

|| EFFECT OF ILLICIT BREW AND DRUG ABUSE ON THE LEVEL OF YOUTH
PARTICIPATION IN DEVELOPMENT ACTIVITIES: A CASE OF NDUMBERI
LOCATION IN KIAMBU DISTRICT ||

By

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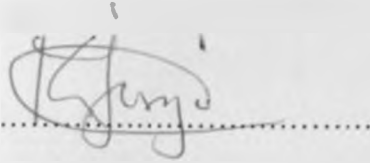
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A RESEARCH REPORT SUBMITTED IN PARTIAL FULFILMENT OF THE
REQUIREMENT FOR THE DEGREE OF MASTERS OF ARTS IN PROJECT
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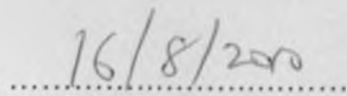
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DECLARATION

I hereby declare that the contents of this research report are original and that the work has not been submitted to any other university or institution for award of a degree.



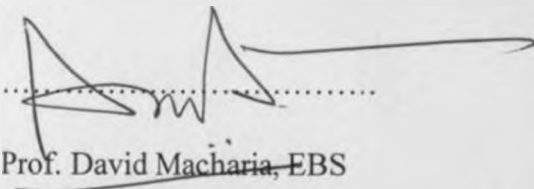
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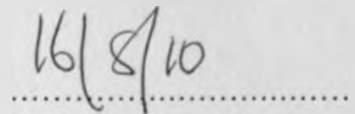
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This research report has been submitted for examination with my approval as a supervisor of the University of Nairobi.



Prof. David Macharia, EBS



Date

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University of Nairobi

DEDICATION

My dedication goes to my parents David Kariuki and Mary Nyambura, My brothers and sisters, Wife Rose. Son David and Daughter Mary not forgetting Dr Bransford for making me who I'm today.

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ABBREVIATIONS AND ACRONYMS

HIV	Human Immune Virus
AIDS	Acquired Immune Deficiency Syndrome
NACADA	National campaign against drug abuse
LSD	Lysergic acid diethylamide
DUF	Drug use forecast
PRIDE	Parents' Resource Institute for Drug Education
WHO	World Health Organization
IDUs'	Injecting Drug Users
UNODC	United Nation Office on Drug and Crime
AMS	American Cancer Society
E.T.S	Environmental Tobacco Smoke
KNH	Kenyatta National Hospital
NGO	Non-governmental Organisation

ABSTRACT

This research study was an investigation into the effects of illicit brew and drug abuse on youths' level of participation in development activities: a case of Ndumberi location in Kiambu District. This study covered all the three sub-locations in Ndumberi location each given equal coverage.

The objective of the study was to establish how the effects of illicit brew and drug abuse on youth affect their level of participation in development activities in Ndumberi location. The following four effects of illicit brew and drug abuse among the youth aged between 16-30 years were investigated; youths' poor health, school dropping out, engagement in criminal activities and family break-up.

A multi-stage sampling technique was used where Ndumberi was divided into three clusters each cluster being equal to a sub-location, from each cluster a purposive sampling technique was used to select the sample units, which was combined from each cluster to form one representative sample for the whole location from where the deductions about the population were made.

This research study gathered both qualitative and quantitative data. Data analysis was done using Statistical Package for Social Sciences (SPSS) software. Findings were presented using percentages and frequency distribution tables. Analysis was followed by interpretation and discussion. Conclusion and recommendations were then made.

According to Hawkins et al,(1992) young people who persistently abuse substances often experience an array of problems, including academic difficulties, health-related problems (including mental health), poor peer relationships, and involvement with the juvenile justice system. Additionally, there are consequences for family members, the community, and the entire society.

From the research findings majority of the youth confessed that substance abuse indeed reduces the level of the abusers' participation in development activities. This is caused by various reasons which includes: poor individual health, being arrested by police due to involvement in criminal activities, the abuser being mistrusted by both family members and public hence no one is willing to work with them and self isolation due to ones' low self esteem. This has been a big blow to the country's economy.

CHAPTER ONE

INTRODUCTION

1.1. Background of the study

Abuse of substances, both licit and illicit is a cause of concern not only because of the health of the individuals concerned but also due to the socio-economic consequences and the devastating impact on close family members. The economic liberalisation process in Kenya has seen manufacturers of alcohol and tobaccos aggressively market their products through advertisements in the mass media and various sales promotions. This has resulted to a lot of youth being attracted to the drugs abuse and as a result of the effect of substance abuse; their participation in development activities has declined. (Othieno et al, 2000)

In pre-colonial days, drugs and alcohol were used and consumed as part of the cultural traditions of the community. The traditional rules and values of most African cultures strictly prescribed the circumstances under which drugs and intoxicants could be obtained, used and consumed. Drinking alcohol was generally the prerogative of the elders-more often than not, of the male elders. So was the use of tobacco. Restrictions were placed on youth, but both men and women elders were free to use it. Drug abuse as a social problem did not exist because strong social cohesion acted as a mitigatory mechanism. The close-knit social communities were torn apart however, by the economic policies of colonialism, which emphasized individualism rather than the well-being of the communities. Colonialism thus eroded the powers of censure and control of the family, and weakened traditional family solidarity. The process of urbanization also led to social atomization, as the values of individualism took root and spread (Mwenesi, 1996),

Alcohol and drug use has been an integral part of societies throughout history. Use of drugs has been accepted and considered statistically normal in many parts of the world especially among the elderly. Only recently, we have become aware of the dangers involved in the use of drugs. Even when the use of drugs was an acceptable practice, certain individuals were thought to have 'problems' with drugs. Use of drugs therefore turns to abuse of drugs when individuals violate societal norms for the frequency, duration and intensity of ingestion or norms governing the social context within which the substances are used (Miruka, 2006).

Drug and illicit brew addiction has now become a serious problem in Kenya especially among the youth. It is the cause of death of hundreds of people and destroys happiness and peace in the family and society. In many urban places there are many more drinking dens, both licensed and unlicensed, than churches mosques, temples, schools, food kiosks and shops put together. Any hour is drinking hour. You will gladly be served with illicit brew or alcohol at six in the morning. It is done behind the authorities' camps. In return illicit brew is causing untold suffering to the people. There are men who will never know the joy of impregnating a woman. This has been echoed by furious demonstrating women all over this nation. Women drinkers are not spared either. They may never know the joy of carrying a healthy baby in their wombs or cuddle one in love. Some schools have registered a significant fall in the nursery class intake. (Hart, 2009)

Most addicts are poor, there drink that is the source of their addiction is cheap, and they take local brews that cost 10 shillings, which is equal to 0.1 dollars. This in most cases leads them to the fastest way of getting drunk with little regard of hygiene under which the substances were prepared and also the content of the brew, leading to a lot of deaths among the substance consumers. (Njuguna, 2010)

According to Munira (2005) Statistics of illicit brew crisis in Kenya (1998-2005) are as follows: In August, 1998 in Nairobi more than 80 people died in Kenya after drinking chang'aa or methanol poisoning.

In November, 2000 in Nairobi, 512 people admitted for "Chang'aa" intoxication at Kenyatta National Hospital. Out of 512 admitted; 137 people died, 20 people became blind, Others visually impaired and physically disabled. In July, 2005 in Machakos 50 people died of 'Chang'aa' poisoning.

In April 2010, 15 people died in Shauri Moyo Nairobi and 10 became visually impaired due to "chang'aa" poisoning. In all the cases most of the affected were the youths thus depriving the country the most potential population to participate in development activities.

According to the "United Nation Office on Drug and Crime" (U.N.O.D.C) survey (2006), the respondents generally did not know any sources of help for drug abusers, but they were of the opinion that prisons and approved schools failed to meet their needs. Parents in particular, were

frustrated that apart from turning their offspring over to law enforcement agencies or taking them to mental health institutions, there is no other source of help. Pupils and students felt that schools where counseling was available provided some relief. U.N.O.D.C annual prevalence of abuse as percentage of population aged 15-60, shows that Kenya is first in East Africa on abuse of cocaine by 0.1 million, second in east, north and central Africa on abuse of cannabis sativa by 4.0 million to Mauritius which host 7.2 million, Kenya is also second to Mauritius in abuse of opiates in north and East Africa by 0.2 million to Mauritius which hold 2.0 million of its population. Kenya is therefore evident that will face more addiction and other drug abuse related diseases.

According to America Cancer Society (AMS) tobacco statistics account for the loss of 4 million every year worldwide, and that by the year 2030 the number will be likely 10 million, (AMS) also account that 53,000 die each year from effect of ETS. The rise of addiction in Kenya has taken a drivers' seat because the government and major NGO are relaxed on its prevention unlike the fight on HIV/AIDS. About 95% of Kenyan community is unaware of the effect of alcohol and drug abuse.

It is also certain and of warrant serious consideration that most of crimes are associated with drug abuse. In the year 2004, there were 1,140 murders, 16 incident of manslaughter, 2,190 rapes and 4,650 drug seizers thus claiming lost of lives in Kenya. Crime statistics therefore raise yearly. At the other hand, a study conducted by KNH show that Kenya nearly spends Ksh 7, 000 on each victim who get admitted to government hospital on alcohol related accident, the study supports that there is increase of alcohol related accidents from 20 percent to 43 percent. (Miruka, 2006)

The youth are dying morally, socially, psychologically, economically and physically from drug abuse and addiction as the drug barons and peddlers bask in the dark glory of plagued monetary gains amid the incessant catastrophe. Many are now asking whether the relevant authorities are doing enough, with revelations that law enforcement agents are being bribed by drug barons so as to allow them to perpetuate their illicit trade. The duty of parents in looking after their youth has also come into serious focus here. Before anything else, parental care is the most important control and preventive measure against drug abuse and addiction. Are they, the parents, really

doing enough to guide and be with their children at all times? Who is going to come up with legislation, which effectively outlaws drugs? Are our youth going to be left at the mercy of drug dealers? (Affray, 2004)

This has shown a very big gap between the levels of understanding among the drug consumers of the dangers they are exposed to when abusing these drugs. Another gap also exists in the government policies in place to prevent illicit brew and drug abuse among the consumers and especially the youth, this as a result has affected the youths who are the majority in participating in various development activities in Kenya. This research is meant to assist in bridging these gaps by creating awareness among the consumers especially the youth and their parents and also exposing the magnitude of these effects on the Kenyan economy, for the government to facilitate policy making.

1.2. Statement of the problem

The increase in the rate of illicit brew and drug abuse among the youth has caused major concern not only in Kenya but the world at large; this was because of their effect on the youths' level of participation in development activities. For instance the recent media reports about Shauri Moyo in Nairobi where fifteen consumers of illicit brew died and a number of others went blind, majority of whom were youth; this has greatly reduced the of the affected to participate in development activities in the region due to poor health, not forgetting a number of women demonstrations in Ndumberi and Ruaka locations in Kiambu district complaining of their sons or husbands involvement in abuse of illicit brew hence becoming ineffective in the family matters. Ndumberi location was mostly considered for this research because, despite its proximity to Kiambu town and with a lot of government funded projects through various devolved funds, the level of youths participation in development activities is very low especially the male, leaving almost everything to old men, women and children as shown by the records in the Kiambu district development officer office and the community development assistants office.

A lot of research have been conducted on the effect of illicit brew and drug abuse on different aspects of human life, but very little has been done to establish how these effects affect on the substance abusers' level of participation in development activities. This was meant to bridge

this gap by establishing how these of substance abuse on youth affect their level of participation in development activities. It was based on the four main effects of substance abuse, which includes: high level of youths' school dropping out leading to low literacy among them, Poor health as a result of sickness, youths' engagement in criminal activities and family break-up.

1.3. Purpose of the study

This study was conducted to investigate how the effects of illicit brew and drug abuse among the youth aged between 16 to 30 years affect their level of participation in development activities in Ndumberi Location.

1.4. Objectives of the study

This study was based on the following objectives:

- i) To investigate how poor health among the youth affects their level of participation in development activities.
- ii) To establish how dropping out of school among the youth affects their level of participation in development activities.
- iii) To establish how youth engagement in criminal activities affects their level of participation in development activities.
- iv) To investigate how family break-up affects the level of youth participation in development activities.

1.5. Research questions

- i. To what extent does youths' poor health affect their level of participation in development activities in Ndumberi Location?
- ii. To what extent does youths' school dropping out affect their level of participation in development activities in Ndumberi location?
- iii. To what extent does the youths' engagement in criminal activities affect their level of participation in development activities in Ndumberi Location?
- iv. To what extent does family break-up affect the level of youths' participation in development activities in Ndumberi Location?

