

**TYPES OF DRUGS ABUSED BY STUDENTS AND THEIR
EFFECTS TO LEARNING ENVIRONMENT IN
SECONDARY SCHOOLS IN SIAKAGO DIVISION
(MBEERE DISTRICT).**

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FULFILLMENT OF THE REQUIREMENT FOR THE
AWARD OF POST-GRADUATE DIPLOMA IN
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DECLARATION

This research project is my original work and has not been presented for award of post-graduate Diploma in education in any other university.

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DEDICATION

This research project is dedicated to my wife and children who all along have given moral support to help me in the preparation of this research project.

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First and foremost, I give thanks to the almighty God who takes care of me and gives me strength and ability to fulfill my duties and achieve goals worth the living.

Special thanks go to all those who have been assisting me in compilation of this research work, especially Dr. Robert Ayot H.O my supervisor for timeless guidance through the course of my research work. I pray that the almighty God may watch over him. I would also wish to specially thank the district commissioner Mbeere District and more so KBS office for allowing me access to information on the district various aspects. I would also wish to thank the District Education officer Mbeere district for allowing me access the relevant information about education matters in the district. Also my appreciation goes to my fellow members of staff for their reading materials. Not forgetting Siakago boys principal for allowing time during working hours to go out into the field and also time to meet my supervisor. To all these people I say may God Bless you.

ABSTRACT

The title of this research work is to identify the types of illicit drugs used by students in the secondary schools in Siakago Division. It also intended to find out the effects of drug abuse in schools in the division. The researcher intended to collect data on the types of illicit drugs available to the students in the secondary schools in this division. He also intended to find out using data collected the effects of drug abuse to the students. The findings of the research was meant to help the researcher identify the types of drugs their source and effects in the learning process not only in Siakago division but also schools in Mbeere district as a whole. He also intended to find ways of controlling drug abuse in the schools. The study will be used by the teachers, parents and students in controlling drug abuse in secondary school. The literature review of this study looked into various aspects of drug abuse including types of drugs, their source and effects to learning environment. The study adapted descriptive survey covering six secondary schools in Siakago Division Mbeere district. There were three sets of questionnaires used as instruments of data collection, with head teachers, teachers, and students as the main respondents. In total 6 head teachers, 21 teachers and 120 students were sampled. This made a total of 147 questionnaires released. All the questionnaires for the head teacher were returned but three for teachers and 7 for students got lost, making a total of 10 questionnaires not returned, therefore only 137 questionnaires were returned.

ABBREVIATIONS

A.P.A-- American Psychiatry Association.

B.C.-- Before Christ

D.C.-- District commissioner

D.E.O --District Education Officer

K.B.S.--Kenya beau of Statistics

L.S.D--Lysergic Acid Diethylamide.

NACADA--National Campaign Against Drug Abuse.

P.R.S.P--Poverty Reduction Strategy Paper.

WHO--World Health Organization

NGO - ?

LIST OF FIGURES

Figure 4.0 figure showing types of drugs abused by students in schools.

Figure 4.1 figure showing types of drugs abused by individual students.

Figure 4.2 figure showing students awareness of others abusing drugs

Figure 4.3 figure showing types of drugs seen taken by other students.

Figure 4.4 figure showing effects of drug abuse on the learning process.

Figure 4.5 figure showing sources of drugs abused by students

Figure 4.6 figure showing types of drugs cultivated in the division.

Figure 4.7 figure showing students hobby

Figure 4.8 figure showing noticeable difference

Figure 4.9 figure showing students views on drug abuse.

Figure 4.10 figure showing number of times cases of drug abuse have been received by head teachers

Figure 4.11 figure showing methods of handling drug abuse cases

LIST OF TABLES

Table 1.1.1 Table showing institution type and drug abuse

Table 3.3.1 table showing Mbeere district population by gender.

Table 3.3.2 table showing summary of sample population

Table 3.5.1.1 table showing sampling grid.

Table 3.5.1.2. table showing distribution of respondents by status

Table 4.0 table showing distribution of respondents by status

Table 4.1 table showing knowledge of abuse in schools.

Table 4.2 table showing individual students indulgence in drug abuse.

Table 4.3 table on whether drug abuse has effects on the learning process.

Table 4.4 table showing noticeable difference between time involved and now.

Table 4.5 table showing education dangers of drug abuse.

Table 4.6 table showing reception of drug abuse cases

Table 4.7 table showing causes of drug abuse

Table 4.8 table showing teachers knowledge of drug abuse cases in their schools

Table 4.9 table showing number of drug abuse cases known by teachers

Table 4.10 table showing most abused drugs in schools

Table 4.11 table showing causes of drug abuse amongst students

| TABLE OF CONTENTS | PAGES |
|--|--------------|
| DECLARATION..... | i |
| DEDICATION..... | ii |
| ACKNOWLEDGEMENT..... | iii |
| ABSTRACT..... | iv |
| ABBREVIATIONS..... | v |
| LIST OF FIGURES..... | vi |
| LIST OF TABLES..... | vii |
| CHAPTER ONE..... | 1-9 |
| INTRODUCTION | |
| 1.1 Background of the study..... | 1. |
| 1.2 Statement of the problem..... | 5 |
| 1.3 Purpose of the study..... | 6 |
| 1.4 Objective of the study..... | 6 |
| 1.5 Research questions..... | 6 |
| 1.6 Assumptions of the study..... | 7 |
| 1.7 Significance of the study..... | 7 |
| 1.8 Delimitation..... | 7 |
| 1.9 limitations..... | 7 |
| 1.10 Definition of significant terms of the study..... | 7-8 |

| | | |
|----------------------|---|-------|
| 1.11 | Theoretical framework..... | 8 |
| CHAPTER TWO | | |
| | REVIEW OF RELATED RETERATURE..... | 10-18 |
| CHAPTER THREE | | |
| 3.0 | Methodology of the study..... | 19 |
| 3.1 | Introduction..... | 19 |
| 3.2 | Research scope and design..... | 19 |
| 3.3 | Delimitation..... | 20-21 |
| 3.4 | Target population..... | 22 |
| 3.5 | Sample size..... | 22 |
| 3.5.1 | Schools..... | 22 |
| 3.3.2 | Students..... | 22 |
| 3.6 | Research instruments and data collection tools..... | 23 |
| 3.7 | Data analysis..... | 23 |
| CHAPTER FOUR | | |
| 4.0 | DATA ANALYSIS AND INTERPRETATION..... | 24-41 |
| CHAPTER FIVE | | |
| 5.0 | DISCUSSIONS..... | 42-44 |
| 5.1 | CONLUSION..... | 44-45 |
| 5.2 | RECOMMENTATIONS..... | 45-46 |
| | REFERENCES..... | 47 |
| | APPENDICES..... | 48-63 |

CHAPTER ONE

1.0 INTRODUCTION

1.1 Background of the study

This chapter deals with the background to the study, statement of the problem, purpose of the study, research questions, basic assumptions, significance of the study and delimitation and limitations of the study, definition of terms in the study, schemes of chapterization and abbreviations.

Drug abuse in schools in Kenya is not a current issue. Alcohol and cigarettes (nicotine) have existed for as long as recorded history. In traditional African societies many ceremonies and pacts involved use of substance like snuff, beer or miraa. Furthermore, a lot of present pharmaceutical knowledge began from earlier herbal use. However, while drug use had a special purpose in traditional set up, in contemporary day society drug has often been abused even by students within learning institutions. Not only is there a significant rise in the number of students that are turning to drugs as a means of escape from problems of life and the challenges of education; but drug abuse has also been associated with escalating strikes, truancy and dropout cases in schools (Kombo D.K. 2005)

The various types of drugs are available to students while in schools and outside school environment. The drug sellers have targeted students who readily buy their drugs with hope that, the drug will help them solve their problems.

Some of the drugs abused by students or rather available for use by students are grown in their homes by their parents. In Siakago division for example, Tobacco which is one of drugs commonly abused, is one of the main cash crops. It can be used in form of

cigarettes or rolled using newspaper. Another crop currently in great use is Miraa (commonly referred to as Muguka) in most areas of Mbeere. This crop has become a major cash crop in recent years. It has become popular cash crop as it is rising as a major source of income especially in some parts of Siakago and Gachoka divisions, where most farmers have turned to the crop. In my own view, the crop has become very popular to students and many young people in the villages. Miraa is an evergreen plant botanically called *Catha edulis*. People use its leaves and fresh tender shoots that are plucked and chewed. According to (Kombo 2005) these parts contains two known chemicals, Cathinone and cathine, whose pharmacological properties are similar to those found in amphetamines. When chewed, it produces a mild or moderate euphoria, suppresses appetite, sustains alertness and abolishes sleep. It produces dependence, tolerance and mild withdrawal symptoms.”

There are other drugs that are used by students in our secondary schools. Some of these are not obtained from the surrounding environment but brought from other areas of the country. Some of these drugs include drugs like marijuana, cocaine, heroine, caffeine, madrax and many others .

When we consider the drug induced states, we are in an area where there has been long-standing interest among layman. The use of Marijuana is reported as early as 2737 B.C by the Chinese emperor Shen Nung, who described cannabis (Marijuana) in an encyclopedia on drugs. In Europe, drugs came into greater prominence following Napoleons' multiple campaigns in Egypt and Africa, in the United State, usage has increased precipitously during the second half of this century (Munn, N.L 1972).

Overall, we might say that the psychological use of drugs serves two general purposes, therapeutic and experiential. In therapeutic usage, they are prescribed to alleviate anxiety, depression, hallucinations and other conditions associated with mental disorders and they are referred to as psychotropic. When drugs are used for experiential purposes- that is, in an effort to obtain certain experiences- one hears the terms hallucinogenic and psychotomimetic, but neither term is accurate. The former refers to subjective aspects of the drug state, but reactions are not necessary hallucinations; the latter, as pointed earlier, suggests a psychotic state, which is not necessarily true either. The current term, psychedelic, literally translated, means “mind –manifesting”, it was promoted as neutral term referring to the many different altered states of consciousness (Munn, N.L 1972)

Even when just the psychedelic drugs and their various potencies are considered, there are many ways to classify them. Sometimes the terms minor and major are used, in which case the minor psychedelic drugs, as compared with the major ones, have been described as involving effects which are closer to voluntary control, of shorter duration and less likely to produce after experiences (Tart, 1969) On this basis, Marijuana, and Scotch Broom are common minor psychedelic drugs, L.S.D, Mescaline, and psilocybin show more extreme effects (Munn, N.L 1972)

There are various types of drugs available in Kenya. These include the following:-

(a) Depressants/Sedatives. That is drugs that reduce excitement or functional activities. One feels drowsy without actually sleeping. They include alcohol, barbiturates and peps (Kombo,2005)

“A drug is, any chemical substance that when taken by the body, can affect one or more of the body functions” (Kombo 2005). In Kombo’s work, drug abuse as defined by

(Jarry and Jarry 1999), means, the use of drugs for the purpose other than therapeutic ones. While in therapeutic use, drugs are used to relieve certain symptoms, drug abusers use drugs to experience some effects associated with them. They take drugs continuously in order to experience their effect and avoid the discomfort of not taking them. In the long run, their bodies are habituated to the drugs and larger increasing doses are required in order to feel the effect. Unpleasant physical symptoms occur when drug is withdrawn. Psychologically the abuser is unable to face life and its challenges without the drug. Therefore, a drug is abused when its use causes harm to personal health, to others and society at large. Some of the commonly abused drugs among students include alcohol, cigarettes, 'Bhang, cocaine and Heroin. Legal drugs which are used improperly or without a prescription include pain killers, amphetamines and sleeping pills.

