

## Persistence of Alcohol and Drug Abuse among the Youth in the Presbyterian Church of East Africa

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**Abstract:** Global statistics show persistence of alcohol and drug abuse among the youth. In response to this, religious organizations, notably the Christian church have come up with programmes aimed at mitigating alcohol and drug abuse. However, the problem continues to persist despite the significant role religions play in the society. This study sought to investigate why alcohol and drug abuse continue to persist among the youth in the Presbyterian Church of East Africa (PCEA) yet the church has mitigating programmes. The study was guided by Emile Durkheim's Functionalism Theory and Sandra Coleman's Incomplete Mourning and Addict Theory. The accessible population was church elders, Parish ministers, Presbytery moderators, the PCEA Youth Director and the youth members who included the youth abusing alcohol and drugs. Multistage cluster sampling technique was used to select three PCEA regions. Proportional sampling technique was used to get PCEA Presbytery moderators, church elders, Parish ministers and youth members who formed three clusters. Snowball sampling technique was used to get the youth who are abusing alcohol and drugs. Purposive sampling was used to select the Youth Director as a key informant due to his direct knowledge on alcohol and drug abuse mitigation activities in the PCEA. The study had a total sample of 928 respondents. Descriptive survey research design was used to obtain qualitative data. Instruments for data collection were questionnaires, structured interview schedule and focus group discussions. Data collected using questionnaires was cleaned and coded for analysis using statistical package for social sciences. Tape recorded data from the interview was transcribed verbatim. Data was analyzed qualitatively and presented in summary form using frequency tables and discussions. The study established that the foremost reasons for the persistence of alcohol and drug abuse among the youth in the PCEA is peer influence, curiosity and easy availability of alcohol and drugs. The study recommends that the church in collaboration with the government and other stakeholders should initiate income generating projects for the youth with the aim of keeping them busy and to acquire income. The youth can be encouraged to access youth economic empowerment programmes like the youth enterprise fund. The church should work in collaboration with NACADA, national government and other stakeholders in conducting preventive education and awareness programmes on alcohol and drug abuse in the community. The church should also conduct capacity building for parents to address alcohol and drug abuse among the youth by creating forums to share experiences and equip them with guidance and counseling skills. Creating awareness among parents is also key because it will help them increase their appreciation of their unique role in curbing alcohol abuse among their children.

**Keywords:** Persistence, Alcohol and Drug Abuse, Youth.

### INTRODUCTION

Globally there has been rapid increase in production and consumption of alcohol and illicit drugs in the last two decades. According to the United Nations Office on Drugs and Crime [1], there has been an increase in the overall global situation regarding the production, use and health consequences of illicit drugs. According to the United Nations office for Drug

Control and Crime Prevention [2], alcohol and drugs destroy lives and communities, undermine sustainable human development and generate crime.

Alcohol problems, including at-risk drinking, drug abuse and dependence are highly prevalent in many countries in Africa. In Africa, an average of 1 in 18 people suffers from drug-use disorders or drug

dependence with the youth being the most affected [3]. The vulnerability of Africa to drugs and crime remains a grave concern, with increasing seizures of heroin indicating the region's role as a key transit area for global drug trafficking routes [4].

Kenya has also been experiencing rapid increase in production, distribution and consumption of multiple drugs of dependence. At the greatest peril are the youth who are deliberately and tactically recruited into alcohol and drug culture through uncontrolled media influences, curiosity, and peer pressure [5]. The government of Kenya enacted a legal and institutional framework to address the problem of alcohol and drug abuse. In 2007, Parliament ratified the formation of the National Campaign against Drug Abuse Authority (NACADA) with a mandate to coordinate a multi-sectoral effort aimed at preventing, controlling and mitigating the menace of alcohol and drug abuse in Kenya. Among the major objectives of the agency in executing its mandate is to research on various aspects of alcohol and drug abuse and chemical dependence. According to a study by NACADA [6], 8 % of 10-14 year-olds have used some alcohol at least once in their life and about 13 % of them have ever used other drugs such as cigarettes.