1.6. Significance of the study

This research was conducted with the aim of collecting information concerning the youth involvement in illicit brew and drug abuse and how this affects their potential to carry on the development activities. The information gathered was recommended to the Kenyan government for purpose of policy making, it was also communicated to the parents of these youth to make them aware of the magnitude of the problems facing their children. In addition to these; the compiled report was used to warn the youth of the harmful consequences of abusing these substances to their future aspirations and development plans, This research was conducted to increase the knowledge level of the researcher on matters pertaining to illicit brew and drug abuse among the youth.

1.7. Limitations of the study

This study touches on sensitive issues among the youth in the region which could result to low response; this was over-come through clear explanation to the respondents to ensure that they understand the purpose of the research study; some secondary data was also obtained from the hospitals, DYO office and provincial administration offices in the region to verify the accuracy of the information given, the study also targeted the current and former illicit brew and drug abusers for the purpose of comparison. The other challenge was on the large target population from whom the information was collected in the location; to overcome this data was collected from sample units selected purposively from the target population, and use of a well prepared and pilot tested questionnaire to ensure uniformity of the data collected. The main limiting factors of the study are time frame that the research need to be completed and finances.

1.8. Delimitations of the study

The coverage of the research was Ndumberi location, which comprises of three sub-locations. This study was only targeted to the out of school youth aged between 16 to 30 years living within Ndumberi location. This study was conducted to investigate how the four known effects of illicit brew and drug abuse among the youth affect their level of participation in development activities. The effects to be investigated are youths' school dropping out, poor health, engagement in criminal activities and family break-up. The study involved collection of data from the current and former illicit brew and drug abusers, and other key informants as outline

in chapter three on target population. It also came-up with the recommendations on policy issues which needed to be in place to improve the situation.

1.9. Assumptions of the study

- i. The respondents answered questions correctly and truthfully.
- ii. All the respondents interviewed had the potential to participate in the development activities of Ndumberi location.

1.10. Definition of significant terms

A drug	It is any substance that when absorbed into human bodies modify one or more of their physiological functions. In this case the term is generally used in reference to abused substances.
Alcoholism	It is an excessive habitual consumption of alcoholic beverages despite physical, mental, social, or economic harm, or continued consumption of illicit brew without self control
Drug abuse	It is basically the use of substances that adversely affect the health and productivity of the user. The multiplier effect is that the whole society suffers
psychoactive substance	Something that people take to change the way they feel, their process of think or behave.
Flash blood	It is a cash-saving technique where a user injects himself with illicit substances and then draws a syringe full of blood which he passes to a second user to inject himself.
Youth	Is an individual male or female aged between 16 to 30 years
Substance abuse	Refers to the harmful or hazardous use of psychoactive substances, including illicit brews and drugs.
Illicit brew “Chang’aa”	It is a brew laced with methanol which is poisonous, highly flammable and very toxic
Development Activities	They are activities conducted with the purpose of improving the living standards of the individual, family, community or all.

CHAPTER TWO

LITERATURE REVIEW

2.1. Introduction

This chapter presents literatures that are related to the illicit brew and drug abuse studies which have been studied elsewhere both in Kenya and other parts of the world. It shows the magnitude of illicit brew and drug abuse and its effect on the abuser and how these effects affect their level of participation in development activities. The literatures will include the effect of substances abuse on the literacy levels as a result of youth school dropping out, health of the youth, effect on family due to family break-up and youth involvement in anti-social behaviours or crimes. It also explains the various reasons that makes one to become a drug abuser and at what stage in life.

2.1.1. Stages of risk factors and protective factors. (Start of drug abuse)

Risk and protective factors can affect children at different stages of their lives. At each stage, risks occur that can be changed through prevention intervention. Early childhood risks, such as aggressive behavior, can be changed or prevented with family, school, and community interventions that focus on helping children develop appropriate, positive behaviors. If not addressed, negative behaviors can lead to more risks, such as academic failure and social difficulties, which put children at further risk for later drug abuse. (National institute on Drug Abuse Report, 2008). The Table below describes how risk and protective factors affect youth in five domains, or settings, where interventions can take place.

Table: 2.1: Risk and protective factors five domains

	Risk factors	Domain	Protective factors
1	Early Aggressive Behaviour	Individual	Self Control
2	Lack of parental Supervision	Family	Parental Monitoring
3	Substance Abuse	Peer	Academic Competence
4	Drug Availability	School	Anti Drug use Policy
5	Poverty	Community	Strong Neighbourhood Attachment

Risk factors can influence drug abuse in several ways. The more risks a child is exposed to, the more likely the child will abuse drugs. Some risk factors may be more powerful than others at certain stages in development, such as peer pressure during the teenage years; just as some protective factors, such as a strong parent-child bond, can have a greater impact on reducing risks during the early years. An important goal of prevention is to change the balance between risk and protective factors so that protective factors outweigh risk factors. (National Institute on Drug Abuse Report, 2008). Association with drug-abusing peers is often the most immediate risk for exposing adolescents to drug abuse and delinquent behavior. Other factors—such as drug availability, trafficking patterns and beliefs that drug abuse is generally tolerated—are risks that can influence young people to start abusing drugs.

According to NIDA report (2008), research has shown that the key risk periods for drug abuse are during major transitions in children's lives. The first big transition for children is when they leave the security of the family and enter school. Later, when they advance from elementary school to middle school, they often experience new academic and social situations, such as learning to get along with a wider group of peers. It is at this stage—early adolescence—and children are likely to encounter drugs for the first time. When they enter high school, adolescents face additional social, emotional, and educational challenges. At the same time, they may be exposed to greater availability of drugs, drug abusers, and social activities involving drugs. These challenges can increase the risk that they will abuse substances.

When young adults leave home for college or work and are on their own for the first time, their risk for drug and alcohol abuse is very high. Consequently, young adult interventions are needed as well. (National Institute on Drug Abuse Report, 2008)

2.1.2 The global burden due to youths' illicit brew and drug abuse

Psychoactive substance use poses a significant threat to the health, social and economic factors of families, communities and nations. The extent of worldwide psychoactive substance use is estimated at 2 billion alcohol users, 1.3 billion smokers and 185 million drug users. In an initial estimate of factors responsible for the global burden of disease, tobacco, alcohol and illicit drugs contributed together 12.4% of all deaths worldwide in the year 2000.

Table: 2.2. Percentages of mortality due to different drugs

Type of drug	Mortality (% of all deaths worldwide)
Tobacco	8.8
Alcohol	3.2
Illicit Drugs	0.4
TOTAL %	12.4

The global burden of these three psychoactive substance categories varies across the WHO Regions. The level of economic development in countries also plays an important role. The burden from psychoactive substance use is higher in the developed countries than especially in the high mortality developing countries. The sex ratio attributable to deaths of psychoactive substance use varies from 80% male for tobacco and illicit drug use and 90% for alcohol. Illicit drug use inflicts its mortality burden earliest in life, alcohol also mainly (65%) before the age of 60, while 70% of the tobacco deaths occur after the age of 60 (World Health Organization Report, 2002).

According to the world drug report (2008), at least 39 percent of the world population consumed heroine while another 36 percent smoked bhang, 11 percent chewed Miraa/Khat and 10 percent used cocaine.

2.1.3 Illicit brew and Drug abuse among youths in Kenya

Kenya, like many other developing countries, has limited resources to cover the basic needs of its people. Abuse of the drugs among the youth not only drains the economy because controls of supply and demand reduction are expensive undertakings but also deals a blow to the country as its youth become less productive. The overall picture has shown a steady upward trend in drug peddling (Parker, 1987)

According to World Drugs Report 2008, heroin is consumed by 38% of the Kenyan population, cannabis by 36%, Miraa (Khat) by 11% and cocaine by 10% of the population. A United Nations Office on Drugs and Crime (UNODC) study in April 2007 mapped over 12,000 heroin

users and 103 drug dens in Nairobi and Coast Province. More worrisome statistics came from a NACADA Authority survey of 2007 that showed about 40% of Kenyans aged between 15 and 65 years have drunk one type of alcohol or another, and that at least 13% of people from all provinces in Kenya except North Eastern are current consumers of alcohol. Worst hit are the youth, the 2007 study found that alcohol is abused by 77% of youths out of school and 28% of youths in school. It also established alcohol, tobacco and bhang as being the most easily known substances by over 50% of 15-65 year-olds. (NACADA, 2010)

Kenyan youth face the greatest risk, being targets for recruitment into the abuse of drugs by drug barons. It is increasingly clear that nearly 92% of the youth experiment with drugs during the growing up process. Drug abuse is, therefore, an issue that not only involves the secondary school students and youth at large but is also a National issue. Several strikes that have occurred in schools in the past have usually been attributed to drugs without any concrete evidence. (Otieno & Ofulla, 2009)

According to statistics by Nacada (2007), some 12,201 Kenyan abused heroine with Nairobi and Mombasa recording 6,519 and 5,682 cases of the hard drug respectively. These statistics are based on mapping out exercise carried out by the authority in all provinces. According to the authority more than 50 per cent of Kenyans between ages of 15 to 65 years mostly abused alcohol, tobacco and bhang with another 19 percent abusing heroine and 29 percent abused hashish. (Kamore, 2009)

2.1.4 Levels of Illicit brew and drug abuse in six provinces in Kenya.

According to rapid assessment of drug abuse in Kenya (1996) (a case study of drug abuse in six provinces in Kenya) where a total of 383 drug abusers were interviewed, the results shown in Tables below were obtained. Commonly abused drugs among street children, the first drug of abuse is usually tobacco, followed by gasoline and then glue. When a little older, they start on cannabis "and are ashamed to be seen sniffing glue". Abuse of solvents, however, is not confined to street children. Adults also reported abusing gasoline and glue when "nothing else was available". Khat has taken a hold in varying degrees throughout the country. Although herbal cannabis is widely abused, the abuse of resin or hashish was also found in the coastal region.

Table: 2.3: Commonly abused drugs by region

Drug	Number of abusers					
	Nairobi (65)	Coast (51)	Rift valley (46)	Eastern (76)	Western/Nyanza (77)	Central (68)
Alcohol	40	22	30	55	38	40
Amphetamine	29	18	15	30	4	21
Cannabis	45	30	29	24	77	32
Cocaine	5	7	2	1	2	2
Hallucinogens	7	7	5	-	-	1
Hashish	-	7	-	-	-	-
Heroin	13	10	1	-	-	-
Khat/miraa	42	47	20	59	22	10
Mandrax	8	4	2	-	-	5
Solvents	20	13	9	10	8	11
Tobacco	58	35	29	40	44	51
Other	20	9	5	2	1	4

Note: Figures in parentheses indicate size of regional sample. Total sample = 383.

Other abused drugs include codeine-based painkillers and cough syrups that cause drowsiness". They are used as antidotes to Khat. The question about the approximate number of friends a respondent knew who abused drugs yielded interesting information. About 50 respondents said that the number was too large to estimate reliably, but the average figure given was between 5 and 10 friends whom the respondent could mention by name. One respondent commented: "This drug problem in Kenya is becoming a serious problem. When I first took heroin in Nairobi (in 1987) there were less than 20 addicts in all. Now, seven years later, there are close

to 1,000 addicts in Nairobi. It has increased at a rate of approximately 100 to 150 addicts per year."(Mwenesi, 1996)

2.1.5 The main sources of illicit drugs in Kenya

Eighty per cent of illicit drugs, mainly bhang, come from neighbouring countries because of our porous borders and corruption among law enforcement agencies. However, bhang is also grown locally in such areas as Mt Kenya. As for alcohol, the main concern has been illegal brewing. The latest and most disturbing trend is where brewers and distillers are mixing liquor with industrial chemicals in a bid to make the products more potent. The most annoying thing, however, is the fact that some of these products find their way onto the shelves and consumers, especially youth, can easily get them. The case of Shauri Moyo in Nairobi where various illicit brew consumers became blind and others died (Njuguna, 2010).

2.2. Effects of illicit Brew and drug abuse on the youth

Young people who persistently abuse substances often experience an array of problems, including academic difficulties, health-related problems (including mental health), poor peer relationships, and involvement with the juvenile justice system. Additionally, there are consequences for family members, the community, and the entire society. This research concentrated the effects of illicit brew and drug abuse on; youths' health, School dropping out, involvement in criminal activities and family break-up.