Drug abuse or drug use has led to addiction. Some students in our schools cannot do anything including learning without them. This meant that the students are drug dependant. In his work, Kombo quoted from Jarry and Jarry (1999), drug dependence or drug use, perhaps with the attempts to stop but repeatedly returning to drugs". Drug dependence also means that one's body has begun to require the drug in higher and higher doses in order to avoid withdrawal symptoms. It is a chronic physical and psychological compulsion or craving to take a drug. (Kombo, 2005)

Table 1.1.1 Institution type and Drug use

| Institution | Alcohol | Tobacco | Bhang | Miraa | Inhale |
|----------------------|---------|---------|-------|-------|--------|
| Primary | 22.7 | 2.7 | 1.6 | 5.3 | 2.1 |
| Secondary | 43.8 | 6.2 | 7.1 | 22 | 8.7 |
| University | 68.5 | 10.2 | 7.6 | 30.9 | 5.6 |
| National Polytechnic | 60.7 | 11 | 11 | 26.1 | |
| Other Institutions | 47.1 | 9.3 | 8.5 | 21.8 | 4.7 |

Source: National baseline survey on Drug and substances Abuse among the youth in Kenya; October 2002 (unpublished) results.

1.2 Statement of the problem.

The use of drugs in Kenya is not, a current issue. Alcohol and Cigarettes have existed for as long as recorded history. However while drug use has special purpose in traditional set up, in contemporary day society drug use has often been abused even by students within learning institution. Not only is there a significant rise in the number of students that are turning to drugs as a means of escape from problems of life and the challengers of education but drug abuse has also been associated with escalating strikes, truancy and dropout cases in schools (Kombo , 2005).

1.3 Purpose of the study

The purpose of the study was to establish the types of drugs, their source and how they affect learning process in secondary schools in Siakago Division of Mbeere District.

1.4 Objectives of the study

- (i) To identify the types of drugs available for abuse by students in schools in Siakago division Mbeere district.
- (ii) To identify the sources of the drugs
- (iii) To determine the effects on student learning process.
- (iv) To find out the ways of curbing access to drugs

1.5 Research questions

Introduction

There have been great concerns on the rising levels of drug abuse in secondary schools. To this end the objectives of this study was to find out the types, source and effects of drugs abuse in secondary schools.

In such a case the study was guided by the following research questions;

- (i) What types of drugs are commonly abused by students in our secondary schools?
- (ii) Where do these drugs come from?
- (iii) How do these drugs affect students' learning process?
- (iv) How can drug abuse be eliminated in these secondary schools?

1.6 Assumptions of the study

- (i) All the secondary schools in the studied sample have been experiencing some problems in drug abuse
- (ii) Drugs are readily available and accessible to the students
- (iii) Respondents will have a positive attitude and answer the questions faithfully

1.7 Significance of the study

This study is of great help to the Kenyans education because of the following:

First, it was expected that the findings of the study would stimulate interest of the future researchers to undertake further and specific investigations in this field.

Secondly; it was hoped that, the findings and the recommendations would help the quality manpower output.

1.8 Delimitation

The study was confined to secondary schools drawn from Siakago Division of Mbeere District Eastern province.

1.9 Limitations

The information in this research may not be adequate to generalize beyond the studied region. It was not possible to cover the opinions of the parents in the Division since assembling them would have required considerable time, finances, and other logistics. Although several factors may have existed which could affect learning process in schools, only the role of drug abuse was used in the study

1.10 Definition of significance terms in the study.

Drug- Any substance that affects the structure and functioning of a living organism.

Drug Abuse- This is sporadic and excessive use of mind altering and behaviour changes substances for many other reasons other than medical purpose.

Illicit Drugs-Chemical substances which are sold illegally for legal purposes.

Addiction- This is complete dependence on the substance.

Dependent- A person who is relatively depending on substances to enhance their mood.

We have psychological dependence and physical dependence.

1.11 Theoretical framework

The study adopted structural-strain theory by Morton Robert (1968) and person level theories and did not contradict the proposition that drug abuse has been a cry all over the world, for long people have ignored the dangers posed by the raising cases of drug trafficking and abuse, this is shattered by a growing body of evidence that drug peddlers have made deep inroads into schools and other learning institutions (Lazarus, 2001).

Kombo (2005), According to structural-strain theory by Morton Robert, deviant behavior such as drug abuse is the natural outgrowth of the values, norms and structure of society. Society places a high value on certain goals such as economic success. However, not everyone in the society is given equal opportunities of achieving. Individuals may lack adequate qualifications, or in corrupt societies, may have qualifications but lack a 'good' father. Nevertheless, these people are expected to meet the goals of society and are judged on basis of how well they

meet society's goals under the strain of incompatible goals and means these individuals fall victim of anomie. This is a situation that arise when the norms of society are unclear or without sufficient guidelines for behavior, thus causing confusion both for individuals and for society. They therefore turn to deviance.

They want to be successful but find the goals too difficult or impossible to attain by acceptable means, they therefore device new ways of being recognized. Students may want to be recognized and appreciated by teachers and peers but are unable to attain good grades even when they try their best. Such students may divert to drug abuse (Kombo, 2005).

In person-level(p) theories of behavior change suggest that programmes aimed at changing personal attitudes about, and the value and consequences of drugs use are more likely to change individual drug use behavior than those aimed at changing knowledge or at providing information about drugs (Ajzen and Fishbein 1990). Added to this are theories of cognitive problem solving and intentions, which suggest that skills training and public commitments against drug use can change an individual decision and instructions to use drugs (petraitis, feay and miller 1995).

CHAPTER TWO

A REVIEW OF RELATED LITERATURE.

A.P.A (1987) defined drug abuse as maladaptation and consistent use despite social, occupational psychological or physical problems that are exacerbated by the drug and recurrent use in situations that are hazardous like driving while intoxicated.

Carter (1981) stated that we live in a society in which drugs are advertised on the mass media as being the answer to many problems. The effects of drugs have been known since antiquity. The drunkenness of Noah is mentioned in the bible and displayed the sculpture by 15th Century artist on corner of Doge's Palace in Venice. The Sumerians, in Mesopotamia knew about opium, the dried juice of opium poppy in 300 BC. Cannabis and coca leaves seem to have been known since recorded history.

Plant (1915) indicated that adolescents are at risk, particularly around school leaving age. Large population attending drug dependence clinics in large cities are unemployed with few stable relationship and leading disorganized lives. However, young drug abusers remain in employment and their drug taking is a passing phase. Kombo (2005), there are various factors that have been associated with increase in drug abuse among students. These include mass media, peer influence, ignorance, curiosity, cultural practices, Breakdown of family unit, stressful environment, easy accessibility to drugs, and laxity in institution management/lack of role model and permissiveness in society.

Kombo,(2005). A student on drug usually manifests symptoms physically, emotionally and socio-economically. These include the following:-

(i) Physical Symptoms for example, signs of fatigue, repeated health complaints, watery, red and glazed eyes, a lasting cough, dizziness, a clammy skin, seizures, runny nose and injections marks on arms. The student may also have white powders around the nostril.

(ii) Emotional symptoms.

A Student on drugs may display emotional symptoms such as acute irritability. The student may be aggressive to the extent of picking a fight with fellow students. There are also mood swing owing between happiness and excitement to sadness, indifference and moodiness. The students may also be unnecessary critical and may start uncalled arguments aimed at diverting attention from student to others.

(iii) Social Symptoms.

Include the type of friends the student associates with and their transparency. Most of these friends are less interested in school activities. The students also react negatively to any inquiry about the friends. The student may encounter problems with law enforcers such as being apprehended driving while drunk or being outside odd hours with no particular explanation. The student may also have a history of frequent absenteeism and falling asleep in class. In discussion the student abusing drugs may display memory loss or lack of interest. Others social symptoms are poor concentration, daydreaming, decreased interest in learning, drop in grades and indiscipline problem. Other symptoms shown by student abusing drugs according to Kombo (2005) include economic symptoms.

Kombo (2005) the fact that drugs use has become all too acceptable in learning institutions in Kenya is worrying. More than half of College and University students are on drugs. Worse still, even pupils at the primary level are affected, yet using alcohol and other drugs has risks in education. These include the following: - Indiscipline for example strikes. A case in point is the 1999 Nyeri High School arson, in which colleagues burnt four prefects to death. In 2001, a fire started by students believed to be on drugs at Kyanguli Secondary school claimed the lives of 67 Students (Daily Nation, 2003) Other effects according to Kombo include, Educational wastage, poor academic performance and poor health. Lazarus, M.M (2001) World health organization (WHO) started a tobacco free initiative that focus on international attention and resources on the global tobacco epidemic which is entirely avoidable burden of disease. One out of very two smokers who started at a young age and continue smoking throughout their lives will ultimately be killed by tobacco –related illness. On average, smokers who begin smoking in adolescent and continue to smoke regularly have a 50 per cent chance of dying from tobacco related disease.

Acute health risks of tobacco uses include shortness of breath, increased heart rate, exacerbation as asthma, impotence, infertility and increased serum carbon monoxide. Long term health risk of smoking, the major contributors to morbidity and mortality, include heart attacks and strokes, lung and other cancers (larynx, oral cavity, pharynx, chronic obstructive pulmonary disease (chronic bronchitis and emphysema) not only the smoking individuals but surrounding individuals can be harmed by tobacco smoke.

Lazarus (2001) Bhang is very destructive drug and like many other drugs, induces a false feeling of well –being. It reduces the sense of responsibility and leads people into action

they would not normally get involved in. Crimes, theft, lose their interest in real life, the desire for more drug destroys their love for the family and normal human relationships. Bhang can stimulate desire for more powerful narcotics like hashish and cocaine which are high additives. Munn, (1972) Unpleasant physical effects also are reported, such as dizziness, headaches, and dryness of the throat and mouth, as well as nausea, tremors, and other impairments of muscular coordination. Again, it should be repeated, these effects are not highly predictable; they vary with the situation, the potency of the drug, the individual prior experience and his present condition.

Munn (1972) Lysergic acid diethyl amides; (LSD). Among the more potent drugs, mescaline and LSD both have been used in religious rituals. Mescaline comes from a type of cactus plant and its name is after the Mescalero Indians, who have employed it in religious contexts; both drugs can produce marked changes in awareness.

Lazarus (2001); the user of LSD often goes through an experience of sheer terror. He also sees things that seem real but are not (hallucination) and shapes are distorted or he may have a feeling of euphoria and relaxation. The drug is capable of causing brain damage, mental, illness, flash back to torment the (user) and also damages chromosomes.

Wumser (1977) describes that the basic effects and moods of persons dependent on drugs are; disappointment, disillusionment, rage, shame, loneliness and panic, mixture of terror and despair. Although this picture is changing; on the other hand, use of poly drug is widespread among middle class youth. Kombo (2005) in Schools, drug abusers may be shunned and made to feel inferior by the school community. This affects their performance. Drug abuse hampers learning as those on drugs lack concentration. They waste more time thinking about how to acquire drugs. Poor, performance has serious

repercussions. It contributes to unemployment leading to social stratification within the education sector and countrywide.

