INFLUENCE OF DRUG ABUSE ON STUDENTS ACADEMIC PERFORMANCE IN PUBLIC UNIVERSITIES. A CASE OF UASIN GISHU COUNTY IN KENYA

BY

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DECLARATION

This research project is my original work and has not been submitted for the award of a degree in any university or any other institution of higher learning.

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This research project has been submitted for examination with my approval as the University Supervisor.

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DEDICATION

I dedicate this Research Project to my Mother Mrs Sarah Chumba Tuwei for her patience, support and encouragement throughout my study period, her understanding and contribution gave me comfort all through the period of my study.
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I wish to acknowledge the assistance from my supervisor Mr Stephen Okello for his concern and guidance in making this project a reality, The University of Nairobi for giving me a chance to advance my education, My lectures for having spent time to give me the necessary skills and Knowledge to do this project and My family for being supportive in all ways.
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ABBREVIATIONS AND ACRONYMS

AIDS – Acquired Immunodeficiency Syndrome

CBOs – Community Based Organizations

ICPA – International Commission on Prevention of Alcoholism

MOE – Ministry of Education

NACADA – National Authority for Campaign against Alcohol and Drug Abuse

NIDA – National Institute on Drug Abuse

SAS – School of Arts & Social Sciences

UN – United Nations

UNODC – United Nations Office on Drugs and Crime

UNDCP – United Nations Drug Control Programme

WHO – World Health Organization
ABSTRACT

This study seeks to examine the influence of drug Abuse on students’ academic performance in public universities in Uasin Gishu County. Specifically, the study sought to establish the effects of the drugs as a contributing factor to poor performance by students in Moi University, University of Nairobi, Kisii University, Laikipia University and University of Eldoret. Substance use among college and university students predicts substance related problems in later life. Few studies on this phenomenon have been carried out in schools in rural areas, and most focus on urban and secondary school students. This study therefore aimed to establish the prevalence and factors associated with drug use among university and college students in a rural area. The target population was 18,099 respondents consisting of 9 college administrators and 18,090 students in Uasin Gishu County. The sample size was 400 respondents, made up of 9 college administrators and 391 students. The data was collected by use of questionnaires, interviews and supplemented by personal interviews where necessary. Data analysis was done using descriptive statistics after data cleaning and coding. Quantitative data was analysed using frequency counts, means and percentages while qualitative data was analysed by tallying the numbers of similar responses. Results of data analysis were presented using frequency distribution tables and bar graphs. The study established that more students were able to access drugs and more are at risk of being influenced to start using drugs. The study therefore recommends for stricter measures on addressing the supply and use of drugs, and also to provide more funds to fight and assist students who are addicts and increase the number of students who graduate as well as increase quality of education. The findings of this study should stimulate continuous debate on drug abuse in academic institutions and also provide valuable insights that the government, stakeholders, scholars and researchers can rely on their collective endeavour of addressing the challenges and making the fight against drug abuse initiative a success. The study findings hoped to provides a guidance upon which recommendations are made. It is expected that this study will lead to a better understanding to the major contributors to student’s academic performance. A Drug is any product other than food or water that affects the way people feel, think, see, and behave. It is a substance that due to its chemical nature affects physical, mental and emotional functioning. It can enter the body through chewing, inhaling, smoking, drinking, rubbing on the skin or injection.
CHAPTER ONE

INTRODUCTION

1.1. Background to the Study

Drug abuse is the Use of drugs for purposes other than medical reasons, thus affecting the individual in a negative way socially, cognitively or physically Kuria(1996). Social effects may be reflected in an individual’s enhanced tendency to engage in conflicts with friends, teachers, and school authorities. Cognitive effects relate to the individual’s lack of concentration on academic work and memory loss. While Lewinsohn(2007) defines a drug as any product other than food or water that affects the way people feel, think, see, and behave. It is a substance that due to its chemical nature affects physical, mental and emotional functioning. It can enter the body through chewing, inhaling, smoking, drinking, rubbing on the skin or injection.

Drug abuse amongst the global youth population has become a serious problem affecting everyone. Addiction leads many people, young people prominent amongst them, into downward spiral of hopelessness that in some cases ends fatal. They range from glue-sniffing street children and teenage ecstasy users, to hard core heroin and cocaine addicts (Nacada, 2005). Drug abuse is responsible for lost wages, destruction of property in schools, soaring health care costs and broken families. It is a problem which affects us all as parents, children, teachers, government officials, taxpayers and workers.

United States of America was found to have citizens who were four times more likely to report using cocaine in their lifetime than the next closest country, New Zealand (16% vs. 4%). Marijuana use was more widely reported worldwide, and the U.S. also had the highest
rate of use at 42.4% compared with 41.9% of New Zealanders (Warner 2005-2008). The problem of alcohol and illicit drug use on college and university campuses is significant. Among college and university students, specific problems identified include binge-drinking, underage drinking, underage binge-drinking, and drug use. Estimates of prevalence of these behaviours range from 25 to 44%. American researchers have identified an upward trend for these problems, with increased percentages of students self-reporting these behaviours between 1993 and 2001 (Mohler-Kuo et al., 2003). Abuse of substance is considered as one of the most critical problems in public health in the American colleges (Sullivan and Risler, 2002).

Pakistan had an approximately 25 to 44% of students reporting alcohol and/or illicit drug use, and prevalence rates on the incline, this problem is a significant concern for Pakistani colleges and universities (Khattak, Iqbal and Ullah, 2012). Binge drinking, alcohol use, and illicit drug use is associated with a number of consequences for students. Sheffield et al. (2005) indicate that binge drinking is associated with significant consequences to students, including employment, educational, and relationship problems. In addition, Wechsler et al. (2002) indicate that, in comparing underage with legal age students, underage students who drink are more likely to experience consequences related to their alcohol use.

Researchers in Pakistan have identified an increasing prevalence of drinking and drug use among college students, an increasing trend of self-reported alcohol-related consequences, including arrests, has also been noted between 1993 and 2001 (Nicklin, 2000; Wechsler, Lee and Nelson 2002). In accordance with present research related to alcohol and drug use among college and university students, the currently proposed research seeks to examine the extent and nature of alcohol use and how their academic performance is being affected by it.
South African study found an alcohol use prevalence rate of 39.1% and a cigarette use prevalence rate of 10.6% among high school adolescents. Other drugs that are commonly used in these settings include cannabis, inhalants, tranquilizers, heroin and cocaine, among others. The drug problem in South Africa is extremely serious, with drug usage reported as being at twice the world norm. Over 15% of their population has a drug problem. Studies show that people who start drinking before the age of 15 are four times more likely to become alcoholics. School kids who use alcohol or drugs are three times more likely to get involved in violent crimes. Frighteningly the average age of drug dependency in South Africa is 12 years old and dropping (Peter Jordan, 2008).

Tanzania, is the second country after Kenya in East Africa with an increasing number of drug users mainly being school going teenagers The Drug Control Commission (DCC) Report (2011) states that the actual number of drug addicts in general is estimated to be at between 150,000 and 500,000 nationwide. Statistics issued by Mirembe Hospital in Dodoma region that were incorporated in the DCC Report show that the number of young people who use drugs and attend clinics at the hospital increased from 290 in 2000 to 569 in 2005, equal to a 96.2 per cent increase.

Kenya has reported high rates of substance use among students in public Universities, (Odek-Ogunde et al., 2004) indicated rates as high as 84% for alcohol use and 54.7% for tobacco. The rates would continue to rise among students in institutions of higher learning in the near future for instance, (Kuria MW., 1996) found alcohol use prevalence rates of up to 15% among secondary school students, while (Kwamanga et al., 2003) found lifetime cigarette smoking rates of 32%. In a study among students in Kenya, (Ogwell et al., 2003) found a lifetime cigarette smoking rate of 31%.
The National government in Uasin Gishu County embarked on an aggressive campaign to fight drug and substance abuse (Michael Shiundu, 2014, Kenya News Agency). Stakeholder established advisory committees and other mechanisms to help sensitize communities on the vice. The campaign, which targeted parents and students was spearheaded by chiefs and their assistants at the grassroots level. According to Kapsoya location Chief Musa Kipchumba, drug abuse was becoming a disaster both in rural and urban settings, as barons target school children. In an interview, the Chief said the involvement of communities in the awareness campaigns had seen a reduction in cases of drug abuse by both parents and their children, hence increasing student enrolment and completion rates in schools. He said while drug and substance abuse had hit hard on the youthful population, the older people were also resorting to substance abuse through excessive intake of alcohol.

Creating awareness to the public on the dangers of drug abuse has become one of the key priorities in the County Government work schedule as public servants, through this effort it is hoped that there will be reduced cases of drug and substance abuse by a huge percentage. The report emphasized that measures had been put in place to reduce the production and sale of illicit brews, stating that through area advisory committees established under the County Commissioner’s office, they have managed to disband the illicit brew dens.
1.2. Problem Statement

Uasin Gishu County has experienced rapid growth of population in recent years, the increasing demand for education has led to more Universities being formed. Due to the rapid development, drug use has become common among students in campus and is even affecting their performances in class. Despite the worldwide concern and education about the dangers of drug abuse, most of the students have limited knowledge of how dangerous the habit is (Ngesu, 2008). Many students have dropped out of school and others opted to engage in criminal activities thus endangering the lives of the people living in Uasin Gishu County. The young generation no longer has role models since most of the young Adults are unemployed and under the influence of this drugs.

Despite the government’s concern and heightened campaigns against the vice among high school students, there exists a parallel accelerated rate of students who are illicit drug users. Although, students are expected to be aware of the effects of drug abuse and commit themselves to their studies, the habit still exist default of their prior expected awareness of its consequences. Although excessive use of illicit drugs is prevalent in all societies, students with no exception, none of critical studies on factors influencing its prevalence comparing in school to out of school youth has yet been conducted in Uasin Gishu County Michael Shiundu (2014). This has been established from a thorough search in the archives and libraries so as to ascertain originality of this study. This has been a green field of research that has greatly prompted the choice Uasin Gishu County as the location of the study.

This study therefore, seeks to establish the correlation between poor academic performance and the use of drugs in Public Universities in Uasin Gishu County in Kenya. The study will also assess the various reasons as to why students abuse drugs and the various types
of drugs available to the students’ population. Behaviour is a major aspect of life, after observing students behaviour when under the influence of this drugs this study will recommend ways of rehabilitating those already affected and ways of eradicating drug peddling business going on at our Universities. The study will also propose policy recommendations to mainstream drug related projects to secure students’ rights to education and the entire young generation.

1.3. Purpose of the Study

The purpose of this project is to investigate the influence of drug abuse on students’ academic performance in Public Universities in Uasin Gishu County in Kenya.