2.2.1. Illicit brew and drug abuse as cause of youths' poor health

According to Abebaw et al (2007), recent scientific evidence has singled out alcohol and drug abuse as one of the major drivers of the HIV/AIDS epidemic in Kenya and the world over. This is due to the fact that alcohol and drug abuse makes the individual lose self-control and the ability to make sound life decisions, which may drive him/her into risky sexual and other behaviour that promote HIV infection. As such, people who abuse alcohol and other drugs are more likely than the general population to contract HIV. Similarly, people living with HIV are likely to abuse alcohol and other drugs due to the denial, stigma and stressful conditions they find themselves in.

Substance abuse has many negative physiological health effects, ranging from minor issues like digestion problems or respiratory infections, to potentially fatal diseases, like AIDS and hepatitis C. The effects depend on the drug and on the amount, method and frequency of use. Some drugs are very addictive, like heroin, while others are less so. But the upshot is that regular drug abuse or sustained exposure to a drug - even for a short period of time - can cause physiological dependence, which means that when the person stops taking drugs, he/she experiences physical withdrawal symptoms and a craving for the drug. (BMA Health, 1999)

Drug abuse also causes brain damage. Again, depending on the drug, the strength and character of this damage varies. But one thing is clear, drug abuse affects the way the brain functions and alters its responses to the world. How drug abuse will affect your behaviour, actions, feelings and motivations is unpredictable. By meddling in the natural ways the brain functions, abusers exposes themselves to risks they may not even have imagined.(Bureau of Justice Statistics, 1992).

Drug abuse also damages the ability of people to act as free and conscious beings, capable of taking action to fulfill their needs. How free drug abusers are when they have no control over their actions or reactions is debatable. What is unarguable is that by giving in to bio-chemical processes that are deviant, a drug abuser loses what makes humans admirable and unique. According to BMA, the probability of sexual intercourse is increased by drinking amounts of alcohol sufficient to impair judgment, but decreased by drinking heavier amounts that result in feeling of nausea, passing out or mental confusion. Though most college drinkers would deny it, young people do die solely from drinking. (BMA Health, 1999)

Injuries due to accidents (such as car accidents), physical disabilities and diseases, and the effect of possible overdoses are among the health-related consequences of teenage substance abuse. Disproportionate numbers of youth involved with alcohol and other drugs face an increased risk of death through suicide, homicide, accident, and illness. (Smith et al, 2003)

According to the drug abuse warning network study (1994) -- in a representative sample of hospitals throughout the United States -- reports trends in people seeking emergency department treatment related to illegal drug use or non-medical use of legal drugs. Preliminary 1994 estimates indicate drug-related emergency department episodes for youth ages 12 to 17

increased by 17 percent from 1993 to 1994. This increase was greater than for any of the older age groups reported. Significantly, emergency department visits related to marijuana/hashish for youth ages 12 to 17 increased 50 percent between 1993 and 1994 (McCaig, 1995). Ninety-one youth between the ages of 12 and 17 died of drug abuse in 1993 (Office of Applied Studies, 2003).

Mental health problems such as depression, developmental lags, apathy, withdrawal, and other psychosocial dysfunctions frequently are linked to substance abuse among adolescents. Substance-abusing youth are at higher risk than nonusers for mental health problems, including depression; conduct problems, personality disorders, suicidal thoughts, attempted suicide, and suicide. Marijuana use, which is prevalent among youth, has been shown to interfere with short-term memory, learning, and psychomotor skills. Motivation and psychosexual/emotional development also may be influenced (Bureau of Justice Statistics, 1992).

2.2.1.1. Flashing blood among the youth

The link between injecting drug use and HIV infection is clearly established. Injecting drug use refers to intravenous self-administration of drugs. Injecting drug users (IDUs) are at greater risk of HIV infection since they occasionally share injecting equipment at the spur of the moment owing to strong craving and also due to lack of new clean ones that cost money. (Allen, 2006)

In December 2008, NACADA Authority learnt firsthand information from IDUs in Mombasa of the “blood flashing” phenomenon. This involves retrieving blood from an IDU who has just injected heroin and injecting the blood in the vein of a second IDU. Apart from directly transmitting HIV, flashing exposes the user to hepatitis infection and death due to instant agglutination from incompatible blood. Blood flashing and sharing of needles make injecting drug use “the most efficient way of transmitting HIV.” In fact, a UNODC study in 2004 found high prevalence of HIV among IDUs in Nairobi and Mombasa - between 68% and 88% of the users. (NACADA, 2010)

Several women in Mombasa have threatened to strip publicly unless the government moved fast to arrest the escalating drug abuse among the youth in the region. (Gatonye, 2009)

According to Gatonye (2009), the women argue that the drugs compromised the youth's capacity to engage in either productive or reproduction activities at the Coast.

The study, A Rapid Assessment of Injecting Drug use in Mombasa and Kilindini Districts, identified 40 sites, called maskani in the users' language, where the teenagers meet to share drugs. According to the study, while bhang is still a popular drug it is quickly being overtaken by injected heroin with 70 per cent of the respondents saying they use it. The study found that most of the users and those addicted to being in their early 20s. "In their study area of Mombasa and Kilindini, they estimated there are over 6,000 drug injectors."

2.2.1.2 Danger of drug abuse on Youth

Several types of drugs are susceptible to abuse by youths. These drugs range from most common and less expensive such as cigarettes and illicit brews to expensive and more deadly such as cocaine and heroin. The danger of drug abuse has been defined as "a state of periodic or chronic intoxication, detrimental to the individual and society, of a drug consumer." The major indication of drug addiction is the irresistible desire to take drugs by any means. Physical dependence manifests itself when drug intake is decreased or stopped resulting in withdrawal syndrome, which leads to a very distressing experience. Psychological dependence is experienced when an abuser relies on a drug to produce a feeling of well being. (Alagbe, 2004)

2.2.1.3 Kenyan media quote about effects of illicit brew and drug abuse

Beware the smoking hot star: There's a strong correlation between mental illness and smoking. People who suffer from depression are much more likely to be smokers, eighty percent of alcoholics smoke. So do 90% of schizophrenics. And half of the 12-15year olds with emotional and behavioural problems smoke, compared to only 10 percent of other children of similar age. Dating a heavy smoker should carry a health warning! Seriously, the cool, outgoing personality associated with smoking is highly attractive- but comes with a number of disadvantages. Like your date will probably have a worse temper, be more impulsive and less able to control their moods and outbursts than a non smoker. Many smokers are truly charming .but you're definitely taking a risk if you're becoming attracted to one. (Hart, 2009)

2.2.2 Illicit brew and drug abuse as a cause of youths' school dropping out

Declining grades, absenteeism from school and other activities, and increased potential for dropping out of school are problems associated with adolescent substance abuse, (Hawkins et al, 1992) cite research indicating that a low level of commitment to education and higher truancy rates appear to be related to substance use among adolescents. Cognitive and behavioral problems experienced by alcohol- and drug-using youth may interfere with their academic performance and also present obstacles to learning for their classmates (Bureau of Justice Statistics, 1992).

Education is very paramount in determining how well an individual will participate in a given development activity especially in the present situation of high technological changes. With the low level of literacy among the youth as per the Kenya census result of 1999 table 2. which shows that 20.4% of the youth have the necessary education requirement for them to engage in various development activities. This shows 79.6% can only participate in manual jobs which are not affected by technological change, as a result of this their scope of where they can work is greatly reduced

Table: 2.4: 1999 Kenya population census on youth level of education

AGE	Population	Number that have attained form 4 or above level of education	Percentage
18 to 19	1,260,534	76,893	6.1
20 to 24	2,808,446	586,965	20.9
25 to 29	2,313,452	636,199	27.5
TOTAL	6,382,432	1,300,057	20.4

(1999 Kenya census of population and housing: tabulations pg 7)

2.2.3 Illicit brews and drug abuse as a cause of youth involvement in crimes

There is an undeniable link between substance abuse and delinquency. Arrest, adjudication, and intervention by the juvenile justice system are eventual consequences for many youth engaged

in alcohol and other drug use. It cannot be claimed that substance abuse causes delinquent behavior or delinquency causes alcohol and other drug use. However, the two behaviors are strongly correlated and often bring about school and family problems, involvement with negative peer groups, a lack of neighborhood social controls, and physical or sexual abuse (Wilson and Howell, 1993).

Possession and use of alcohol and other drugs are illegal for all youth. Beyond that, however, there is strong evidence of an association between alcohol and other drug use and delinquent behavior of juveniles. Substance abuse is associated with both violent and income-generating crimes by youth. This increases fear among community residents and the demand for juvenile and criminal justice services, thus increasing the burden on these resources. Gangs, drug trafficking, prostitution, and growing numbers of youth homicides are among the social and criminal justice problems often linked to adolescent substance abuse.(National Institute of Justice, 1996).

The drug use forecasting (DUF) study found the highest association between positive drug tests of male juvenile arrestees and their commission of drug-related crimes (e.g., sales, possession). However, a substantial rate of drug use also was found among youth who committed violent, property, and other crimes (National Institute of Justice, 1996).

The Survey of Youth in Custody, 1987 (Beck, Kline, and Greenfeld, 1988) found that more than 39 percent of youth under age 18 were under the influence of drugs at the time of their current offense. More than 57 percent reported using a drug in the previous month. In another study of 113 delinquent youth in a State detention facility, 82 percent reported being heavy (daily) users of alcohol and other drugs just prior to admission to the facility, 14 percent were regular users (more than two times weekly), and 4 percent reported occasional use (DeFrancesco, 1996).

A study conducted in 1988 in Washington, D.C., found youth who sold and used drugs were more likely to commit crimes than those who only sold drugs or only used drugs. Heavy drug users were more likely to commit property crimes than nonusers, and youth who trafficked in drugs reported higher rates of crimes against persons. Youth in this sample were most likely to commit burglary or sell drugs while using or seeking to obtain drugs. About one-fourth of the youth also reported attacking another youth to obtain drugs (Altschuler and Brounstein, 1991).

A breakdown of crimes that youth have committed to obtain drugs follows: Drug selling: 36 percent, Serious assault: 24 percent, Burglary: 24 percent, Robbery: 19 percent.

According to the 1996-97 National Parents' Resource Institute for Drug Education (PRIDE) study (1997) a significant association between crimes committed by adolescents and their use of alcohol and other drugs. Table 1 show the percentage of 6th through 12th grade students who reported they had used various substances and had been involved in threatening or delinquent activities. The percentage of youth who were involved in these activities and had not used alcohol or other drugs was substantially lower.

Association between Threatening or Delinquent Activities and use of Alcohol or other drugs by 6th through 12th Graders

Table: 2.5: Delinquent activities and use of alcohol

Type of Substance Used	Percentage of Students who:			
	Carried a gun to school	Participated in Gang activities	Threatened to harm another	Got into trouble with the police
Liquor	76.4	68.4	51.7	65.3
Marijuana	71.1	59.7	36.7	54.2
Inhalants	38.2	26.9	13.8	18.1
Cocaine	37.2	19.4	7.8	12.8

(National Parents' Resource Institute For Drug Education, 1997)

For those who work in the juvenile justice system, new data are constantly being reported, but the story is an old one. Juvenile justice professionals encounter daily the distress of youth, their families, and communities resulting from juvenile involvement in substance abuse and delinquent behavior. These professionals also experience the difficulties of trying to work successfully with these young people. (Juvenile Justice System report, 1998)

Drugs are related to crime in multiple ways. Most directly, it is a crime to use, possess, manufacture, or distribute drugs classified as having a potential for abuse. Cocaine, heroin, marijuana, and amphetamines are examples of drugs classified to have abuse potential. Drugs

are also related to crime through the effect they have on the user's behavior and by generating violence and other illegal activity in connection with drug trafficking. The following scheme summarizes the various ways that drugs and crime are related.

Table: 2.6: Various ways crime and drugs are related

Drugs and crime relationship	Definition	Examples
Drug-defined offenses	Violations of laws prohibiting or regulating the possession, distribution, or manufacture of illegal drugs.	Drug possession or use. Marijuana cultivation. Methamphetamine production. Cocaine, heroin, or marijuana sales.
Drug-related	Offenses in which drug's pharmacologic effect contribute; offenses are motivated by the user's need for money to support continued use; and offenses connected to drug distribution itself.	Violent behavior resulting from drug effect. Stealing to get money to buy drugs. Violence against rival drug dealers.
Drug-using lifestyle	Drug use and crime are common aspects of a deviant lifestyle. The likelihood and frequency of involvement in illegal activity is increased because drug users may not participate in the legitimate economy and are exposed to situations that encourage crime.	A life orientation with an emphasis on short-term goals supported by illegal activities. Opportunities to offend resulting from contacts with offenders and illegal markets. Criminal skills learned from other offenders.