According to Cary and Kate (1991), Drug abuse is a major pervasive problem. It is endemic in most communities, reaches all levels of society and affects people in all professions. It is a subject that in recent years until now has been the focus of nation campaign and much debate by legislators, health care professionals and the general public, yet there are few areas where disagreement is so fundamental.

Rensick (1979), quoted that, people continue to take drugs today for other than medical reasons. Drugs may make them feel good, relief stress, tension or provide temporarily escape. Peer pressure is a strong factor in the use of drugs by young people.

A report by health workers suggests that drug and alcohol abuse increasingly involves a variety of substances used in combination. The pharmacological interaction of the substances is likely marked and affects the health of individual users in different ways and with different implication for treatment (PSA, 1992 WHO (1992) quoted that the extent to which policies to prevent substance abuse and its harmful affects can be structured to respond to the need of drug using populations and those "at risk" depends on what is known about the distribution and the form that the problem can take.

Substance abuse is a behaviour phenomenon and is likely to be influenced by how individuals perceive the risks and by their motivation to use drug and alcohol. Few countries have up to date information in this area and many continue to depend on estimates and guess PSA (1992 and WHO /PSA (1992) records that drug abuse prevention and demand/ harm reduction aims primarily to lower, if not eliminate; the adverse health impact of psychoactive drugs and alcohol However, patterns of drug and

alcohol abuse are constantly changing; new drugs are becoming available and new social groups are being exposed and at risk.

Lazarus (2001) reports that, speed is a drug commonly abused by the young people in colleges, high schools and in the institution, it speeds up the body of the abuser. The drug does exactly what it says by speeding up the body, it may also bring with it severe depression, brain and speech damage, swollen lips and eyes.

According to Georgy Mann, medical director of the Johnson Institution in Minneapolis, a center for understanding and treating chemical addiction, has written that all addictive chemicals have one thing in common, they change moods. Some mood changes are very potent and highly addictive; others are much less powerful. Almost any person can become psychologically and physically dependent on drug if that person is exposed to high dosage for a long enough period of time. With drug like heroin the time may be shorter and the effect is both fast and very dangerous, with caffeine the time is longer and the effects are almost negligible (Lazarus, 2001)

It is notable that drug use was not a social problem in traditional African society. This was because communities were cohesive units that had strong social structures. This assisted in binding them together and providing social controls. Anyone who abused drugs was scorned at and made to pay penalties. Songs were composed to ridicule such persons. Society had rules and regulations that were strictly enforced. A case in point is of the Kamba Community which had warriors in the name of "Kiny'ole". This group acted as a social control mechanism. Such groups had powers of controlling wayward people.

It is clear from the forgoing discussion that drugs were available but were not abused. Drugs were used for relaxation, curative purposes such as snakebites, stomach aches and headaches. Abuse was minimized due to community policing. There were also specific regulation on who could use drugs and the occasions that required this use. Strict mechanism ensured that drugs were not misused (Kombo, 2005)

In this book “Sociology of Education, Kombo recommend that:

- (a) The Ministry of education should address factors that make drugs attractive to students above all, the government and school administrators should seal all the roots and loopholes used by drug peddlers /abusers.**
- (b) In schools, teachers should be equipped with skills and knowledge of identifying drugs, drug abusers and drug peddlers. Parents should also be alert all the time to be able to notice any change in their children’s behaviour.**
- (c) The ministry of Education should ensure that every school has an active and creative drug abuse prevention programme. Prevention efforts, such as saying “No” to drugs and learning of their potential dangers, must start in the early grades, not just in high schools. Early identification of drug-abusing youngsters and swift efforts to ameliorate the problem should be the norm in schools. Substance abuse counselors, who are especially skilled at identifying drug-abusing youngsters and providing the necessary assistance or referral, should be attached to all schools.**
- (d) Despite escalating levels of drug abuse in schools, most school teachers receive no formal training in ways of identifying and assisting students on drugs. This situation must be corrected by mandating that a core curriculum in teacher training colleges should be in drugs and drug management in schools (Kombo, 2005).**

Gilmer H.B (1970) major addictive drugs such as heroin are characterized by an overwhelming desire to continue taking the drugs; by a tendency to increase dosage, and by both psychological and physiological dependence on it.

Very painful withdrawal symptoms results when the drug is not used for a period of time. Reporting in the current issue of the journal of the royal society of medicine, Dr. Sugar, Sala and Dr.Clare Dollery of the London Heart Hospital said, long -term chewing of leaves can cause heart attack, liver damage, tooth lose and cancer of the throat. The drug also leads to hallucinations and loss of sleep. Khat chewers are at higher risk of heart attack than people who do not. Khat seems to affect blood clotting and causes spasms in arteries supplying blood to the heart (Dairy Nation,2006).Drug misuse is by no means a new problem, for example and drugs such as morphine and cocaine were regular features of the late nineteenth century diet, both in Europe and North America. Forms of drugs use have long been known in rural areas examples being opium smoking or the chewing of coca leaves in some parts of rural Latin America. Although it is in Europe and North that most public concern has been generated about drug use, problems such as heroin misuse are now understood to be of global proportions. The associations between social deprivation and heroin misuse has been clearly demonstrated in the post-war heroin epidemics in both Britain and North America. It remains necessary to explain the nature of this connection. Perhaps the most common way of explaining why heroin misuse and social deprivation come to be linked is to invoke the notion of drug use as escapism-a flight from the harsh realities of life into drug-induced fantasy. Opiate drugs provide a cushioning effect

against both physical and emotional pain (Heartbeat, D.T and Smith. D.M 1989). The drugs which are seen to create a 'drug problem' belong primarily to a narrow group of psychoactive ("mind-altering") substances such as Marijuana, heroin, barbiturate and the like.

By a large margin, the most widely used drugs are alcohol and tobacco. The effects of drug abuse include the hippie cult, radical politics and the like are viewed as both cause and effects of illicit drug use (Mauss, 1975).

CHAPER THREE

3.0 Methodology of the study

Research methodology can be defined as an operational framework within which the facts are placed so that their meaning may be seen more clearly (Khamadi, S.I.D 1992).

The methodology section usually contains rather detailed information about technical aspects of the study and the research design, including appropriate, selected method to the solution of the problem described (Khamadi, 1992)

3.1 Introduction

This chapter contains a description of the research methodology used in establishing the types of drugs, their source and effects to students' learning in secondary schools

This chapter gives procedures for data analysis. It focused on research design, target population, description of research instruments, sample size and sampling area, data collection and data analysis.

3.2 RESEARCH SCOPE AND DESIGN.

Survey design will be adopted in conducting this study. Survey design will be appropriate to evaluate specific attitudes or behaviours. Questions concerning attitudes about issues can be evaluated with a field survey; and can be used to evaluate behaviours; the prediction of behaviour. Survey methodology typically involves designing and administering a questionnaire (Borden, K.S 1988). The descriptive survey was appropriate for those data that were derived from observations. They were physically observed or observed through the questionnaire. (Khamadi,1992). Engelhart (1972) argues that descriptive methods are widely used to obtain data useful in evaluating present practices and providing basis for decision.

This study will make an investigation on the type, source and role of drugs in learning in secondary schools.

3.3 Delimitation

The study was carried out in Siakago Division in Mbeere district, which is one of four Divisions in Mbeere District.

Mbeere District borders Embu to Northwest, Mwingi to the South East, Meru North to the North, Machakos to the South and South East, Tharaka to the North East and Kirinyaga to the West. The District lies between latitude 0° 20' and 0° 50 South and Longitude 37° 16' and 37°56' East. It has a total area of approximately 2093 sq. km, and divided into four Divisions, 19 locations and 42 sub- locations with 1 local authority (Mbeere County Council) and two constituencies namely Siakago and Gachoka.

Table 3.3.1 Mbeere District Administrative areas.

| Division | No. of Location | No. of Sub-Location | Area of Division in Sq. Km |
|--------------|-----------------|---------------------|----------------------------|
| Gachoka | 8 | 18 | 800.3 |
| Evurore | 4 | 8 | 410.0 |
| Siakago | 4 | 9 | 367.3 |
| Mwea. | 3 | 7 | 514.9 |
| Total | 19 | 42 | 2092.5 |

Source: Poverty reduction Strategy paper- Mbeere District 2001-2004.

Mbeere District slopes in a Northwest to Southern direction with altitudes ranging from approximately 1200m above sea level down to 500m on the Tana River Basin. The slope

is broken by existence of a few hills, for example, Kiambere, Kiang'ombe and Kianjiru, which rise above general height. The southern part is covered by Mwea Plains. The district is served by five permanent rivers namely; Tana, Rupingazi, Thuci, Thiba and Ena, flowing in southern easterly direction.

According to 1999 census, the district population was estimated to be 170,036 people with a density of 82 persons per sq.Km.

Table 3.3.2 Mbeere District Population by Gender.

| Division | Male | Female | Total | Density |
|----------|--------|--------|---------|---------|
| Siakago | 16,656 | 17,674 | 49,118 | 93 |
| Evurore | 16,674 | 20,077 | 59,823 | 90 |
| Gachoka | 28,772 | 30,330 | 40,517 | 74 |
| Mwea. | 19,693 | 20,987 | 56,958 | 79 |
| | 81,885 | 89,068 | 170,036 | 82 |

Source Poverty Reduction Strategy Papers (PRSP (2004)

The table shows the Mbeere District population by gender, in each Division. It also gives the total population per division and population density of each division in the district

Out of 2092.5 Sq. Km land, about 1690 Sq. km (81%) is suitable for agriculture and livestock activities but only 56% of arable land is normally under cultivation.

Subsistence farming is dominant. The cash crops grown are tobacco and miraa with miraa gradually becoming the main cash crop.

3.4 Target population

The study targeted teachers and students in secondary schools in Siakago division, Mbeere district. It targeted head teachers and the teachers as informed specialists.

Students were targeted to represent users of the information and services. The target population was all public and private secondary schools in Siakago Division. The division has twelve secondary schools of which two are privately managed. The twelve schools contain approximately two thousand and two (2002) students, one hundred and thirteen teachers (113) and twelve (12) head teachers.

3.5 Sample size

3.5.1 Schools

The sample size was schools. The target population was twelve (12) schools. The research used simple random sampling which was for head teachers and teachers.

3.5.2 Students

According to Gay (1976) a sample of 10% of population is considered minimum in a descriptive research.

Based on this information, the use of systematic sampling was incorporated in the sample of population. See table below.

3.6 Research instruments and data collection tools.

The researcher used questionnaires to gather the information from the available respondents in schools within the division. There were three categories of questionnaires:

- (i) Questionnaire for head teachers.
- (ii) Questionnaire for class teachers.
- (iii) Questionnaire for students.

3.7 Data analysis

The data collected was processed and analyzed both manually and electronically by use of scientific pocket calculators and form of graphs and pie charts for easier understanding. Discrete data received from the field were categorized into information that answered the researcher's questions. The data was summarized and subjected to descriptive methods of analysis comprising qualitative treatments. Qualitative data will be analysed in narrative form to describe the researcher's objectives (Van Dalen, 1982).

Descriptive statistics was used to analyze and present the obtained on demographic information influencing drug abuse.

The researcher analysed the findings on basis of which conclusions and recommendations were drawn in the subsequent chapters.