1.4. Research Objectives

The objective of the Current study will be;

1. To determine the extent to which Alcohol abuse Influences Student’s Academic Performance in Uasin Gishu County.
2. To examine the extent to which Marijuana abuse influences Student’s Academic Performance in Uasin Gishu County.
3. To evaluate how Tobacco abuse influences student’s Academic performance in Uasin Gishu County.
4. To examine the extent to which Barbiturates abuse influences student’s Academic Performance in Uasin Gishu County.
1.5. Research Questions

The study will attempt to answer the following questions:

1. What is the extent of Alcohol abuse among students in public universities in Uasin Gishu County?
2. What are the main causes of Marijuana use among the students in public universities?
3. Which are the drugs commonly abused by the students in public universities?
4. What are some of the negative impacts on academics caused by the abuse of tobacco?
5. How does the use of Barbiturates influence students’ academic performance?

1.6. Significance of the Study

The findings of the study will be useful to the Community, Institutions of higher learning and the County Government. The study will reveal the influence of major drugs on students’ academic performance and in their behaviour aspects. There are many parents and lecturers with questions as to why their students don’t perform as expected, the government is also looking for explanations as to why the youth are not innovative and as to why most of them drop out of school.

Uasin Gishu, like many other counties, is faced with the social problem of high rates of drug abuse. To make matters worse, the percentage of drug abusers in the population increases yearly despite the efforts to eradicate the problem. Failure to solve this problem not only threatens the life of individuals, but also the economic and social development of the country as a whole. The current study is useful in contributing to the general body of knowledge in this area. Beyond that, however, it also explores the potential of universities as well as other schools to curb the drug problem.
The study should help to make local government; administrators, local community as well as students aware of the factors hindering the effectiveness of the approaches which attempt to curb drug abuse and, where possible, create opportunities to eradicate the problem. The proposed programme would be useful in educating all youths and adults in Uasin Gishu, on the risks of drug consumption. Thus, this study would play an important role in reducing, or even preventing high rates of drug use and abuse. Based on the findings, recommendations will be made. If followed, these recommendations would be useful to administrators and local government in curbing drug abuse in schools through improving existing educational programmes, and striving to develop ones that are even more efficient. A part from proposing more effective preventive measures in relation to drug abuse, the study will also provide a background for other studies in its prevention. This would help in promoting a drug-free school environment and better academic performance, thus improving the standards of education in the county. In the absence of specific policies on substance abuse in schools this study will make important recommendations on the way forward.

1.7. Delimitations of the Study

The study will be carried out in tertiary institutions of higher learning within Uasin Gishu County, Kenya. They are government-run Universities with ISO certification and different affiliated collages within Eldoret. This study will concentrate on the determining factors that influence academic performance among students and its outcome in Public Universities within Uasin Gishu County. This study will examine the commonly abused drugs in school, their cost, availability rate of consumption and various effects on student’s performance.

Moi University, main campus is located 36 kilometres south east of Eldoret and on a 1,3663.04 hectares of land. The university is located in a rural agricultural prone area and the
recently Chepkoilel campus which is now The University of Eldoret and is about 20km away from town. While The University of Nairobi, Laikipia University and Kisii University are all at the Central business centre, the study will target both students and staff and will be carried out between February and June 2014.

1.8. Limitations of the Study

Exploring the possible confounds and conducting a thorough investigation into the construct validity of information given by respondents will be difficult and would require additional research. This research could perhaps assume a qualitative nature, and might probe people’s concepts about personality resilience, comprehensibility, manageability and so on. Interviews and panel discussions with people from the local community, local government and the administration may help but in spite getting a research permit and letters of introduction from relevant government authorities and schools, suspicion of the area of research would also likely to cause unnecessary delays. Drug abuse is sensitive and many people may withhold vital information.

1.9. Assumptions of the study

In this study the researcher assumed that the reasons for students’ high prevalence of drug abuse are ones enumerated in the objectives of the study. Other factors have no or negligible influence on the frequency of drug abuse among students. Therefore the study findings, conclusions and recommendations are pegged on the factors of the study and all other factors held constant.
1.10. Definition of Significant Terms

**Alcohol abuse** - A pattern of drinking that result in harm to one’s health, interpersonal relationships, or ability to work.

**Academic Performance** - The extent to which a student has achieved his or her educational goals.

**Barbiturates** - They are drugs that act as central nervous system depressants. They produce effects ranging from mild sedation to total anaesthesia. They include sleeping pills and mau.

**Binge Drinking** - drinking lots of alcohol in a short space of time or drinking to get drunk or feel the effects of alcohol

**Drug** - Any product other than food or water that affects the way people feel, think, see, and behave. It is a substance that due to its chemical nature affects physical, mental and emotional functioning.

**Drug abuse** - The Use of drugs for purposes other than medical reasons, thus affecting the individual in a negative way socially, cognitively or physically.

**Influence** - the power to change or affect someone, the power to cause changes without directly forcing them to happen.

**Students** - Undergraduate learners in public universities in Uasin Gishu County.

**Marijuana Abuse** - Preparation of the cannabis plant intended for use as a psychoactive drug.
1.11. **Organization of the Study**

This study is organized into five chapters; the first chapter is the introduction that gives a general overview of the research problem. This chapter further provides a background to the problem, a problem statement as well as the objectives and assumptions of the study. Literature that is relevant to this field of study is reviewed in chapter two to establish the influence of drugs on students’ academic performance. Chapter three examines the methodology that will be used to collect and analyse data. Chapter four deals with data analysis while chapter five focuses on conclusions and recommendations as well as further proposed areas of research.
CHAPTER TWO

2. LITERATURE REVIEW

2.1. Introduction

This section consists of review of related literature. The section covers introduction, literature on the causes of drug abuse amongst Students, Nature and extent of drug abuse by Students. Then literature is reviewed on the measures taken against drug abuse by the schools, local community as well as both local and county government, effects of drugs, levels of drug and substance prevention, policies against drug use in Kenya and social effects of drug abuse and poor academic performance. After this the theoretical framework and conceptual framework of the study are presented.

2.2. Alcoholism and Academic Performance

A large number of studies tried to identify whether there are direct and/or indirect causal links between consumption of addictive substances and poor educational attainment. Most intuitively, alcohol and drug consumption may have some detrimental effects on pupils’ cognitive abilities, for instance, by decreasing their ability to concentrate. Concerning the indirect channels, drug and alcohol consumption may for instance be responsible for shifting individuals’ resources away from schooling. Additionally, it may undermine students’ progress by making them less likely to attend classes or keep up with their studies. Finally, psychologists argue that heavy drinking may lower individuals’ expectations about their academic performance Deasetal, (2000). This effect could be driven by a shift in students’ peers when they engage in abusive alcohol consumption. There is still no consensus in the literature concerning the existence of a causal link between consumption of addictive
substances and educational outcomes. On the one hand, some studies provide evidence that heavy drinking and drug consumption lead to a lower schooling performance. DeSimone and Wolver (2005) find that by introducing a large vector of covariates which control for heterogeneity between alcohol consumers and non-consumers, the negative causal relation between alcohol use and academic performance re-mains significant for heavy drinking. In line with these results, Williamset al (2003), report that heavy drinking has a negative impact on schooling achievements by reducing the time spent studying.

Renna (2006) finds that heavy alcohol consumption has a negative effect on the probability of graduating from a high school rather than receiving a general education diploma (GED). However, these results are subject to valid criticisms since they ignore or only imperfectly control for the potential selection bias. Some studies are not able to reject the absence of a causal effect of drugs and alcohol consumption on educational performance. For instance, many physiological studies do not provide robust evidence on the detrimental effects of drugs Solowij, (1998). In the economic literature, Dee and Evans (2003) conclude that alcohol use by teenagers does not have any significant impact on their education. Similarly, Koch and Ribar (2001) demonstrate that the actual effects of youthful drinking on students’ success are likely to be small. Finally a recent paper by McCaffrey et al (2008) shows that marijuana abuse does not have any significant influence on high school dropout.

The major difficulty in the identification of a causal effect of addictive substances consumption on educational outcomes is the fact that students who regularly consume alcohol and drugs do not constitute a random sample of the population of students. They tend to present some characteristics that systematically differ from those of students who abstain from drug and alcohol consumption. For instance, this behaviour is negatively associated with family income and educational background (Deaton, 2003). Suppose that some parents do not
encourage their children to place great value on education. If they provide poor quality supervision to their children including with respect to alcohol and drugs consumption, then the empirical association between education and the consumption of these substances would be spurious. Also, more impatient children are both more likely to smoke and drink alcohol Sutter et al (2010) and to procrastinate with their school working duties Bettinger et al (2007). Thus, it is difficult to disentangle the causal impact of consumption of drugs and alcohol per someone’s educational achievement. To account for this endogeneity problem Duarte et al(2006) and Duarte and Escario (2006) employ a bivariate probity model to jointly estimate the determinants of schooling and drinking/smoking decisions. Their results indicate a negative causal relationship between alcohol consumption and schooling attendance. However, this study can be criticised on the grounds that it relies on the availability of a valid instrument, i.e. Factor that has some bearing on the decision to use alcohol and drug, but that is unrelated to schooling. Renna (2008) and DeSimone (2005) employ a two-stage probity model to deal with the problem of endogeneity of alcohol use.

A common and comprehensive measure of students’ learning is Grade Point Average (GPA). GPA is an important outcome because it is a key determinant of college admissions decisions and of job quality for those who do not attend college. Only a few studies have explored the association between alcohol use and GPA. Wolaver (2002) and Williams, Powell, and Wechsler (2003) have studied this association among college students, while DeSimone and Wolaver (2005) have investigated the effects of underage drinking on GPA during high school. The latter study found a negative association between drinking and grades, although it is not clear whether the effects are causal or the result of unobserved heterogeneity.
Understanding the relationship between teenage drinking and high school grades is pertinent given the high prevalence of alcohol use among this age cohort and recent research on adolescent brain development suggesting that early heavy alcohol use may have negative effects on the physical development of brain structure (Brown, Tapert, Granholm and Delis, 2000). By affecting the quality of learning, underage drinking could have an impact on both college admissions and job quality independent of its effects on years of schooling or school completion. Alcohol use could conceivably affect a student’s quality of learning and academic performance regardless of its impact on school completion. This possibility is suggested by Renna (2008), who uses a research design similar to that used by Dee and Evans (2003) and finds that although binge drinking does not affect high school completion rates, it does significantly increase the probability that a student graduates with a GED rather than a high school diploma.

By contrast, more recent economic studies that arguably use better estimation methods have found that drinking has modest or negligible effects on educational attainment. Dee and Evans (2003) studied the effects of teen drinking on high school completion, college entrance, and college persistence. Employing changes in the legal drinking age across states over time as an instrument, they found no significant effect of teen drinking on educational attainment. Koch and Ribar (2001) reached a similar conclusion applying family fixed effects and instrumental variables to NLSY data. Though they found that drinking had a significant negative effect on the amount of schooling completed among men, the effect was small. Finally, Chatterji (2006) used a bivariate model of alcohol use and educational attainment to gauge the sensitivity of the estimates to various assumptions about the correlation of unobservable determinants of these variables. She concluded that there is no evidence of a
causal relationship between alcohol use and educational attainment when the correlation coefficient is fixed at plausible levels.