(Bureau of Justice Statistics, 2007).

2.2.3.1 Kenyan media quotes on effect of illicit brew and drug abuse

Drug taking is an addictive and expensive behaviour drug users have to have money to maintain the little naughty habit .they steal, sell home and office property, hijack vehicles, hold people hostage for a ransom, and engage disproportionately in commercial sex to maintain their drug taking habit. (Kariuki, 2009)

2.2.4. Illicit brew and drug abuse as a cause of family break-up

Substance-abusing youth often are alienated from and stigmatized by their peers. Adolescents using alcohol and other drugs also often disengage from school and community activities, depriving their peers and communities of the positive contributions they might otherwise have made.(Bureau of Justice Statistics, 1992).

In addition to personal adversities, the abuse of alcohol and other drugs by youth may result in family crises and jeopardize many aspects of family life, sometimes resulting in family dysfunction. Both siblings and parents are profoundly affected by alcohol- and drug-involved youth (Nowinski, 1990). Substance abuse can drain a family's financial and emotional resources (Bureau of Justice Statistics, 1992).

The social and economic costs related to youth substance abuse are high. They result from the financial losses and distress suffered by alcohol- and drug-related crime victims, increased burdens for the support of adolescents and young adults who are not able to become self-supporting, and greater demands for medical and other treatment services for these youth (Gropper, 1985).

2.3. Conceptual framework

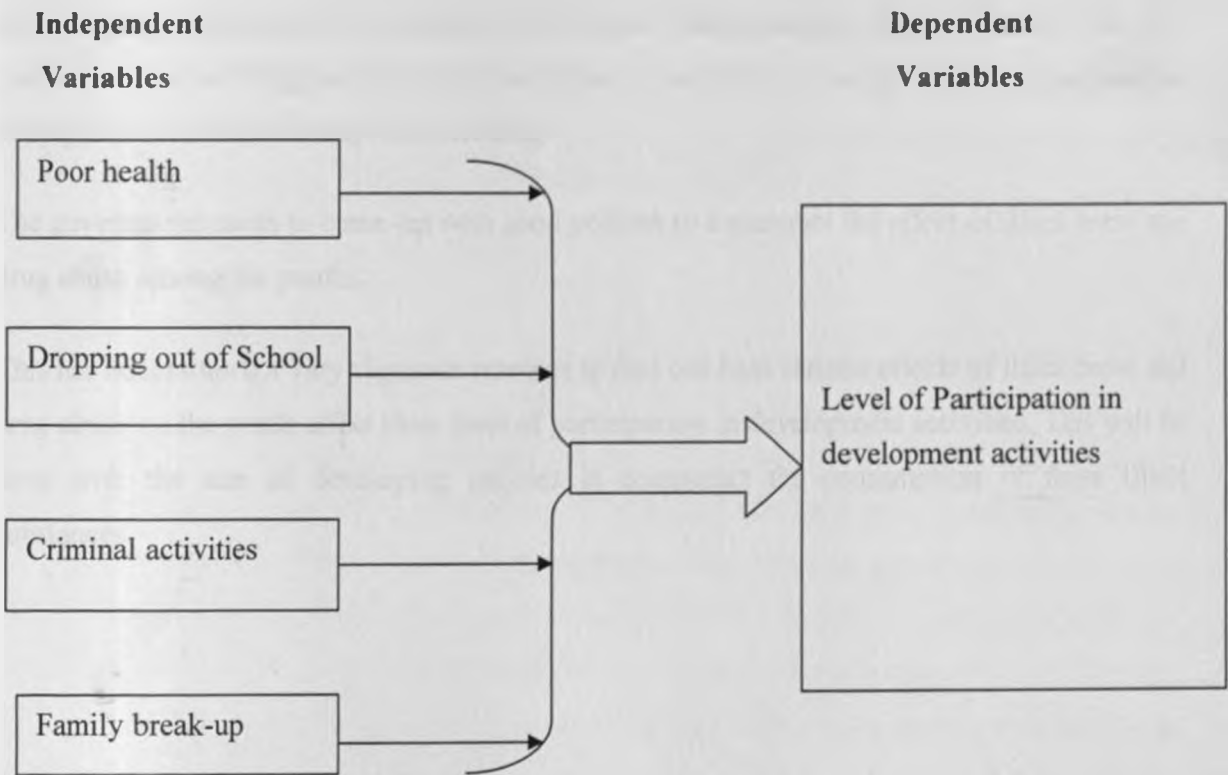


Figure 2.1 Conceptual framework

Independent variables include youths' poor health, school dropping out, involvement in criminal activities and family break-up, are variables whose variations are believed to affect greatly the level of youth participation in development activities in Ndumberi. In this case any change of the four said independent variables affects either positively or negatively the dependent variable. Dependent variable is the variable whose variation in the independent variable affects it either proportionally or at a given magnitude, which in this case is the level of youths' participation in development activities.

2.4. Summary

The youth are the most affected by illicit brew and drug abuse. A lot of young people are introduced to drugs before the age of 30 years. The abuse rate shoots up from around age 10 to 14. The highest increase occurs between the ages of 14 and 30 years.

The implications of drug abuse among youth are tragic. Firstly, we lose many young lives to drugs every year. Worse still, almost 90 per cent of school unrests are attributed to drug abuse, not to mention crime and the spread of HIV/Aids. More damning, however, is the fact that youths hooked on drugs are unproductive either in school or at work. You can imagine the damage the national economy was suffering.

The government needs to come-up with good policies to counteract the effect of illicit brew and drug abuse among the youths.

This has necessitated a very vigorous research to find out how various effects of illicit brew and drug abuse on the youth affect their level of participation in development activities. This will be done with the aim of developing policies to counteract the consumption of these illicit substances.

CHAPTER THREE

RESEARCH METHODOLOGY

3.1 Introduction

This chapter contains the research methodology which includes: - description of study area, research design, target population, instrumentation, sample population, sample size, sampling technique, data collection methods, data presentation, analysis and discussion and chronology of activities

3.2. Description of the study area

Kenya has 210 constituencies which in most cases are equal to districts they are in, as the case of Kiambaa constituency which is equivalent to Kiambu district, each of these districts are sub-divided into locations which in turn are sub-divided into sub-locations. Ndumberi location is one of the fourteen locations in Kiambu district. This location covers an area of 8.1sq kilometres (KM²) and is subdivided into three sub-locations (Ndumberi, Karunga and Kahuho). According to the 1999 population census results this location had a population of 17981 (with the ratio of male to female being 49:51) equivalent to 9.56% of total population in Kiambu district, as shown in the Table below basing on the ten locations that were there during the 1999 population census.

Table: 3.1: Kiambu district population divided into locations

NO.	Location name	Population: according to 1999 census results	Area(Km ²)
1	Kimiti	6,609	39.6
2	Ting'ang'a	12,598	9.1
3	Riabai	18,574	8.4
4	Kiambaa Settled Area	16,166	34.2
5	Ndumberi	17,981	8.1
6	Waguthu	18,834	13.3
7	Cianda	11,850	37.0
8	Kiambaa	39,548	20.2
9	Ruaka	13,531	7.5
10	Kihara	32,364	13.1

This location borders the following locations Kiambaa settled area, Waguthu, Cianda, Riabai and Ting'ang'a.

The main economic activity in Ndumberi is farming where a few residents are involved in the coffee farming, while majority are involved in small scale farming of food crops and rearing of few livestock (dairy cows, goats, pigs and chicken) with most of their products meant for domestic consumption.

In this location most of the economic or development activities are undertaken by either young children or elderly people with most of the male youths being involved with tobacco smoking and abuse of illicit local brew, this has made them non partisan in various development activities. In most cases these youths spend most of their days at the illicit brew clubs to the expense of involving themselves in constructive activities.

3.3. Research design

A descriptive research survey design was used, with the use of questionnaires and interview guide as instruments of data collection.

3.3.1 Research instruments

The study used well pre-tested questionnaires and interview guide. The questionnaires were used to obtain data from the youth because they are convenient to use when handling a large group of respondents. The interview guide was used to collect information from the key informants. Interviews provide in-depth data, which is not possible to get if questionnaires are used (Tuckman, 1978). They also make it possible to obtain data required to meet specific objectives of the study. These instruments were administered as follows:

1. **Personal interview:** Well structured interview guide were used by the researcher to interview the key informants on matters pertaining to how the effects of illicit brew and drug abuse affects the level of youth participation in development activities in Ndumberi location.
2. **Drop and collect survey.** This involved the hand delivery and subsequent recovery of self-completed questionnaires. The questionnaires were completed at the respondents own time. This method was used to collect information from the literate youth population in the

location. It was used to encourage high response rate. The illiterate and semi-literate respondents were guided by both researcher and research assistants on how to fill the questionnaires.

3.4. Target Population

The research study targeted out of school youth population aged between 16 to 30 years who were currently involved in illicit brew and drug abuse and former abusers of the same. This population was approximated to be 30% and 5% respectively of all youth in Ndumberi location, basing on the records available at the provincial administration offices in the region. It also targeted other key informants who included: the provincial administration (Area chief and three sub-chiefs), Area community development assistant, Area community health officer and Kiambu district youth officer. According to population projections from Kiambu district statistics department Ndumberi, has the youth population of 7197 aged 12 to 35 years from whom 48.5 are aged between 16 to 30 years equivalent to 3491. This gives the population of youth drug abusers as 1048 and those who had since stopped abusing drugs as 175.

3.5. Samples and sampling procedure

This study adopted non probability sampling techniques. A Multi-stage sampling technique was used where Ndumberi location was divided into three clusters basing on the number of sub locations constituting it. Each cluster was equivalent to a sub location. Purposive sampling technique was used to select the youths who abuse drugs and illicit brew and former abusers of the same from each cluster. The desired sample size was determined using a formula recommended by Mugenda and Mugenda (1999). This formula is expressed as shown below:

$$n = \frac{Z^2 pq}{e^2}$$

Working out the calculations we have

$$n_0 = \frac{(1.96^2) (0.30) (1-0.30)}{(0.05)^2} = 323$$

$$n_1 = \frac{(1.96^2) (0.05) (1-0.05)}{(0.05)^2} = 80$$

Where;

n=sample size

Z=Standard variate at a given confidence level, in this case 95% confidence interval will be used which gives Z= 1.96

p = proportion of the target population estimated to abuse drugs and illicit brew, is estimated to be 30% abusers and 5% former abusers of the total youth population aged between 16-30 years, according to the records at the provincial administration offices in the region.

$$q = 1 - p$$

e = acceptable error (Precision) where $e = 5\%$ at 95% confidence interval

$$nf = \frac{n}{(1 + n/N)}$$

Working out the calculations we have

$$nf_0 = 323 / (1 + 323/1048) = 247 \text{ (Sample of youth substance abusers from the location)}$$

$$nf_1 = 80 / (1 + 80/175) = 55 \text{ (sample of former Youths substance abusers)}$$

Where;

nf = Sample size (when the population is less than 10,000):

n = Sample size (when the population is more than 10,000);

N = Estimate of the population size;

Table 3.2: Ndumberi youth population in clusters and sample size

Clusters/ Sub-locations	Youth Population Aged 16-30 yrs	Estimated number of substance abusers	Estimated number of former substance abusers	Sample size of substance abusers	Sample size of former substance abusers
Ndumberi	1351	406	68	96	21
Karunga	1113	334	56	78	18
Kahuho	1027	308	51	73	16
TOTAL	3491	1048	175	247	55

Purposive sampling technique was also used to select the key informants as outlined above

The population in this location is quite homogeneous and once representative samples were taken from each cluster the deductions made from either of them reflected the population characteristics in the location.

3.6. Data collection methods and procedures

The researcher used the services of six research assistants to administer the questionnaires to the respondents. The research assistants were thoroughly inducted and later given the questionnaires to administer to 247 substance abusers and 55 to former substance abusers over a period of two weeks, the completed questionnaires were submitted back to the researcher for analysis.

3.6.1. In- depth interviews

This was done to obtain the information from key informants. It involved in-depth discussions using a key informant guide, covering several specific topics concerning how the effect of drug abuse and illicit brew affect the level of youth participation in development activities in Ndumberi location. This enabled the researcher to carry out discussions on a wide range of issues covering the topic under study. It was administered to the key informants, where the records on the effect of drug abuse and illicit brew are available in Ndumberi location. Its purpose was to establish the perception of the respondents on the effect of drug abuse and illicit brew on the youth. The questions were developed basing on the literature review, problem statement and objectives of the study.

