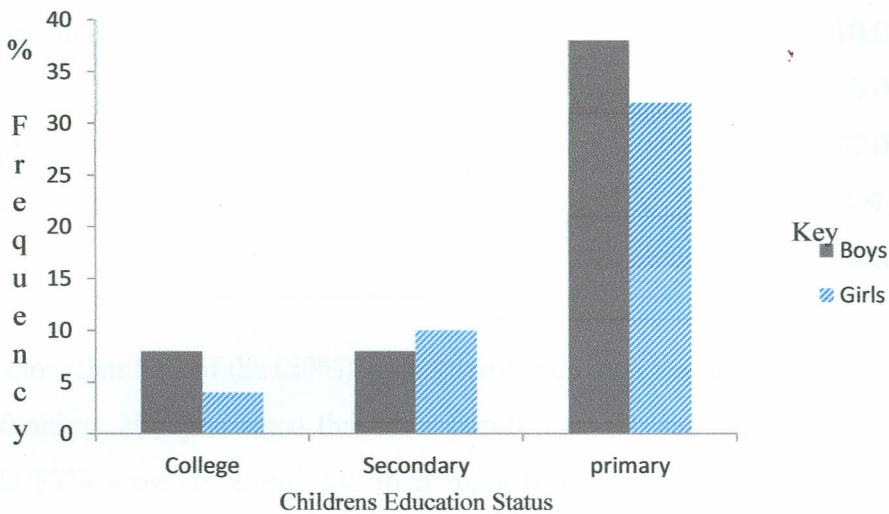
**Figure 4.5: Parents' Education Status**

The study further sought to establish the education status of the children of alcoholic parents. Data shown on Table 4.6 and Figure 4.6 was elicited.

**Figure 4.6: Children Education Status**

The findings also illuminate some aspects of the relationships between parental education and that of their children. There does seem to be an association between parental alcoholic involvement and the children education. Boys who had completed college education accounted for 8% compared to the girls 4%. However, more 10 % girls had completed secondary level of education as compared to 8% boys. Majority 15% boys had reached class

eight as compared 11 % girls who had attained similar level of education. More girls 17% than boys 14% were below class seven level of education.



**Figure 4.6: Children Education Status**

The study established disproportionality among the population of children whose parents were alcoholics. While some had attained higher education status than others, a much bigger proportion was below class seven level of education. Children level of education appears to show some close associations with that of their parents of an estimated 114 children of alcoholics in the study area, nearly 17% girls and 14% boys have not gone beyond class seven as reflected by a similar finding with the parents where 21% fathers and 11% mothers had not gone beyond class seven. One central finding within the body of these results is that education levels of members of households of alcoholic parents are generally low in addition to the family pedigree. Findings imply that alcoholism may be contributing to the low education levels and the family pedigree may be the context for this particular scenario. Among the remarks provided by parents regarding their children low education was that they were unable to further their education due to lack of school fees.

#### **4.2.5 Effect of Alcohol on Family Income and Cohesion**

The first objective of the study was to establish the effect of alcohol on family income. The household heads were asked to state the main source of family income. The responses elicited are shown in Table 4.7.

**Table 4.7: Main Source of Family Income**

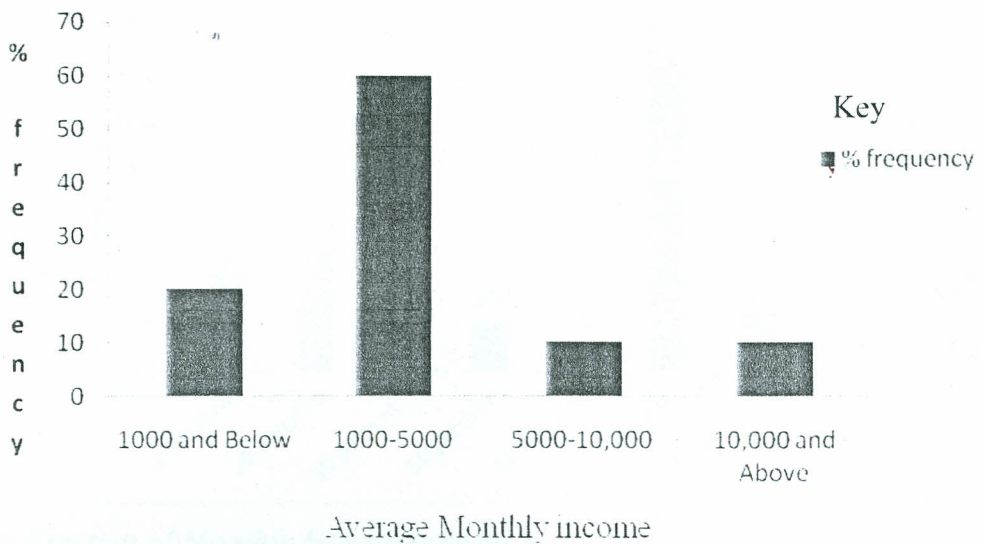
Main Source of Income	Frequency	%
Farming	15	50.0
Livestock keeping	3	10.0
Business	6	20.0
Salaried employment	5	17.0
Others (casual laborer)	1	3.0
<b>Total</b>	<b>30</b>	<b>100.0</b>

The findings show that half of the (50%) respondents indicated that the main source of family income was farming. 20% indicated that their family income was derived from operating a business while 17% were employed and their main source of income was salary. The data also shows that livestock keeping was a source of income for 10% of the respondents as 3% performed casual labor to draw an income.

The findings clearly show that farming is the main livelihood of majority of the families in the study area. An interview with the respondents revealed that most of them were involved in subsistence farming with low returns and therefore can be described as deriving low incomes from proceeds generated from farming. It is also clear that tremendous heterogeneity exist among the population as the data reflects. Families that indicated they operated businesses had small and medium business that generated low income. Majority of those who were employed and received a salary were teachers. The study further sought to establish the amount of income generated by the activities identified by the respondents. Table 4.8 provides grouped data of monthly income levels of the households.