Drinking could affect learning through a variety of mechanisms. Recent neurological research suggests that underage drinking can impair learning directly by causing alterations in the structure and function of the developing brain with consequences reaching far beyond adolescence Swartz welder, (2004). Negative effects of alcohol use can emerge in areas such as planning and executive functioning, memory, spatial operations, and attention

2.3. Marijuana and Academic Performance

According to (Spooner, 2005) the social environment is a powerful influence on health and social outcomes. In this context Marijuana use and related problems result from the complex interplay of the individual and the environment whereby social institutions or structures can influence the environment in a manner that can influence drug use and related problems. Societal structures include government policies, taxation systems, laws and service systems such as welfare, education, health and justice. As such increased attention to the ‘social’ determinants of drug use is required. In terms of increasing problematic Marijuana use Wilkinson notes the rapid growth in widening income differences during the 1980s and the rise in heroin use.

Adverse socio-economic circumstances may lead to psychological and emotional damage partly through increasing levels of stress brought on by money worries, unemployment and housing but essentially through a lack of choices. The social and economic environment establishes the context in which domestic life has to cope and cannot be separated from a range of what are normally seen as family problems. The quality of the social life of a society is one of the most powerful determinants of health and this is closely
related to degrees of income equality. However income equality is not the only determinant. Also important are psychosocial relationships for the subjective quality of life that people experience. Sources of social stress, poor social networks, low self-esteem, and high rates of depression, anxiety and a lack of control all have a fundamental impact on life experience. In this sense ‘unhealthy behaviours’ such as addiction may in part be explained by the need to consume psychoactive substances for their psychosocial effects, particularly where they are used to counter stress and reduce anxiety.

Behaviour has been found to lead to the trying out of new experiences such as drug and sex, sometimes with dire consequence for the adolescents. One widely accepted definition of drugs states that drugs are compounds that, because of their chemical structure, change the functioning of biological systems (Levinthal, 2000). The biological systems include respiration, growth, excretion, locomotion, reproduction, etc. The effects may be beneficial as in the case when drugs commonly referred to as medicines (e.g. Panadol, antibiotics, cough mixture, etc.) are used as prescribed by the doctor. Some other drugs have been found to be capable of producing effects that are not beneficial but harmful (Oloyede, 1996). The term drug abuse, applies only to instances in which people take drugs purely to change their moods, and in which they experience impaired behaviour or social functioning as a result of doing so (Wallace & Fisher 2003).

Unfortunately, when people consume consciousness-altering drugs on a regular basis, they often develop dependence – they come to need the drug and cannot function without it. According to (Odejide, Ohaeri, Adelekan and Ihuesan 2005), psychoactive drug use is a common problem among adolescents especially for the socially acceptable drugs like alcohol and cigarettes. A survey of secondary school students in Ilorin, Kwara State reported that 12% were currently using alcohol (Abiodun, Adelekan, Ogunremi, Oni &Obayan, 2005). In a study
of out-of – school adolescents aged 11 to 20 in Jos, found a lifetime consumption of alcohol reported by 38.7% of the respondents (Obot, Ibagam, Ojiji & Wai, 2001).

Having realized that majority of Marijuana use start during the adolescence stage especially so for the ‘gateway’ drugs, alcohol and cigarettes, the need to check this bad practice in the society is important. Alcohol and cigarettes are described ‘as gateway’ because they are usually, the first drugs that are used before other drugs are tried out (Indiana Preventive Resource Centre, 2003). Drug abuse by students can lead to sharp decline in their academic performance, increase reports of truancy and expulsion from school. It can also lead to addiction increased desire for drugs without which normal life processes is disturbed, and increased appetite and libido. Other vices such as stealing, fighting and gambling may also be caused by drug abuse as a result of alteration in the brain chemistry of the abusers.

Continued use of a drug over a prolonged period of time often leads to drug tolerance, physiological reaction in which the body requires larger and larger doses in order to experience the same effects. In some cases, tolerance for one drug increases tolerance for another; this is known as cross-tolerance (Baron & Kalsher, 2008). Patterns of drug use may vary greatly around the world and overtime. In the United States, the use of many consciousness-altering drugs by young people dropped during the 1980’s, but increased again during the 1990s (Baron & Kalsher, 2008). In fact, the result of One large survey indicated that teenager’s use of many drugs – including, alcohol, cocaine, marijuana, and nicotine (in cigarettes) – had increased substantially (Johnston, O’Malley & Bochman, 1997).

Consumption of cannabis for medical purposes is legal with a prescription in 15 states, and many states are in the process of decriminalizing non-medical marijuana use. More than 97.5 million Americans over the age of 12 have used illicit marijuana, and it is considered by
many to be a benign recreational drug. However, evidence exists of significant harm for some individuals, with 1 in 10 users developing cannabis dependence Samhsa (2007). Furthermore, sixteen percent of all substance abuse treatment admissions in the United States were for cannabis-related disorders; this is second only to alcohol-related disorders Samhsa (2007). It is estimated that more than 4 million Americans meet Diagnostic and Statistical Manual of Mental Disorders-IV diagnostic criteria for cannabis dependence. This figure has doubled from 2001, and will likely continue to grow. Thus, an understanding of the effects of cannabis on executive functions is likely to be of widespread clinical relevance.

Some cannabis-related executive function deficits improve after cessation of cannabis use Pope Bolla (2002), but growing evidence suggests that other deficits persist after cannabis is discontinued. This may hinder an individual’s ability to make the best use of behavioural therapies and put him or her at greater risk for relapse to cannabis use. Adding to the complexity of this issue is the fact that many factors can impact cannabis-related impairment and recovery of executive functions, including age of onset of smoking cannabis, years of use, and amount of regular use Grant (2003). This clinical conundrum is compounded by the fact that treatment professionals may not be able to easily identify patients with cannabis-related impairment in executive functions without the benefit of neuropsychological assessment.

Although there is convincing evidence that acute cannabis use generally affects cognitive and motor functions, it is less clear as to whether those deficits are short term and transient or if they are more enduring. Previously published reports Pope et al., (2001; 2002) using traditional neuropsychological assessment methods typically show a resolution of deficits by 28 days of abstinence. However, as neuroimaging technology has improved, more recent reports show subtle, long-term effects of cannabis on cognition and brain functioning.
2.4. Tobacco and Academic Performance

A survey conducted by (Fatoye and Morakinyo, 1997) on substance use amongst secondary school students in rural and urban communities in South Western Nigeria with a sample size of 542 made up 266 males and 276 females found that the prevalence rate of current Smoking was 13.4%. The study also found that the prevalence rate of Tobacco use was 26.4%. And that the most commonly used alcoholic beverage was palm wine (60.1%), followed by beer (20.8%), and then locally fermented wine and locally distilled gin (14.7%).

Numerous studies have indicated an alarming increase in water pipe smoking (Eissenberg T., Shihadeh A, 2009). Water pipes are known by different names depending on the region of the World, These include, but are not limited to, hookah, narghile, arghile, shisha, and hubble-bubble. Research has established that water pipe tobacco smoke contains and produces toxic substances similar to those produced by cigarette smoke, including carcinogenic polycyclic aromatic volatile aldehydes, hydrocarbons, carbon monoxide, and nicotine. (Eissenberg and Shihadeh A, 2009) reported that a single water pipe tobacco smoking session may involve the inhalation of 50 to 100 times the smoke volume inhaled from a single cigarette.

Water pipe smokers who smoke once a day were found to have the same plasma nicotine concentration as cigarette smokers who smoke 10 cigarettes a day. Evidence also suggests that water pipe smoking is associated with negative health outcomes similar to those of cigarette smoking and poor concentration levels due to its hallucinogen properties since it contains the harmala alkaloids harman and norharman, which are hallucinogens. Over the years researchers have identified, the association between water pipe tobacco smoking and lung cancer, respiratory illness, low birth-weight, blood pressure and heart rate increase, and
poor academic performance. According to (Eneh and Stanley, 2004) the signs range from physical, behavioural and psychological signs of drug abuse. They include sudden weight loss or gain, disorderly conduct, unusual smell on breath, body or clothing, unexplained need for money, engaging in secretive or suspicious behaviours, sudden change in friends, favourite hang-outs and hobbies, sudden mood swings, irreparability anger outburst and unexplained change in personality.

Eneh and Stanley (2004) also outlined signs that come with different drugs. Marijuana use has the following signs; Glassy, red eyes; loud talking, inappropriate laughter followed by sleepiness; loss of interest, motivation; weight gain or loss while Depressants (including Xanax, Valium, GHB) had Contracted pupils; drunk-like; difficulty concentrating; clumsiness; poor judgment; slurred speech and sleepiness. Stimulants (including amphetamines, cocaine, and crystal meth): Dilated pupils; hyperactivity; euphoria; irritability; anxiety; excessive talking followed by depression or excessive sleeping at odd times; may go long periods of time without eating or sleeping; weight loss; dry mouth and nose.

The link between school achievement and smoking behaviour is well studied (Bryant et al., 2000; Ellison et al., 2001). The better students do academically, the less likely they are to smoke (Bryant et al., 2000; Young et al., 1986). Poor grades early on in life predicts strongly increased tobacco use at a later date (Bryant et al., 2000) and difficulties in quitting smoking. Furthermore, other studies have indicated that onset of smoking may result in a decline in school achievement. Bryant et al. (2000) tested this bi-directional relationship between school achievement and smoking, among other indicators such as alcohol use, school bonding and misbehaviour. They argued that smoking might lead indirectly to poor school performance (Bryant et al., 2000). Moreover, Ellickson et al. (2001) showed that early smoking experimenters were at a higher risk of poor grades later on.
Since the mid-1980s, the Member States have stepped up cooperation on combating drug addiction and drug trafficking. Since 1990, European Councils have adopted a variety of action plans and programs to provide a comprehensive response to this phenomenon. The European Councils in Cardiff (June 1998) and Vienna (December 1998) called on the Council, the Commission and Parliament to draw up a new, comprehensive anti-drug strategy to replace the 1995-1999 Action Plan. The Commission communication is a follow-up to this request and sets out recent trends in drug abuse and trafficking in the EU and the course the Union's anti-drugs measures should take over the next five years.

The setting up of the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA) and the Europol Drugs Unit (replaced since 1 July 1999 by the European Police Office (Europol)) has led to a better understanding of the drug phenomenon and simplified Member States' cooperation on the collection and exchange of information. The information provided by these two bodies in 1998 has made it possible to identify a number of trends in consumption and trafficking. The use of cannabis, still the most widely used drug in the EU, has levelled out, while the use of amphetamines and misuse of medicines is on the increase. As regards trafficking, the routes used by the various drugs are well known, the countries of Central and Eastern Europe and the Balkans often serving as the hub for heroin, cocaine and cannabis. The EU is also a major producer of synthetic drugs. The plan for 2000-2004 identifies a number of priorities: Measures to counter the use and production of cannabis, amphetamines and ecstasy; the introduction of integrated projects to combat urban delinquency, especially among young people.