CHAPTER FOUR

4.0 Data analysis and Interpretation

This chapter deals with data analysis and interpretation. This data was collected by means of questionnaires. The researcher issued 147 questionnaires whereby six were for the head teachers, 21 for teachers and 120 questionnaires for the students. Out of six questionnaires issued to the head teachers all were returned. For the teachers 21 questionnaires were issued out of which three got lost and only eighteen were returned. For students questionnaires 120 copies were issued out of which seven got lost. Therefore, out of 147 questionnaires released to the field a total of 137 were received back. The data has been organised by sorting and group tallying. The data has been analyzed interpreted and represented in form of tables, pie charts, percentage and histograms.

Table 4.0 distribution of respondents by status

| Status | frequency | percentage |
|---------------|-----------|------------|
| Head teachers | 6 | 4 |
| Teachers | 18 | 13 |
| Students | 113 | 83 |
| Total | 137 | 100 |

Table 4.0 shows that 4% of the respondents were head teachers, teachers responded 13% of all the respondents and students responded 83% of all the respondents.

Table 4.1 Student knowledge of drugs abuse in schools

| Awareness | Frequency | Percentage |
|--------------|------------|------------|
| Yes | 94 | 83 |
| No | 19 | 17 |
| Total | 113 | 100 |

Source: student questionnaires

Table 4.1 shows the students awareness of drug abuse in schools. Out of 113 students respondents on the knowledge of drug abuse in schools 94 students which represents 83%, are aware of drug abuse in their schools. Only 19 students representing 17% were aware of drug abuse in the secondary school.

Fig. 4.0. Types of drugs abused by students in school

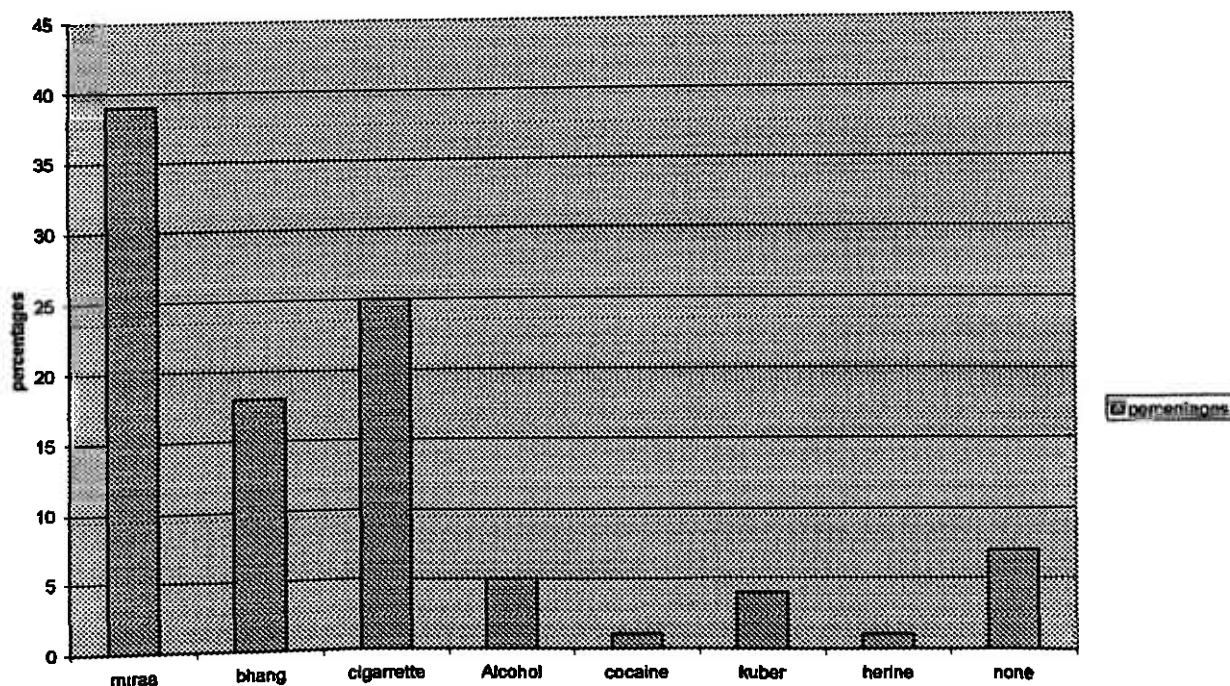


Figure 4.0 gives the proportion of student respondents on types of what drugs abused in secondary schools in Siakago division Mbeere District. From the respondents it is evident

that students indulge in drugs abuse and the main drugs abused include miraa (commonly known as muguka), bhang, cigarettes, alcohol, cocaine, kuber, and heroine. Out of 113 student respondents, 39% mentioned miraa, 18% bhang, 25% cigarettes, 5% alcohol, kuber 4%, with cocaine and heroine each 1% and 7%of the respondents had no idea of types of drugs abused in secondary schools in the division. The results indicate that miraa (muguka) is the widely abused drug followed by cigarettes, bhang, alcohol, kuber, with cocaine and heroine not very popular with students.

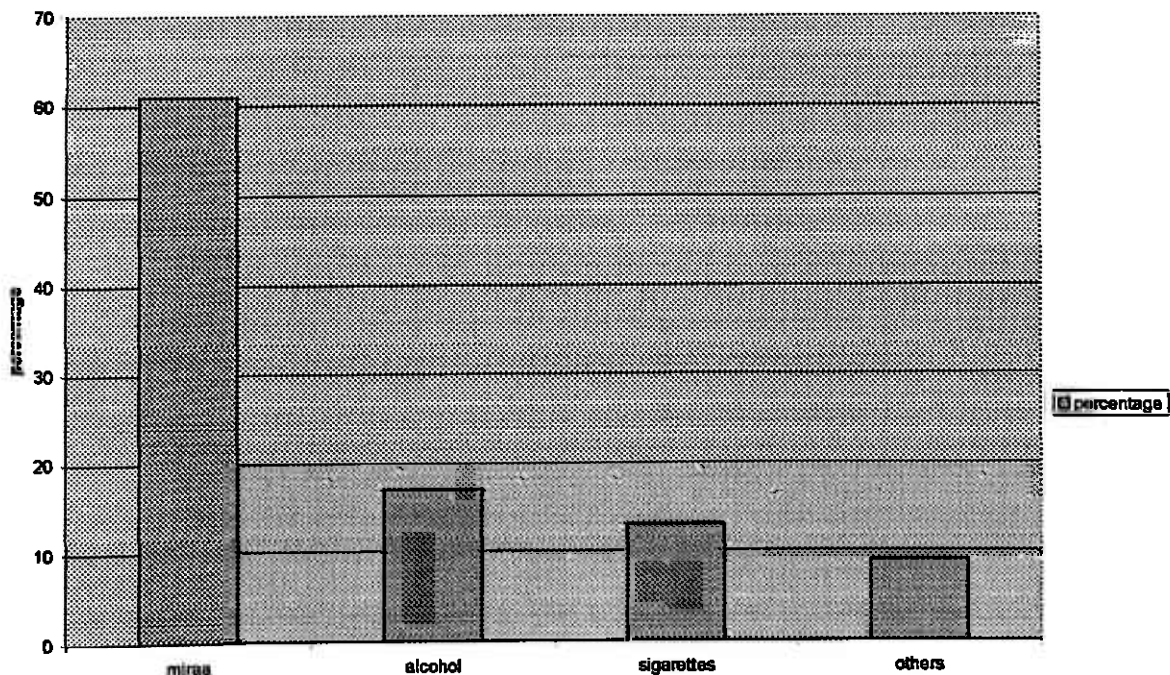
Table 4.2 individual students' indulgence in drug abuse

| Indulgence | Frequency | Percentage |
|-------------------|------------------|-------------------|
| Yes | 23 | 20 |
| No | 90 | 80 |
| Total | 113 | 100 |

Source: Students' questionnaires

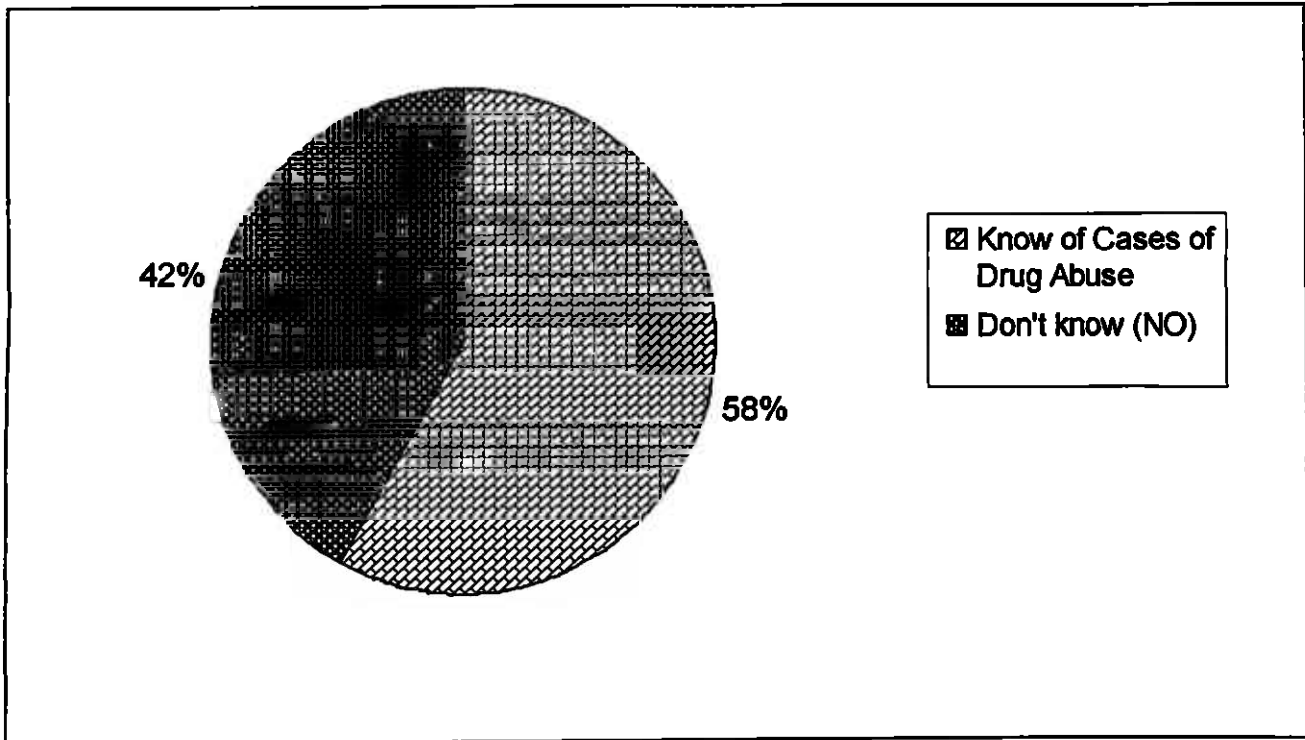
The above table 4.2 show individual students indulgence in drug abuse. Of 113 students respondents, 23 (20%) admitted as having been involved in drug abuse. Therefore the results show that even though the percentage of students doing drugs is low, 20% is not negligible as it gives evidence that there are quite large numbers of students involved in drug abuse.