A report of PCEA 21<sup>st</sup> General Assembly [7] showed that there was an increase in alcohol and drug abuse among the youth in the Church from 8 to 12 percent [7]. During the PCEA annual youth conference, it was noted that alcohol and drug abuse is one of the greatest challenges facing the youth in the Church. It was agreed that every effort must be made to educate the youth on the dangers of alcohol and drug abuse [8]. In response to the challenge of alcohol and drug abuse among the youth, the PCEA has initiated mitigation programmes. These include youth conferences, seminars, workshops, guidance and counseling, retreats, education on the dangers of alcohol and drug abuse, youth camps, revival weeks and weekend challenges and Bible study among others.

In addition, the PCEA has established a drug education desk which in consultation with Theological Education by Extension (TEE) department and the Presbyterian University of East Africa (PUEA) develops alcohol and drug education materials [9]. The Parish ministers with assistance of church elders are directly involved in coordinating the programmes on alcohol and drug abuse among the youth in the various congregations. Despite the existence of these programmes the problem of alcohol and drug abuse continues to persist. This study sought to investigate why alcohol and drug abuse continues to persist among

the youth in the PCEA yet the Church has mitigating programmes.

### Objectives

The study was guided by the following objective:

- To investigate why alcohol and drug abuse still persists among the youth in the PCEA in spite of the mitigation Programmes being implemented.

### METHODOLOGY

The study adopted a descriptive survey research design where qualitative data was collected in order to assess alcohol and drug abuse mitigation programmes among the youth in the Presbyterian Church of East Africa. According to Mugenda & Mugenda [10], a descriptive survey research design is used when examining social issues that exist in communities. This design was therefore deemed appropriate for this study since alcohol and drug abuse is a social problem which has permeated the society and all youth are at a potential risk. The study was conducted in three regions (Eastern, Nairobi and Mount Kenya) out of the five regions of the Presbyterian Church of East Africa. The choice of the three regions is justified by the fact that the PCEA regions were administratively designed to take care of social, economic and cultural diversity. The five regions of the PCEA include; Eastern Region, Mount Kenya Region, Central Region, Nairobi Region and Rift Valley Region [9]. The five geographical regions have 53 Presbyteries and 400 Parishes. The PCEA 20<sup>th</sup> General Assembly report [7] show an increase in alcohol and drug abuse among the youth in the Church from 8 to 12 per cent. Studies to establish why alcohol and drug abuse continues to persist despite there being mitigation programmes established by PCEA are inadequate. This advised the choice of the study locale.

The Presbyterian Church of East Africa where the study was conducted has five regions which include; Eastern Region, Mount Kenya Region, Central Region, Nairobi Region and Rift Valley Region. The total population of PCEA is about 2,835,000 according to the statistics of Nkonge [11]. The PCEA has a total of 56 Presbyteries each under a Presbytery Moderator and 400 Parishes each under a Parish Minister. The target population for this study was 2,835,000 PCEA members. The accessible population included the Church elders, Parish ministers, Presbytery moderators, the youth director and the youth members who included the youth abusing alcohol and drugs.

Table 1 shows a summary of the population characteristics in the PCEA in Kenya.

**Table-1: Summary of Population Characteristics of PCEA**

Region	No. of Church Members	No. of Registered Youth population	No. of Church Elders	Parish Ministers	Presbytery Moderators
Eastern	667000	10500	1050	70	9
Mt. Kenya	597000	10400	1360	80	10
Nairobi	587000	14400	1152	72	8
Central	717000	16200	1710	90	15
Rift valley	267000	17600	1408	88	14
Total	2835000	69100	6680	400	56