#### **Figure 4.8: Family Average Monthly Income**

Figure 4.8 data shows the results of the average monthly income generated by the family income generating activities. The findings reveal that majority 60% families obtained an average income ranging from Ksh 1000-5000 from their income generating activity. The results also show that families that raised Ksh 1000 and below accounted for 20% and that only about 10% of the families were able to raise on average Ksh 5000-10000. Another 10% draw on average Ksh 10000 and above from their main source of income. A pictorial illustration of the data shown in Figure 4.8.



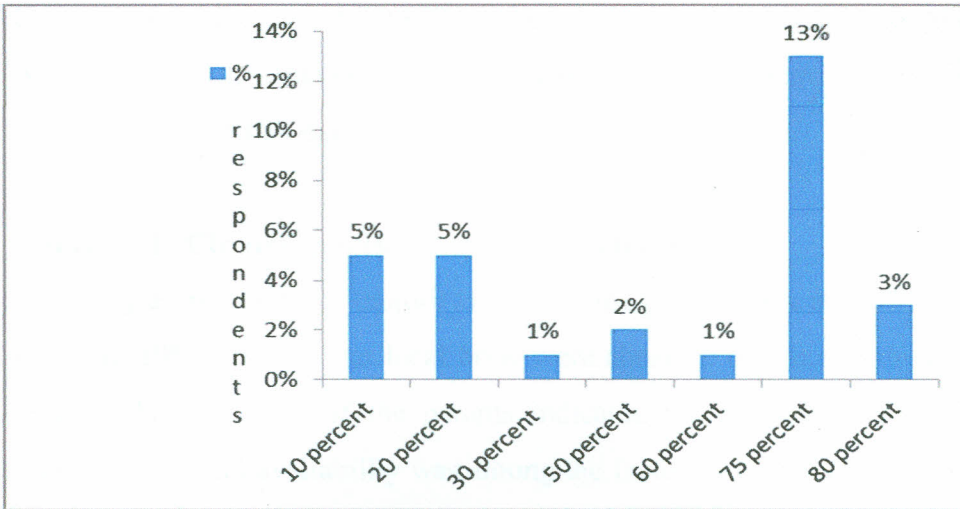
**Figure 4.8: Family Average Monthly Income**

It can be seen from the findings that the average monthly income for majority of the families ranged between Ksh 1000-5000. The information implies that the level of family income of majority households was low.

In order to answer the research question arrived at establishing the effect of alcohol on family income, the researchers asked the respondents to state the fraction of family income used on alcohol. The responses generated are shown in Figure 4.9.

**Figure 4.9: Fraction of Monthly Income used on Alcohol**

The study established that 13(43%) used about 75% (three quarters) of the family income on alcohol. The results clearly indicate that alcohol depletes family income in a very significant way. For instance, the amount of money used on alcohol for the majority families with an average income of Ksh 5000 is Ksh 3750 accounting for three quarters of the income. This leaves the family with an average Ksh 1250 to cater for other family expenses. This information is further illustrated by Figure 4.9.

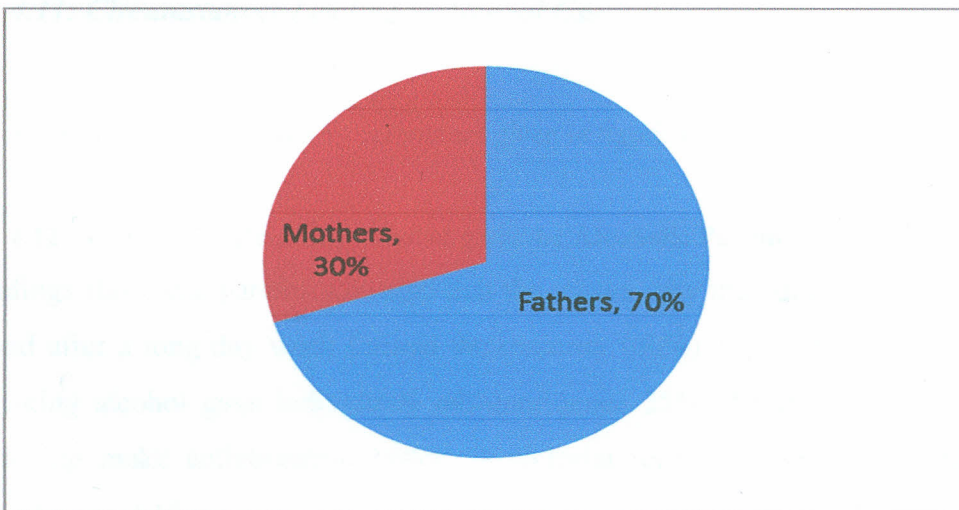


**Figure 4.9: Fraction of Monthly Income used on Alcohol**

These findings therefore lead to the conclusion that financial constraints are a major source of conflict in the family of alcoholics impacting negatively on family cohesion.

#### **4.2.6 Relationship between Parents' Alcohol intake and Children's Education Status and its impacts on Husband–Wife relationship in the Family**

The second objective of the study sought to find out the relationship between parents' alcohol intake by gender and children's' education levels and how it impacts on husband-wife relationship in the family. In order to examine the relationship between parents' alcohol use and its effects on children education and its impact on the couple's relations, the researchers used several probing questions. The respondent was asked to state who among the parents was an alcoholic. The responses given by the subjects are given in Figure 4.10

