

**INFLUENCE OF PEER PRESSURE ON ALCOHOL USE DISORDER AMONG
STREET YOUTH IN SLUM AREAS OF KARIOBANGI SUB-COUNTY, EMBAKASI
NAIROBI COUNTY, KENYA**

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DECLARATION

I, affirm that this thesis is the work of my individual initiative and research and that it has not been published or presented in any other institution for academic purpose. Any literature source has been duly cited and acknowledged. I allow the thesis to be available for use in academic work through photocopying or use as a reference as the University sees fit.

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We certify that this thesis is the original work of the student and that it certifies all university requirements.

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Date:

DEDICATION

The thesis is devoted to my parents, brothers and sisters, and to my religious congregation of Comboni Missionaries of the Heart of Jesus (MCCJ) in the Archdiocese of Nairobi in Kenya and last to the youth in streets.

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Firstly, I acknowledge God for granting me the wisdom to finish this final thesis work. I likewise extend my appreciation to my religious congregation of the Comboni Missionaries of the Heart of Jesus (MCCJ), for offering me this opportunity and financial assistance in my entire studies. My distinct recognitions go to entirely my community affiliates for their provision and encouragement towards my education at Tangaza University College.

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ABSTRACT

The research endeavored to evaluate the influence of peer pressure on alcohol use disorder among street youth in slum areas of Kariobangi Sub-County within Nairobi County in Kenya. The study objectives were: to analyze the types of peer pressure, to examine the factors that lead to alcohol use disorder, to discuss the effects of alcohol use disorder, and to suggest measures that would be embraced to minimize cases of alcohol use disorder among the street youth. Phenomenological design and qualitative techniques were used for data collection, analysis and presentation. Stratified random sampling techniques were used to obtain 200 study participants. The study findings revealed six types of peer pressure that were embraced among street youth namely negative peer pressure, positive peer pressure, direct peer pressure, indirect peer pressure, verbal and unspoken peer pressure. Moreover, the study findings revealed that peer pressure, stress-free induction, media influence, availability and affordability of alcohol, anxiety and curiosity factors led the street youth to alcohol use disorder. Lastly, the study findings revealed the following effects of alcohol use disorder among the street youth: death, poor health, and loss of memory, poor judgment, poor personal hygiene, and upsurge in crimes, rape cases, unprotected sex, and unwanted pregnancy among street youth. Thus, the researcher suggested for promoting positive peer pressure, seeking counseling services, provision of basic needs, using rehabilitation centers for alcohol addicts, creating awareness and advocacy against alcohol use disorder among the street youth, and the government, NGOs and Faith-Based organizations to reduce the number of street youth.

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LIST OF ACRONYMS

| | |
|----------------|--|
| AIDS | Acquired Immunodeficiency Syndrome |
| DV | Dependent Variable |
| FBOs | Faith-Based Organizations |
| FGDs | Focused Group Discussions |
| HIV | Human Immunodeficiency Virus |
| IV | Independent Variable |
| NACADA | National Authority for the Campaign Against Alcohol and Drug Abuse |
| NACOSTI | National Commission for Science, Technology and Innovation |
| NGOs | Non-Governmental Organizations |
| OR | Operational Research |
| SPSS | Statistical Package for Social Sciences |
| TV | Television |
| UN | United Nations |
| UNICEF | The United Nations Children's Fund |
| UNODC | United Nations Office on Drug and Crime |
| US | United States |
| WHO | World Health Organization |

OPERATIONAL DEFINITION OF TERMS

Alcohol use disorder: consistent utilization of alcohol where it is used in amounts or with methods, which are dangerous to the street youth in Kariobangi Sub-County.

Influence: the capacity to have an outcome on the development, character or behavior of the street youth within Kariobangi Sub-County.

Peer pressure: influence of youth who share similar social characteristics namely age, class, education, occupation, and interact on a level of equality they have on others and significantly influence the behavior of street youth within Kariobangi Sub-County.