Source: PCEA Records, 2015

Multistage cluster sampling technique was used to select three PCEA regions from the five regions. According to Bordens and Abbot [12] multistage sampling involves identification of large clusters and randomly selecting from among them (first stage), then randomly selecting individual elements from the selected clusters. The three selected regions included Eastern region, Mt. Kenya region, and Nairobi region. Each of the three regions represented a cluster. The choice of the three regions is justified by the fact that the PCEA regions were administratively designed to take care of social, economic and cultural diversity. The researcher used a table developed by Kathuri and Pals [13] to select a sample for the youth members, Church elders and Parish ministers in the three regions. Eastern region has 10500 youth, Nairobi region has 14400 youth and Mount Kenya region has 10400 youth. This gives a total of 35300 youth in the three regions. The sample that corresponds with a target population of 35300 is 379 for youth members. However, the sample frame used was 400 to counter non-response rate. Eastern region has 70 Parish ministers, Nairobi region has 72 Parish ministers and Mount Kenya region has 80 Parish ministers. This gives a total of 222 Parish ministers in the 3 regions. The sample that corresponds with a target population of 222 is 144 for Parish ministers. However, the sample frame used was 150 to take care of attrition. Eastern region has 1050 Church elders, Nairobi region has 1152 Church elders and Mount Kenya region has 1360 Church elders. This gives a total of 3562 Church elders in the three regions. The sample that corresponds with a target population of 3562 is 353 for Church elders. However, the sample frame used was 360 to counter non-response rate.

Proportional sampling method was used to access the youth members, Parish ministers and Church elders in proportion to the way they occur in the population. Eastern region generated  $10500/35300 \times 400 = 119$  youth members. Mt. Kenya region generated  $10400/35300 \times 400 = 118$  youth members while Nairobi region generated  $14400/35300 \times 400 = 163$  youth members. This gave a total population of 400 youth members in the 3 regions. For Parish ministers, Eastern region generated  $70/222 \times 150 = 47$  Parish ministers. Mt. Kenya region generated  $80/222 \times 150 = 54$  Parish ministers while Nairobi region generated  $72/222 \times 150 = 49$  Parish

ministers. This gave a total of 150 Parish ministers in the three regions. For the Church elders, Eastern region generated  $1050/3562 \times 360 = 106$  Church elders. Mt. Kenya region generated  $1360/3562 \times 360 = 137$  while Nairobi region generated  $1152/3562 \times 360 = 116$  Church elders. This gave a total of 360 Church elders in the three regions.

All the PCEA Presbytery moderators in the three clusters were included in the sample. According to Kathuri and Pals [13] a population of ten and below cannot be sampled. Eastern region has nine Presbytery moderators; Mt. Kenya region has ten Presbytery moderators while Nairobi region has eight Presbytery moderators. Snowball sampling technique was used to select the youth abusing alcohol and drugs with the help of Parish ministers. Simple random sampling method was used to select one Parish from among the parishes in each of the three clusters. Each of the Parish ministers in the selected Parishes was asked to identify a youth member abusing alcohol and drugs who in turn identified others to form three Focus Groups of seven youth members in each cluster. This is in line with Kombo and Tromp [14] recommendation that a focus group should have six to eight members.

Purposive sampling was used to select the youth director as a key informant due to his direct knowledge on alcohol and drug abuse prevention activities in the PCEA. This is in line with Creswell's [15] recommendation that the researcher needs to choose respondents based on certain criteria that will help arrive at the respondents who are knowledgeable on the aspects that the study variables seek to investigate. The sample for the study was 928 respondents as shown in Table 2.

Data was collected using four sets of instruments. The instruments were; structured interview schedule, questionnaires, focus group discussions and document review. Saldana [16] says that using multiple data gathering methods guarantees a wider spectrum of diverse perspectives for analysis and representation. Harris [17] argues that limitation of one data collection method can be addressed by an additional method and that multiple data collection methods enhance credibility and trustworthiness. Structured interview guide was used for the PCEA youth Director,

Presbytery Moderators, Parish ministers and Church elders. Questionnaires were administered to the youth members. Focus Group Discussions were used for the youth abusing alcohol and drugs. The researcher

reviewed documents available in the Church to find out how alcohol and drug abuse programmes are being implemented.