3.7. Information Validity and Reliability

Reliability is the degree of constancy between two measures of the same thing. The questionnaires were pre-tested to a selected sample of 15 and 8 youth illicit brew and drug abusers and former abusers of the same respectively in Kiambaa settled area Location, so as to determine its reliability. The raw data obtained by the instrument was converted to numerical codes representing the measurement of the variables. This coding facilitated the determination of reliability. The Cronbach co-efficient Alpha was then computed to determine how the variables correlated among themselves. Cronbach's Alpha is the general formula of the Kuder-Richardson (K-R) 20, (Mugenda and Mugenda, 1999). The K-R 20 formula is as follows:

$$KR_{20} = \frac{K(S^2 - \sum s^2)}{S^2(K-1)}$$

Where:

KR20 = Reliability coefficient of internal consistency.

K = Number of items used to measure the concept.

S^2 = Variance of all scores.

s^2 = Variance of individual items.

Dane (1990) defines validity as the extent to which a measure actually measures what is supposed to measure. Validity therefore has to do with how accurately the data obtained in the study represents the variables of the study. To ascertain the content validity of the research instruments, the researcher used simple understandable language, a thorough training of the research assistants was done to ensure that they were able to guide the respondents in the filling of the questionnaires.

3.8. Operational definition of variables

Table 3.3: Breaking objectives into a smart way

No	Objectives	Variables	Indicators	Measurements	Measuring scale	Type of analysis	Tool of analysis
i	To establish how the youth poor health affect their level of participation in development activities	<p><u>Independent</u> -poor health</p> <p><u>Dependent</u> -level of participation in development activities</p>	<p>--increase in the Rate of youth sickness and premature deaths.</p> <p>-Low youth participation in development activities.</p>	<p>-Number of youth seeking medical treatments per a given period of time due to drug abuse</p> <p>-average number of hrs youth are involved in development activities per day (0-4-low, 5-8-medium, 9-above high)</p>	Interval	descriptive	Measure of central tendency (Mean)
ii	To investigate how school dropping out among the youth affect their level of participation in development activities.	<p><u>Independent</u> - School dropping out</p>	<p>-high rate of school dropouts.</p> <p>-low level participation in development activities</p>	<p>-Number of youth dropping out of schools per given period of time.</p> <p>-average number of hrs youth are involved in professional development activities (0-4-low, 5-8-medium, 9-above-high)</p>	interval	descriptive	-Measure of central tendency (Mean)

iii	To investigate how the youth engagement in criminal activities affect their level of participation in development activities.	<u>Independent</u> Engagement in criminal activities	-increase in criminal activities. -low rate of investments in the area -low level of youth participation in development activities	-Number of criminal case reported to the police. -Number of willing investors in the region. - average number of hrs youths are involved in development activities (0-4-low, 5-8-medium, 9-12- high) -Number of youths involved in development activites.	interval	descriptive	-Measure of central tendency (Mean)
iv	To investigate how the family break-up affect the level of youth participation in development activities.	<u>Independent</u> Family break-up	-Increase in divorce and family separations cases - Increase in quarrel and fights among family members - low level of youths' participation in development activities	-Number of single families in the region. - Number of quarrels and fights reported to relevant authorities -Number of hrs youth are involved in development activities (0-4-low, 5-8-medium, 9-above- high)	interval	descriptive	-Measure of central tendency (Mean)

3.9. Data analysis methods and justifications

Data analysis being the computation of certain measures along with searching for pattern of relationship that exists among data groups. The collected data was tabulated and audited. Close ended questions were coded to enable all the responses be keyed into the computer. Data was analyzed using the Statistical package for social scientists (SPSS). Descriptive statistical procedures were used to describe the distribution and derive patterns from the data. These were percentages and frequency distribution Tables.

This was computed to show the number of youth involved in the abuse of both illicit brew and drugs and information obtained from the respondents on how these substances affect them analyzed. This was done with the aim of finding out whether illicit brew and drug abuse effects on youth affects their level of participation in development activities in Ndumberi location.

Part of the qualitative data was analyzed as data was being collected in the field in form of field notes. Analysis involved reducing, selecting and transforming it into relevant themes.

3.10 Summary

This study was conducted in Ndumberi location in Kiambu district, where the location was divided into three clusters basing on the number of sub-locations. The targeted population was out of school youths who are currently or former substance abusers aged between 16-30 years, and the key informants who included; provincial administration (area chief and three sub-chiefs, DYO, , area community health officer and CDA)

The sample size of the research study was 247 current and 55 former substance abusers respectively, who were selected from cluster population using purposive sampling technique. The researcher collected the data from the sample units using the assistance of six research assistants, who were first well inducted on how to collect data using the questionnaires before they embarked in the process of questionnaire administration to the respondents, a process that took two weeks to be accomplished. The data was analyzed using a statistical package of social statistics (SPSS) and presented in form of percentages and frequency distribution Tables.

CHAPTER FOUR

DATA PRESENTATION, ANALYSIS AND INTERPRETATION

4.1 Introduction

This chapter presents the procedures and activities followed to analyse raw data (data collected from the field), how this data is presented, and its interpretation. The main purpose of the study was to investigate how the effects of illicit brew and drug abuse among the youths affect their level of participation in development activities. To achieve this purpose research questions were formulated which guided the whole study. To address this, data was collected from 247 current and 55 former illicit brew and drug abusers respondents respectively. The raw data collected from the field was summarized by both the researcher and the research assistants and presented in tabular form. This information was grouped according to whether the respondent is a current or former substance abuser and also based on the research objective/ questions.

This chapter therefore, descriptively reports and interprets the findings from the survey carried, which are discussed under themes derive from the research questions of the study. According to Kerlinger (1973), principles of data analysis and interpretation, data analysis is where the researcher breaks down data into constituent parts so that to obtain answers to research questions. On the other hand according to Kombo K.D et al (2006) data analysis refers to examining what has been collected in a survey or experiment and making deductions and inferences. It involves uncovering underlying structure, extracting important variables, detecting anomalies and testing any underlying assumptions.

4.2 Respondents' Demographic summary

The correct responses of the research were obtained from 203 current and 49 former substance abusers, from whom 42.8% of the current abusers came from Ndumberi, 34.5% from Karunga and 22.7% from Kahuho sub-locations, while the former abusers were distributed as follows; 40.8% Ndumberi, 32.7 Karunga and 26.5% Kahuho sub-locations. 95% of the current and 91.8% of the former substance abusers were male while the rest were female. Of the current substance abusers 5.4% aged 16-18years, 18.2% aged 19-21 years, 38.9% aged 22-24 years, 17.2% aged 25-27 years and 20.2% aged 28-30 years. For the former substance abusers 6.1%

aged 16-18years, 32.7% aged 19-21 years, 12.2% aged 22-24 years, 24.5% aged 25-27 years and 24.5% aged 28-30 years.

According to the respondents level of education; the former substance abusers respondents were analyzed as follows 2% never went to school, 32.7% primary school level, 40.8% secondary school level, 9% tertiary college and 2% university level. With the current substance abusers respondents being distributed as follows 6.9% never went to school, 31.5% primary school level 43.8% secondary school level, 10.3% tertiary college and 7.4% university level.

Table 4.1, summarizes what the respondents do to earn a living on a daily basis.

Table 4.1: Respondents occupation

Occupation	Current substance abusers			Former substance abusers		
	Frequency	Percent	Cumulative Percent	Frequency	Percent	Cumulative Percent
Employed	32	15.8	15.8	15	30.6	30.6
Self employed	33	16.3	32.0	15	30.6	61.2
Casual labourer	79	38.9	70.9	10	20.4	81.6
Provided for by parents and others	33	16.3	87.2	8	16.3	98.0
Sell illicit drugs	9	4.4	91.6	1	2.0	
Sell illicit brew	17	8.4	100.0	-	-	100.0
Total	203	100.0		49	100.0	

According to Table 4.1 above 15.8% and 30.6% of the current and former substance abusers respectively are employed, 16.3% and 30.6% of current and former substance abuse respectively are self-employed, 38.9% and 20.4% of current and former substance abusers respectively are casual labourer, 16.3% of both current and former substance abusers are provided for by parents, 4.4% and 2% of the current and former substance abusers sell illicit drugs and 8.4% of the current substance abusers selling illicit brew but none from the former substance abusers.

According to the marital status of the respondents; 53.7% and 67.3% of the current and former substance abusers respondents respectively were single (not married), 35% and 18.4% of the current and former substance abusers were separated from their spouses, 0.5% and 2% of the current and former substance abusers were widowed, 3.4% and 2% of the current and former substance abusers were divorced, and 7.4% and 10.2% of the current and former substance abusers were married.

From the collected data 91.6% and 81.6% of the current and former substance abusers respectively abused illicit brew, while 62.1 and 67.3 of the current and former substance abusers respectively abused drugs.

4.3 Effects of Youths' poor health on their level of participation in development activities

From the data obtained, 75.9% of the current and 75.5% of the former substance abusers respondents confessed that substance abuse have/ had negative effects on their health, which in most cases hindered their level of performance. Table 4.2 below shows how the respondents felt about these effects of substance abuse on their level of participation in development activities

Table 4.2: Respondents' health and the level of participation

Respondents answer	Current Substance Abusers			Former Substance Abusers		
	Frequency	Percent	Cumulative Percent	Frequency	Percent	Cumulative Percent
Yes	143	70.4	70.4	38	77.6	77.6
No	60	29.6	100.0	11	22.4	100.0
Total	203	100.0		49	100.0	

According to Table 4.2 above 143 (70.4%) of the current and 38 (77.6%) of the former substance abusers confessed that indeed substance abuse affects the abusers' level of participation in development activities while only 60(29.6%) of the current and 11 (22.4%) of the former substance abusers respectively had no effect due to substance abuse.

From the research results 50.7% of the current substance abusers cannot do more than six hours without substance abuse, while 55.1% of the former substance abusers respondents confessed of taking the same duration before stopping abusing substances. 28.6% of the current abusers cannot take more than 12 hours compared to 26.5% of the former substance abusers who confessed the same. Only 20.7% and 18.4% of the current and former substance abusers respectively could take more than 13 hours before substance abuse. This in most cases has/had affected their level of performance due to reduced number of hours at work as summarized in Tables 4.3 and 4.4.

Tables 4.3 shows average the number of hours the respondents used to work per day before they started substance abuse for the current abusers, and average number of hours the respondents work per day after stopping substance abuse for the former substance abusers.

Table 4.3: Average hours worked per day without abusing substances.

Average hours worked per day	Current substance abusers			Former substance abusers		
	Frequency	Percent	Cumulative Percent	Frequency	Percent	Cumulative Percent
0-4hrs	3	1.5	1.5	4	8.2	8.2
5-8hrs	54	26.6	28.1	17	34.7	42.9
9-above	146	71.9	100.0	28	57.1	100.0
Total	203	100.0		49	100.0	

According to Table 4.3; 1.5% and 8.2% of the current and former substance abusers respectively worked on daily average between 0-4 hours. 26.6% and 34.7% of the current and former substance abusers worked on daily average of 5-8 hours, while 71.9% and 57.1% of the current and former substance abusers worked on daily average of more than 9 hours.

Table 4.4 shows the average number of hours worked per day by the respondents during substance abuse.

Table 4.4: Average number of hours worked per day during substance abuse

Average hours worked per day	Current Substance Abusers			Former Substance Abusers		
	Frequency	Percent	Cumulative Percent	Frequency	Percent	Cumulative Percent
0-4hrs	65	32.0	32.0	28	57.1	57.1
5-8hrs	118	58.1	90.1	16	32.7	89.8
9-above	20	9.9	100.0	5	10.2	100.0
Total	203	100.0		49	100.0	

According to Table 4.4; 32% and 57% of the current and former substance abusers respectively worked on daily average between 0-4 hours. 58.1% and 32.7% of the current and former substance abusers worked on daily average of 5-8 hours, while 9.9% and 10.2% of the current and former substance abusers worked on daily average of more than 9 hours.

Table 4.5; summarizes the level of the respondents' satisfaction to their current level of participation in development activities basing on their health categorized into five levels

Table 4.5: Satisfaction Level

Respondents Participation level	Current Substance Abusers			Former Substance Abusers		
	Frequency	Percent	Cumulative Percent	Frequency	Percent	Cumulative Percent
Low	64	31.5	31.5	3	6.1	6.1
Fair	51	25.1	56.7	5	10.2	16.3
Moderate	70	34.5	91.1	10	20.4	36.7
High	15	7.4	98.5	17	34.7	71.4
Very High	3	1.5	100.0	14	28.6	100.0
Total	203	100.0		49	100.0	

According to Table 4.5: 31.5% and 6.1% of the current and former substance abuse respondents' respectively consented that their participation in development activities were very low, 25.1% and 10.2% of the current and former substance abusers respectively were fairly low, 34.5% and 20.4% of the current and former substance abusers respectively were moderately low, 7.4% and 34.7 of the current and former substance abusers respectively were abit satisfied and 1.5% and 28.6% of the current and former substance abusers respectively were fully satisfied.