Slum Areas: the informal settlements within the streets of Kariobangi Sub-County.

Street youth: girl or boy amid the ages of fifteen and twenty-nine years old who is living or working on the streets of Kariobangi Sub-County.

CHAPTER ONE

INTRODUCTION

1.1 Introduction

The section represents background to the problem, statement of the problem and the purpose of the research. The chapter has also illustrated the research objectives showing both general and specific objectives and research questions as a guiding framework for the entire study. Besides, the chapter has demonstrated the significance of the study, delimitations and scope, and the research assumptions.

1.2 Background to the Problem

The phenomenon of street youth is considered to be the most crucial issue facing youths currently in both the developing and developed countries. According to the UN definition, a child in the street is any boy or girl in which the street is their dwelling place- the so called “home” (Aptekar, 2014). The concept of street youth is not a clearly identifiable or homogeneous population. The category is a socially constructed one, best understood as a label used to describe young people for whom the street plays a central role during this period of their lives - usually as a place to live or work. Accordingly, the phenomenon of street youth requires to be addressed and solved immediately, or else it continues to endanger societies in the global world. Even though difference exists, international bodies like UN and other organizations estimate that the population of street children globally ranges from one hundred to one hundred and fifty million youth. The phenomenon of street youth is mainly an urban issue. The strong informal system and family ties of rural areas frequently keeps youth off the streets, even though huge street youth in the towns have floated from country side to the towns alone or alongside

with their families' members (UNICEF, 2010). Therefore, youth coming to the street is a serious problem for both the youth themselves and their respective families.

Factors that initiate youth onto the streets and how they cope once they are there are an extraordinary kind of incidences that deserve deeper scrutiny. If we are to closely study the circumstances in which youth end up being on the streets, there is need to look at what drives them to the streets. According to UNICEF (2010), the number of youth in streets increase every day due to poverty, urbanization, abuse, rape, abandonment, torture, or orphaned due to HIV and AIDS, and the recent Covid-19 pandemic. Besides, when there are many progressive hotels, industries, schools, shops, and other major establishments that have many residents, these are attractive to the urban life and lead other youth to flock to cities to make a life for themselves. They do feel that there is much money to be made where several youth are around and they even copy the lifestyles of the youth they see as a consequence of peer pressure.

Notably, peer pressure is a complex issue having diverse features. According to Steinberg and Monahan (2017), the capacity to counterattack peer pressure originates from a mixture of many factors namely respecting one another, age and gender, self-esteem, peer norms and values, and personal experience. Notably, peer pressure is characterized by social acceptance, social belonging, social influence, peer norms and values. In fact, there exist both negative and positive peer pressures. To begin with, positive peer pressure assists the youth in making the correct choices and preferences and comes from acquiring a group of peers with optimistic values and norms. Besides, negative peer pressure makes it problematic among the youth to establish positive, and make right choices or preferences in life. The progress of vulnerability to peer pressure in youth grows through early puberty, and its climax at the age of fourteen years, and decline subsequently (Steinberg & Monahan, 2017).

Peer pressure is frequently raised in debates of youth misbehavior and is associated with numerous accounts of adolescent risk-taking. This is because the utmost risky behavior in which youth indulge in alcohol use takes place in the group of peers to enhance social belonging as denoted by Simons-Morton, Lerner, and Singer (2015). Youth do essentially influence one another and that the impacts of peer pressure are tougher through youth years compared to adulthood. A current research established that disclosure to nobles in the course of a risk-taking chore increased the quantity of dangerous behavior amongst youth including alcohol abuse, and increased it by 50% among street youth to achieve social acceptance as revealed by Steinberg and Monahan (2017).

Humanity has been infected and affected by drug and substance misuse since antiquity times. Drugs give alluring side effects namely elation, euphoria, the sensation of good, power, and serenity (WHO, 2013). What began as a means of recreation, grew over time into a problem of disorder and dependence. According to Ali (2012), winemaking started from the wild grape areas of the Middle East. Unfortunately, alcohol use disorder has spread at a shocking rate and has become a universal concern. Nowadays, no single country has been spared on the impacts of alcohol use disorder on the users (WHO, 2013). Therefore, due to alcohol use disorder, street youth are experiencing unstable lifestyles including no schooling, deteriorating health, and no developments.