**Table-2: The Sampling Matrix**

Category of participants	Population	Sample
Youth Director	1	1
Presbytery Moderators	27	27
Parish Ministers	222	150
Youth Members	35300	400
Church Elders	3562	350
Total	39112	928

Data from the field was cleaned, coded and recorded. Data collected by use of the questionnaires, was coded and analyzed using Statistical Package for Social Sciences (SPSS) version 21 for windows. The researcher interviewed the PCEA youth director, Presbytery moderators, Parish ministers and the Church elders and made a complete and accurate record of the respondents' answers. The respondents' exact words were recorded verbatim. This recording was facilitated by use of tape recorder to ensure that all the details of the interview were captured. The researcher recorded the information solicited from focus group discussions in a notebook for further analysis. Data was analyzed qualitatively whereby the main themes in the responses were identified. Data was analyzed using descriptive statistics including frequency counts, percentages and

means. Data was presented in summary form using the frequency distribution tables.

**RESEARCH FINDINGS**

**Reasons for Persistence Alcohol and Drug Abuse among Youth in the PCEA**

The aim of this study was to gain insight into why the problem of alcohol and drug abuse still persists among the youth in the PCEA despite intervention Programmes being implemented to mitigate the problem. Three hundred and ninety youth respondents filled a questionnaire on the same while the rest of the respondents gave open ended responses.

A summary of the findings obtained from the youth respondents are presented in Table 3.

**Table-3: Reasons for Persistence of Alcohol and Drug Abuse among the youth in PCEA**

Factors	Frequency	Percentage
Peer influence/social influence/social networks	58	15.0
Curiosity/experimentation/adventure/exploration	55	14.0
Lack of parental care/poor upbringing	18	5.0
Idleness/joblessness/inactive engagements	34	9.0
Frustrations	15	4.0
Boredom	23	6.0
Poor role models to emulate/family disruptions	30	8.0
Perverse social media/ media influence	29	7.0
Stress and psychological problems/depression	25	6.0
Pleasure/enjoyment/craving/relaxation	19	5.0
Show-off/prestige	12	3.0
Availability/accessibility at cheap prices	40	10.0
Some see it fashionable "swag"	16	4.0
Permissiveness in society/moral decadence	8	2.0
Systemic abuse and re-lapse	8	2.0
Total	390	100.0

The results presented in Table 3 show factors influencing youths to alcohol and drug abuse. As indicated, majority 58(15%) of the youth reported that they abused alcohol because of peer influence or social influence. The results further show that alcohol abuse among the youth was as a result of several other reasons that included curiosity or exploration 55(14%), lack of parental care or poor upbringing 19(5%), idleness/joblessness or inactive engagements 34(9%),

and frustrations 16(4%). Other salient reasons for youth engaging in alcohol and substance abuse were low self-esteem or hopelessness 23(6%), poor role models to emulate 3(8%), perverse social media or media influence (7%), stress and psychological problems such as depression (6%), pleasure, enjoyment, craving, relaxation 19(5%), show-off or for prestige (3%), availability or accessibility of alcohol and other substances of abuse at cheap prices (10%), fashionable



“swags” 16(4%), permissiveness in society or moral decadence 8(2%) and systemic abuse or re-lapse 8(2%). These are discussed in detail in the following sections:

#### **Peer Influence/Social Influence/Pressure**

These findings are consistent with previous research which suggests that peer groups are markedly influential and substance abuse is especially susceptible to peer influences. Myers [18] found that adolescents who associate with smoking peers have less success with quitting. Adolescents strongly identify with their friends and peers, a phenomenon central to an adolescent’s development of a self-image distinct from one’s family [19]. A verbatim response from Mugambi [20], a youth undergoing rehabilitation qualifies this finding. Mugambi says: I started ‘getting high’ to be “in,” to go along with my friends [20]. In support of Mugambi’s assertion, Rev. Ngere [21] said that some of the youth abuse alcohol and other substances because their friends are doing it or pressuring them to do the same. This was also qualified by Rev. Muriungi [20] who asserted that some teens may give in to the urging of drug-using friends to share the experience with them. As such, the role of peers in youth substance abuse can be understood as part of an adolescent’s social identity (that is, how youth view alcohol and drugs in relation to self and others) and peer selection rather than solely as “peer pressure” [22]. These findings indicate that associating with peers who use drugs regularly increases the severity of drug use among the young adults.