Fig. 4.1 Types of drugs abused by individual students



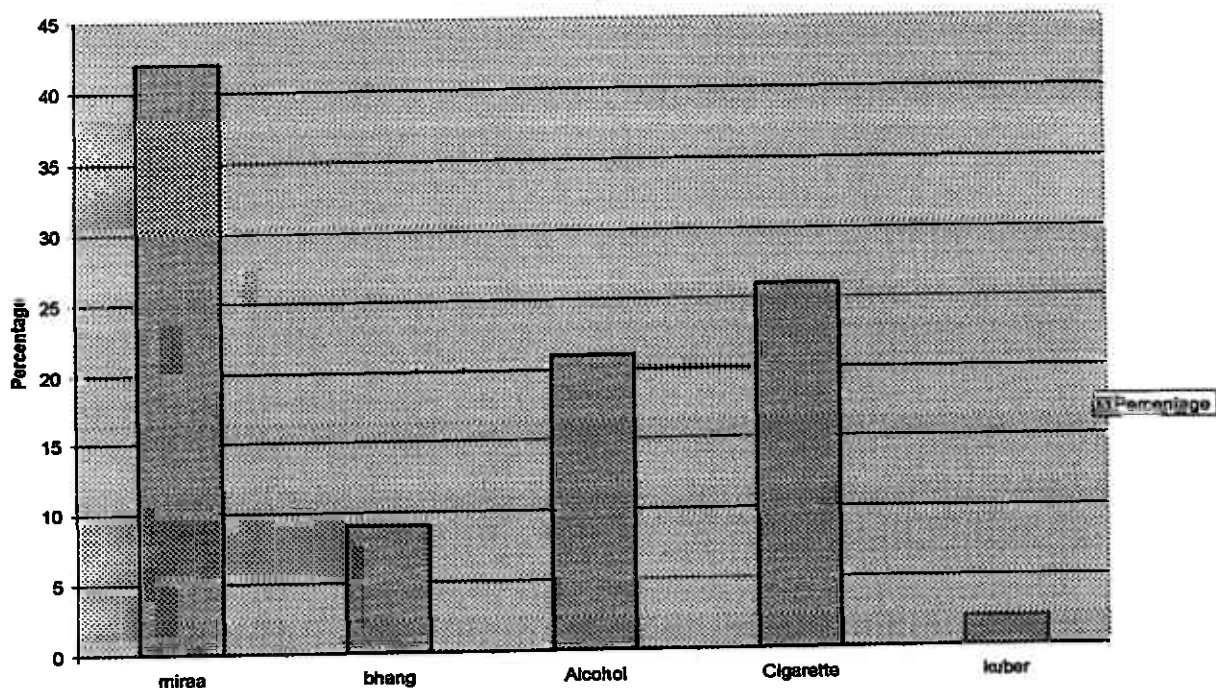
The results displayed in fig. 4.1 above indicate the type of drugs abused by students who admitted to have indulged in drug abuse in table 4.1. Out of 23 students respondents who accepted to have been involved in drug abuse 14 students (6%) engage in chewing miraa, 4 students (17%) take alcohol, 2 students (9%), use bhang, kuber, heroine, maddax and cocaine.

Fig. 4.2 Students awareness of other students abusing drugs



The figure 4.2 shows that, the percentage of students aware of other students involvement in drug abuse. Out of 113 students respondents 65 students (58%0 admitted that they are aware of other students in their schools taking drugs. Only 48 students (42%) had no knowledge of other students involvement in drug abuse

Fig. 4.3 Types of drugs seen taken by other students



The figure 4.3 shows the type of drugs seen by 65 students in figure 4.2, abused by other students. Out of 65 students from figure 4.2 who admitted seeing other students taking drugs 27 students (42%) mentioned miraa, 6 students (9%) bhang, 14 students (21%) alcohol, 17 students (26%) cigarettes and 1 student (2%) kuber.

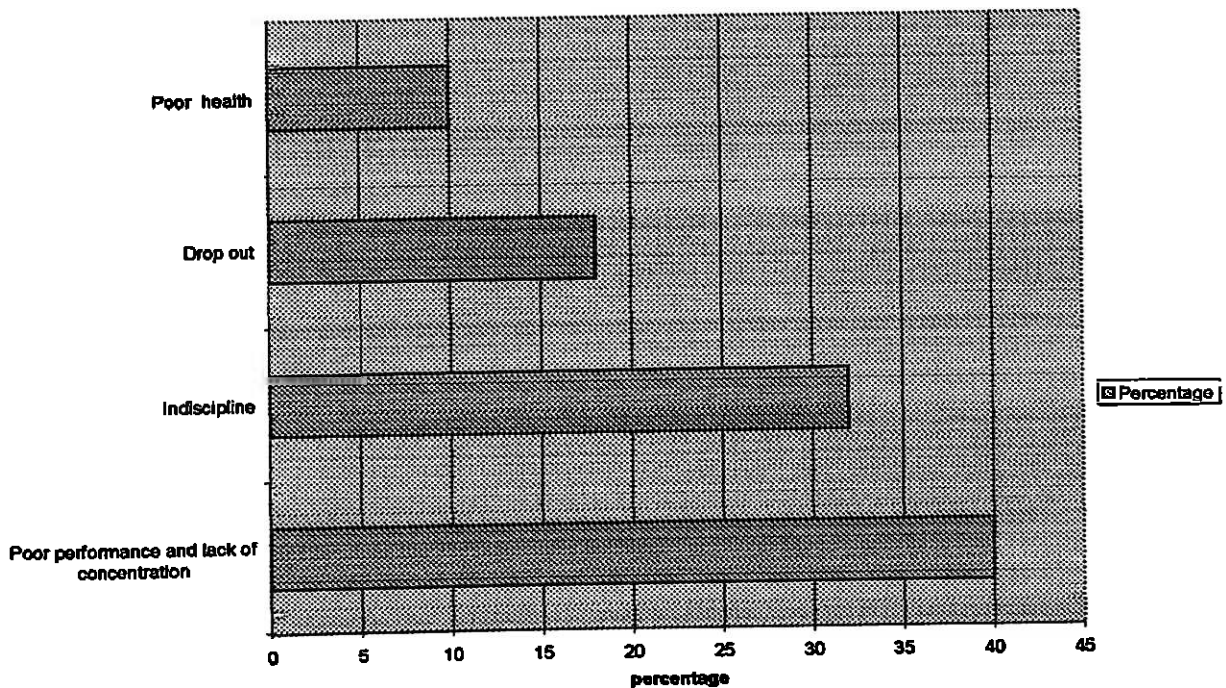
Table 4.3 whether drug abuse has effect on learning process

| Effect | Frequency | Percentage |
|--------|-----------|------------|
| Yes | 67 | 59 |
| No | 46 | 41 |
| Total | 113 | 100 |

The table 4.3 shows the results obtained from the question on whether drug abuse has effects on the learning process in schools in Siakago division. From the results , 67

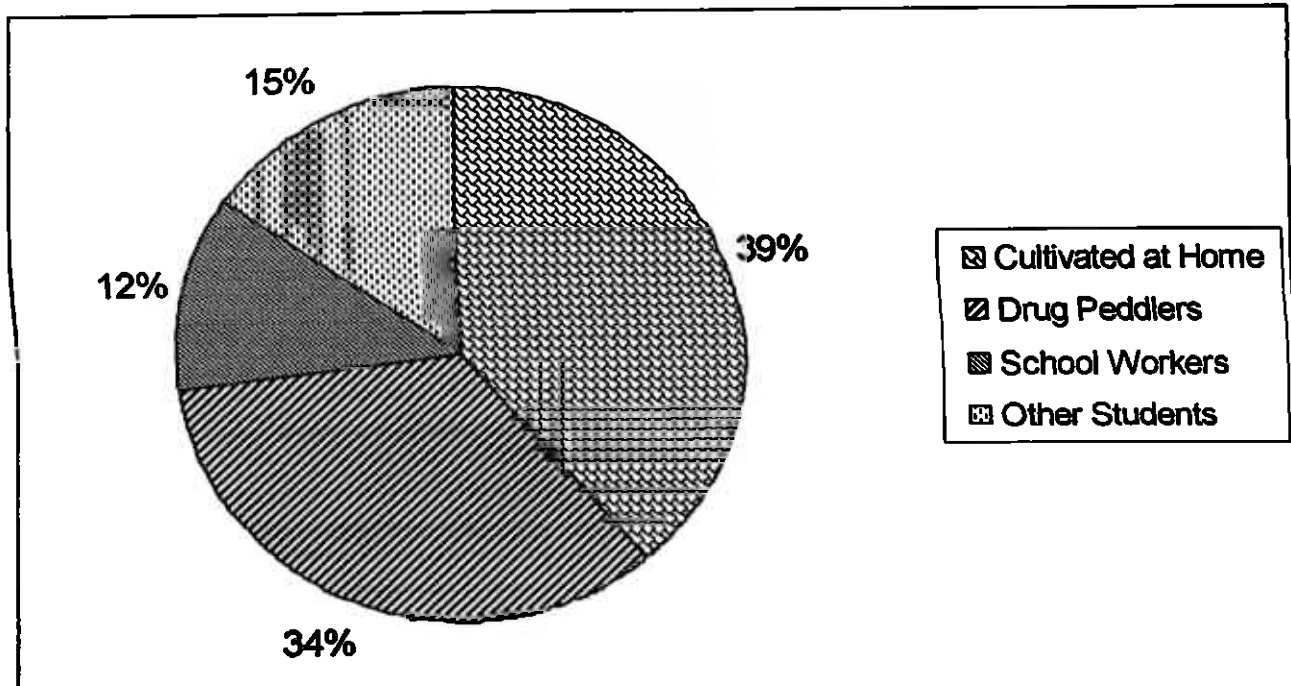
students (59%) agreed that drug abuse has effects on the learning process and 46 students (41%) disagreed or had no idea on effects of drug abuse.