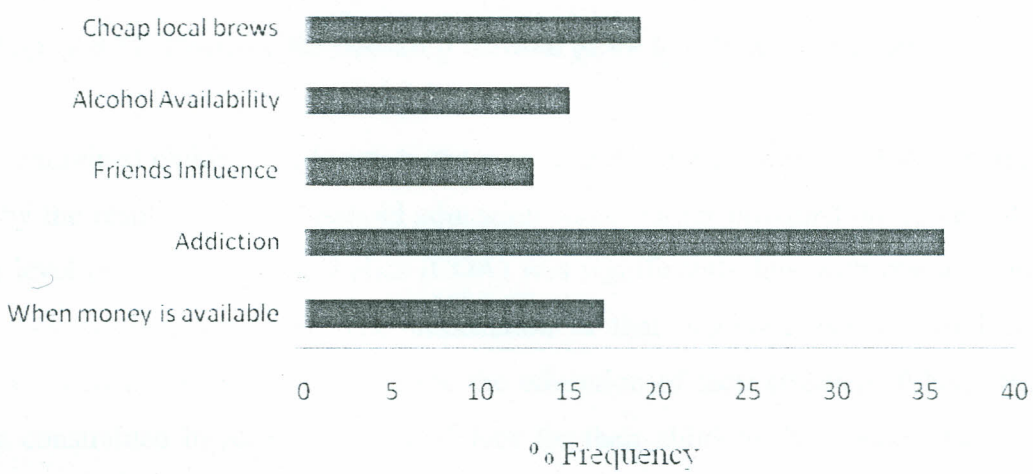


**Figure 4.10: Parental Alcohol use by Gender**

The study establishes that 37(70%) fathers as compared to 16(30%) mothers were alcoholics. When asked to give the circumstances that predisposed them to drink alcohol the responses shown in Table 4.10 were provided.

**Figure 4.11: Circumstances Leading to Alcohol Use**

The study established that majority (36%) of the parents took alcohol because they had gotten addicted. 19% reported that local brew were cheap to obtain and thus this made them drink alcohol. Another 17% of the parents indicated that they took alcohol when money was available. Alcohol availability was among the factors predisposing its abuse by about 15% of the parents. 13% said that they took alcohol sometimes due to the influence from friends. This information is further illustrated in Figure 4.11.

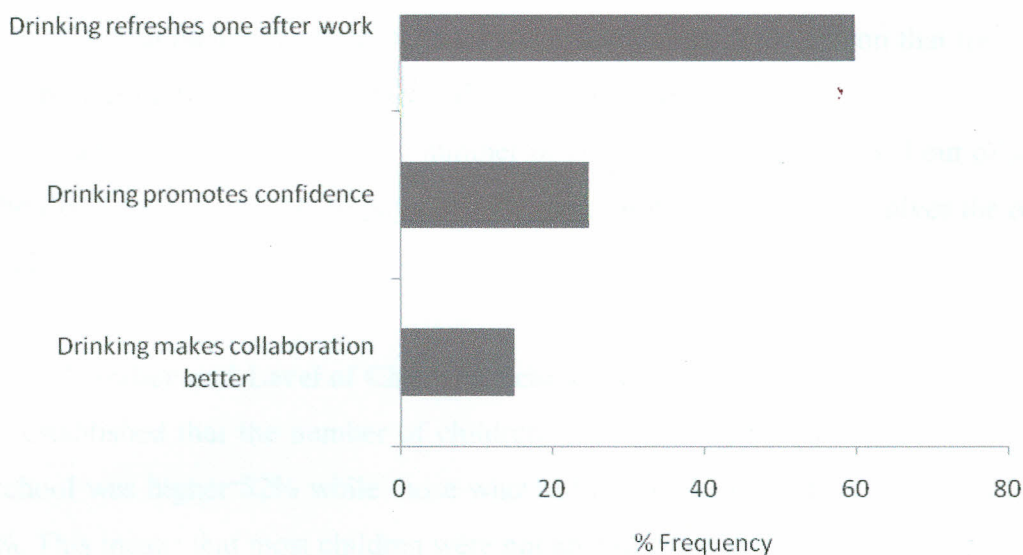


**Figure 4.11: Circumstances Leading to Alcohol Use**

The other reasons alcohol is taken by parents are given in figure 4.11.

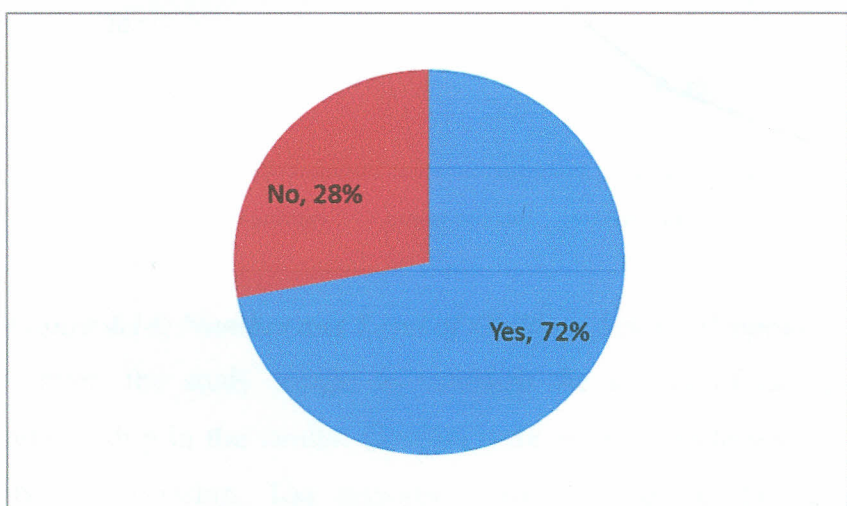
**Figure 4.12: Reasons for Drinking Alcohol given by Alcoholic Parents**

The findings show that parents who said that the reason why they drank alcohol was because it is good after a long day work formed the majority (60%) as compared to those who said that drinking alcohol gave individuals self-confidence 25%. Another 15% gave the reason that drinking make collaboration better. A pictorial representation of the findings given shown in Figure 4.12.