The study further establishes that teens give into peer pressure for many reasons, including: fear of rejection, not wanting to be made fun of, not wanting to lose a friend, not wanting to hurt someone’s feelings, the desire to appear grown up and to appear in control, not having a clear picture of what they want and not understanding how to avoid or handle a situation. Popular celebrities, athletes, and other well-known people, whom teens look up to, also openly discuss their alcohol and drug use, which may influence teens to want to try alcohol or drugs as it seems to be normal behavior. They want to fit in or try it to experience ‘the high’ for. Reverends Murigu, Mugendi and Ndoria [23] support this view by asserting that many youngsters are pulled into drugs by those they associate with. It is learned from those already involved in the practice. Reverends Kirima, Ndanyu and Mwirichia [24] also reported that some youth are influenced by mass media into the habit of alcohol and drug abuse.

Aseltine [25]; Ennett and Bauman [13] and Hoffman *et al.* [14] established that peer influence is a direct and significant predictor of adolescent substance use. Baron and Kenny [26] further support that peer social influence is significantly associated with substance use. The findings of this study therefore suggest that many youngsters are pulled into alcohol and drugs by those they associate with. It is learned

from those already involved in the practice. Bandura and Walter [27] developed a social learning theory of personality which supports this fact. To them, this theory is based on the premise that behaviour is learned and personality can be explained in terms of cumulative effects of a series of learning experiences. The high alcohol and drug abuse rates among youth indicate that addressing peer influences may be particularly important with this population. Peer influence or social influence emerged as one of the causes of alcohol drug abuse among the youth in the PCEA.

#### **Curiosity/Experimentation/Adventure**

Notably, the findings of this study are congruent with the findings of Santrock [28] who reported that some of the youth use alcohol and drugs for the purposes of satisfying curiosity. Reverends Kithinji, Ndoria and Rukenya [29] were of the view that youth are curious to discover the sensations and get unique profound feelings. This argument was also brought to the fore by Rev. Mwirichia and Rev. Ndumia [24] who asserted that the youth drink alcohol and take other drugs because they desire to try new things. They want to know what it feels like to be drunk, intoxicated, or high.

Imbosa [2] asserts that the youth curiosity to adventure on alcohol among other drugs is partly aroused by seductive advertisement on print and electronic media which make the youth falsely believe that it is good to take drugs to satisfy their curiosity.

#### **Lack of Parental Care/Poor Upbringing**

In their study seeking to find out familial, social and individual factors contributing to risk for adolescent substance use, Whitesell, Bacand, Peel and Brown [1] observed that poor upbringing of children or lack of parental care exacerbates the problem of substance abuse among youth in such family settings. Parental examples of using drugs and alcohol can be even more traumatic than peer pressure.

When interviewed Reverends Muriungi, Murigu and Ngere [20] indicated that,

*Parents are no longer in the firm position to direct and guide their children. Some of the youth live far away from their parents, either in school or other learning institutions or may be working. Lack of parental care due to the working situations of the mother or both parents and the disintegration of joint family system have tended to encourage the vice. The child relationship with the parents especially the mother is very important in the child development as it shapes the child behavior.*

Parents are role models, whether or not they choose to be, and while few mothers and fathers hand their children illicit substances, many make statements and take actions that insinuate using drugs is the grown-

up thing to do. Manufacturing, selling, possessing, or taking drugs by parents can also send the message that drugs and alcohol are okay.

### **Idleness/Joblessness/Inactive Engagements**

The findings of this study are consistent with Agrawal and Dick [30] who found that the youth generally consume alcohol and other drugs mainly because they are idle or have no meaningful engagements. Reverends Mwangi, Kimathi, Nyaga and Gitau [31] supported this by saying,

*In trying to keep themselves busy, idle youth often find themselves indulging in alcohol and substance abuse. Further, this clergy reported that there are many youths in PCEA who are alcoholic. Some have resulted to alcoholism due to unemployment, idleness and general lack of engagement.*

This implies that providing the youth with work that engages them could be a good recipe towards curbing the problem of alcohol and substance abuse among the youth.