Fig. 4.4 Effects of drug abuse on learning process



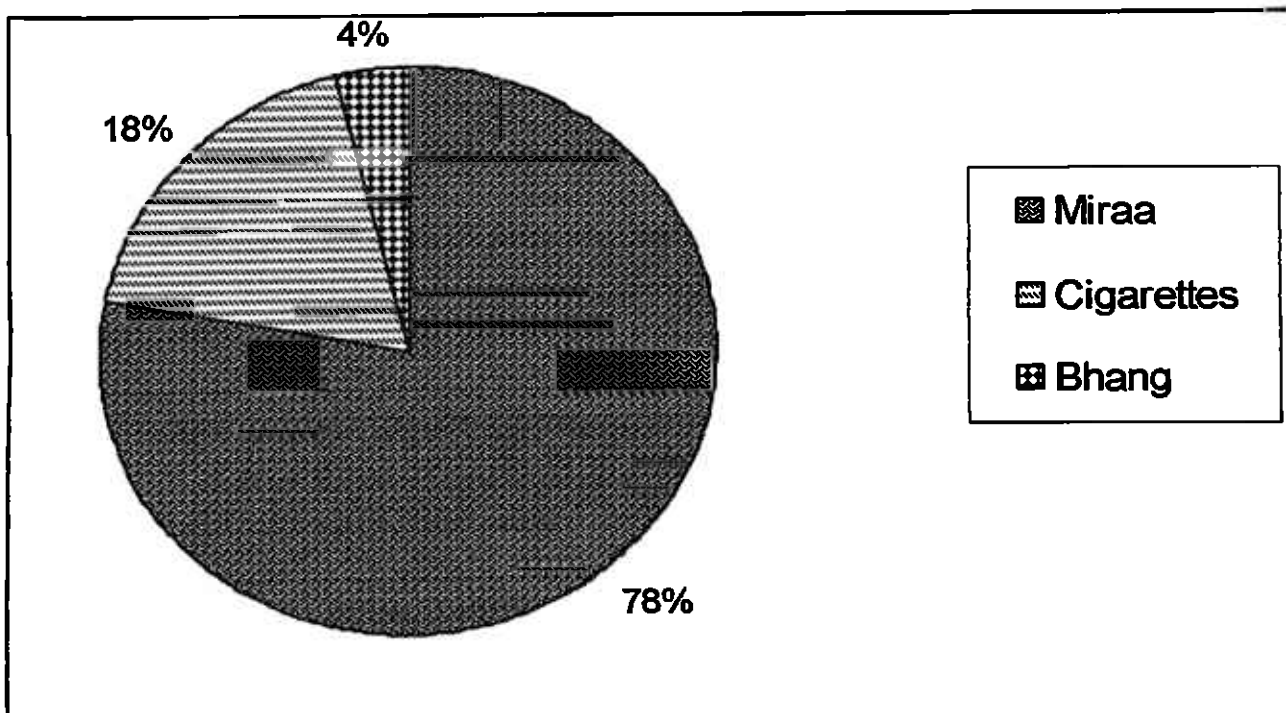
The results tabulated in figure 4.4, gives effects of drug abuse to learning process. Out of 67 students who responded yes to effects of drug abuse, 30 students (40%) indicated that drug abuse leads to poor performance and lack of concentration in class, 22 students (32%) said that, drug abuse leads to indiscipline in schools 12 students ((18%) said that drug abuse led to students dropping out of school and 3 students (10%) said that drug abuse causes poor health to those involved in the act.

Fig. 4.5 Sources of drugs abused by students



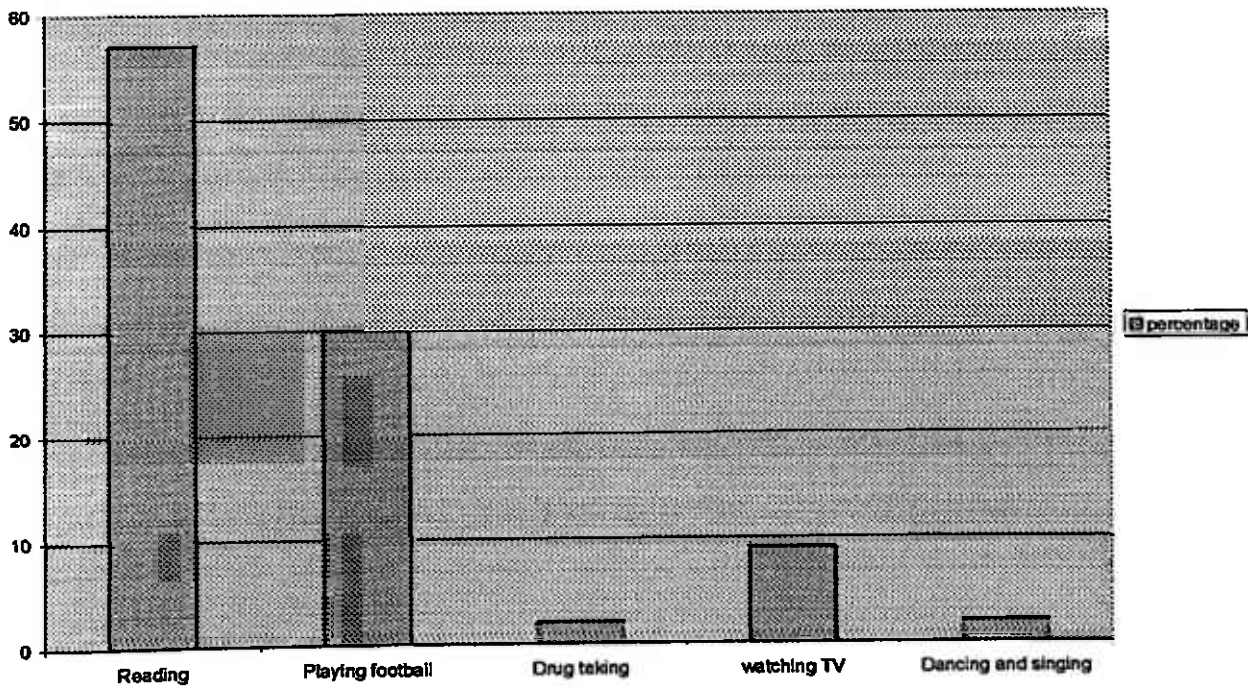
This question tried to identify the sources of drugs abused by students in secondary schools in Siakago division, Mbeere district. Out of 113 student respondents, 44 students which represent 39% of all the respondents said that illicit drugs are sold to students by school workers, and 17 students (15%) said that drugs are supplied by fellow students.

Fig. 4.6 Types of drugs cultivated in the division



The question tried to establish the types of drugs cultivated in the division. The fig 4.6 indicate that miraa, tobacco, and bhang are the main type of drugs cultivated in the division with miraa leading , 88 students representing 78%, of respondents, followed by tobacco; 20 students representing 18% of the respondents and finally bhang (5 students representing 4% of the respondents).

Fig. 4.7 Students Hobby



Source students' questionnaire

Figure 4.7 shows students hobby. From the figure 65 students (57%) have reading as their hobby; 35 students (30%) playing and watching football and other games as their hobby, 3 students (2%) have drug taking as their hobby, 10 students (9%) have TV and movie watching as their hobby and 3 students (2%) have dancing and singing as their hobby.

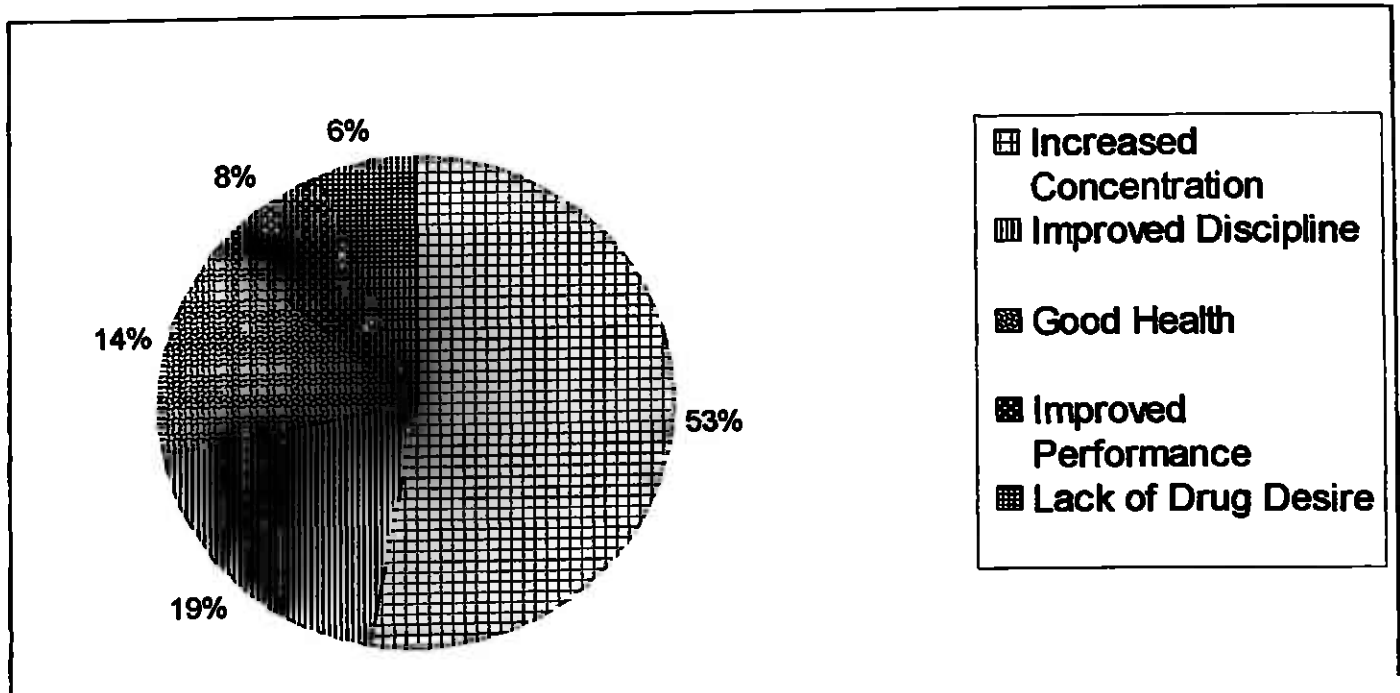
Table 4.4: Noticeable difference between times involved in drug abuse and now

| Difference | Frequency | Percentage |
|--------------|------------|------------|
| Yes | 36 | 32 |
| No | 77 | 68 |
| TOTAL | 113 | 100 |

Table 4.4 give the difference the students have after stopping drug abuse and when they were involved in the act. Out of 113 students 36 (32%) agreed that there is a difference in

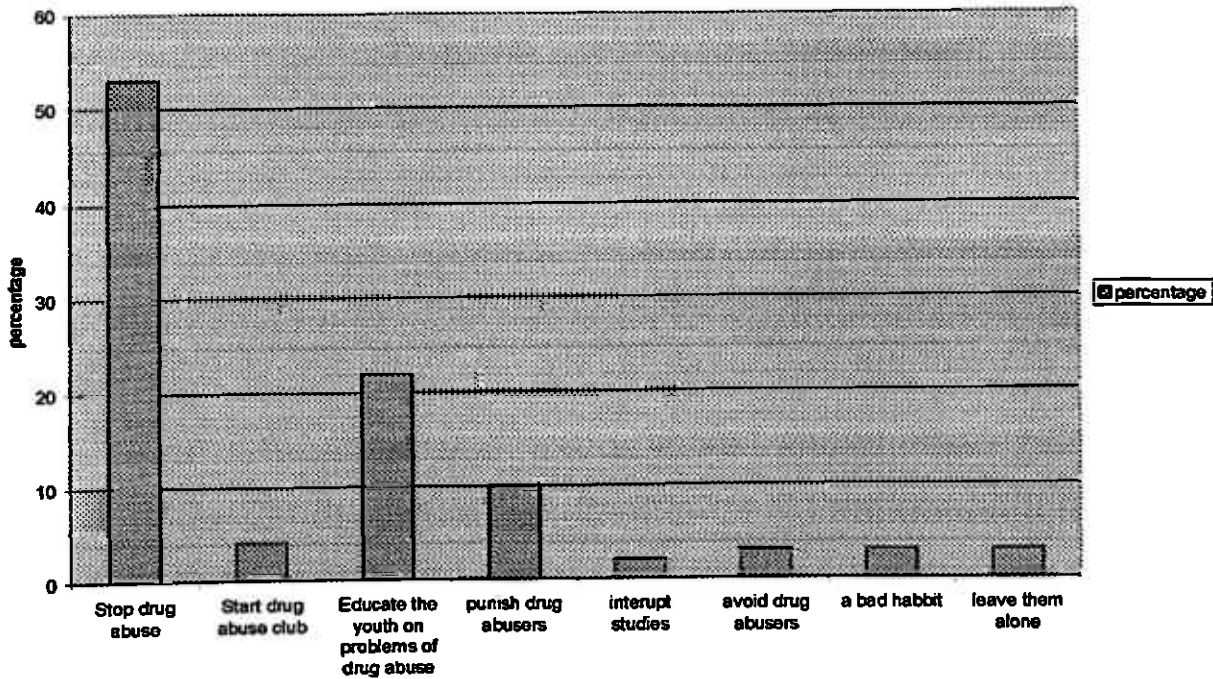
their lives after stopping drug abuse while 77 students (68%) did not have any noticeable difference as they had never engaged in drug abuse.