**Figure 4.12: Reasons for Drinking Alcohol given by Alcoholic Parents**

The study examined children’s education status in relation to the parents’ alcohol intake. As reflected by the results of the household education status earlier provided on Table 4.8. The education level of children of alcoholics (COA) was significantly low with majority having not gone beyond primary level. The implication is that alcoholic parents used family resources on alcohol thereby compromising the education of their children. When asked if they were constrained in paying the school fees for their children the reasons provided in Figure 4.13, were elicited.



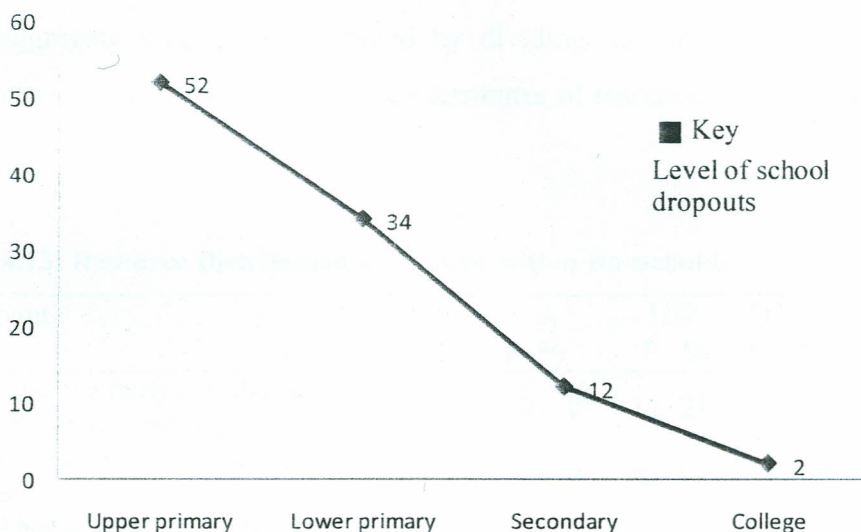
**Figure 4.13: Responses on Whether Fees Payment for Children Education was a Problem**

From Figure 4.13, majority 38(72%) indicated that they had problems in paying fees for their children as compared to only 15(28%) who said they were not constrained. Alcoholic parents who said they had problems in paying fees for their children gave the reason that they could not abstain from drinking alcohol as they had gotten addicted.

The study further sought to establish the number of children who had dropped out of school because their parents were unable to pay fees. The data shown in Table 4.12 gives the results that the study established.

**Figure 4.12: Number and Level of Children School Dropout**

The study established that the number of children who had dropped out of school at upper primary school was higher 52% while those who had dropped earlier at lower primary were about 34%. This means that most children were not able to complete basic primary education. A fewer number therefore reached secondary and college level. They however, dropped before they would complete school as reflected by the 12% and 1% responses. A pictorial representation of the information is further given in Figure 4.12.



**Figure 4.14: Number and Level of Children School Dropout**

Further, the study sought to establish the impact of alcoholism on husband and wife relationship in the family. Couples were asked to state ways by which alcoholism affected their relationship. The responses indicated that alcohol abuse affected husband- wife relationship in a variety of negative ways including: intimate partner violence, communication problems, increased conflicts and low relationships satisfaction, nagging

blame, complaints, emotional and physical abuse, poor sexual relationship and guilt. Similar findings were established by Connors (2001) and Robert and Linney (2000).

#### 4.2.7 Alcohol Influences on the Distribution of Resources and Cohesion in Male headed and Female headed Households

The third objective of the study was to determine alcohol influences on the distribution of resources in male headed and female headed households. The purpose of this objective was to determine how resources were distributed in alcoholic male headed and female headed households. The aim was to understand gender specific resource distribution patterns in the areas of land, income, income generating activities, family wealth, and employment. Respondents were required to tick appropriately their best opinion on a Likert's scale. The options from which they were to choose were strongly agree (SA), agree (A), undecided (UD), disagree (D), and strongly disagree (SD). Statistically, the perceptions of the parents were computed by deriving frequencies, percentages on a five (5) point scale. The second statistic computed was the mean. This was done by getting the aggregate score for each respondent. The maximum aggregate score that could be obtained was 60(12x5), whereas the least aggregate score was computed by dividing the total score by the total number of respondents. The responses to various attributes of resources distribution are shown in Table 4.13

**Table 4.13: Resource Distribution by Gender within Households**

Statement	SA		A		UD		D		SD		Mean
	F	%	F	%	F	%	F	%	F	%	
Family income fairly distributed between husband and wife	0	0	0	0	11	21	10	19	32	60	1.603
Husband and wife pools income together	0	0	0	0	9	17	15	28	29	55	1.622
Female has access to critical productive resource e.g. land	2	4	3	6	11	21	16	30	21	40	2.037
Female has access to family income generating activities	3	6	5	9	14	26	13	25	18	34	1.905
Female has lesser access to paid employment and income in general than do men	17	32	13	25	10	19	7	13	6	11	3.528
Man controls the valued resources in the family such as income, wealth, and income generating activities	31	58	11	21	10	19	1	2	0	0	4.358

Table 4.13 summarizes results of parents' perceptions on resource distribution. A total of 53 alcoholic parents participated in the study. The study established that men controlled the valued resources in the family as income, wealth, land and income-generating activities as indicated by a computed mean of 4.358. The study further established that women had lesser access to paid employment and income than men (Mean = 3.528). It was also established that women did not have access to critical productive resources like land (Mean = 2.037). This may be due to cultural stereotypes. The findings also reveal that women had limited access to family income generating activities (Mean = 1.905). It was also established that female headed households or male headed households did not pool incomes as shown by a mean of 1.622. Further, It was established that family income was not fairly distributed between husband and wife (Mean = 1.603).

From the aforementioned findings, the study draws the conclusion that females faced severe constraints in terms of ownership of resources. Relatively large degree of gender inequality in resource distribution within households existed. The sex stratification system places men as superior leading to power over women. At the societal level, traditional patriarchal values assign to men the economic responsibility while women role is relegated to children and family care. Female headed households for a variety of cultural and biological reasons are more likely to have unfair resource distribution. The implication here is that gender is a key distributional criterion at the household level.