Interest in social influence on adolescent smoking has conventionally included family influence (Tyas et al., 2001). Social influences can be described as the processes whereby people directly or indirectly influence the thoughts, feelings and actions of others.
influence constitutes social norms, modelling and perceived pressure (Markham et al., 2004). Social norms are adolescents’ expectations of people’s reactions to specific behaviour and the support that they experience from others in carrying out a certain type of behaviour De Vries (2000). Modelling as a term denotes perceiving a prevalence of smoking among influential people and ‘pressure’ denotes an experience of direct pressure to smoke. Social influence can be direct social norm and perceived pressure or indirect modelling Markham (2004). Recently, contextual variables at the macro level, such as the influence of the neighbourhood, have also been shown to affect adolescent smoking Backer (2003).

2.4.1. Levels of Drug and Substance Prevention

Primary prevention of substance abuse is preventing the initiation of psychoactive substance use or delaying the age at which use begins (WHO, 2000:12). This is aimed at ensuring that drug abuse will not occur. It aims at teaching the skills for dealing with inter and intra-personal influences such as stress and peer pressure. The objective of primary prevention is broadly to deter experimentation, encourage or provide risk minimization within a population. Most primary prevention programs are directed to elementary schools and children in general because there is the realization that drug abuse is now beginning at early ages. Primary prevention aims at emphasizing on the realistic risks associated with drug and alcohol abuse. In order to formulate a realistic primary prevention program the following should be considered.

The program’s must provide knowledge on effects of drug abuse, life skills like communication, assertiveness, decision making and coping social skills. Secondary prevention is the intervention aimed at individuals in the early stages of psychoactive substance use. The aim is to prevent substance abuse from becoming a problem thereby
limiting the degree of damage to the individual (World Drug Report, 2000:109). It’s aimed at identifying a determination or modifying for the better drug abuse at the earliest moment possible. It aims at discontinuation of infrequent drug abuse, increasing opportunities for intervention to prevent progression of the problem and individual at risk rather than the entire society. This prevention can be done by instituting early detection programs in schools, workplace and other areas where drug abuse takes place.

Tertiary prevention aims at ending dependence and minimizing problems resulting from use/abuse. This type of prevention strives to enable the individual to achieve and maintain improved levels of functioning and health. Sometimes tertiary prevention is called rehabilitation and relapse prevention (WHO, 2000:12). It’s aimed at preventing drug abuse related to death; reduce the negative impact of an already established problem by restoring and reducing other related complications. It also aims at relapse withdrawal of symptoms and preventing the retaking of substances after achieving abstinence.

2.5 Barbiturates and Academic Performance

It has been observed that much of substance use among youths take place in schools. The incidence of barbiturates use among students is high (Eneh& Stanley, 2004). Barbiturates use during adolescence is almost always a social experience and a learned behaviour (Swaid 1988). One of the important psychological phenomena observed during this period of adolescence is experimentation (Graham, Turk &Verhulst 1999). Youth engaging in drugs and having low grades in school often feel misplaced and judged by the society, this is because the community educates a child so as to assist him or her and in future the child can give back to the community but once one starts getting involved in drug activities, there is no longer hope for that child since drugs are linked to misery and poverty hence one cannot
advance. Crime increases due to unemployment when these individuals are at home, social norms are broken and young girls may engage in other activities such as prostitution with an aim of making money World Drug Report (2002). Youth start experimenting with this drugs before they start using them, they are commonly given in the major youth joints where young people meet, after they have experimented most go to the next level which is regular use of this drugs and they soon develop risky behaviours which are far different from their normal behaviours, once they are dependent on this drugs the enter the final stage which is drug abuse.

The use of prescription stimulants among college-age adults to enhance academic performance is increasing. However, the extent of usage across health care programs is unknown. There have been numerous studies on the use of illicit drugs in undergraduate colleges and by health care professionals; however, the literature is lacking in studies that explore health care professions students using prescription drugs specifically for academic performance enhancement and studying purposes. Wolaver (2005) Methylphenidate and amphetamine, dextran and phentermine are reported as being used frequently to increase alertness during periods of study. Stimulant drugs, primarily prescribed for patients with Attention Deficit Hyperactivity Disorder are also being used across college campuses.

Several theories have been discussed in the literature regarding reasons for substance abuse in general. Renna (2006) found that Individuals may begin abusing drugs due to anxiety and fears of failure. These substances may temporarily mask these fears by creating a feeling of indifference towards the high expectations of society. For healthcare students, tension and stress are especially high due to intense competition, challenging curricula, and dealing with patient interactions. There have been numerous studies regarding the prevalence of prescription stimulant use among college students. In research performed by DeSantis (2000),
rates of stimulant use varied from 4.1% to 35.5%. Another study describes 382 (8.3%) of the 4,850 respondents had used illicit prescription stimulants in their life-time, and 269 (5.9%) had used illicit prescription stimulants in the past year.

This same study also found that around three-quarters of illicit prescription stimulant users reported taking amphetamine in the past year, and approximately one in four reported using methylphenidate products. In this study, 48 students (18.0%) used methylphenidate. Another 2004 study found 6.9% lifetime prevalence in college students, a past-year prevalence of 4.1%, and a past-month prevalence of 2.9%. One study found that 17% of men and 11% of women use prescription stimulants. A study published in 2008 confirmed higher rates among males at 39% versus females at 30%, while another 2008 study came to the conclusion that there is no difference between genders. DeSantis et al (2000) found that 94% of stimulant users were Caucasian and McCabe et al (2004) also found highest rates in Caucasians. Teter et al (2002) reported that college students were more likely to use prescription stimulants illegally

There are several theoretical motives behind stimulant drug use. DeSantis et al (2000) found that 72% of the college students surveyed were taking prescription stimulant drugs to stay awake to study, and 66% were using them to concentrate on their work. Other reasons included to aid in memorization (36%), to stay awake and have fun (22%), and to make work more interesting (12%). During qualitative interviews, DeSantis et al (2000) found that alcohol, marijuana, prescription barbiturates, and cocaine were used almost exclusively to have fun. Medications were used predominantly for the more serious pursuit of getting good grades.
Carroll (2004) found that college students were using stimulant drugs as study aids as well as for recreational purposes. Of those surveyed 96.8% were using stimulants to study longer, 96.8% to stay awake, 83.9% to study better, and 27.6% to improve memory. Teter et al (2002) revealed that 65.2% of their survey population used prescription stimulants to help with concentration, 59.8% to help study, and 47.5% to increase alertness. Teter (2002) also found that students who started using prescription stimulants during college were more likely to use them to improve concentration (70.0%) as compared to those who started before college (55.0%). The purpose of this study was to evaluate the prevalence of prescription stimulant use and thus increase awareness of the problem. Knowing which prescription stimulant drugs are most commonly abused for other-than-intended uses, as well as the motives behind abuse, can potentially help universities implement prevention policies and educational strategies.

As an academic discipline, Luppicini (2005) asserts that educational technology prepares individuals by helping them acquire a deeper understanding and mastery of learning resources: messages, people, materials, devices, techniques and settings. This implies that it analyzes and provides solutions to problems through research, theory, design, production, evaluation, utilization. The focus is on effective processes to facilitate learning using technologies and understanding the impacts of technology on learners and organizations (DeVaney and Butler 2009). The National Policy on Education (NPE 2004) conceptualizes technology education as that type of education that leads to the acquisition of practical and applied skills as well as the basic scientific knowledge.
2.6 Theoretical Framework

The social developmental Theory developed by Hawkins and Weis. (2002), suggests that individuals develop bonds to groups and organizations when they experience opportunities for involvement, possess necessary skills for involvement, and receive positive feedback regarding their involvement. Once an individual bonds to a context they are more likely to behave according to the group’s norms and beliefs. The Social Development Model highlights the steps to developing programs that promote bonding and positive behavior development. The following research to practice points provides specific programming guidelines. Youth will tend to form groups that engage in similar activities, those using drugs will be able to identify with each other since they are more comfortable with the same group hence the influence will be equal in the entire group. Hawkins and Weis (2002) proposes that drug use and deviant behaviors emerge from interactions with the primary socialization sources--the family, the school, and peer clusters. The theory further postulates that the individual's personal characteristics and personality traits do not directly relate to drug use and deviance, but, in nearly all cases, influence those outcomes only when they affect the interactions between the individual and the primary socialization sources.

Interpretation of research results from the point of view of primary socialization theory suggests the following: Characteristics such as depression, anxiety, and low self-esteem are related to drug use and deviance only when they have strong effects on the primary socialization process among younger children. Traits such as anger, aggression, and sensation seeking are related to drug use and deviance because these traits are more likely to influence the primary socialization process at all ages. The psychopathologies that are least likely to interfere with bonding with prosocial socialization sources, the anxieties and most of the affective disorders, are less likely to have comorbidity drug dependence.
2.7. Conceptual Framework

In this study the conceptual framework has been constructed with independent variables to include: if parents take illicit drugs they may lure their children to drug abuse. However, the parents who socialize their children into an antidrug use culture greatly reduce the chances of children getting drug use experiences regardless of the availability of drugs as shown in figure 2.1 below.

![Conceptual Framework Diagram]

**Independent Variable**

- **Alcohol Abuse**
  - No of Students taking Alcohol
  - Class attendanc
  - Grades Attained

- **Marijuana Abuse**
  - Availability of Marijuana in school
  - Cost of Marijuana to students
  - No of Students abusing Marijuana

- **Tobacco Abuse Influence**
  - Availability in school
  - Cost of Tobacco
  - Class Attendance

- **Barbiturates Abuse Influence**
  - Availability in school dispensary
  - Grades attained
  - Number of Students abusing Barbiturates

**Moderating Variables**

- **Attitude**
  - Students’ attitude to drug use

**Dependent Variable**

- **Academic Performance**
  - High Grades in School
  - Average Grades
  - Low Grades

**Intervening Variables**

- **Cultural Factors**
  - School Culture as an influencing factor

**Figure 2.1. Effects of Drug abuse on Academic Performance**

Figure 2.1 above shows the relationship between the dependent and independent variables of the study. As shown in the figure, the academic performance, which was the dependent variable, could be affected by drug abuse such as alcohol, marijuana, tobacco and
barbiturates among others. If students abuse drugs such as alcohol, marijuana, tobacco and barbiturates then this will directly impact negatively on their academic performance. Easy access to drugs at home or at school influence whether a student is likely to be an addict.