4.4. Effects of youths' school dropping out on their level of participation in development activities

According to the data obtained 57.1 % of the current and 40.8% of the former substance abusers never completed their stated level of education. 36.9% and 24.5% of the current and former substance abusers respectively confessed that they failed to complete their schooling as a result of substance abuse. Table 4.6 below shows various effects of substance abuse on the abuser as far as their level of education is concerned.

Table 4.6: How substance abuse affected the abusers level of education

Effect of substance abuse	Current Substance Abusers			Former Substance Abusers		
	Frequency	Percent	Cumulative	Frequency	Percent	Cumulative
			Percent			Percent
Poor academic performance	65	32.0	32.0	22	44.9	44.9
School dropping out	51	25.1	57.1	7	14.3	59.2
Expelled from school	23	11.3	68.5	2	4.1	63.3
any other	64	31.5	100.0	18	36.7	100.0
Total	203	100.0		49	100.0	

From Table 4.6; 65(32%) and 22(44.9%) of the current and former substance abusers respectively confessed of getting poor academic grades, 51(25.1%) and 7 (14.3%) of the current

and former substance abusers respectively confessed that they dropped out of school, 23(11.3%) and 2 (4.1%) of the current and former substance abusers respectively confessed that they were expelled from school due to substance abuse. Others refer to those whose schooling was not affected by substance abuse.

According to the data obtained from the respondents 62.6% and 73.5% of the current and former substance abusers respectively confessed that their level of education greatly determines the types of jobs they do, and therefore there are jobs they could not participate in despite their availability hence affecting their participation level in development activities as summarized in Table 4.7:

Table 4.7: Education attained and the level of participation in development activities.

Respondents views	Current Substance Abusers			Former Substance Abusers		
	Frequency	Percent	Cumulative Percent	Frequency	Percent	Cumulative Percent
Does not affect	76	37.4	37.4	13	26.5	26.5
It affects	127	62.6	100.0	36	73.5	100.0
Total	203	100.0		49	100.0	

From Table 4.7; 76(37.4%) and 13(26.5%) of the current and former substance abusers respectively felt that their education does not affect their level of participation in development activities. While 127 (62.6%) and 36(73.5) of the current and former substance abusers respectively confessed that their level education indeed affects their level of participation in development activities.

4.5. Effects of Youth engagement in crimes on their level of participation in development activities.

71.4% and 81.6% of the current and former substance abusers respectively confessed that substance abuse has indeed affected their social life in various ways. This involves either the abusers engaging themselves in criminal activities or other unacceptable behaviours by the

community. This indeed affects their level of performance hence participation in development activities as indicated in the Table 4.8 below.

Table 4.8 Effect of crimes on the level of participation in development activities

Respondents answers	Current Substance Abuser			Former Substance Abuser		
	Cumulative			Cumulative		
	Frequency	Percent	Percent	Frequency	Percent	Percent
Yes	120	59.1	59.1	40	81.6	81.6
No	83	40.9	100.0	9	18.4	100.0
Total	203	100.0		49	100.0	

From Table 4.8 above 120 (59.1%) and 40 (81.6%) of the current and former substance abusers respondents respectively confessed that change in their social behaviour affected greatly their level of participation in development activities, while 83 (40.9%) and 9(18.4%) of the current and former substance abusers respondents respectively had no change or had noticed no change in how they participated in development activities despite change in their social behaviour.

123(60.6%) and 24(49%) of the current and former substance abusers respondents respectively confessed that they have been arrested at one time and in some cases jailed by police due to their involvement in criminal activities. By being arrested, a number of respondents felt that it affected their level of participation in development activities by decreasing their participation as summarized in Table 4.9.

Table 4.9: Effect of being arrested on the level of participation in development activities

Effect on level of participation	Current Substance Abuser			Former Substance Abusers		
	Cumulative			Cumulative		
	Frequency	Percent	Percent	Frequency	Percent	Percent
No effect	81	39.9	39.9	26	53.1	53.1
Decrease	122	60.1	100.0	23	46.9	100.0
Total	203	100.0		49	100.0	

From Table 4.9 above; 122(60.1%) and 26(53.1%) of the current and former substance abusers respondents respectively felt that being arrested due to change in one's social behaviour(criminal activities) affect their level of participation in development activities. While 81(39.9%) and 23 (46.9%) of the current and former substance abusers respondents respectively felt that it does not affect.

Table 4.10: Presents the respondents feelings of the effects of substance abuse on their social behaviour and how these effects affect their level of participation in development activities. It is a Table that shows to what degree/ level these effects affects the respondents' level of participation in development activities. This is achieved by seeking from the respondents the following information, "has substance abuse affected your level of participation in development activities?"

Table: 4.10: Substance abuse and the level of participation in development activities

Respondents' Rating	Current Substance Abusers			Former Substance Abusers		
	Frequency	Percent	Cumulative Percent	Frequency	Percent	Cumulative Percent
Not at all	28	13.8	13.8	6	12.2	12.2
Slightly	25	12.3	26.1	7	14.3	26.5
Moderately	39	19.2	45.3	6	12.2	38.8
Quite abit	60	29.6	74.9	10	20.4	59.2
Almost totally	51	25.1	100.0	20	40.8	100.0
Total	203	100.0		49	100.0	

From the Table 4.10 above 28(13.8%) and 6(12.2%) of the current and former substance abusers respondents respectively were not interfered at all, 25(12.3%) and 7(14.3%) of the current and former substance abusers respondents respectively were slightly interfered, 39 (19.2%) and 6(12.2%) of the current and former substance abusers respondents respectively were moderately interfered , 60(29.6%) and 10(20.4%) of the current and former substance abusers respondents respectively were quite interfered and 51 (25.1%) and 20(40.8%) of the current and former substance abusers respondents respectively were interfered almost totally.

4.6 Effects of Family break – up on the level of youth participation in development activities

According to the data collected 71.4% and 83.7% of current and former substance abusers respondents respectively confessed that substance abuse have greatly affected their relationships with other family members. This is because the other family members are not impressed by the change in their behaviours. This has greatly affected their level of performance hence participation in development activities, as indicated in the Table 4.11. 41.4% and 69.4% of the current and former substance abusers respondents respectively confessed that their poor relationship with other family members greatly affect the level of the other family members participation in development activities.

Table 4.11: Family break-up and the level of participation in development activities

Respondents answer	Current Substance Abusers			Former Substance Abusers		
	Frequency	Cumulative		Frequency	Cumulative	
		Percent	Percent		Percent	Percent
Yes	117	57.6	57.6	41	83.7	83.7
No	86	42.4	100.0	8	16.3	100.0
Total	203	100.0		49	100.0	

From Table 4.11; 117 (57.6%) and 41 (83.7%) of the current and former substance abusers respondents respectively were greatly affected, while 86 (42.4%) and 8(16.3%) of the current and former substance abusers respondents respectively were not.

According to the research data collected 46.3% and 36.7% of the current and former substance abusers respondents respectively felt that their habit of substance abuse does not affect their parents' relationship. 5.4% and 6.1% of the current and former substance abusers respondents respectively confessed that their substance abuse habit has made their parents separate, 7.9% and 16.3% of the current and former abusers respectively confessed that their substance abuse habit made their parents' divorce, with 40.4% and 40.8% confessing that their habit has made their parents' quarrel frequently. Due to these poor relationships among their parents 34% and 30.6% of the current and former substance abusers respondents respectively confessed that they

lack a lot of resources which greatly affects their level of participation in development activities as summarized in Table 4.12.

Table 4.12: Resource and level of participation in development activities?

Respondents view	Current Substance Abusers			Former Substance Abusers		
	Frequency	Percent	Cumulative	Frequency	Percent	Cumulative
			Percent			Percent
No effect	112	55.2	55.2	26	53.1	53.1
Decrease	86	42.4	97.5	21	42.9	95.9
Increase	5	2.5	100.0	2	4.1	100.0
Total	203	100.0		49	100.0	

From Table 4.12, 112 (55.2%) and 26(53.1) of the current and former substance abusers respondents respectively were not affected by the relationship existing between their parents or spouses. 86 (42.4%) and 21(42.9%) of the current and former substance abusers respondents respectively confessed that their participation level in development activities has decreased; 5 (2.5%) and 2(4.1%) of the current and former substance abusers respondents respectively confessed that their participation level has increased.

Table 4.13 shows how the respondents rated their level of participation in development activities basing on the existing relationship between their parents or spouses.

Table 4.13: General level of participation in development activities

Respondents rating	Current Substance Abusers			Former Substance Abusers		
	Frequency	Percent	Cumulative	Frequency	Percent	Cumulative
			Percent			Percent
Excellent	8	3.9	3.9	11	22.4	22.4
Very good	11	5.4	9.4	5	10.2	32.7
Good	45	22.2	31.5	11	22.4	55.1
Fair	78	38.4	70.0	13	26.5	81.6
Poor	61	30.0	100.0	9	18.4	100.0
Total	203	100.0		49	100.0	

From Table 4.13 above the respondents rated their level of participation as follows; 8 (3.9%) 11(22.4%) of the current and former substance abusers respondents respectively rated as excellent, 11 (5.4%) and 5(10.2%) of the current and former substance abusers respondents respectively as very good, 45(22.2%) and 11(22.4%) of the current and former substance abusers respondents respectively as good, 78(38.4%) and 13 (26.5%) of the current and former substance abusers respondents respectively as fair, 61 (30%) and 9(18.4%) of the current and former substance abusers respondents respectively as poor.

4.7 Summary

The research was conducted at Ndumberi location which was divided into three clusters basing on sub-locations: Ndumberi, Karunga and Kahuho sub-locations. This research targeted the out of school youth who are currently abusing illicit brew and drug abuse aged between 16-30 years, where a sample size of 247 respondents was targeted, also the former substance abusers of the same age where a sample of 55 respondents was targeted. The data collection was conducted by the researcher with the assistance of six research assistants. 247 questionnaires for current and 55 questionnaires for former substance abusers were administered. 203 and 49 questionnaires for current and former drug abusers were returned fully and properly filled.

The questionnaires were intended to collect the information from the respondents on how the effect of illicit brew and drug abuse affected the level of the respondents' participation in development activities. This was done basing on the four areas where effects of substance abuse are clearly manifested: Youth school dropping out, poor health, involvement in criminal activities and family break-up. Majority of the youth respondents who had never completed school blamed substance abuse as the cause of their dropping out. They said that they were unable to participate in professional jobs due to lack of necessary skills. This according to them has reduced greatly their level of participation in development activities especially where only professional jobs are available.

On health effects majority of the respondents confessed that they have suffered a lot as a result of substance abuse. The effects given includes: frequent coughing and chest pains, depression, craving for the substance, general body weakness, mouth cancer among others. The respondents agreed that this have reduced greatly their level of participation in development activities, as

most of their time is spent at illicit brew and illicit drug dens, while the rest is spent in hospitals or idling due to the feeling of body fatigue, and in most cases nurturing hangovers.

Substance abuse was blamed as being the main cause of criminal activities among the youth in the region. The crimes mentioned by the respondents includes: direct stealing and robbing, coning/lying, fighting and quarreling, raping, trafficking illicit drugs and brew, substance abuse. These in most cases have landed the abusers in jail therefore denying them a chance to participate in development activities. Other times the respondents take most of their time hiding for fear of being arrested for the crimes they have committed. Because of their criminal activities the public have lost trust on them hence treated like enemies and no one is willing to work with them. Due to their unacceptable behaviours they have developed low self esteem hence self isolation, which has resulted to low level of participation in development activities.

Family break-up in the region was partially as a result of substance abuse, majority of the respondents whose families had relationship problems confessed that it was due to substance abuse. According to these either family has separated, divorced, or have frequent quarrels. These in most cases have resulted to the respondents lacking either family support or spouse support, which may be financially, psychologically or emotionally. In some cases the abusers result to self isolation as a result of shame or depression after family break-up. Which in most cases lead to a decline in the respondents' level of participation in development activities.

CHAPTER FIVE

SUMMARY OF FINDINGS, DISCUSSIONS AND RECOMMENDATIONS

5.1 Introduction

This chapter presents a summary of the main study findings, discussions, Conclusion, recommendations and suggestions for further studies.