In European nations, many young people take alcohol drinks from a young tender age of sixteen years. The latest survey done by Swinson and Eaves (2018) found that 40% of Americans between the age of fifteen and sixty-five years consumes alcohol. Approximately, 80% of the youth aged among ten and fourteen years old have tested alcohol. Studies carried out on the general topic of alcohol use disorder illustrate that though extensively used as an entertainment

drink and has been legal in many nations, alcohol has overwhelming negative impacts on the society hence hindering holistic developments (Swinson & Eaves, 2018).

There exists a connection between alcohol use disorder and peer pressure. Jorge et al. (2018) carried out a research on peer pressure and unlawful drug consumption among youthful undergraduates in Brazil. Alcohol use disorder was the result and was obtained through the query: "Have you ever used any illicit drugs namely alcohol in your life?" An utmost vital group of associates was classified as religious practices, family, school, sporting, games, and other culture practices. The total degree of illegal substance usage was fifteen point two percent. Sex heterogeneity in the groups (OR = 3.14; 95% CI: 1.63-6.06), religious relationships (OR = 0.36; 95% CI: 0.17-0.75) then games, athletic, and social connections (OR = 0.44; 95% CI: 0.22-0.87) stayed meaningfully related to illegal substance consumption. Youth who dwelt in vulnerable zones exhibited an advanced chance of substance misuse compared to those dwelling in more susceptible zones. Besides, religious, culture or sports and games-based relationships appear to reveal a defensive effect alongside lifetime illegal drug misuse. Sex heterogeneity in the groups and existing prone vulnerable locality advanced the probabilities of youths recording illegal drug consumption (Jorge et al., 2018).

In Calcutta, India, a study by Aptekar (2014) found out that there exists close to three hundred thousand youth in streets. Within Sao Paulo, there exist nearby 0.5 million children in the streets. Regarding the research findings, it is projected that 0.8 of the Sao Paulo's population in prison are former youth in streets. The study findings indicated that family breakdown, poverty, and child neglect and abuse, appear to be causing the issue. Numerous economically ignored families have converted extremely dysfunctional, and have positioned their youth in situations that have stemmed in such youth leaving families and attempting to live in the

frequently hazardous and unprotected street environment and end up engaging in alcohol use disorder due to peer pressure (Aptekar, 2014).

A culture of indulging in alcohol use disorder among youth is spreading from developing to developed states. In South Africa, a research by Ali (2012) revealed that street youth's experiences of life on the streets seem to be expressed in contradictory feelings of shared group solidarity, yet pierced with feelings of loneliness and continuous fighting with peers. Most of the day for a typical street youth is spent running: either running to find some food or running away from the police or other bullies on the street. This is a huge struggle that is very tiresome and takes a lot of energy. Besides, in an empty of grumbling stomach, one cannot afford to think about changing but feeding one's mouth. Sometimes, taking some substances helps to ease the pain and hunger pains that the youth on the streets feel, not to mention they assist in the numbing process of the mind so that the day's worries will not overwhelm the mind. Street youth fall into patterns of alcohol use disorder to manage antagonistic circumstances then endure on the thoroughfares (Ali, 2012).

In Africa, more particularly Sub-Saharan, consultations with youth misusing alcohol revealed that they thought that consuming alcohol is important for leisure which have ambitions of getting drunk (Morris, 2019). In the Ethiopian context, there are few studies conducted on the effects of peer pressure on street youth substance abuse. For example, a research carried out by Eshetu (2011) regarding drug misuse among street youth in Addis Ababa indicated that peer influences coupled with other risk factors have been the main reason for the street youth to start using drugs. The findings of the study also mentioned that friends and relatives at their age initiated them to test alcohol by modeling the drug-usage.