The culture of the people in the community and around the school directly impacts the student’s life. Excessive alcohol consumption, especially illicit brews are common in the county, therefore this is tied to students taking the habit from peers and parents and bonding with other drug users in the society. However, a student’s attitude towards drug abuse, impacted by education and knowledge can contribute to them deciding not to or to take the drugs anyway. The effects of these variables on the academic performance in colleges could also be influenced by cultural factors, such community acceptance or lack of intervention, which was the intervening variable of the study.
CHAPTER THREE

RESEARCH METHODOLOGY

3.1 Introduction

This chapter comprises of the research design, target population and the samples under consideration, the research tools and instruments, data collection methods and data analysis. A combination of all these components will lead to the results upon which conclusions will be made. Research methodology therefore provides a framework under which the study is conducted.

3.2 Research Design

The study will adopt a descriptive survey. Descriptive survey design is used in preliminary and exploratory studies to allow the researcher gather information, summarize, present and interpret it for the purpose of clarification. It also allows the researcher to describe record, analyse and report conditions that exist or existed. This design will allow the researcher to generate both numerical and descriptive data that will be used in measuring correlation between variables. Descriptive survey research will be intended to produce statistical information about the influence of drugs on Students’ Academic performance. The field survey implies the process of gaining insight into the general picture of a situation, without utilizing the entire population (Gall, Borg and Gall, 1996: 28).

3.3 Target Population

Target population is defined as all the members of a real or hypothetical set of people, events or objects to which a researcher wishes to generalize the results of the research study
(Borg & Gall, 1989). The target population for this study will consist of all undergraduate students from public universities in Uasin Gishu County which are Moi University, University of Nairobi, Kisii University, Laikipia University and University of Eldoret. Therefore the total population for the study will be 18,108 subjects including administration staff who were a total of 18. The Study will use Simple Random Sampling Technique to get the subjects of the study.

**Table 3.3: Target Population**

<table>
<thead>
<tr>
<th>Description</th>
<th>Student Population</th>
</tr>
</thead>
<tbody>
<tr>
<td>Moi University</td>
<td>10,000</td>
</tr>
<tr>
<td>University of Nairobi</td>
<td>40</td>
</tr>
<tr>
<td>University of Eldoret</td>
<td>7,000</td>
</tr>
<tr>
<td>Kisii University Collage</td>
<td>750</td>
</tr>
<tr>
<td>Laikipia University</td>
<td>300</td>
</tr>
<tr>
<td>Total</td>
<td>18,090</td>
</tr>
</tbody>
</table>

**3.4 Sampling Technique**

**3.4.1 Sample Size**

Sampling means selecting a given number of subjects from a defined population as representative of that population. Any statements made about the sample should also be true of the population Orodho, (2002). It is however agreed that the larger the sample the smaller the sampling error. Gay (1992) recommends that when the target population is small (less than 1000 members), a minimum sample of 20% is adequate for educational research.

The survey used a sample size determined using the Sloven’s formula Altares et al. (2003).
\[ n = \frac{1 + N \cdot e^2}{N} \]

Where,

- \( n \) = Sample Size
- \( N \) = Total population (18,090)
- \( e \) = margin of error (5% or 0.05)

The study will be conducted in all the 5 Universities in Uasin Gishu County. From the 18,090 students, the researcher will use Non Probability snow ball sampling to select 391 undergraduate students who will participate in the study. This will form 23.5% of the target population, which is in line with Gay’s (1992) recommendation. Table 1 presents the sampling matrix.

**Table 3.4: Sampling Matrix**

<table>
<thead>
<tr>
<th>Description</th>
<th>Student Population</th>
<th>Sample Size</th>
</tr>
</thead>
<tbody>
<tr>
<td>University of Nairobi</td>
<td>40</td>
<td>8</td>
</tr>
<tr>
<td>Moi University, Eldoret</td>
<td>10,000</td>
<td>216</td>
</tr>
<tr>
<td>University of Eldoret</td>
<td>7,000</td>
<td>151</td>
</tr>
<tr>
<td>Kisii University</td>
<td>750</td>
<td>16</td>
</tr>
<tr>
<td>Laikipia University</td>
<td>300</td>
<td>6</td>
</tr>
<tr>
<td>Total</td>
<td><strong>18,090</strong></td>
<td><strong>391</strong></td>
</tr>
</tbody>
</table>
3.5 Research Instruments

This study will use questionnaires and observation guide to collect quantitative and qualitative data required for the study. Qualitative research will consist of detailed notation of behaviour events and contexts surrounding the event and behaviour. The researcher will use one dimension covertly with the full knowledge of those being observed or with only some of those being observed aware of the observation. The researcher will go through the questions with the respondent from both Universities to ensure a common understanding of the questions and ability to answer them correctly. They will be open and closed ended.

3.5.1 Validity and Reliability

To enhance validity and reliability, a pilot study will be done in the same area through administering the instruments to randomly selected respondents. It will be further enhanced by making necessary adjustments to the questionnaire based on the pilot study. The reliability and validity of the research instruments for this study have been discussed below:

3.5.2 Validity of Instrument

Validity refers to the degree of congruence between the explanations of the phenomena and the realities of the world (Schumacher 2006) and it seeks to establish if the instrument measures what it is purported to measure. The researcher will ensure continuous refinement of the sampling and data collection techniques throughout the process. The expert opinion of a professional in research as well as the supervisor will be considered. To enhance validity convergent validity will be put to use. Convergent validity can be established when there is high degree of correlation between two different sources responding to the same measure.
3.5.3 Reliability of Instrument

The reliability of a measure is established by testing for both consistency and stability of a research instrument. Consistency indicates how well the items measuring a concept hang together as a set. Cronbach’s alpha is a reliability coefficient that indicates how well the items in a set are positively correlated to one another. Cronbach’s alpha = 0.77; Bryant et al. (2000).

The researcher will use split half coefficient technique. Since this reflects the correlations between two halves of a set of items, the coefficients obtained will vary depending on how scale is split. Sometimes split-half reliability is obtained to test for consistency when more than one scale, dimension, or factor, is assessed. The items across each of the dimensions or factors are split, based on some predetermined logic. In almost every case, Cronbach’s alpha is an adequate test of internal consistency reliability. Cronbach’s alpha is computed in terms of the average inter-correlations among the items measuring the concept. The closer Cronbach’s alpha is to 1, the higher the internal consistency reliability.

3.6 Data Collection Procedure

The researcher will request the University administration to allow her to administer questionnaires to the students in the two Universities. Questionnaires and interviews schedules designed will be used to collect primary data for the study. All questionnaires and interview schedules will be printed and administered by the research assistants to the respective respondents to obtain immediate feedback. Data collected will be assembled and stored in both hard copies and soft copies for further analysis. The data collection process is estimated to take approximately four weeks.
3.7 Data Analysis

Once the data after field work has been collected the researcher will edit and counter check completion of questions in order to identify items which will not have been appropriately responded to. Quantitative data will be coded manually, organized, and analysed using percentages and frequencies. The results will be presented in tabulated form for easy interpretation. From the interviews, data will be sifted through, sorted and coded. Qualitative data generated from questions will be organized into themes, categories and patterns pertinent to the study. This will help identify information that will be relevant to the research questions and objectives.

After data is obtained through questionnaire and observation editing will be done. The blank responses, if any, have to be handled in some way, the data coded, and categorizing scheme has to be set up. The data will then be keyed in, and a software program used to analyse. According to Abey (2012) data has to be edited, especially when they relate to responses to open-ended questions of interviews and questionnaires, or unstructured observations. In other words, information that may have been noted down by the, observer, or researcher in a hurry must be clearly deciphered so that it may be coded systematically in its entirety. Lack of clarity at this stage will result later in confusion.

The researcher is also aware that not all respondents answer every item in the questionnaire. Answers may have been left blank because the respondent did not understand the question, did not know the answer, was not willing to answer, or was simply indifferent to the need to respond the entire questionnaire. According to Abay (2012), if 25% of the items in the questionnaire have been left unanswered, it may be a good idea to throw out the questionnaire and not include it in the data set for analysis. In this event, the researcher will
mention the number of returned but unused responses. If, however, only two or three items are left blank in a questionnaire with, say, 30 or more items, the researcher will allow the computer to ignore the blank responses when the analyses are done. The data will be directly coded from the questionnaires onto a code sheet where at least 10% of the coded questionnaires will be checked for coding accuracy. A systematic sampling procedure will be followed that is, every fifth form coded will be verified for accuracy. If many errors are found in the sample, all items will have to be checked. It is also easy to compute the new variables that have been categorized earlier, using the Compute dialog box, which opens when the Transform icon is chosen. Once the missing values, the recodes, and the computing of new variables are taken care of, the data are ready for analysis.

According to (Madhu, 2005) there are in fact, a number of software packages available that facilitate data analysis. These include statistical packages like SPSS, SAS, and Microsoft Excel etc. Similarly tools like spreadsheets and word processing software are multipurpose and very useful for data analysis. Microsoft excel, Pie Charts and Tables will be used to analyse the data. The raw data will have to be manually keyed into the computer. All missing values will appear with a period dot in the cell. It is possible to add, change, or delete values after the data have been entered. The findings will be tabulated and presented in frequency tables. After the data has been completely analysed, its results have to be properly interpreted. That interpretation of results is the most meaningful to the organization.
3.8 Ethical Considerations

According to (Gakuu, 2010) ethical issues are an integral part of the research planning and implementation process. Ethics in research refers to a code of conduct or expected social norm of behaviour while conducting research. Researcher in this case will treat people with respect will ensure that the procedures are reasonable and fairly administered. Full informed consent will be obtained and privacy and confidentiality of the research participants will be guarded. The researcher will explain the real purpose and the use of the research to participants. Silenced voices will be included to ensure that the groups marginalized in the society are considered and a mechanism will be identified which is publishing the research to enable the linking of research results to social action. The information gathered from the subjects will be confidential.
CHAPTER FOUR
DATA ANALYSIS, PRESENTATION AND INTERPRETATION

4.1. Introduction

This chapter presents the findings of the study, their analysis and interpretation. The chapter is divided into the following sections: The extent of drug abuse among students, Causes of drug abuse, Commonly abused drugs by students and their sources, Effects of drug abuse on academic performance among the students, Strategies used to address drug abuse and their perceived effectiveness, Suggested strategies to help curb drug abuse in Colleges and Universities.

The above sections correspond with the research objectives and questions in chapter 1 section 1.3. Both qualitative and quantitative analysis approaches have been used in data analysis, thus reflecting the mixed model research design approach followed in the analysis. Data for the study was sampled and collected from students in public universities within Uasin Gishu County. Table 4.1 below shows the response rate in public Universities

<table>
<thead>
<tr>
<th>Description</th>
<th>Expected No. Of Respondents</th>
<th>No. Of Respondents Interviewed</th>
<th>Percentage Response rate (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>University of Nairobi</td>
<td>8</td>
<td>8</td>
<td>100%</td>
</tr>
<tr>
<td>Moi University, Eldoret</td>
<td>216</td>
<td>216</td>
<td>100%</td>
</tr>
<tr>
<td>University of Eldoret</td>
<td>151</td>
<td>151</td>
<td>100%</td>
</tr>
<tr>
<td>Kisii University</td>
<td>16</td>
<td>16</td>
<td>100%</td>
</tr>
<tr>
<td>Laikipia University</td>
<td>6</td>
<td>6</td>
<td>100%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>391</strong></td>
<td><strong>391</strong></td>
<td><strong>100%</strong></td>
</tr>
</tbody>
</table>
4.1.1. Demographic Data

The study sought demographic data of the respondents including gender and level of education being pursued. The study was carried out in Public universities within Uasin Gishu County, Kenya. The study was conducted among 391 students of which were 44.4% males and 55.6% females. The study sought to find out the university or college the highest number of respondents.