Fig. 4.8 Noticeable difference



Out of 36 students in table 4.3 who agreed on the existence of difference between the times they had indulged in drug abuse and after stopping, 19 students (53%) said that the concentration, 19 students (19%) said there was improvement in their discipline, 2 students (6%) said that they no longer have desire for drugs, 5 students (14%) said their health had improved while 3 students (8%) noted improvement in their academic performance.

Fig 4.9 views on drug abuse



The figure 4.9 shows the students views on the issue of drug abuse in schools. Out of the 113 students, 60 students (13%) felt that drug abuse should be stopped, 5 students (4%) indicated the need to establish anti-drug abuse clubs in the schools, 25 students (22%) said students should be educated on the dangers of drug abuse, 12 students (10%) had the view that drug abusers should be punished, 2 students (2%) said that drug abuse interrupt studies, 3 students (3%) had the view that drug abusers should be avoided while 3 students (3%) said that drug abusers should be left alone

Table: 4.5 Education dangers of drug abuse

| Educated | Frequency | Percentage |
|-----------------|------------------|-------------------|
| Yes | 85 | 75 |
| No | 28 | 25 |
| Total | 113 | 100 |

In the table 4.5 the table shows the distribution of the respondents, those who had education on the dangers of drug abuse.

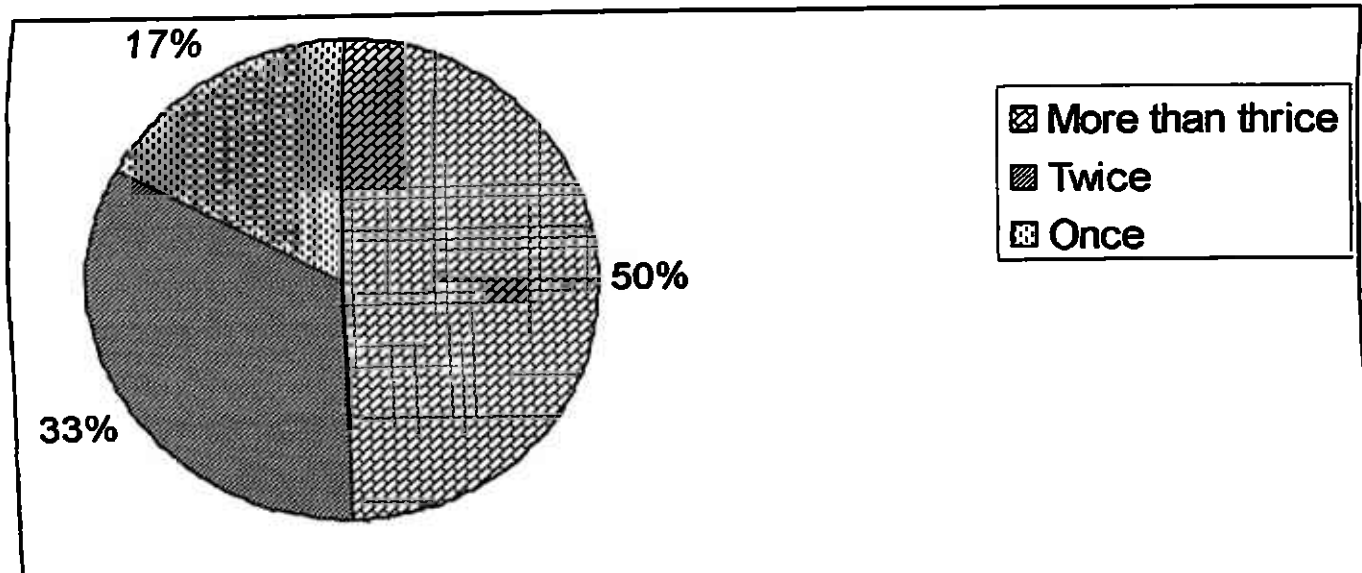
Table 4.6: Reception of drug abuse cases

| Cases reception | Frequency | Percentage |
|------------------------|------------------|-------------------|
| Yes | 6 | 100 |
| No | 0 | 0 |
| Total | 6 | 100 |

Source: head teachers' questionnaires

Table 4.6 above shows that all respondents in head teacher category had received cases of drug abuse. Therefore all the 6 head teachers who were given the questionnaires, that is 100% had received drug abuse cases.

Fig. 4.10 Number of times cases have been received by headteachers



The figure 4.10 shows the number of times the cases of drug abuse had been reported to the head teachers. From the results obtained from the field, 1 head teacher (17%) had received cases of drug abuse only once, 2 head teachers (33%) twice, and 3 teachers (50%) had received cases of drug abuse more than three times.

Table 4.7 Causes of drug abuse.

| cause | Frequency | Percentage |
|--------------------|-----------|------------|
| Peer pressure | 5 | 83 |
| Cultural influence | 1 | 17 |
| Others | 0 | 0 |
| Totals | 6 | 100 |

Source head teachers' questionnaires

Table 4.7 shows the causes of drug abuse in secondary schools in Siakago division, Mbeere District. Out of 6 teachers, 5 (83%) said that students involved themselves in

drug abuse out of peer pressure, and 1 (17%) mentioned the cause of drug abuse as cultural influence.

Table 4.8 teachers' knowledge of drug abuse cases in their schools

| Knowledge | Frequency | Percentage |
|--------------|-----------|------------|
| Yes | 15 | 83 |
| No | 3 | 17 |
| Total | 18 | 100 |

Source: Teachers questionnaires

Table 4.8 shows the knowledge of teachers on drug abuse cases in their schools. It shows that out of 18 teachers who filled the questionnaires, 15 (83%) had knowledge of drug abuse cases and only 3 (17%) had no knowledge of drug abuse cases in their schools.

Table 4.9 Number of drug cases known by teachers.

| Number of cases | Frequency | Percentage |
|-----------------|-----------|------------|
| One | 1 | 6 |
| Two | 4 | 22 |
| Three | 2 | 11 |
| More than three | 11 | 61 |
| Total | 18 | 100 |

Source: teachers' questionnaire

Table 4.9 shows the number of drug cases brought to the attention of teachers. Out of 18 teachers, 1 teacher (6%) knew of only one case, 4 (22%) two cases, 2 (11%) three cases and 11(61%) had no known of more than three cases of drug abuse in their schools.

Table 4.10 most abused Drugs in Schools

| Drug | Frequency | Percentage |
|--------------|------------------|-------------------|
| Miraa | 9 | 50 |
| Cigarettes | 5 | 27 |
| Bhang | 1 | 6 |
| Alcohol | 3 | 17 |
| Total | 18 | 100 |

Source: teachers' questionnaires

Table 4.10 shows the most commonly abused drugs in secondary schools in Siakago division Mbeere District. Out of 18 teachers, 9 (50%) said that miraa was the drug which was commonly abused, cigarettes followed with 5 (27%). Bhang 1(6%) and alcohol had three respondents (17%).

Table 4.11 Causes of Drug abuse amongst students.

| Cause | Frequency | Percentage |
|--------------------|------------------|-------------------|
| Peer pressure | 7 | 39 |
| Money availability | 5 | 27 |
| Cultural influence | 3 | 17 |
| Lack of guidance | 3 | 17 |
| Total | 18 | 100 |

Source: teachers' questionnaire

Table 4.11 shows the teachers' views on the causes of drug abuse by student in secondary schools. Out of 18 respondents, 7 teachers (39%) said student indulge in drug abuse out of peer influence, 5 teachers (27%) said that money availability was the cause, 3 teachers (17%) talked of cultural influence and 3 teachers (17%) said students lacked guidance on the problems associated with drug abuse.

Fig. 4.11 Methods of handling drugs abuse cases

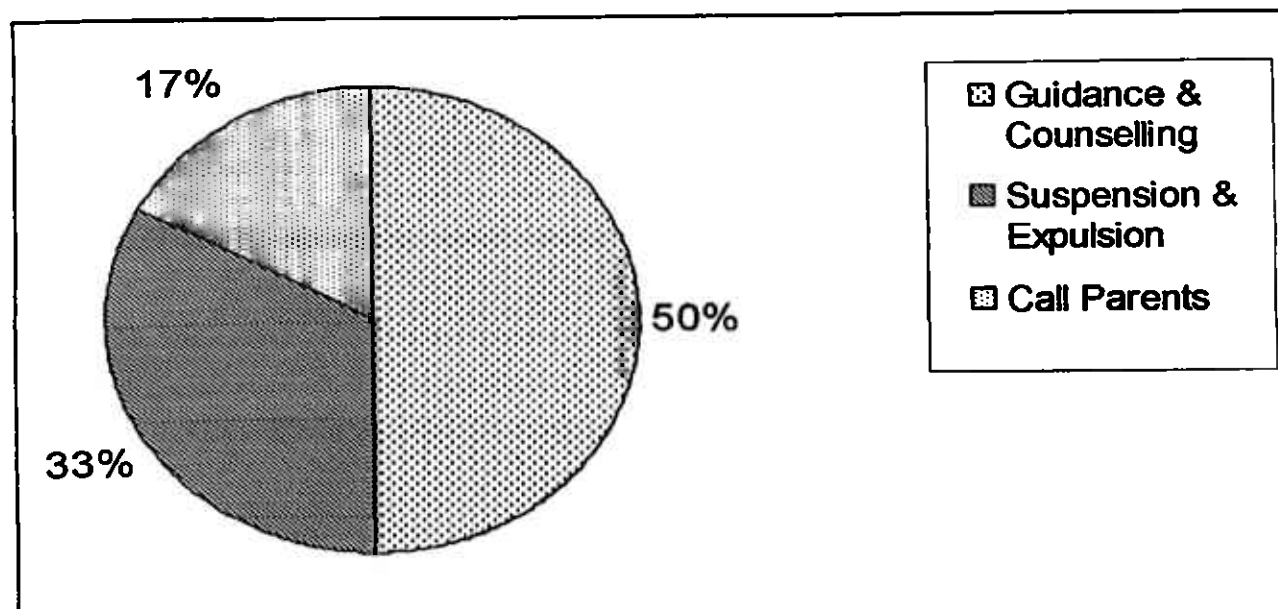


Figure 4.11 below shows the methods used by head teachers when dealing with cases of drug abuse. Out of six head teachers three (50%) apply guidance and counseling, two (33%) use suspension and expulsion method and 1 (17%) call the parent of the affected student to discuss the problem.

CHAPTER FIVE

5.0 DISCUSIONS

Kombo, (2005) noted that drug abuse in schools in Kenya is not a current issue. Alcohol and cigarettes (nicotine) have existed for as long as recorded history. Table 4.0 shows that most students in secondary schools know about drug abuse in their schools. Out of 113 students, 83% said they were aware of drug abuse in schools. This gives the view that drug abuse is common in secondary schools.