According to Monica (2011) from Zambia, the greatest significant variable in foreseeing the possibility of alcohol use disorder is the point of youth participation in peer actions, the number of peers consuming alcohol, and peers' disrespects to alcohol usage. The implication is so long as a youth links with a group of alcohol consumers there occurs a great likelihood of the youth to indulge in drinking alcohol. In reality, youths wish endorsement from their peers complementary than everything otherwise. While their peers doing other things, the peers too want to do so. The youth faces a challenging time of transitioning when search is more mutual and questions based on the identity and self- concept are questioned more habitually.

In Tanzania, Castens, Luinga, Shayo, and Tolia (2012) carried out a study on alcohol use disorder in urban Moshi. The respondents revealed that most street youth start drinking because of peer pressure. Young people increasingly impress the urge to drink to fit with their peers and consider alcohol as a source of bravery that will brand social connections. Peer-targeted selling and absence of oppositional movements support the fact that the universal weight of alcohol misuse exceeds that of tobacco misuse. The study recommended for rehabilitation programs to minimize cases of alcohol use disorder among street children.

In Uganda, a study by Tumwesigye and Kasirye (2018) found out that the street youth who dwell in deprived areas, precisely in the slum areas, are at great danger for a wide-ranging of hostile health impacts which includes difficult alcohol use disorder due to peer pressure, violence oppression and enactment, sexual violence oppression, HIV and AIDS, suicidal thoughts, and homelessness. Whereas the youth who dwell in the streets do all endure suffering and society disadvantage, those who account for partaking wandering for some time do encounter the great forms of difficulty. Informal settlements are usually categorized as areas missing state planning and structure that is demonstrated through congestion, absence of access

to communal services, and unfortunate surroundings, economic, and social conditions. Street youth, demarcated as persons slumbering severely on the roads plus not in a house, encounter many jeopardies connected to social segregation, admittance to alcohol, and absence of getting resources and social fairness. Street adolescents have similarly been detected to account for advanced stages of mental distress and other health damages, encounter great physical and emotional traumas, fight to sustain helpful systems and have advanced rates of alcohol use disorder compared to youth who dwell in shelters with their families.

Kenya has admitted the gravity of the problem of alcohol consumption designating that misuse of alcohol and other substance has gotten a scale that initiates a state tragedy if well-timed procedures are not embraced. Remarkably, Sorre (2010) noted that in Kenya one hundred and thirty-seven people died in the Nairobi streets after taking alcohol brew mixed with methanol ingredients and twenty people lost eye-sight. Additionally, in August 1998, 85 individuals died after taking unclean alcohol and in 1999 seventeen persons lost their lives in similar episode after taking illegalized alcohol which was extremely toxic (Sorre, 2010). Researches have indicated that the frequently utilized substances and drugs among the Kenyan youth are not illegalized since they are substances sold including alcohol (Ochieng, 2010). Many explanations have been articulated as the source of alcohol use disorder among youths in Kenya. The study findings revealed psychological stress, poor role models, parental influence, and accessibility of low-cost alcohol was due to peer pressure (Swisher, 2011).

Alcohol is a persuasive and slow killer. It has mutually short and long term negative outcomes among the consumers. It leads to social, economic, and health problems among youth (Sorre, 2010). Some of the health issues comprise stomach ulcers, blurred vision, blindness, and liver damage, and mouth cancer-related cases. Alcohol consumption is prevalent among the

youth in Kariobangi (Gongera, et al., 2013). This has become a social concern to the guardians, parents, educators, and society at large.