Table 4.2 Gender frequency table on the number of respondents

<table>
<thead>
<tr>
<th>Gender</th>
<th>Is drug abuse common in your school?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Yes</td>
</tr>
<tr>
<td>Male</td>
<td>174</td>
</tr>
<tr>
<td>Female</td>
<td>217</td>
</tr>
<tr>
<td>TOTAL</td>
<td>391</td>
</tr>
</tbody>
</table>

4.2. The Extent of Drug Abuse among Students As Reported By Students, And School Administrators

This section sought to establish the magnitude of drug abuse among College and University students in Uasin Gishu County. The magnitude of the problem was measured by establishing the number of students involved in drug abuse as shown in Table 4.3

Table 4.3 Number of students who have used drugs

<table>
<thead>
<tr>
<th>Ever used drugs</th>
<th>Students’ responses N = 391</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Frequency</td>
</tr>
<tr>
<td>Yes</td>
<td>116</td>
</tr>
<tr>
<td>No</td>
<td>275</td>
</tr>
<tr>
<td>Total</td>
<td>391</td>
</tr>
<tr>
<td>No response</td>
<td>0</td>
</tr>
<tr>
<td>Total</td>
<td>391</td>
</tr>
</tbody>
</table>

Table 4.3 shows that 116 (29.6%) of the students reported drug use other than for medicinal purposes while 275 (70.4%) reported they have never abused drugs.
The relationship between age and drug abuse was next investigated. The results are presented in Table 4.4

**Table 4.4 Relationship between age and drug abuse as reported by students**

<table>
<thead>
<tr>
<th>Age in years</th>
<th>Yes</th>
<th>No</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>18-20</td>
<td>15(25%)</td>
<td>46(75%)</td>
<td>61(100%)</td>
</tr>
<tr>
<td>21-23</td>
<td>79(29%)</td>
<td>193(71%)</td>
<td>272(100%)</td>
</tr>
<tr>
<td>24-26</td>
<td>27(58%)</td>
<td>19(42%)</td>
<td>46(100%)</td>
</tr>
<tr>
<td>No Response</td>
<td></td>
<td></td>
<td>12</td>
</tr>
<tr>
<td>TOTAL</td>
<td></td>
<td></td>
<td>391</td>
</tr>
</tbody>
</table>

**Chi – square test results**

\[ X^2 = 8.23. \] The probability (chi-sq = 8.23) < 0.05, with df = 1 and at the 5% level of significance, indicates significant dependency between age and drug abuse.

As shown in table 4.4 respondents’ ages ranged from 18 – 26 years, with the majority being between 21 and 23 years.

A Chi-square test was also conducted on the frequencies to establish whether a statistically significant dependency exists between drug abuse and age. The computed Chi square value of 8.23 was greater than the tabulated value of 5.99 at 5% level of significance and with 1 degree of freedom. This implies that drug abuse is significantly dependent on age of respondents, and therefore a significant relationship exists between the two variables.

The deduction is illustrated in Table 4.4: frequencies indicate that the greatest ratio of drug abusers to non-abusers is associated with the 24 to 26 years category, namely 27 of 46 respondents which represents a ratio of 11/8 = 1.38 or 58% of the 24 - 26 years age category. The researcher can only speculate that the finding might be linked to the development phase of an independent adult which is characterized by sense of wanting to be in control and peer
influence as mentioned by Paglia (Paglia and Room, 1998:5). The table also shows that there are very few cases of drug abuse in the 18 to 20 age category, namely 15 (25% of the particular age-category). The table furthermore reveals that the proportion increased to the 24 - 26 years category. The tendency suggests that, if students could be made aware of the effects of drug abuse at an early enough stage, the practice could be reduced among the youth in colleges and universities in Kenya.

On the general situation of drug abuse in their institutions the administrators gave the responses shown in table 4.5

<table>
<thead>
<tr>
<th>Administrators’ response N = 18</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Is there a drug problem at your school</strong></td>
</tr>
<tr>
<td>Yes</td>
</tr>
<tr>
<td>No</td>
</tr>
<tr>
<td>Total</td>
</tr>
</tbody>
</table>

Nine school administrators (50%) said there is a drug problem, and nine (50%) said there was no problem. The limited sample thus indicated a trend of indecision among teaching staff as to whether drug abuse was a problem at the schools where they work.

A frequency distribution of the responses from the 18 school administrative staff as to whether the problem of drug abuse is increasing indicated that it was perceived as increasing as presented in Table 4.6
Table 4.6: Frequency distribution on whether the drug problem is increasing.

<table>
<thead>
<tr>
<th>Responses</th>
<th>Frequency</th>
<th>Per cent</th>
<th>Valid per cent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>6</td>
<td>33.3</td>
<td>40.0</td>
</tr>
<tr>
<td>No</td>
<td>9</td>
<td>50.0</td>
<td>60.0</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>15</strong></td>
<td><strong>83.3</strong></td>
<td><strong>100.0</strong></td>
</tr>
<tr>
<td>No response</td>
<td>3</td>
<td>16.7</td>
<td></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>18</strong></td>
<td></td>
<td><strong>100.00</strong></td>
</tr>
</tbody>
</table>

As shown in table 4.6, only six (33.3%) said the problem was increasing while nine (50%) said no and three (16.7%) did not respond.

As part of the qualitative approach to the research design, interviews were conducted with four college administration staff on the general situation of drug abuse. They perceived that drug abuse problem does exist. One dean of students at a college indicated that he knew of a few isolated cases. All in all, the general perception among the four interviewees was that the drug abuse problem was not extensive.

4.3. Commonly Abused Drugs by Students and Their Sources

This section presents information based on the most commonly abused drugs by students in Public Universities. Knowledge of the most frequently used drugs by students was regarded as important in recommending possible prevention and intervention measures. The assumption was that cheap drugs are more frequently abused. The variables considered in this section included types of drugs abused, their sources and availability.

4.3.1. Prevalence of Drug Abuse by students

Alcohol and drug use were prevalent among University students. On average, 40% of college students drink alcohol excessively, 16% meet criteria for an alcohol use disorder, and
22% used a drug during the past month, with marijuana being the most common. Nonmedical use of prescription medications were also common with 40 percent reported using, but this use varied significantly across Universities. Moreover, excessive drinking and drug use often overlap.

4.3.2. Commonly Abused Drugs and their sources

According to table 4.7, it shows that not all (391) students responded to the various multiple-choice options in this question. Based on the chart, alcohol is the most frequently abused drug with a response (41%), followed by Marijuana, (19%), tobacco, (16%), Khat (14%) and barbiturates, (10%).

<table>
<thead>
<tr>
<th>Drugs</th>
<th>Frequency</th>
<th>Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alcohol</td>
<td>160</td>
<td>41%</td>
</tr>
<tr>
<td>Marijuana</td>
<td>74</td>
<td>19%</td>
</tr>
<tr>
<td>Tobacco</td>
<td>63</td>
<td>16%</td>
</tr>
<tr>
<td>Khat</td>
<td>55</td>
<td>14%</td>
</tr>
<tr>
<td>Barbiturates</td>
<td>39</td>
<td>10%</td>
</tr>
</tbody>
</table>

The findings concerning alcohol, khat and tobacco as the most commonly abused drugs possibly reflect the overall current situation of drug abuse among the youth in the country (NACADA, 2004; 2007). For example in 2004, NACADA reported that the national prevalence of substance misuse among the youth was 60% alcohol, 58% tobacco, 23% cannabis and 22% khat among others. The current scenario could be attributed to the fact that Kenya has become a progressively significant transit point for drugs destined for other countries such as Europe and North America. In addition, use of drugs such as alcohol, khat and tobacco is culturally, socially and legally acceptable in Kenya and these drugs are locally produced. Such factors have compounded the problem of substance abuse and dependence among the youth including students.
When students were asked whether these drugs are easy to get in school, out of 391 students, 211 (53.9%) said yes, 160 (40.9%) said no and 20 (5.1%) did not respond. These responses could suggest that society outside the school is contributing to drug abuse among students by making drugs easily available, which, as indicated in Table 4.2 of the study proved to be a statistically significant factor in the drug-abuse chain. This finding is further supported by Nyassy (Sunday Nation, February 8, 2009:6), who says that the general trend in the country is for drug sellers target younger people, with children as young as 11 and 13 years are being recruited into drug use.

Table 4.8: Students sources of drugs

<table>
<thead>
<tr>
<th>Source</th>
<th>Yes</th>
<th>Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Night Clubs</td>
<td>34</td>
<td>8.7</td>
</tr>
<tr>
<td>Hospitals</td>
<td>22</td>
<td>5.6</td>
</tr>
<tr>
<td>Slum areas</td>
<td>54</td>
<td>13.8</td>
</tr>
<tr>
<td>Kiosks/small shops</td>
<td>75</td>
<td>19.2</td>
</tr>
<tr>
<td>Fellow students</td>
<td>177</td>
<td>45.4</td>
</tr>
<tr>
<td>Watchmen</td>
<td>29</td>
<td>7.4</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>391</strong></td>
<td><strong>100</strong></td>
</tr>
</tbody>
</table>

According to table 4.8 it shows that: fellow students who are peddling drugs were leading at (45.4%) followed by kiosks/shops around the campuses (19.2%), Slums (low economic areas) around the school, (13.8%), night clubs (8.7%), watchmen, (7.4%), and hospitals at (5.6%).

4.4. Influence of Alcohol Abuse on Academic Performance

According to table 4.9 below, difficulty meeting academic responsibilities is one of the most common consequences of alcohol use, about 25 percent of college students report academic problems caused by alcohol use, such as earning lower grades, doing poorly on exams or papers, missing class, and falling behind. According to this study, 21.6 percent of students who drank during the year prior to the study had fallen behind in their schoolwork
and 29.5 percent had missed class because of their alcohol use. Also the study indicates 21.8 percent of students reported performing poorly on a test or assignment, and 30.7 percent said they had missed a class due to alcohol use.