### **Frustrations of Life**

Merton [12] emphasizes that if an individual finds no avenue towards achievement of his goals he may be compelled to indulge in the anti-social behaviour and one way of doing that is by retreating from social participation through drug addiction. An excerpt from Rev. Kithinji and Rev. Mungai [32] reveals that frustrations and emotional stress due to failures, sorrows of miseries of life lead the youth to drug abuse.

Frustrations in life can be caused by several factors. This could arise from inability to perform well in class and meet expected standards, inability to meet ones' goal or lack of satisfaction in the family or work place. This makes an individual/ student to engage in other activities like drug taking which result to strike and riots in school. Frustrations and emotional stress due to failures, sorrows of miseries of life lead people to drug abuse. Merton [12] talks of differential opportunity causing frustration that drive people into antisocial behaviour. Merton says that modern societies put a very high premium on material success, the form of wealth by which education opens the doors to this success and status symbols but at the same time the same societies fail to make adequate institutional means for the average person especially the poor in slums to achieve the goals.

### **Boredom**

Miller [33] suggests that boredom or even fear of it motivates youngsters to engage in anti-social behaviour. In support of this, Rev. Kiriungi pointed that: boredom is a precursor for youth engagement in alcohol and substance abuse in many communities. It is however more perverse in urban areas where agents of

socialization are limited. Drug abuse may therefore be a satisfying form of recreation and it is difficult for the community to substitute an equally thrilling but more convectional form of diversion.

### **Broken Homes /Family Disruptions**

According to Davis [5] children need both parents to grow up as a normal law-abiding youth. The community has failed to live according to the expected moral standards. The parents and teachers expose their behaviour to the teens which they tend to copy. This has influenced the young as they imitate the elders in all manners. This has led to disrespectful children, unruly behaviour when children cannot be corrected. One of the clergy Rev. Mugendi [10] had this to say in relation to broken homes in Kenya exacerbating the percentage of the youngsters involved in alcohol and drug abuse,

*Broken homes in Kenya have caused or increased the percentage of the youngsters involved in drug abuse. But more distractive than the broken homes in a child's growth is where parents live together in atmosphere of tension and unhappiness.*

Due to the disruption of family relationships and separation from social institutions (such as schools), homeless peers often become the primary social support network for homeless young adults. Homeless young adults draw upon peer relationships to fulfill multiple needs including love, companionship and safety. These peer relationships often provide an educational function to newly homeless youth regarding street survival. The relationships between homeless young adults may provide a supportive function by protecting the individual, especially newly-homeless young adults, from the adversity of the street lifestyle. Despite the benefits of homeless peer relationships; young adults often emulate the behavior of their peer group, especially concerning substance abuse.

Studies conducted by Ngesu *et al.*, [34] in Kenya show that parenting practices have a lot of influence on early initiation into the use of alcohol and drugs by the youth. For example, parents who communicate and are involved with their children at ages 10 and 11 and who set clear expectations for their children's behavior, practice good supervision and consistent discipline, and minimize conflict in the family have children who are more likely to see alcohol use as harmful. They are also less likely to misuse alcohol at ages 17 to 18 [35]. Lack of parental support, monitoring, and communication and lack of feeling close to their parents have been significantly related to frequency of drinking, heavy drinking, and drunkenness among adolescents [34]. Harsh, inconsistent discipline and hostility or rejection towards children has been found to significantly predict adolescent drinking and alcohol-related problems [36].