The area of Kariobangi lies to the North East of Nairobi about eight kilometers from the City Centre. It is one of the many slum areas on the outskirts and covers about ten kilometers square. Many people who live in Kariobangi do not have access to limited resources. A number of them have no access to sewage systems, health centers are few, and electricity and access to clean running water is a problem. Notably, the average family lives on an income of Kshs. 50 per day which is equivalent to one US dollar. Due to peer pressure more especially among the street youth, alcohol drinking has become an option to cope with hardship of life in Kariobangi (Gongera, et al., 2013). The high rate of increase in alcohol taking by the street youth is an evolving problem that requires an urgent appropriate solution more especially in Kariobangi Sub-County, Nairobi County. However, little is identified on the influence of peer pressure in alcoholism among young people. It is clear that little is currently embraced to deal with the issue and that definitely street youth is an overlooked disaster that is fixed to have an overwhelming influence on the Kenyan holistic development.

1.3 Statement of the Problem

Street life is a public problem for countless states, poor and rich alike. Some of youth wander in the main streets of small and big municipalities around the world. Such youth is discovering a place that they can prefer to spend their nights and meet their basic needs. Notably, the number of youth in the streets of Kenya were two hundred and fifty thousand, with sixty percent in Nairobi city only. The figures rose rapidly following the 2007 and 2008 period of post-election violence in Kenya. Recently, based on the case study, thousands of residents living

in sewage slum estates in Kariobangi North were left homeless following the demolition of their houses by the state orders.

Additionally, youth have the longing to be desired and to gain approval and acceptance by peers. Youth find themselves doing things they would not typically do due to peer pressure. That is why many youngsters find alcohol to be an enjoyable form of recreation that is easy, cheap, and exciting to do with their friends.

Consequently, the encouragement of their peers who use alcohol, the youth in streets are affected in their health, social, and physical growth and developments, which is a concern and problem for the whole society and the state at large. Majority of street youths engage in alcohol use disorder as a result of peer pressure which leads to increased cases of violence, unprotected sex leading to unwanted pregnancy, accidents, unstable lifestyles, no schooling, and deteriorating health. Still, influence of peer pressure among the youth in streets and alcohol use disorder have not been researched extensively as the principal agent of spreading alcohol use in the lives of youth in the streets of Kariobangi Sub-County. Therefore, this research was designed to assess the influence of peer pressure on alcohol use disorder of street youth in slum areas with specific reference to Kariobangi Sub-County within Nairobi County in Kenya.

1.4 Purpose of the Study

The purpose of the research was to assess the influence of peer pressure on alcohol use disorder among street youth in slum areas with specific reference to Kariobangi Sub-County in Nairobi County.

1.5 Research Objectives

This research was directed by the following over-all and particular study aims.

1.5.1 General Objective

The over-all aim of the research was to examine the influence of peer pressure on alcohol use disorder among street youth in slum areas of Kariobangi Sub-County within Nairobi County in Kenya.

1.5.2 Specific Objectives

The particular research aims were:

- i. To analyze the types of peer pressure that are there among street youth in slums areas of Kariobangi Sub-County within Nairobi County in Kenya.
- ii. To identify the factors that lead street youth to the alcohol use disorder in slum areas of Kariobangi Sub-County within Nairobi County in Kenya.
- iii. To evaluate the effects of alcohol use disorder among the street youth in slum areas of Kariobangi Sub-County within Nairobi County in Kenya.
- iv. To identify measures that can be used to minimize cases of alcohol use disorder among the street youth in slum areas of Kariobangi Sub-County within Nairobi County in Kenya.

1.6 Research Questions

This research endeavored to respond to the subsequent queries:

- i. What types of peer pressure exist among street youth in slum areas of Kariobangi Sub County within Nairobi County in Kenya?
- ii. What are the factors that lead street youth to the alcohol use disorder in slum areas of Kariobangi Sub-County within Nairobi County in Kenya?
- iii. What is the effect of alcohol use disorder among the street youth in slum areas of Kariobangi Sub-County within Nairobi County in Kenya?

- iv. What are the measures that can be used to minimize cases of alcohol use disorder among street youth in slum areas of Kariobangi Sub-County within Nairobi County in Kenya?

1.7 Significance of the Study

The research would have many practical implications. Notably, little is known about factors namely peer pressure influencing alcohol use disorder among the youth in the streets of slum areas of Kariobangi Sub-County in Nairobi County. The study findings would correspondingly shed some light on the contributions of peer pressure in the expansion of social behavior of street minorities in general and alcohol use disorder in particular.