Table 4.9: Effects of drugs on academic performance

<table>
<thead>
<tr>
<th>Effects</th>
<th>Number of students</th>
<th>Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lower Grades</td>
<td>120</td>
<td>30.7%</td>
</tr>
<tr>
<td>Doing poorly in exams and papers</td>
<td>86</td>
<td>21.8%</td>
</tr>
<tr>
<td>Missing classes</td>
<td>115</td>
<td>29.5%</td>
</tr>
<tr>
<td>Falling behind in school work</td>
<td>85</td>
<td>21.6%</td>
</tr>
</tbody>
</table>

4.4.1. Impacts on class attendance

Excessive drinking and drug use are both associated with short-term academic problems. Students who use substances during college spend less time studying and skip more classes, thereby reducing their exposure to the classroom learning environment and the beneficial experience of interacting with faculty and other students. In this study 29.5 percent of the students reported missing most of their classes. Longitudinal research has found that students who use alcohol and drugs are more likely to have disruptions in their enrolment in college and also fail to graduate. Associated mental health problems can exacerbate the adverse academic consequences of excessive drinking and drug use. Frequent binge drinkers are more likely to miss a class, fall behind in their schoolwork (Wechsler et al., 1998). The number of drinks consumed correlates positively with the number of classes missed (Alcohol Edu, 2008-2009). Frequency of alcohol consumption was associated positively with absenteeism from classes disliked (Wyatt, 1992).
4.4.2. Time Spent studying

Alcohol consumption has a negative predictive effect on study hours under all definitions of drinking (binge, frequent binge, drunkenness, and frequent drunkenness) (Wolaver, 2002). More frequent use of alcohol usually produces larger negative effects on study hours, with frequent drunkenness having the largest negative effect (Wolaver, 2002). In this study 56.7 percent of the respondents acknowledged that they spend less time studying because of alcohol drinking. There is a negative relationship between heavy episodic alcohol use and the time students spend on academics (Porter & Pryor, 2007).

4.4.3. Relationship between Drug Abuse and Academic Performance

Binge drinking two or more times in a typical two week period is linked to significantly lower semester grades (Pascarella et al., 2007). The probability of getting a high grades significantly decreases as the frequency of heavy episodic drinking increases this is because the heaviest drinkers obtain the lowest grades (Preseley, 1993). Heavy college drinking predicts a reduction in the probability of having an A average cumulative GPA (Wolaver, 2002). Of the students interviewed, 67 percent who drink everyday reported a mean grade of C or below in their past academic year. Those with higher grades of B and above consumed fewer drinks per week or even a month. Therefore, there is a significant decline in mean grade when comparing abstainers to heavier drinking categories (Rau & Durand, 2000).

4.5. Influence of Marijuana Abuse on Academic Performance

According to table 4.10, 19 percent of respondents took marijuana. According to table 4.10, 46 percent who used marijuana daily, skipped more classes, spent less time studying therefore earning lower grades and eventually dropped out of college. 31.6% who used marijuana every week spent less time studying while 42.9% who used marijuana once a month only reported poor grades. According to a study by University of Maryland, School of
Public Health 2013, chronic use can lower your IQ as many as eight points. Marijuana users were broken down into categories from minimal users, those who smoked only a handful of times, to frequent and heavy users.

### 4.10: Influence of Marijuana Abuse on Academic Performance

<table>
<thead>
<tr>
<th>No. of times used</th>
<th>Frequency</th>
<th>Percentage</th>
<th>Effects</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Everyday</td>
<td>22</td>
<td>29.7%</td>
<td>Skip Classes</td>
<td>10</td>
<td>46%</td>
</tr>
<tr>
<td>Every week</td>
<td>38</td>
<td>51.4%</td>
<td>Spent Less time</td>
<td>12</td>
<td>31.6%</td>
</tr>
<tr>
<td>In a month or more</td>
<td>14</td>
<td>18.9%</td>
<td>Lower grades</td>
<td>6</td>
<td>42.9%</td>
</tr>
<tr>
<td>Total</td>
<td>74</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### 4.6. Influence of Barbiturates Abuse on Academic Performance

According to table 4.7, abuse of barbiturates stands at 10 percent in colleges. The ‘popular’ impression one has is that those who are on hard drugs tend to have strong social association, relative to their non-drug user counterparts. But the study revealed that the relationship is not statically significant. This thus, in a way, belies the logical reasoning that the degree of intoxication, due to drug, is highly related to sociability. According to table 4.11, 51.3% of students who used barbiturate felt moody, 61.5% felt anxiousness, 20.5% reported impulsiveness while 66.7% reported restlessness. Therefore the psychological effects of barbiturates cannot be ignored and this eventually leads to poor academic performance.
Table 4.11: Effects of Barbiturates on Students Health

<table>
<thead>
<tr>
<th>Effects</th>
<th>Number</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Moody</td>
<td>20</td>
<td>51.3%</td>
</tr>
<tr>
<td>Anxious</td>
<td>24</td>
<td>61.5%</td>
</tr>
<tr>
<td>Impulsive</td>
<td>8</td>
<td>20.5%</td>
</tr>
<tr>
<td>Restlessness</td>
<td>26</td>
<td>66.7%</td>
</tr>
</tbody>
</table>

West (2000) discovered that a significant percentage of regular users are adversely affected in terms of mental health; while Miller, (2001) found that amphetamines increase the availability of no adrenaline at the nerve cell connections. Also Juman (1999) found that morphine and tranquilizers, analgesics and sedatives, may precipitate hepatic encephalopathy, possibly as a result of increased brain sensitivity to centrally acting drugs.

Drugs like Indian hemp have the power to impair mental activities. It decreases the male sex hormone called testosterone and as well as interfere with the menstrual cycle in women Ogun-sakin (2007). Rebury (2006) enumerates the effects of some drugs abuse as follows: Amphetamine takes away the desire to eat, hence, some persons grow thin and become easy target for dis-eases. Ephedrine makes one feel powerful but aggressive, nervous, talkative and easily excited. The mind becomes deranged due to sleeplessness. Indeed Indian hemp causes mental disorder, hallucination and cocaine damages the heart and cause heart attack in human beings.
CHAPTER FIVE

SUMMARY OF FINDINGS, CONCLUSIONS AND RECOMMENDATIONS

5.1. Introduction

The focus of this study was to propose a programme for prevention of and intervention in drug abuse among students in Public universities in Uasin Gishu County. The findings of this empirical study will, among other things, contribute to knowledge in this area and help both administrators and policy makers to develop more efficient educational programmes to address drug abuse in schools.

5.2. Summary and Findings of the Empirical Investigation

5.2.1 Alcohol abuse influence on Academic Performance

Heavy drinking has a negative effect on the image of an institution, branding it a “party school.” This image may encourage more alcohol-related problems, as it attracts students who choose to be in high-risk environments. Given alcohol’s detrimental effect on student performance, a decrease in drinking on campus should enhance the quality of higher education. Research suggests that the most effective way to change the “culture of drinking” is through environmental management, that is, by changing the physical, social, legal, and economic environment on and around campus that fosters alcohol and other drugs use.

5.2.2 Marijuana Abuse influence on Academic Performance

Like alcohol, marijuana abuse also directly impairs academic abilities which limit academic performance. A substantial minority of students who are daily marijuana deals with highly stigmatised forms of behaviour which can involve criminal behaviour e.g. going against the law or when individuals engage in criminal acts to fund their drug use. The use of addictive drugs often has adverse effects on colleagues and the wider school community for example having to share a room in campus with a smoker. The fear among students of arrest
by police sometimes leads to stigmatisation of marijuana smokers therefore having negative psychological effects therefore leading to poor performance in academic work and sometimes drops out of school.

5.2.3 Tobacco abuse Influence on Academic Performance

From the students’ responses, it was evident that they were aware of the effects of drug abuse. Tobacco use leads to lack of concentration on studies, missing classes, physical weakness, lack of sleep, lack of appetite, and rejection by friends. School administrators who were interviewed also gave the effects as lack of responsible citizens, school indiscipline, poor health, and stealing, high rate of school dropout, poor academic performance and personal negligence. All these characteristics eventually lead to drop out, expulsion from school and poor academic performance.

5.2.4 Barbiturates Abuse Influence on Academic Performance

Barbiturate users are adversely affected in terms of mental health. According to this study, abuse of barbiturates stands at 24 percent in colleges. These drugs tend to make the user moody, anxious and impulsive according to these findings. Low academic performance therefore is caused by mostly by anxiety and restlessness. Use of these drugs also waste academic time when students have to visit hospitals frequently and for longer time therefore leading in a drop in academic performance. The findings also indicate that students are only concerned with short-term and not long-term effects of these drugs because they are unaware, therefore there is need of sensitization on the effects of these drugs in the long-term.
5.3. Conclusion

The substance use of heavy drug-using students may directly impair academic abilities which limits their academic performance. For most students who use drugs at a lower level, however, drug use may serve as a maturational ‘snare’ that keeps some students engaged in deviant peer groups as others move on to more normative groups, thus having a long-term direct effect on educational attainment. Other studies have discussed similar processes, in which differential pathways to problematic outcomes are determined, in part, by the level of multiple risk behaviours.

If we believe that multiple mechanisms are operating, then it follows that preventive interventions aimed at improving academic engagement should broaden their focus beyond drug use in adolescence. Community and family risk factors should also be targets of intervention. Our findings showed that drug use in students partially mediated the effect of their externalizing behaviours on college completion; students externalizing also had direct effects on both students reading achievement and on degree completion. This implies that a powerful target of intervention would be externalizing behaviours, especially for those who have not yet developed heavy or problematic levels of alcohol and or drug use.

5.4. Recommendations

Based upon the literature review and the empirical investigation various recommendations for a prevention and intervention programme are proposed to help address drug abuse among students in Kenyan Colleges and Universities. The following are recommendations for effective programming to prevent and reduce drug abuse among school youth.
5.2.1. Pre-enrolment Messages

First-year students typically have exaggerated ideas about how much college students drink. Wanting to fit in and being free of parental control for the first time, these students can be led by this misperception into a pattern of heavy drinking that increases their risk of academic failure, serious injury, sexual assault, and even death. Social norms marketing campaigns should be rolled out in universities and colleges to try to counteract these false beliefs by conveying accurate survey data about student drinking norms. The idea is that once students learn that far fewer students are drinking heavily than they once thought, they will feel less social pressure to drink and, therefore, moderate their alcohol use.

5.2.2. Provide Alcohol-free Options.

The schools and county governments should create and promote alcohol-free events for students, support student clubs and organizations that are substance-free, create and promote service learning and volunteer opportunities, require community service work as part of the academic curriculum and promote consumption of non-alcoholic beverages and food at events.

5.2.3. Restrict Alcohol Availability.

Schools should enforce strict rules on alcohol and drug abuse by requiring all social events during orientation of first years to be alcohol free, disseminate responsible host guidelines for both on- and off-campus parties, install a responsible beverage service program, eliminate residence hall delivery of alcohol purchases, advertise food and activities, such as dancing or sports, rather than drinking as the focus of the event.
5.5. Contribution to Body of Knowledge

Drawing from the findings of the study, and building on existing research, it is suggested that more studies be carried out to address the following: Future research should replicate this study, but emphasize qualitative data gathering techniques such as interviews and observations, given that the current study mainly used questionnaires. Using such an approach would help come up with a more comprehensive programme for prevention of and intervention in drug abuse. The Table below shows the study contributions to the body of Knowledge.