Kombo, (2005) some of the commonly abused drugs among students include alcohol, cigarettes, miraa, Bhang, Cocaine and heroine. This argument is evidenced by figure 4.0, 4.1 and 4.3 from the teachers questionnaires. The figure 4.0, 4.1, and 4.3 shows that miraa (muguka) leads among the drugs abused by students in Siakago division Mbeere district. Followed by cigarettes, alcohol, bhang, and others that are taken by small number of students include kuber, cocaine and heroine.

Table 4.2 shows that quite a good number of students indulge in drug taking. It shows that 20% of students are involved in drug abuse. Rensick,(1979), quoted that, people continue to take drugs today for other reasons other than medical reasons. Drugs may make them feel good, relief stress, tension or provide temporally escape.

Lazarus, (2001), reports that, speed is a drug commonly abused by the young people in Kenya colleges, high schools and in other institutions. It speeds up the body functions of the abuser. The drug does exactly what says by speeding up the body functions, it may also bring with it severe depression, brain and speech damage, swollen lips and eyes. This can be proven by figure 4.4 from students questionnaires which shows the effects of drug abuse on learning process where 40% of students said that drug abuse leads to poor

performance and lack of concentration in class, 32% said it leads to increase in indiscipline cases, 18% said it leads to school drop out and 10% said it leads to serious effects on the learning processes in schools. This proves Kombos argument on the effects of drugs abuse which include educational wastage poor academic performance and poor health.

Kombo, 2005, there are various factors that have been associated with increase in drug abuse among students. These include mass media, peer influence, ignorance, curiosity, cultural practices, and breakdown of family unit, stressful environment, and easy accessibility to drugs, laxity in institution management\ lack of role model and permissiveness in society. This is evidenced by table 4.7 obtained from head teachers questionnaires and table 4.11 obtained from teachers questionnaire on causes of drug abuse amongst students. This is supported by Rensick (1979) who reported that peer pressure is a strong factor in the use of drugs by the young people. Other causes of drugs abuse as shown by the findings from the data analyzed include cultural influence which from head teachers' questionnaires is represented by 17% and by the same percentage in table 4.11 from teachers' questionnaires. Other than the above causes others are money availability represented by 27% and lack of guidance by 17% in table 4.11.

On the sources of drugs figure 4.5 from student questionnaires shows that quite large proportion of drugs are grown in the area. It shows that 39% of drugs abused in the area are cultivated at homes. These drugs include miraa which takes 78% in figure 4.6 followed by tobacco (cigarettes) 18% and bhang 4%. Other sources include drug peddlers' 34% school workers 15% and other students 12%.

Figure 4.8 showed that, majority of students would wish to have drug abuse eliminated in schools (53%) while some felt that anti-drug abuse campaign should be stepped up (4%) , while others would wish to have education on the dangers of drug abuse increased (22%).

Table 4.5 showed that education on dangers of drug abuse has effectively been communicated to the students through various fora. 75%of the students agreed to have been informed on the dangers of drug abuse with only 25% denying to have been educated on the same.

Table 4.10 showed the mechanism used in dealing with drug abuse cases in schools. Most of the head teachers (50%) use guidance and counseling, 33% use suspension and expulsion method and 17% call parents to the school to discuss drug abuse problem of their children

5.1 CONCLUSION

The research findings from the data collected indicate that drug abuse is common in most schools in Siakago Division, Mbeere District. It shows that students are involved in cases of drug abuse in secondary schools in this area.

It indicates that there exists polydrug abuse in schools. The most commonly abused drugs include miraa commonly referred to as muguka which is emerging as the dominant cash crop in the area. The other most common drugs include cigarettes sold in the shops and locally rolled cigarettes. Others include alcohol, bhang, cocaine, kuber, and heroine. it is evident that students accessibility to drugs is not difficult because most of these drugs are

grown in their homes notably miraa (muguka), tobacco (cigarettes) and alcohol available at home and in bars.

It is also evident that due to drugs availability, students get them from other students, drug peddlers and even school workers.

Drug abuse has serious effects on learning process in schools. The data shows that it affects students' academic performance and concentration in class, causes indiscipline, leads to school dropouts and students poor health. It is also evident that majority of students dislike drug abuse and they would wish that the problem is eliminated in schools by taking tough measures on those who are found abusing drugs and by use of guidance and counseling.

5.2 RECOMMENDATIONS

1. Students be educated on adverse effects by the relevant ministers; such as ministry of education, government sector such as NACADA and NGO's for purpose of enlightening students on dangers of drug abuse.
2. Head teachers, teachers and parents should come together to find ways of dealing with drug abuse issues in schools.
3. The government should ensure laws on drugs abuse are enacted and enforced to deter drug traffickers from getting into schools.
4. The government should implement the WHO recommendations on Narcotics and other substance abuse.

5. Further research is should be carried out on the effects of Miraa cultivation and chewing to school going children and its effects on transition from primary to secondary school level.
6. School administration should encourage students to get involved more in extra-curricula activities so as to keep then active most of the time. This would make sure that students are more engaged in constructive activities other than doing drugs.
7. Parents should ensure that the amount of money given to students is only adequate for their needs and avoid giving them excess that could de used to buy drugs

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Daily Nation Chewing miraa could give you a heart attack
Horizon(8-6-2006)

APPENDICES:

APPENDIX A: BUDGET

| | ITEM/ACTIVITY | COST(KSH) |
|---|--------------------------|------------------|
| 1 | Stationery | 10,000 |
| 2 | Typing & printing | 10,000 |
| 3 | Traveling | 9,000 |
| 4 | Telephone | 3,000 |
| 5 | Miscellaneous | 5,000 |
| | Total Expenditure | 37,000 |

APPENDIX B: TIME TABLE (WORK PLAN)

| | SEPT | OCT | NOV | DEC | JAN | FEB | MAR | APR | MAY | JUN | JUL |
|------------------------------|------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|
| Literature Review | | | | | | | | | | | |
| Drafting Research Proposal | | | | | | | | | | | |
| Data collection and analysis | | | | | | | | | | | |
| Typing, printing & editing | | | | | | | | | | | |
| Report submission | | | | | | | | | | | |
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APPENDIX C: QUESTIONNAIRE FOR HEAD TEACHERS.

This questionnaire is aimed at gathering information that will be essential in trying to establish the type of drugs, their source and effects to students learning in Secondary Schools. All information provided will be strictly used for the purposes of research, and will be kept confidential. You, therefore need not indicate your name.

1. Name of the school.....
2. Zone.....
3. How long have you served as a head teacher in this year particular schools?.....yrs

4.

4(a) Have you received any case of drug abuse in your school

- (i) Yes (ii) No

(b) If yes, how many times?

- (i) Once (ii) Twice (iii) Thrice (iv) More than thrice

5 What types of drugs have been found with the students?

- (i) Tobacco ()
(ii) Bhang ()
(iii) Local brew ()
(iv) Miraa ()
(v) Bear ()

(vi) Any other. ()

6 In your own opinion where do students get these drugs from?

(i) Other students ()

(ii) School Workers ()

(iii) Teachers ()

(iv) Other sources ()

7 What do you think makes students indulge in drug abuse?

(i) Peer pressure ()

(ii) Money availability ()

(iii) Cultural influence ()

8 How does drug abuse affect students learning process in your School?

.....

.....

.....

.....

.....

.....

9 How do you handle students caught abusing drugs in your school?

(i) Suspend them ()

(ii) Guide and counsel them ()

(iii) Call their parents ()

APPENDIX D: QUESTIONNAIRE FOR TEACHERS.

This questionnaire is aimed at gathering information that will be useful in trying to establish the type of drugs, their sources and their effects to students learning process.

All information provided will be solely used for the purposes of research, and will be kept confidential. You therefore, need not indicate your name.

1. Name of the School.....

2. Zone.....

3. Teaching experienceyears

4(a) Do you know of cases of drug abuse in your school

(i) Yes (ii) No

(b) If yes, how many cases have you been brought to your notice? Tick appropriately.

(i) One

(ii) Two

(iii) Three

(iv) More than three

5. What types of drugs have been found with students in your school?

- (i) Cigarettes
- (ii) Bhang
- (iii) Local brew
- (iv) Miraa
- (v) Others (specify)

6 Of the drugs named above, what drugs are mostly abused in your school?.....

.....

.....

.....

7 What are causes of drug abuse amongst students?

- (i) Peer pressure ()
- (ii) Money availability ()
- (iii) Cultural influence ()
- (iv) Lack of guidance ()

8 Where do drugs abused by students in your schools come from?

- (i) Students ()
- (ii) Teachers ()
- (iii) School workers ()
- (iv) Other sources (specify).....

.....
.....

9 How does drug abuse affect students learning process in your schools?

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

10 How are cases of drug abuse handled in your school?

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

APPENDIX E: QUESTIONNAIRE FOR STUDENTS.

Dear Students,

You are provided here below with questions for you to answer. Note that there is no right or wrong answer. Do not indicate your name anywhere on this questionnaire.

1. Name of your School.....

2. Do you like your school?

(i) Yes (ii) No

3(a) What is the type of your school?

(i) Day

(ii) Boarding

(iii) Day/Boarding

(b) If day, how far is your home from school?.....Kms

(c) How do you travel from school to home?

(i) Public transport

(ii) Walking

(iii) School bus

(iv) Family car

4 Have you ever heard about drug abuse?

(i) Yes

(ii) No

If yes, do you know any type of drugs?

(i) Yes

(ii) No

If yes, what drugs do students use in your School? Specify.

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

5 Have you ever indulged in drug taking ?

(i) Yes

(ii) No

If yes, what drugs?.....

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

6 Do you know of students in your school who involve themselves in drug abuse?

(i) Yes

(ii) No

7.If yes, what drugs do they take?.....
.....
.....
.....

8 What led you to do drug (drug taking)

(i) Peer Group pressure (Friends) ()

(ii) Cultural influence ()

(iii) Frustrations ()

(iv) Others ()

9 If you do drugs, has the habit affected your learning process in the school?

(i) Yes

(ii) No

If yes, what effect does it have in your learning process?.....
.....
.....
.....
.....

10 Where do you get the drugs from?

(i) Cultivated at home ()

(ii) Buy from peddlers ()

(iii) Workers ()

(iv) Students ()

(v) Others

specify.....

.....

.....

SIMPLE STRUCTURED INTERVIEW QUESTIONS (SECTION B)

12. What are some of drugs you know are cultivated in this divisions?.....

.....

.....

.....

13 During your free time what do you do?.....

.....

.....

.....

14 Which is your hobby?.....

15 Is there any noticeable difference between when you were not involved in drug taking and now?.....
.....

16 If yes, what is the difference?.....
.....
.....

17 What are your views towards this issue of drug taking?.....
.....
.....

18 Do you have any knowledge on effects of drug abuse in lives of who take drug?
.....
.....
.....

19 Has anybody/group of persons educated you on the dangers of drug abuse?.....
.....
.....

20 Who and when?.....

APPENDIX F: LIST OF PARTICIPANTS.

| Participants | Numbers |
|---------------------|----------------|
| Head Teacher | 6 |
| Teachers | 21 |
| Students | 120 |
| Total | 147 |

APPENDIX G: MBEERE DISTRICT