The Kenyan government would profit from the study results. First of all, the Ministry of Youth, Gender Affairs, and Public Service would be informed to come up with reformation and transformation ways that would help the street youth to change and become responsible citizens. Furthermore, the Ministry of Education would be informed to create educational empowerment programs that would enable street youth to get access to education as it is a powerful tool to dispel negative peer pressure accompanied by alcohol use disorder from their lives.

Different religious organizations and locally-based Non-Governmental Organizations (NGOs) would use the study findings to plan programs namely getting involved in various religious groups, and taking an active role in shaping the behavior of street youth. Regarding these, street youth would rehabilitate rapidly and become strong, responsible, and productive citizens by minimizing cases of alcohol use disorder.

Besides, it was realized that the research findings would inform all Faith-Based Organizations (FBOs), and all missionary agents to be sensitive to the plight of street youth in our cities. It was hoped to give more insights to church leaders more especially in the

Archdiocese of Nairobi and other urban Dioceses in Kenya to establish effective pastoral programs that would help to alleviate the problem of street youth and alcohol use disorder.

Lastly, the study findings and their implications would give some vital direction for other investigators to carry out further research in the same area. The few insights that was gained from the research findings would complement the available works literature on peer pressure and alcohol use disorder among street youth.

1.8 Scope and Delimitations

The research focused on the influence of peer pressure on alcohol use disorder among street youth. This study was conducted in the slum areas of Kariobangi Sub-County within Nairobi County in Kenya. The study targeted the street youth of Kariobangi Sub-County between the age of 13-30 years old.

It should be noted that although many factors contribute to alcohol use disorder among youth on the streets, this study was delimited to the area of the role that peer pressure plays in making street youths indulge in alcohol use disorder during their stay in the streets. Furthermore, there were a lot of youth who experience alcohol use disorder. However, this study focused on the youths that live specifically on the streets of Kariobangi Sub-County.

1.9 Assumptions

Assumptions are arguments accepted as true or as certain to happen without proof (Kothari, 2014). It should be noted that assumptions are the things that the researcher has no control but if they are not present the study becomes invalid (Kothari, 2014). This research was premised on the subsequent assumption which was tested and approved to be true: There exists a link between peer pressure and alcohol use disorder amongst the youth in streets.

1.10 Summary

Alcohol use disorder amongst the adolescents in the streets has become a social concern that needs a quick response. Alcohol use disorder midst the street youth has been partially attributed to peer pressure. Therefore, this research aimed at assessing the influence of peer pressure on alcohol use disorder among street youth in slum areas with specific reference to Kariobangi Sub-County within Nairobi County in Kenya. Based on the research, many studies on the influence of peer pressure on alcohol use disorder amid street youth seemed to be limited in Kenya more especially in Kariobangi Sub-County, a knowledge gap that was bridged by the current study as chapter two on literature review illustrates below.

CHAPTER TWO

LITERATURE REVIEW

2.1 Introduction

The chapter emphasizes on connected literature review regarding the study. Examination of the other studies on the variables and the research topics were described in this chapter. It also described the theory used to explain the topic, as well as a conceptual framework to demonstrate how the variables related to each other in the research. Lastly, the chapter explained the study gaps that the researcher endeavored to bridge.

2.2 Theoretical Framework

Numerous conjectural representations exist which explain about substance and drug misuse more particularly alcohol intake. In this study, the researcher embraced the hypothetical setting of social learning theory according to Albert Bandura.