#### **4.2.8 Effect of Alcoholism on Family Cohesion and Stability**

The fourth objective sought to establish the effect of alcoholism on family stability. The dimensions of family cohesion were first investigated and the opinion of the respondents measured on a five (5) point Likert's scale. The purpose was to establish the respondents' attitude to alcoholism and family cohesion (stability). The responses elicited are shown on Table 14.14. A total of 179 subjects that included 56 parents and 123 children responded to this question.

**Table 4.14: Dimensions of Family Cohesion**

Cohesion evaluation statement	SA		A		UD		D		SD		Mean
	F	%	F	%	F	%	F	%	F	%	
Family members are involved in each other's lives	15	9	13	8	43	26	90	54	7	4	2.652
There are strict consequences for breaking the rules in our family	0	0	0	0	34	20	59	35	74	44	1.760
Family members feel closer to people outside the family than other family members	0	0	20	12	26	16	20	12	101	60	1.790
In solving problems, the children's suggestions are followed	0	0	17	10	36	22	93	56	21	13	2.293
Family members like to spend some of their free time with others	38	23	50	30	70	42	9	5	0	0	3.820
There is no leadership in this family	0	0	34	20	33	20	81	49	19	11	2.491
It is important to follow the rules in our family	0	0	0	0	37	22	103	78	27	16	2.059

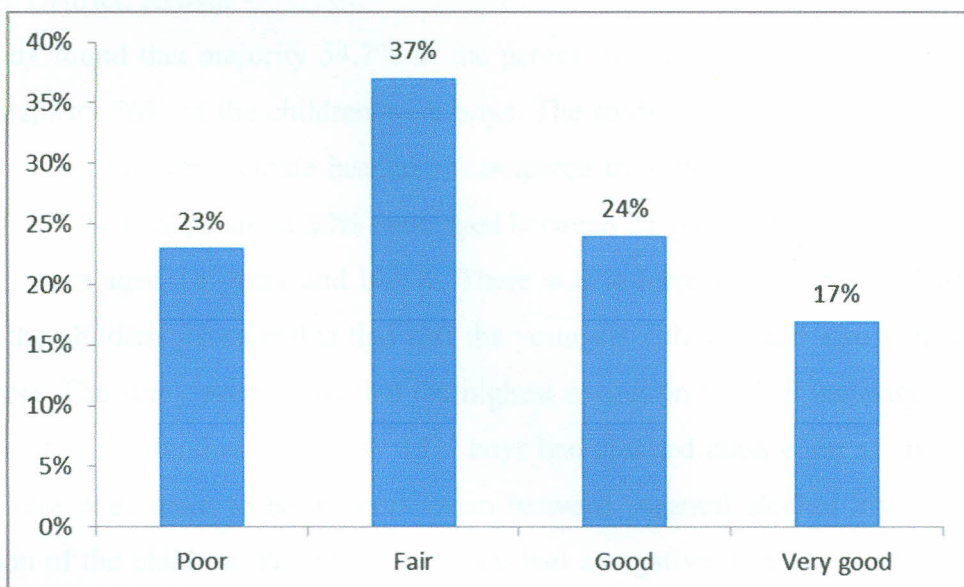
The data in Table 4.14 summarizes results of the subject's responses regarding dimensions of family cohesion. The purpose of generating this data was to get facts on facets of family cohesion in households of alcoholics.

The study established that in the context of alcoholism in families, family members spend some of their free time with others. Statistically, the mean score established for the statement whether family members liked to spend some of their free time with others was 3.820. This implies that there was significant less bonding among members in an alcoholic household.

The means computed for other statements regarding the dimensions of family cohesion in an alcoholic family environment established that on many aspects, family cohesion was significantly affected by alcoholism. After computing the mean scores, it was found that most of the statements generated a mean below three (3) that was considered not to be contributing positively to family stability. For instance, it was found that family members were less

involved in each other's lives as indicated by mean of 2.652 and that there were no strict consequences for breaking the rules in the family (Mean = 1.760). This information shows that there was impaired cohesion in families of alcoholic parents. The fact that family members felt closer to people outside the family than other members (Mean = 1.790) shows that there was poor cohesion within families of alcoholics.

The study established that there was poor parental leadership (Mean = 2.491) in households of alcoholics. This implies that members in such a family are responsible for their own deeds and that there was no common goal. When asked to state what they considered to be the state of cohesion in their families, the responses shown in Figure 4.15 were generated.



**Figure 4.15 Status of Family Cohesion**

The findings shown in Figure 4.15 indicate that a majority 61 (37%) respondent said that the status of their family cohesion was fair as compared to those who indicated that the family cohesion status was good 40(24%) and 28(17%) very good. The study also established that there was poor family cohesion among 38(23%) of the respondents. It is suggestive that alcoholism indeed has an influence on family cohesion. The general impacts noted being; lack of family involvement with each other, no consequences for breaking rules, poor parental leadership, poor communication and problem solving as well as poor intra-family relations.

# CHAPTER FIVE

## SUMMARY, CONCLUSION AND RECOMMENDATIONS

### 5.1 Introduction

In this chapter, a summary of the study and main findings is presented together with conclusions, recommendations and suggestions for further studies.

### 5.2 Summary of Research Findings

This study investigated the effect of alcoholism on family cohesion in Kigio Location of Gatanga District, Kenya.