### Media Influence

Media was cited as a factor influencing the youth to begin consuming alcohol and drugs. Maithya [11] reports that: mass media, advertisement, radio, television, newspaper and the internet have promoted alcohol and drug abuse. Electronic media frequently, and sometimes inadvertently, portrays alcohol consumption and drug-taking in a positive light. Many movies, television shows, advertisements, and other forms of mass media show young people using and enjoying substances without negative consequences. The youth have tended to imitate the advertisers and even tried to experiment some of the adverts. The implication of this is that campaign against alcohol and drug abuse via print and electronic media can also be an avenue to have positive influence on the youth avoidance to alcohol abuse. When interviewed to give views on media influence and youth use and abuse of alcohol and drugs, Rev. Ndoria indicated that most of the youth involved in drug abuse have access to the media such as music, movies, and television programmes that glorify drugs.

### Stress and Psychological Problems/Depression

The study further revealed that 6% of the respondents believed that stress and psychological problems such as depression exacerbated substance abuse. Regarding stress or depression being a cause of alcohol and drug abuse among the youth, Rev. Muriungi [20] responded in the affirmative by asserting that,

*Among the common reasons for youth to abuse alcohol among other drugs is stress derived from daily life experiences. Adolescents that are stressed or depressed as a result of broken relationships can result to alcohol drinking". Teens are dealing with a heavy mix of emotions, and they think that drugs can help numb any pain and make them feel better even when times are tough.*

This supports previous research by NACADA [5] suggesting that those who use alcohol are more likely to abuse drugs and this becomes a common and normative daily activity that provides not only respite from the daily stress of living, but an activity around which social and emotionally supportive interactions occur.

### Pleasure/Enjoyment/Craving/Relaxation

Mutie and Ndambuki [37] argue that some youth in Kenya take drugs because of the "pleasure principle". A qualitative response gotten from Rev. Ndanyu [38] supports this by saying,

*Some youth take drugs because they want to feel "high". These young people do not suffer from stress or money is not their problem. They come from well-to-do families, with video and television sets, computer games and cars at their disposal. Materially they lack nothing.*

*They take drugs for pleasure of it and more fun. They want to feel good.*

Santrock [28] and Papalia [37] established that drugs provide pleasure by giving inner peace, joy, relaxation and exhilaration. Ndambuki and Mutie [39] have the same sentiments when they add that drugs help the adolescents to escape anxiety and emotional problems. Mutie and Ndambuki [37] further argue that when drugs are taken over long periods for fun and pleasure, addictions sets in. Young people abuse drugs out of mixed motives many of, which are unclear to them. For instance, Mutie and Ndambuki [37] argue that adolescents today begin drinking early, consume large amounts of alcohol and remain 'high' for pleasure, enjoyment and so on. The social reasons influence adolescents to abuse drugs because they want to feel more comfortable and to enjoy the company of peers.

### Prestige and Show Off

This study further established that 3.0% of the respondents felt that some youth drunk alcohol and took drugs for prestige and show off. The act of taking alcohol and drugs for prestige and show-off are supported by Muchemi [40] in a study of drug and substance abuse among youth in the informal settlements within Nairobi. Regarding prestige and show-off being a cause of alcohol and drug abuse among the youth, Rev. Ndumia [24] responded in the affirmative by asserting that prestige has become a strong force, motivating the youth to abuse alcohol and other substances as they intend to attract people's attention to admire them.

### Availability and Accessibility

Ten percent of the 390 youth that were surveyed indicated that availability or accessibility to alcohol and drugs sources at cheap prices induced them to abuse alcohol and drugs. Availability of drugs has to do with questions of whether drugs can be within reach of the abusers easily. The assumption is that if the substance is easily accessible, the motivation to abuse becomes higher than if it was hard to get. In some cases, drugs are readily available for example cigarettes in shops, cheap alcohol in wines and spirits shops, khat, marijuana etc. some students are used by dealers to peddle drugs and this increases accessibility of drugs to adolescents. Breakdown of social structure; modern society has become more tolerant to immorality. This is reflected by the qualitative responses generated from elders Kimathi, Kithinji, Murigu, Muthomi and Mwangi [29],

*Alcohol and drugs abused are available next to every family's door. They are available everywhere anytime, in kiosks, bars, social gatherings and over the counter. They are available in every street corner, sold by the street people and other specialized gangs. This makes the youth vulnerable.*

### **Fashionable “swags”**

Some see it fashionable “swags”. The slang word “swag” generally means to have or do something that is “cool”. Rev. Gitau and Kirima [41] stated that the perceived misconception that taking alcohol makes you appear cool, smooth, looking good, stylish and having lots of money to flash during drinking spree to draw the attention of others compels many youths to abuse alcohol and drugs.