5.2. Summary of the main findings

According to the research information obtained: 70.4% and 77.6% of the current and former substance abuse respondents respectively were affected on their level of participation in development activities due to the effects of substances abused on their health. 62.6% and 73.5% of the current and former substance abuse respondents respectively were affected on their level of participation in development activities due to the effects of substances abused on education (school dropping out either voluntary, expulsion or due to poor academic performance). 59.1% and 81.6% of the current and former substance abuse respondents respectively were affected on their level of participation in development activities due to the effects of substances abused on their social behaviour (engagement in criminal activities). 57.6% and 83.7% of the current and former substance abuse respondents respectively were affected on their level of participation in development activities due to the effects of substances abused on family relationship (family break-up).

On average 62.4% and 79.1% of the current and former substance abuse respondents respectively were affected on their level of participation in development activities due to the effects of substances abused on various aspects of their lives.

5.3 Research Finding Discussions

The research was targeting two groups of out of school youth, that is the current and the former illicit brew and drug abusers, where the sample sizes were 247 and 55 respectively. Out of the returned questionnaires 203 and 49 were properly filled from current and former abusers respectively.

According to the data obtained, the most abused substance among the youth in the region is illicit brew with a percentage of 91.63% of all the respondents currently abusing substance and

81.60% of the former substance abuser respondents. All the other illicit drugs abused in the region constituted 62.1% of all the current substance abuser respondents and 67.3% of the former substance abusers.

5.3.1. Effects of youths' poor health on their level of participation in development activities

According to Abebaw et al (2007) and BMA Health report (1999), substance abuse has many negative physiological health effects ranging from minor issues to potentially fatal diseases, which affects the abusers' level of functioning in various activities. The information collected from the respondents supports the above findings where 75.9% of the current substance abusers said that substance abuse had various effects on their health that included general body weakness, craving for the substances, body general fatigue, poor appetite, frequent headaches, depression, memory lapse and poor concentration among other diseases. This was supported by 75.5% of the former illicit and drug abusers. From the research results, 70.4% of the current substance abusers confessed that substance abuse has greatly affected their level of operation due to various effects on their health as indicated above; this was supported by 77.6% of the former substance abusers.

According to the information obtained, the number of working hours of the respondents is greatly reduced once they start abusing substances. For instance in Table 4.4, 1.5% of the respondents worked on average 0-4 hours before starting abusing substances, compared to 32% of the same respondents after starting abusing substance as shown in Table 4.4. This is as a result of various health effects these substances have on the abuser. These therefore confirms that the effects of illicit brew and drug abuse among the abusers greatly affects the functioning level of the abuser, hence their level of participation in development activities.\

5.3.2. Effects of youths school dropping out on their level of participation in development activities

The level of education is taken to be very important for the purpose of participating in various development activities. According to Hawkins et al (1992) and Bureau of justice statistics (1992) declining grades, absenteeism from school and school dropping out are problems

associated with substance abuse. This is supported by 68.4% of the current substance abusers respondents and 63.3% of the former substance abusers

According to the information obtained, 62.6% of the current and 73.5% of the former substance abuser respondents agreed that their level of education is the hindrance to their participation in development activities, especially where professional jobs are involved, since majority can only participate in manual jobs. This research has found that substance abuse has been a major cause of the decrease in the literacy levels among the youth, hence a decrease in their level of performance.

5.3.3. Effects of youths' engagement in criminal activities on their level of participation in development activities.

According Wilson and Howell, (1993). There is an undeniable link between substance abuse and delinquency. Arrest, adjudication, and intervention by the juvenile justice system are eventual consequences for many youth engaged in alcohol and other drug use. This bring about school and family problems, involvement with negative peer groups, a lack of neighborhood social controls, and physical or sexual abuse

The above sentiments were supported by the respondents, where, 71.4% of the current and 81.6% of the former substance abusers confessed that the use of these substances has greatly affected their social behaviours, which has led them to being involved in criminal activities. The sited criminal activities includes: Direct stealing, fighting and quarreling, coning/lying, threatening, wife or husband battering, raping and idling. All this being crimes the offenders have either been arrested severally as stated by the respondents, where 60.6% of the current and 49.0% of the former substance abusers confessed of being arrested by police atleast twice within the previous month, because of their criminal activities resulting from substance abuse, others confessed of hiding due to fear of being arrested, self isolation due to low self esteem, mistrusted hence denied the available jobs. All these confirm how substance abuse affects the abusers' level of participation in development activities in Ndumberi location.

5.3.4. Effects of family break – up on the level of youths' participation in development activities

According to Gropper, (1985), the social and economic costs related to youth substance abuse are high. They result from the financial losses and distress suffered by alcohol- and drug-related crime victims, increased burdens for the support of adolescents and young adults who are not able to become self-supporting, and greater demands for medical and other treatment services for these youth. This was supported by 71.4% and 83.7% of the current and former substance abusers respectively who confessed that substance abuse has greatly affected their relationship with other family members, as a result of their involvement in various criminal activities. This has resulted to the other family members mistrusting them hence not willing to be associated with them.

Failure of the abusers to get support from the other family members due to mistrust and avoidance has resulted to their low level of participation in development activities. This is confirmed by 57.6% of the current and 83.7% of the former substance abusers. The support denied could either be financial, psychological or emotional.

The above results were confirmed by records available in the provincial administration offices especially the information on the youth involvement in criminal activities, family break-up and quarrels. While the issues of concerning youth health were confirmed by the records at the dispensary in the region, though they could not give an accurate number as to how many youth are affected by substance abuse on their health since majority of them do not seek medical services unless very sick. According to the records at the CDA and DYO offices the level of youth participation in development activities in the region is declining, suggesting the reason as abuse of illicit brew and drugs.

According to the discussion with the key informants majority of the substance abusers are irresponsible and non committal hence can not undertake a serious development activity. This is caused by various reasons which include: addiction to substances, frequent sickness, fights and quarrels, depression, frequent arrest by police due to criminal activities, Self isolation either to avoid being arrested or due to low self esteem as a result of their un-acceptable behaviour. It was also realized that majority of the substance abusers are poly-addicts and have different

tolerant to different substances. The rate of abuse of these substances increases with time, as the feeling of “being high” shifts with time hence requiring more substances to be attained. This results to abuser spending every coin they have on the substances to the expense of other responsibilities hence appearing irresponsible. These results to the decline in the level of the substance abuser participation in development activities.

5.4 Conclusions

The purpose of this study was to investigate how the effects of illicit brew and drug abuse on the youth affects their level of participation in development activities in Ndumberi location. This study was based on out of school youth aged between 16-30 years living in Ndumberi location. Most of the substance abuser were affected by the substances abused either in education, health, socially and in family relationship. The effects have contributed greatly to the decline in the level of the abusers participation in development activities.

It was clear from the research that the illicit substance abuse has a number of effects on the substance abuser, which in most cases interfere with their level of participation in development activities. The sited effects on one’s health included: General body weakness, frequent coughing, Craving for the substance/addiction, depression, mouth cancer, and blindness. All these effects have a direct relationship on how one operates. In this case, these effects work as a hindrance to the affected individual level of participation in development activities.

Most substance abusers never completed their school either as a result of voluntary withdraws under the influence of the illicit drugs or being expelled from school by the management. The illicit brew and drug abuse has effects on the level of concentration of the abuser especially when addicted this has resulted to the majority of the abuser performing poorly as far as academics are concerned. This has denied the abusers from getting the necessary skills to participate in various jobs, especially the professional/white collar jobs, leaving them with only manual jobs. This is an indication that the scope of areas one can work are greatly reduced depending on the level of education.

Majority of the substance abuser need money to buy these substances where most are very expensive and scarce. To achieve this need basing on the effects in 3 and 4 they result to

criminal activities. These activities includes: coning/lying to obtain money, stealing and robbery, prostitution, Threatening and especially through the cell phones, engaging in illegal business like drug trafficking among others. All these activities are illegal and prosecutable hence most of the abusers spend a lot of time in jail or hiding for fear of being arrested. Ones arrested and released they feel ashamed of themselves hence are unable to intermingle freely with the public resulting to self isolation, there is also the aspect of public mistrust on them hence no one is willing to offer them any work to do. This reduces their participation level to development activities.

Majority of the families where the drug abusers come from see them as a burden because of various effects of the substances abused on their bodies, which in some cases result in heavy expenditure in terms of hospital bills or fines hence straining the family earnings. There is also an issue of mistrust on the abuser by other family members. This in some families has resulted to conflicts either between the parents, other family members or the spouses, in some cases resulting to separation, divorce or frequent quarrels. Other family members are unwilling to support the affected either financially, socially, psychologically or emotionally resulting to a number of them being depressed, due the feeling that they are hated. This reduces greatly their level of participation in development activities.

5.5 Recommendations

This study has established that a lot potential manpower is destroyed as a result of illicit brew and illicit drug abuse among the youth. In consideration of research findings this study had the following recommendations to the Kenyan Government

- i. A drop-in-drop out rehabilitation centre with well trained staffs where the affected can go for counseling purposes in Ndumberi location should be establish.
- ii. A law banning all the illegal brewers and illicit drug dealers should be introduced.
- iii. Awareness should be created among the youth and their parents on the harmful effects of illicit brew and drug abuse on the abusers' health, education and social life.
- iv. The school curriculum should be changed to include subjects dealing with the harmful effects of drug abuse among the abusers as early as in primary school education.
- v. The law enforcer should be properly facilitated to enable them deal with the illegal brews and drug trafficking.

- vi. Laws should be enacted to allow cheap safe brews which are within the standards of Kenya bureaus of standard. And also enhancing the services of Kenya bureaus of standard to ensure safe drinks.

5.6 Suggestion for further research

- i. This study was conducted in Ndumberi location in Kiambu district, similar research are recommended in other locations in the same district and if possible the whole country.
- ii. A research to find out why the youth involve themselves with the habit of illicit brew and drug abuse in the whole of Kiambu district is recommended.

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APPENDECES

APPENDIX 1: CURRENT ILLICIT BREW AND DRUG ABUSERS QUESTIONNAIRE

- I am currently a master's candidate in the University of Nairobi carrying out field research on "effect of Illicit brew and drug abuse on the level of youth participation in development activities in Ndumberi location".
- Do not write your name on the questionnaire since the information you shall give will be treated confidentially and will be used only for the purpose of this research.
- Kindly respond to all questions.

PART A: SOCIO-DEMOGRAPHIC INFORMATION (Tick where appropriate)

- a) Gender: Male [], Female []
- b) State your age in years 16-18[], 19-21 [], 22-24 [], 25-27 [], 28-30[],
- c) Sub-location of Residence: Ndumberi [], Karunga [], Kahuho []
- d) Highest level of education attained: primary [], secondary [], tertiary level [], university [], never went to school []
- e) Your current occupation/ what you do for a living: Employed [], Self Employed [], casual labourer [], provided for by parents or others [], any other specify
- f) Did you use to take (i) illicit brew? YES [], NO [], If yes specify the type(s) taken.....
(ii) Abuse drugs? YES [], NO [] If yes specify the drug(s) taken.....

PART B: How youths' poor health affect their level of participation in development activities in Ndumberi. (Tick where appropriate)

- a) How did the substance consumption affect your health? Had no effect [], had effect []
- b) If it has effect in "a" above state how
- c) Does this/these effect(s) affect your level of participation in development activities? Yes []
NO [], If yes specify

- d) For how long can you do without consuming this/these substance(s)? 0-6hrs [], 7-12hrs [], 13-above.
- e) Does this “d” affect your level of performance in your work? Yes [], No [], If yes, how? Increases the performance [], Decreases performance []
- f) How many times did you visit the hospital in the **past one month** due to the effect of illicit brew or drug abuse? None [], Once [], Twice [], Thrice [], More than three times [], Admitted [].
- g) Did this “f” affect your level of participation to your daily development activities? Yes [], No [], If Yes how?
- h) On average how many hours do you work per day 0-4 [], 5-8 [], 9-above []
- i) On average how many hours did you use to work per day before you started consuming these substances; 0-4 [], 5-8 [], 9-above [].
- j) Comment on your general health as a result of substance abuse: Excellent [], very good [], good [], fair [], poor [].
- k) Comment on your general health before starting substance abuse; Excellent [], very good [], good [], fair [], poor [].
- l) Comment on your current general level of participation in development activities: Low [], fair [], Moderate [], High [], Very high [].