The study found that majority 54.7% of the parents in the studied households were females while majority 56% of the children were boys. The study also established that majority 67% of the households were female headed as compared to 33% male headed. It was also found that most of the parents about 60% were aged between 25 year and 46 years while 50% of the children were aged 18 years and below. There was a correlation between parents' age and that of the children. Households that had the youngest children had also young parents and vice versa. The study established that the highest education level of majority 21% fathers as compared to 13% mothers. Majority 15% boys had reached class eight as compared to 11% girls. There does seem to be an association between parental alcohol involvement and the education of the children. Parental alcoholism had a negative impact on the education of the children as it was contributing to the low education levels of the children. The main source of family income for majority 50% households was farming as compared to the other sources like livestock keeping, business and employment. Most of the families were involved in subsistence farming with low returns and therefore were low income earners. Majority 60% of the households obtained an average income of Ksh 1000-5000 from their main source of income and that about 43% used about three quarters of the family income on alcohol. Alcohol therefore was found to deplete family income in a very significant way. Majority 70% fathers as compared to 30% mothers were alcoholics and that they took alcohol because they had gotten addicted. Alcohol abuse affected husband-wife relationship in a variety of ways including intimate partner violence, increased conflict and low relationship satisfaction, nagging, blame, complaints, emotional and physical abuse, poor sexual relationship and guilt. Men controlled valued resources in the family such as income, wealth on land, and income-generating activities. Women had lesser access to paid employment, and that they were

facing severe constraints in terms of ownership of resources. Relatively large degree of gender inequality in favor of men in resource distribution existed within households. There was impaired cohesion and low family stability in families of alcoholic parents as indicated by 37% responses.

### **5.3 Answers to Research Questions**

The first research question that sought to establish the effect of alcohol on family income found that 75% of family income was used on alcohol. The second question sought to establish the relationship between parents' alcohol intake and children's education levels and how it impacts on husband and wife relationship in the family. It established that parental alcoholism had a negative impact on the education of the children as it may be contributing to low education levels in children. It also found out that alcohol abuse affected husband-wife relationship in a variety of ways including intimate partner violence, increased conflict and low relationship satisfaction, nagging, blame, complaints, emotional and physical abuse, poor sexual relationship and guilt. The third question was on how alcohol influences the distribution of resources in female and male headed households. The study established that men controlled valued resources in the family such as income, wealth on land, and income-generating activities. Women had lesser access to paid employment, and that they were facing severe constraints in terms of ownership of resources. Relatively large degree of gender inequality in favor of men in resource distribution existed within households. The fourth question was on the effect of alcohol on family cohesion and stability. It found out that there was impaired cohesion and low family stability in families of alcoholic parents as indicated by 37% responses.

## 5.4 Conclusions

Based on the study findings presented and discussed in chapter four, the following conclusions were drawn:

- i) That children raised in alcoholic families tend to experience lower levels of family functioning and are more likely to have had traumatic experiences than children from nonalcoholic families. More specifically, alcoholic families seem to have higher levels of overt unresolved conflict, fighting, blaming, violence, lower levels of togetherness and family closeness, lower levels of physical and verbal expressions of positive feelings, warmth, and caring among family members.
- ii) That individuals who grew up with at least one alcoholic parent have a higher likelihood of having experienced a less healthy family environment and more family dysfunction.
- iii) That children in alcoholic families are more likely to experience verbal, physical, and sexual abuse and also witness verbal and physical violence between their parents than children in nonalcoholic families. This is linked to indulgence in maladjusted behavior like, early smoking and drinking, early sexual activity and joining of dangerous gangs like the outlawed mungiki sect.
- iv) Exposure to alcoholism in the family was strongly related to incest, homicide, high school dropout rate, Gender Based Violence, increased STIs, HIV/AIDS, divorce and more female headed households than male headed households.
- v) Familial alcoholism usually has strong negative effects on marital relationships and family cohesion.
- vi) Alcoholic families demonstrated poorer problem-solving abilities, both among the parents and within the family as a whole. These communication problems may contribute to the escalation of conflicts in alcoholic families thereby leading to dysfunctional families.
- vii) Parental Alcoholism is more strongly correlated to low levels of children education and affects negatively husband-wife relationships. Similarly Alcoholism usually has strong negative effects on family income and family distribution of resources between husband and wife.

## 5.5 Recommendations

Based on the study findings, the following recommendations are formulated:

- i) NACADA, a Government Organization to assist in the establishment of rehabilitation and drop in centers, in order to offer specialized treatment, counseling and training to the victims and their families.
- ii) Family counselling should be intensified by faith based organizations, churches in order to help families of alcoholics to see the negative impacts of alcoholism and alcohol abuse including other substance abuse.
- iii) Clubs related to alcohol and substance abuse should be formed in schools through the ministry of education where by competitions e.g. in, drawing, poetry, peer educators, music can be rewarded to the best performers for motivational purposes.
- iv) Education on the effect of alcoholism through the ministry of education should be endorsed in the primary school curriculum right from lower primary and time set for visiting speakers especially recovered victims. Few questions on this area should be included in the exams.
- v) Since this research has shown that the man and the boy child are worst hit by alcohol then, gender mainstreaming should be practiced by government agencies at all levels of policy development in order to address the gender gap that has been created by policies that are not gender responsive.

## 5.6 Suggestions for further Research

Although the effects of growing up in an alcoholic family are becoming clearer, there is a need for a comprehensive assessment that will support or disconfirm previous findings related to the effects of parental alcoholism on dimensions of family functioning (e.g., conflict, cohesion, and communication) and that will extend previous work to include additional indices of family. Specifically, previous researchers have tended to focus on physical abuse and neglect of children as indicators of dysfunction in alcoholic families. There is a need for a more expansive assessment of family dysfunction in alcoholic families. A primary suggestion for future research, then, is to identify specific factors within alcoholic families that may moderate the effects of parental alcoholism for children and family functioning. Another suggestion for future research according to the researcher is that more research can still be made regarding the effect of the Alcoholic bill control act 2010 on alcoholism in any area of choice in Kenya commonly referred to as Mututho laws.