In a study of childhood and adolescent predictors of alcohol use and problems in adolescence and adulthood in the national child development study, Maggs, Patrick, and Feinstein [42] established that many young adults begin to take and abuse alcohol because they have a false perception that it is fashionable.

### **Permissiveness in Society/Moral Decadence**

The global drug survey report [4] indicated that many young people below age 30 use alcohol because they are exposed to consumption at home or in other environments. This is reflected by the qualitative responses given by elders Maina, Wambugu and Gitonga [43],

*Alcohol and drugs are being used and abused everywhere. Traditionally, alcohol was a preserve of the old and used on special occasions. Today, everyone is using alcohol. The permissiveness in society exacerbates the problem.*

Acuda, Othieno, Obondo and Crome [44] support this by arguing that children and youth start using psychoactive substances in the context of personal and environmental exposure. Furthermore, regular recreational exposure and alcohol drinking by adults in the society is a strong predictor of alcohol abuse and dependency among the youth.

### **Systemic Abuse and Re-lapse**

Relapse can be defined as to fall or slide back into a former state. When a substance abuser relapses it means that they have returned to using alcohol or drugs after a period of being sober. A relapse trigger is an event that gives the individual the justification to return to this behavior. Hawkins, Catalano and Miller [35] study of risk and protective factors for other drug problems in adolescence and early adulthood found that the most common relapse trigger is self-pity whereby addicts expect too much from other people. Self-pity is a wasted emotion in recovery because it makes the individual powerless and unwilling to deal with the real cause of their problems. This is reflected by the qualitative responses obtained from Rev. Kaburu [45] and Rev Maina [43],

*Expecting too much from other people is common relapse trigger for addicts to have low expectations for themselves but high expectations for everyone else. This*

*way of thinking is destructive because it always leads to disappointment and pain.*

Hawkins, Catalano and Miller [35] also established that lying and other forms of dishonesty triggers addiction re-lapse. When people enter recovery, they are deciding to have a more honest approach to life. While trapped in the midst of addiction the individual will have been trapped in delusion and denial. In order to maintain the addiction, they would have also needed to behave dishonestly. Dishonesty prevents them from finding real happiness in recovery and may eventually cause them to relapse.

### **CONCLUSION**

Based on the findings of this study, the foremost reasons for the persistence of alcohol and drug abuse among the youth in the PCEA are: peer influence, curiosity and easy availability of alcohol and drugs. Other salient reasons include: lack of parental care, idleness, lack of engagement and frustrations, low self-esteem or hopelessness, poor role models, perverse social media or media influence, stress and psychological problems such as depression, pleasure or enjoyment/craving/relaxation, show-off or for prestige, fashionable “swags”, permissiveness in society or moral decadence and systemic abuse or re-lapse.

The church should work in collaboration with NACADA, national government, county government and other stakeholders in conducting preventive education and awareness programmes on alcohol and drug abuse in the community. The church should also conduct capacity building for parents to address alcohol and drug abuse among the youth by creating forums to share experiences and equip them with guidance and counseling skills. Creating awareness among parents is also key because it will help them increase their appreciation of their unique role in curbing alcohol abuse among their children.

The church in collaboration with the government can establish preventive, treatment and rehabilitation services that are affordable and within reach so that the youth can make use of such services. Parents also need to be made aware of such services. The church should lobby the government to come up with stricter laws on alcohol and drugs with severe penalties for those who supply alcohol and drugs to minors. The church in collaboration with the government and other stakeholders should initiate income generating projects for the youth with the aim of keeping them busy and to acquire income. The youth can be encouraged to access youth economic empowerment programmes like the youth enterprise fund.

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