<table>
<thead>
<tr>
<th>Objectives</th>
<th>Contributions</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>To determine whether Alcohol Abuse Influences Student’s Academic Performance in Uasin Gishu County.</strong></td>
<td>This study found out that irrespective of the learning institution students still abused Alcohol upto 60%. This affects students class attendance and concentration levels hence leads to poor academic performance. It is therefore advisable that pre enrolment masseges should be spread across during orientation and counseling be put in place to help the already affected students.</td>
</tr>
<tr>
<td><strong>To examine whether Marijuana abuse influences Student’s Academic Performance in Uasin Gishu County.</strong></td>
<td>The study also noted that students also abused Marijuana despite the laws prohibiting the use of this drug in the country, most of the students who abused marijuana had dropped out of school, repeated classes and some had even been reffered to mental institutions after abusing the drug for many years. Therefore prevention strategies of universities should incorporate guidance and counseling services and other support services so as to handle students’ problems adequately.</td>
</tr>
</tbody>
</table>
To evaluate whether Tobacco abuse influences student’s Academic performance in UasinGishu County.

This study established that Tobacco was the third most abused drug in higher institutions of learning, water pipe tobacco was abused by students some younger than the minimal age of 18. The Abuse of Tobacco is highly addictive and is associated with sleep disorders and lower concentration levels hence students fall behind in class, the study recomended that activities that did not involve the use of any of this drugs were to be introduced to promote a drug free environment.

To examine whether Barbiturates abuse influences student’s Academic Performance in UasinGishu County.

Prescriptive drugs like piriton was highly abused so as to counter the other effects of other drugs abused by students in public universities. Students who abused Khat were likely to abuse Barbiturates so as to relax themselves and get sleep. Barbiturates were abused since students can easily access them and are not illegal. The study recomends that all drugs should be prescribed by the school doctor or Nurse.

5.5.1. Areas For Further Research

More studies are needed with respect to background, socio-economic and environmental factors with regard to drug abuse among students. This is because the current study did not determine the association of most of these factors and drug abuse. More investigations are needed on the methods used to address drug abuse in schools in various parts of Kenya. This is because the methods used to address the problem may differ according to different circumstances. There is much to be done about the extent of use drugs in our society and its impacts to the general public. Further research should be conducted on the same topic on all social activities in the country especially sporting events and road trips.
REFERENCES


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NBER Working Paper 11035.22


Meichun Mohler-Kuo, SC.D., George W. Dowdall, PH.D., Mary P. Koss, PH.D., and Henry Wechsler, PH.D. Correlates of Rape while Intoxicated in a National Sample of College Women.


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APPENDICES

Appendix I: Introduction Letter

Patricia Tuwei,

University of Nairobi

School of Continuing and Distance Education

Dear Respondents,

**RE: ACADEMIC RESEARCH**

I am a student at the University of Nairobi pursuing a Master of Arts degree in Project Planning and Management. I am conducting an academic research on The Influence of Drugs on Students’ Academic Performance in Public Universities in Uasin Gishu County.

You have been selected to provide information on Drug and Substance Abuse and how it affects students’ performance and I seek your consent. May I also take this opportunity to guarantee you of full confidentiality of the data you provide which will only be used for academic purposes.

Yours faithfully,

Patricia Tuwei
Appendix II: Questionnaire for Students

RE: INTRODUCTION

Dear Respondent, Your questionnaire is aimed at gathering primary data on the influence of drugs on students’ academic performance in Kenyan Public Universities. You are kindly requested to fill in the answers on the space provided. The information you provide will be treated with confidentiality and will be used for the purpose of accomplishing academic goals. Please do not include your name anywhere in the questionnaire. Note that there are no wrong or right answers.

Please respond to the following items by marking the correct or appropriate option with √ in front of the response to depict your opinion or providing answers to the questions as appropriate.

<table>
<thead>
<tr>
<th>PART I – GENERAL INFORMATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Gender</td>
</tr>
<tr>
<td>Male</td>
</tr>
<tr>
<td>Female</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>2. Have you ever used drugs other than for medicinal purposes?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
</tr>
<tr>
<td>No</td>
</tr>
</tbody>
</table>
3. If yes, and not currently using, for how long did you use them.

1 – 2 years

2 – 3 years

3 – 4 years

More than 4 years

4. Why do students use drugs? Indicate the right number in the box. You can tick more than one

a. To increase intelligence

b. To be accepted by friends.

c. Out of curiosity

d. Teachers/parents take drugs

e. Availability of drugs

f. A lot of pocket money

Other: Specify

PART II - Reasons why Students Engage in Substance Abuse

5. To what extent do you agree with the following statements

<table>
<thead>
<tr>
<th>Statement</th>
<th>Strongly agree</th>
<th>Agree</th>
<th>Uncertain</th>
<th>Disagree</th>
<th>Strongly disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>Peer Influence</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Because they have a lot of Money</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Due to weak policies against drugs in school</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Stress associated Issues</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Availability of drugs in Institutions of Learning</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Drugs are legal only in school</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
**PART III - In your own opinion, which are the main sources of abused drugs? You can tick more than one.**

<table>
<thead>
<tr>
<th>6. Sources</th>
<th>(✓)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kiosks/small shops</td>
<td></td>
</tr>
<tr>
<td>Slum areas</td>
<td></td>
</tr>
<tr>
<td>Fellow students</td>
<td></td>
</tr>
<tr>
<td>Hospitals</td>
<td></td>
</tr>
<tr>
<td>Watchmen</td>
<td></td>
</tr>
<tr>
<td>Night Clubs</td>
<td></td>
</tr>
<tr>
<td>Others (please specify)</td>
<td></td>
</tr>
</tbody>
</table>

**PART IV - Commonly Abused Drugs In Universities**

<table>
<thead>
<tr>
<th>7. To what extent has the following drugs affected the student population in your University.</th>
<th>No Extent</th>
<th>Little Extent</th>
<th>Average Extent</th>
<th>Great Extent</th>
<th>Very Great Extent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alcohol</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Marijuana</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Barbiturates</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tobacco</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sedatives</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other (Specify)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**PART V - Effects of drugs on students’ academic Performance in UasinGishu County.**

<table>
<thead>
<tr>
<th>8. Indicate extent to which drug abuse has affected the students’ academic performance in UasinGishu County.</th>
<th>No Extent</th>
<th>Little Extent</th>
<th>Average Extent</th>
<th>Great Extent</th>
<th>Very Great Extent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Poor Grades in School</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Repeating same class/ Exams</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Class Attendance</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Suspension</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>---------------------</td>
<td>----------</td>
<td>----------</td>
<td>----------</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low Concentration in Class</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other (Specify)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### PART VI - Social Effects of Drug Abuse

9. In your own opinion, do students who take drugs in school more social than ones who don't? *You can tick.*

<table>
<thead>
<tr>
<th></th>
<th></th>
<th>REASON FOR YOUR ANSWER</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>(✔)</td>
<td></td>
</tr>
<tr>
<td>No</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

-End-

Thank you for taking time to complete the questionnaire
Appendix III: Questionnaire for Administrators

QUESTIONNAIRE FOR SCHOOL ADMINISTRATORS ON DRUG ABUSE AMONG COLLEGE AND UNIVERSITY STUDENTS IN UASIN GISHU COUNTY

Questionnaire number

The purpose for this questionnaire is to gain insight on substance abuse among students. Information gathered through this questionnaire will be made available to legitimate and interested stakeholders in order to establish partners for the development of problem solving strategies in relation to drug abuse. This questionnaire is not a test but merely an information exercise. Please answer the questions as honestly as possible. Remember that there is no right or wrong answers.

In order to help address the drug problem in schools, your contribution in this research is important. Therefore, you are kindly requested to provide the researcher with accurate information. Your responses will be processed by computer and will be treated as confidential. Please do not write your name on this paper. Also do not write the name of the institution.

1. Have you had any experience in dealing with drug problems in your School?
   Yes
   No

2. If there is a drug problem in your school, is it increasing?
   No
   Yes

3. If increasing, what are the reasons for your answer? Tick one only.
   a. Most drugs are available
   b. School rules do not prohibit drug abuse
   c. School administration is relaxed
   d. Students are more stressed due to a wide curriculum

4. In your own opinion, which are the main sources of abused drugs? You can tick more than one.
   a. Matatu touts
   b. Shoe cobbles
   c. Shops/Canteens
   d. Slum areas
   e. Fellow students
   f. Hospitals
4. Rank the following sources of drugs abused from the most common to the least common source. Indicate the appropriate number in the box.

<table>
<thead>
<tr>
<th>Sources</th>
<th>Most common source</th>
<th>Common source</th>
<th>Moderately common source</th>
<th>Fairly common source</th>
<th>Not common source</th>
<th>Tick one</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) Matatu touts</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td></td>
</tr>
<tr>
<td>b) Shoe cobbler</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td></td>
</tr>
<tr>
<td>c) Shops</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td></td>
</tr>
<tr>
<td>d) Slum areas</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td></td>
</tr>
<tr>
<td>e) Fellow students</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td></td>
</tr>
<tr>
<td>f) Hospitals</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td></td>
</tr>
</tbody>
</table>

5. In your own opinion, why do students in your school take drugs? You can tick more than one.
   a. Lack of role models at home
   b. Conflict with parents
   c. Peer pressure
   d. A lot of work in school (stress)
   e. To enhance intellectual ability

6. What drugs do most students take? You can tick more than one.
   a. Alcohol
   b. Tobacco
   c. Khat (miraa)
   d. Marijuana
   e. Barbiturates

7. Has your school ever experienced any problem due to drug abuse?
   No
   Yes

8. If yes, what kind of problems has the school experienced? You can tick more than one.
   a. Fighting amongst students
b. Stealing  
c. Strikes  
d. Conflicts between lecturers and students  
e. Disagreements among students  
f. Destruction of school property  
g. Poor performance in examinations  
h. Other: Specify ..........................................................

9. How does drug abuse affect the students’ academic performance?

10. In your own opinion, what academic problems would be experienced in schools due to drug abuse among students? You can tick more than one.
   a. Poor performance by students  
   b. High rate of absenteeism  
   c. Other: Specify ..........................................................

11. Does your institution offer any form of drug education or related programmes to students?
   Yes
   No

12. Suggest ways of eradicating drug abuse in our schools. You can tick more than one.
   a. Guidance and counseling department  
   b. Peer counseling  
   c. Inco-operate drug education to other subjects  
   d. Strict school regulations  
   e. Invite guest speakers on danger of drug abuse  
   f. Other: Specify ..........................................................

THANK YOU FOR YOUR CO-OPERATION