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# APPENDIX 1: INTRODUCTORY LETTER TO THE CHIEF

THE CHIEF

KIGIO LOCATION

Dear Sir/Madam,

## **RE: PERMISSION TO CARRY OUT A STUDY IN YOUR LOCATION**

I am a postgraduate student in the department of gender and development studies of Kenyatta University. I am undertaking a study on the relationship between alcoholism and family cohesion.

Kigio location which is an area within your jurisdiction has been sampled as the study location. I hereby request you to allow me to carry out this study in your location. The research instrument calls for direct dissemination through interview and direct observation with the respondents. The data generated by this study will be treated as confidential and used for the purpose of this study only. The cooperation of the men, women, boys and girls in your location as well as yours will be highly appreciated

Thank you in advance.

Yours faithfully,

Alice Wambui Mwangi

Noted by:

.....

.....

**Supervisor**

## APPENDIX 2: QUESTIONNAIRE

The basic objective of the study is to explore the effect of alcoholism on family cohesion in your area. Please be open to expose all issues as accurately and honestly as possible. This is not a test; the questions are intended for educational research. Your views, observations and suggestions will be valuable in drawing practical strategies to inclusively empower the entire community and humanity eliminate discord and disharmony in our family settings.

The contents of this questionnaire will be treated with utmost confidentiality. The identity of the respondents will not be revealed. Do not in any way write/reflect your names or any other cues and details that may in any way disclose your identity and that of your family. This will safeguard the good reputation, integrity and the good name of your family.

### Part 1: Demographics

#### 1. House Hold Data (Gender, Age, and House hold head details)

Parents		Children		Total Household Population
Male	Female	Boys	Girls	
Age	Age	Age of Child	Age of child	
		1.	1.	
Family Head (Please indicate here who the head of the family is) Tick where applicable  Father <input type="checkbox"/> Mother <input type="checkbox"/> None <input type="checkbox"/>		2.	2.	
		3.	3.	
		4.	4.	
		5.	5.	
		.	.	
		.	.	
.	.	.	.	

2. House Hold Education Status ( indicate Highest level reached and completed)

Parents		Children	
Father	Mother	Boys	Girls
		1	1
Remarks:		2	2
		3	3
		4	4
		5	5
		.	.
		.	.
		.	.

3. Household Financial Status and alcohol consumption (to be asked of household head or a responsible adult)

i) What is the main source of family income? Please tick

Farming

Livestock keeping

Business

Salaried employment

Others (Specify).....

ii) What is the amount of income does the activity you have identified generate per Month and on average what is the fraction of this income is used on alcohol?

Average income.....

Fraction used on alcohol.....

iii) Under what circumstances do members of this family use alcohol?

.....  
 .....

iv) Who among the members of this family drinks alcohol? Please tick.

Father ( ) Mother ( ) brother ( ) Sister ( ) Sibling ( )



Does alcohol usage by the person you have identified in any way affect family

Cohesion? Please state how

.....  
 .....  
 .....

4. It appears that many people drink alcohol for various reasons. Which among the list do you consider to be most significant? Tick
- i. Drinking makes collaboration better ( )
  - ii. Drinking gives one better self confidence ( )
  - iii. Drinking is a good reward after a long working day ( )
5. What would you consider to be the negative consequences of alcohol drinking as portrayed by the behavior of the drunkards? Please indicate your opinion by either strongly agreeing, agree, undecided, disagree, or strongly disagreeing to the statements below.

	Statement	S A	A	U N	D	S D
1	Become aggressive					
2	Become violent					
3	Acquire injurious tendencies					
4	Become sexually aggressive					
5	Become impotent					
6	Fights and may kill members of the family					
7	Sexually molesting family members					

6. Children education background in relation to household alcoholic status

i) Are you constrained in paying fees for your children schooling? Yes ( ) No ( )  
 If "Yes" what is the reason(s) for your constraint.

.....  
 .....  
 .....

If "No" do you think your family non-alcoholic status has empowered you to pay fees for your children education? Yes ( ) No ( )

ii) Do you have children who have dropped out of school because you are unable to pay for their school fees? At what level did the child dropout?

Number of children dropped out	Level at which child dropped out

## Part 2: Resource Distribution

7. Please indicate your best opinion regarding the statements in the table below designed to establish the pattern of resource distribution within the family. Use the rating below where SA- strongly agrees, A- agrees, UD- undecided, D- disagree, and SD- strongly disagree.

Statement	SA	A	UD	D	SD
Family income fairly distributed between husband and wife	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Husband and wife pools income together	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Female has access to critical productive resource e.g. land	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Female has access to family income generating activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Female has lesser access to paid employment and income in general than do men	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Man controls the valued resources in the family such as income, wealth, and income generating activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Part 3: Dimensions of Family Cohesion

1. Please give your opinion to the following which relates to your attitude on alcoholism and family cohesion. Use the rating below where SA- strongly agrees, A- agrees, UN- undecided, D- disagree, and SD- strongly disagree.

		Alcoholic Parent/children				
		Responses				
	Cohesion evaluation statement	SA	A	UD	D	SD
1.	Family members are involved in each others lives	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.	There are strict consequences for breaking the rules in our family	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.	Family members feel closer to people outside the family than other family members	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.	In solving problems, the children's suggestions are followed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.	Family members like to spend some of their free time with others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.	There is no leadership in this family	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7.	It is important to follow the rules in our family	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2. What would you consider to be the state of cohesion/togetherness in this family
- Very good ( )
- Good ( )
- Fair ( )
- Poor ( )

### **APPENDIX 3: INTERVIEW SCHEDULE**

1. Who is the head of the family?
2. How many children do you have in terms of gender?
3. How old is each member of this family?
4. What is the education status of each member of this family?
5. What is the main source of family income?
6. What is the amount of income does the activity you have identified generate per Month and on average what is the fraction of this income is used on alcohol?
7. Under what circumstances do members of this family use alcohol?
8. Who among the members of this family drinks alcohol?
9. Does alcohol usage by the person you have identified in any way affect family cohesion?
10. It appears that many people drink alcohol for various reasons. What would you consider to be the main reason why you or any other person in this family uses alcohol?
11. What would you consider to be the negative consequences of alcohol drinking as portrayed by the behavior of the drunkards?
12. Are you constrained in paying fees for your children schooling? What is the reason(s) for your constraint?
13. Do you have children who have dropped out of school because you are unable to pay for their school fees? At what level did the child dropout?
14. Do you think your family non-alcoholic status has empowered you to pay fees for your children education?
15. Is the family income fairly distributed between husband and wife?
16. Who controls the valued resources in the family such as income, wealth, and income generating activities?
17. Are family members involved in each others lives?
18. Are there strict consequences for breaking rules in this family?
19. In solving family problems, do you consider children opinions?
20. How would you describe the state of harmony and togetherness in the family?