PART C: How school dropping out affect the level of youth participation in development activities in Ndumberi Location. (Tick where appropriate)

- a) Did you complete your schooling as stated in part A,(c): Yes [], No [],
- b) If “No” in “a” above, did the consumption of the above mentioned substances (part A,(e)) contribute to your dropping out; Yes [], No []
- c) How did the consumption of the above mentioned substance affect your level of education? Poor academic grades [], dropping from school [], Expelled [], any other specify.....
- d) How does the education attained affect your level of participation in various development activities? It does not affect [], it affects [].

e) If it affects in "d" above state how?.....

Due to your level of education are there types of jobs you cannot do? Yes [], No []. If yes specify the types

PART D: How youth engagement to anti-social behaviour affect their level of participation in development activities. (Tick where appropriate)

a) Does abuse of these substances affect your social behaviours in any way? YES [], NO [], If yes how?.....

b) Does the change in your social behaviour affect your level of participation in development activities? YES [] NO [], If yes explain how?

c) Does your behaviour affect others from participating in development activities? YES [], NO [], If yes explain how?.....

d) State the anti-social behaviours you are involved in;

e) Are you currently: Single [], Separated [], Widowed [], Divorced []

In any of the cases give a reason why?

f) Have you ever been arrested by police because of this change in behaviour? YES [] NO [], If yes, 1) how long did you stay in custody?.....

2) What was the actual thing that caused your arrest?

g) How did this affect your level of participation in development activities; no effect [], decreased []

h) (Tick appropriately)

		Not at all	slightly	Moderately	Quite a bit	Almost Totally
1	Does abuse of illicit brew and drug abuse interfere with your normal social activities with family, friends, neighbours or groups?					
2	Does abuse of illicit brew and drug abuse interfere with your hobbies or recreational activities?					

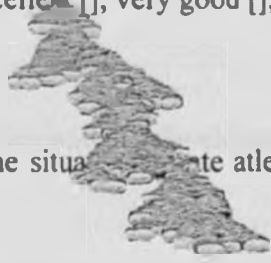
3	Does abuse of illicit brew and drug abuse interfere with your house hold chores and responsibilities?					
4	Does abuse of illicit brew and drug abuse affect your level of participation in your daily economic activity?					

PART E: How family break-up affect the level of youth participation in development activities in Ndumberi location. (Tick where appropriate)

- a) Does abuse of these substances affect your relationship with other family members? YES [] NO [], If yes how?
- b) Does this affect your participation in development activities? YES [] NO [], If yes, How?.....
- c) Does these effects in (a) above affect the level of the other family members' participation in development activities? YES [] NO [], If yes how?.....
- d) How does the abuse of these substances affected your parents' relationships: Had no effect [], made them separate [] made them divorce [], Resulted to frequent quarrels among them []
- e) Are there resources you lacked due to family break-up that affects your level of participation in development activities? Yes [], No []. If yes explain.....
- f) How does the situation in "d" above affect your level of participation in development activities; has no effect [], Decrease the participation level [], increase the participation level
- g) Comment on your general level of participation in development activities basing on the existing relationship between your parents; excellent [], very good [], good [], fair [], poor []

RECOMMENDATION

What do you think should be done to improve the situation? State atleast three measures that should be taken.



THANKYOU FOR YOUR HELP!

APPENDIX2 : FORMER ILLICIT BREW AND DRUG ABUSERS QUESTIONNAIRE

- I am currently a master’s candidate in the University of Nairobi carrying out field research on “**effect of Illicit brew and drug abuse on the level of youth participation in development activities in Ndumberi location**”.
- Do not write your name on the questionnaire since the information you shall give will be treated confidentially and will be used only for the purpose of this research.
- Kindly respond to all questions.

PART A: SOCIO-DEMOGRAPHIC INFORMATION (Tick where appropriate)

- a) Gender: Male [], Female [].
- b) State your age in years 16-18[], 19-21 [], 22-24 [], 25-27 [], 28-30[],
- c) Sub-location of Residence: **Ndumberi** [], **Karunga** [], **Kahuho** []
- d) Highest level of education attained: **primary** [], **secondary** [], **tertiary level** [], **university** [], **never went to school** []
- e) Your current occupation/ what you do for a living: Employed [], Self Employed [], provided for by parents or others [], any other specify
- f) Did you use to take (i) illicit brew? YES [], NO [], If yes specify the type(s) taken.....
(ii) Abuse drugs? YES [], NO [] If yes specify the drug(s) taken.....

PART B: How youths poor health affect their level of participation in development activities in Ndumberi. (Tick where appropriate)

- a) How did the substance abuse affect your health? Had no effect [], had effect []
- b) If it had effect in “a” above state how
- c) Did this/these effect(s) affect your level of participation in development activities? Yes []
NO [], If yes specify
- d) For how long could you do without abusing this/these substance(s)? 0-6hrs [], 7-12hrs [], 13-above

- e) Did this “d” affect your level of performance in your work? Yes [], No [], If yes, how? Increases the performance [], Decreases performance []
- f) How many times did you visit the hospital in the **past one month** due to the effect of illicit brew or drug abuse? None [], Once [], Twice [], Thrice [], More than three times [], Admitted [].
- g) Did this “f” affect your level of participation to your daily development activities? Yes [], No [], If Yes how?
- h) On average how many hours do you work per day 0-4 [], 5-8 [], 9-above []
- i) On average how many hours did you use to work per day before you stopped consuming these substances; 0-4 [], 5-8 [], 9-above [].
- j) Comment on your general health as a result of the consumption of these substances: Excellent [], very good [], good [], fair [], poor [].
- k) Comment on your general health after stopping substance abuse; Excellent [], very good [], good [], fair [], poor [].
- l) Comment on your general level of participation in development activities after the effects of substance abuse: Low [], fair [], Moderate [], High [], Very high [].

PART C: How dropping out of school affect their level of participation in development activities in Ndumberi Location. (Tick where appropriate)

- a) Did you complete your schooling as stated in part A,(c): Yes [], No [],
- b) If “No” in “a” above, did the consumption of the above mentioned substances (part A,(e)) contribute to your dropping out; Yes [], No []
- c) How did the consumption of the above mentioned substance affect your level of education? Poor academic grades [], dropout from school [], Expelled [], any other specify
- d) How does the education attained affect your level of participation in various development activities? It does not affect [], it affects [].
- e) If it affects in “d” above state how?.....

f) Due to your level of education are there types of jobs you cannot do? Yes , No . If yes specify the types

PART D: How youth engagement in criminal activities affect their level of participation in development activities. (Tick where appropriate)

a) Did consumption of these substances affect your social behaviours in any way? YES , NO , If yes how?.....

b) Did the change in your social behaviour affect your level of participation in development activities? YES NO , If yes explain how?

c) Did your behaviour affect others from participating in development activities? YES , NO . If yes explain how?.....

d) State the anti-social behaviours you were involved in;

e) Are you currently: Single , Separated , Widowed , Divorced

In any of the cases give a reason why?

f) Have you ever been arrested by police because of this change in behaviour? YES NO . If yes, 1) how long did you stay in custody?.....

2) What was the actual thing that caused your arrest?

g) How did this affect your level of participation in development activities; no effect , decreased

g) (Tick appropriately)

		Not at all	slightly	Moderately	Quite a bit	Almost Totally
1	Did your abuse of illicit brew and drug abuse interfere with your normal social activities with family, friends, neighbours or groups?					
2	Did your abuse of illicit brew and drug abuse interfere with your hobbies or recreational activities?					
3	Did consumption of illicit brew and drug abuse					

	interfere with your house hold chores and responsibilities?					
4	Did your abuse of illicit brew and drug abuse affect your level of participation in your daily economic activity?					

PART E: How family break-up affect the level of youth participation in development activities in Ndumberi location. (Tick where appropriate)

- a) Did abuse of these substances affect your relationship with other family members? YES [] NO [], If yes how?
- b) Did these affect your participation in development activities? YES [] NO [], If yes, How?.....
- c) Did these effects in (a) above affect the level of the other family members' participation in development activities? YES [] NO [], If yes how?.....
- d) How did your abuse of these substances affected your parents' relationships: Had no effect [], made them separate [] made them divorce [], Resulted to frequent quarrels among them []
- e) Are there resources you lacked due to family break-up that affects your level of participation in development activities? Yes [], No []. If yes explain.....
- f) How did the situation in "d" above affect your level of participation in development activities; has no effect [], Decrease the participation level [], increase the participation level []
- g) Comment on your general level of participation in development activities basing on the existed relationship between your parents; excellent [], very good [], good [], fair [], poor [].

RECOMMENDATION

What do you think should be done to improve the situation? State at least three measures that should be taken.

THANKYOU FOR YOUR HELP!

APPENDIX 3: KEY INFORMANTS STRUCTURED INTERVIEW GUIDE

1. Do you think the youths between the ages 16 to 30 in Ndumberi location are involved in illicit brew and drug abuse? Explain
2. Give the types of illicit brew and drug abused by the youth?
3. How often do they consume these substances?
4. At what ages are the most illicit brew and drug abusers?
5. Where do you think most of the illicit brew and drug abuse addicts come from in Location?
6. What is the general view on the marital status of most addict youth? Give a reason.
7. What is highest level of education attained by most drug addict youth in Ndumberi location?
8. What do most of these youths do to earn their a living?
9. Does abuse of these substances have any effect on their rate of school droppingout? Explain.
10. Do you think the school dropping out among the youth has any effect on their level of participation in development activities in Ndumberi? If yes how?
11. Does abuse of these substances have any effect on their health? Explain.
12. State how often most of the abuser visit the health centre due to the effect of these substances on their health.
13. Do you think the effect of drugs and illicit brew abuse on youth health affect their level of participation in development activities in Ndumberi? Explain
14. Does abuse of these substances have any contribution to their involvement in crimes?
15. Does youth involvement in criminal activities affect their level of participation in development activities? Explain
16. Do their behaviours affect or hinder others from participating fully in development activities? Explain.
17. Have they ever been in the hands of the police due to these crimes? If yes for how long did they spend in the police custody? How do you think this duration affected their involvement in development activities?
18. Does abuse of these substances have any effect on their relationship with other family members? Explain.
19. How does the effect of illicit brew and drugs abuse on their relationship with other family members affect their participation in development activities? Explain how?

THANKS FOR YOUR GREAT HELP

APPENDIX 4: ILLICIT SUBSTANCES ABUSED IN NDUMBERI.

Current drug abusers categorized according to age

Age interval	Type of illicit substance taken								
	Illicit brew	Bhang	Miraa	Tobacco	Cigarettes	Brown sugar	Heroin	Cocaine	Madrax
16-18	14	4	4	2	5	1	0	1	2
19-21	41	20	17	0	7	2	3	1	3
22-24	72	32	25	3	18	2	3	1	6
25-27	33	15	6	3	10	0	0	1	0
28-30	41	13	7	1	12	1	0	2	1
TOTAL	186	84	59	9	52	6	6	6	13
Percentage of respondents	91.63	41.38	29.06	4.43	25.62	2.96	2.96	2.96	6.40

Former drugs abusers categorized according to age

Age interval	Type of illicit substance taken								
	Illicit brew	Bhang	Miraa	Tobacco	Cigarettes	Brown sugar	Heroin	Cocaine	Madrax
16-18	4	1	0	0	0	0	1	0	0
19-21	8	7	2	3	3	2	0	0	0
22-24	7	5	0	1	1	0	0	0	0
25-27	11	4	1	1	4	0	0	0	0
28-30	10	5	6	1	3	0	0	0	0
TOTAL	40	22	9	6	11	2	1	0	0
Percentage of respondent	81.60	44.90	18.37	12.24	22.45	4.08	2.04	0	0

APPENDIX 5: SUMMARY OF THE RESPONDENTS' FEELINGS ON EFFECTS OF SUBSTANCE ABUSE

Effects of Substance Abuse	Current Substance Abusers			Former Substance Abusers		
	Number & percentage affected	Number & percentage not affected	Difference in number & percentages	Number & percentage affected	Number & percentage not affected	Difference in number & percentages
Youth poor health	143	60	83	38	11	27
	70.4%	29.6%	40.8%	77.6%	22.4%	55.2%
Youth dropping out of school	127	76	51	36	13	23
	62.6%	37.4%	25.2%	73.5%	26.5%	47%
Youth Engagement in Criminal activities	120	83	37	40	9	31
	59.1%	40.9%	18.2%	81.6%	18.4%	63.2%
Family Break-up	117	86	31	41	8	33
	57.6%	42.4%	15.2%	83.7%	16.3%	67.4%
Average number and percentage	126	77		39	10	
	62.4%	37.6%		79.1%	20.9%	