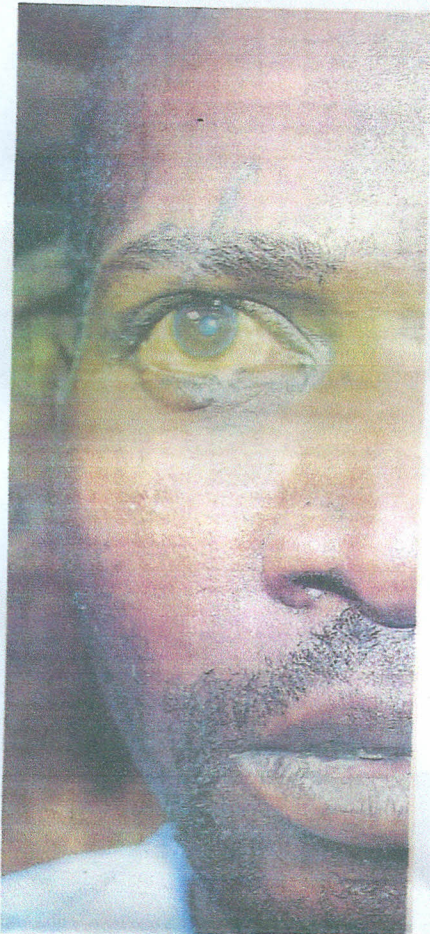
## **APPENDIX 4: ADAPTED PICTURES.**



There is little doubt whether the authorities can rid the streets of drunks. The law proposes that any one who is arrested three times within 12 months for being drunk will, on the third arrest, be confined in a rehabilitation centre ... at their own expense. However, those who are confirmed alcoholics will be invited for rehabilitation at the expense of the liquor industry.

# A portrait of wasted humanity

Caught in a shocking web of fatalism, Kenya's poor will readily take poison in the name of a drink. No lessons are learnt and the macabre ritual of death plays itself out every few months, the latest being just two weeks ago, writes JOHN NGIRACHU





**HELP ME UP:** The new Alcoholic Drinks Control Act becomes operational today and seeks to control binge drinking mostly associated with the youth. [PHOTO: FILE/STANDARD]

# Track star 'was drunk when he fell off balcony'

Woman who was with Wanjiru in his bedroom says she argued with his wife Teresia, who later left the house in a huff

**BY JOHN NGIRACHU**

ngirachu@ke.nationmedia.com

**AND JAMES KARIUKI**

kamaukariuki@gmail.com

**T**he woman who was in the bedroom with marathon world champion Samuel Kamau Wanjiru on the night he died yesterday said she did not think the star wanted to commit suicide.

Ms Jane Nduta said the 24-year-old champion "fell badly" as he ran after his wife, Teresia Njeri, who had just locked them in the bedroom in the couple's Nyahururu home.

Ms Njeri returned home unexpectedly in the middle of the night and found Wanjiru with Ms Nduta in their matrimonial home.

"To me, his intention in jumping off the balcony was not to commit suicide but to go after his wife and get the keys back so that he could open the locked door," Ms Nduta told the *Nation*.

She said she was traumatised by the incident and had moved to her rural home for some time to recover and stay away from Nyahururu Town and the many questions being asked about her.

This emerged as Wanjiru's mother, Ms Hannah Wanjiru, announced that her son would not be buried until investigations into his death are completed.

Ms Wanjiru accused a close relative of killing her son and maintained there was blood in the sitting room and the bedroom. She said "Kamau will not be buried" and wondered why people were asking her about funeral arrangements.

Ms Njeri has asked police for security, saying her mother-in-law "has

been threatening her and sending strange men to her house."

Police are yet to check whether the security cameras that could have recorded the events were working and if there is a record of what transpired that night.

Ms Nduta's presence in the bedroom was the cause of yet another spat between Wanjiru and his wife. The young couple has had a troubled marriage, which at one time landed him in a police cell and in the courts on assault charges.

Ms Nduta, a waitress at Kawa Falls restaurant, which is about a kilometre from the athlete's home, told the *Nation* that Wanjiru was drunk when he got to the bar shortly before closing time, 11pm.

She said they were friends and that he had visited her house at Site Estate, not far from his home.

It was, however, the first time she was going to his home, she said, and only agreed to accompany him after Wanjiru assured her that his wife was not at home.

Ms Nduta said she filled in the records of stock at the bar before they left for Jimrock Restaurant, about 500 metres from Kawa Falls, and Wanjiru took more alcohol and got quite drunk.

"After finishing the drinks, he suggested that we go to his place, but I asked him first whether his wife was at home, and he told me she wasn't and I said we can go ahead," said Ms Nduta.

The woman said when they got home, Wanjiru stopped his car at the gate to talk to the guard first.

He got into the compound and later came to the vehicle and asked the guard to open the gate, then he drove in and parked.

As the guard was locking the door, the two stepped into the sitting room.

The guard, Mr Stephen Maigua, claimed on Tuesday that he did not see any passenger in Wanjiru's car and claimed he was busy closing the gate when his employer entered the