2.2.1 The Social Learning Theory

Social Learning Theory is based on a series of many psychological concepts namely expectations, observational learning, behavioral capability, self-efficacy, reciprocal determinism and reinforcement (Bandura, 1977). The concept of expectations entails that street youth believe that using alcohol will protect them from stress of street life while the concept of observational learning deals with how street youth use modeling to effectively utilize alcohol among peers. Regarding behavioral capability, this is where youth gain information about alcohol use and practice due to peer pressure while self-efficacy give them confidence on how to use alcohol. Additionally, reciprocal determinism make the street youth to do a survey on the available and affordability of alcohol in the street stores while reinforcement is when the street youth are

praised by their peers for using alcohol to attain social acceptance, social belonging, social influence, peer norms and values.

In regard to Social Learning Theory, Bandura (1977) was interested to investigate how behavior is assimilated and preserved in a variety of diverse environmental circumstances. Bandura emphasizes that the process of copying and molding are significant in learning that has a hand in peer pressure. Bandura believes that human beings obtain most arrays of behavior by observational learning instead of direct reinforcement. Bandura maintains that behavior is a multifaceted interface between a person and one's environmental condition. Bandura categorized this process as reciprocal determinism. Thus, the environment stimulates thinking and that, consequently, cognitive processes initiate what the individual does in particular situations and this explains how street youth influence one another towards alcohol use disorder.

Bandura (1977) upholds that the latent abuser copies the models in the surroundings that are noteworthy in his or her life. The models, in this case, are the parents, friends, or siblings. This happens indirectly. That is, through the involvement of others, hence the so-called vicarious learning. Bandura denotes that individuals observe their social world, extract information from it, produce expectations, and then make choices and preferences that make the most of environmental rewards. Thus, people maintain an inner feeling of capability and at the same time avoid negative consequences. Through internalization and observational of what others are experiencing, peers are able to learn good, and also bad behavior like alcohol use disorder.

Bandura (1977) indicates that youth learns by witnessing what others are doing. Although this process, one mentally signifies the actions of other persons and perhaps assumes such actions. This model is applicable to the current research since, through internalization and observation, street youth learn about alcohol intake. If the behavior is damagingly strengthened

like losing friends, falling sick, postponed from social acceptance, social belonging, peer norms and values, then the behavior might together be converted into extinct. Peers do influence their fellow peers' alcohol intake through both direct modeling and the spreading of peer norms and values on alcohol consumption. Therefore, Social Learning Theory applied to the current research since it linked peer pressure to alcohol use disorder among street youth.

2.3 Empirical Literature Review

The section has reviewed works according to the research objectives namely types of peer pressure among the street youth, factors leading to alcohol use disorder among the street youth, effects of alcohol use disorder among the street youth, and measures of minimizing cases of alcohol use disorder among street youth.

2.3.1 Types of Peer Pressure among the Street Youth

Peer pressure influences many youths following the role of peer relationships more especially during puberty. A study by Morris (2019) identified six categories namely verbal, unspoken, direct, indirect, positive and negative peer pressure among the youth. Verbal peer pressure is after a youth asks, proposes, encourages, or else guides to involve in a particular behavior. Doing the activity in individual based setting, the receiver of the pressure has a strong chance of following to one's beliefs and core values. However, if the spoken pressure occurs in a group, the pressure to incline with the group is enormous. With unspoken peer pressure, a youth is influenced to do one or more activities done by other peers out one's desire. Witnessing the scenario could endeavor the process of personal interactions, style choices, or connection kinds of behavior in groups, clubs, or crews. Many youth do not have the mental maturity to control desires and make wise long-term decisions. Because of this, many youth are more vulnerable to

be influenced by elder people or more famous friends (Morris, 2019). The study above missed out other types of peer pressure that were bridged by the current study.

Direct peer pressure can be spoken or unspoken. Direct peer pressure is conduct-centered. Models of these kinds of conduct would be when a youth gives another peer an alcoholic drink. Hence, putting the other youth in a situation of making an instant decision. Alike to unspoken peer pressure, unintended peer pressure is critical and can exercise a strong influence on vulnerable youth. A youth listens to another peer talking about other individual and then responds to that person that is unintended peer pressure based on social influence. School going youth learns that the general youth' gatherings comprise of drugs or alcohol, which unintended pressure might influence them to test as a method to obtain social receipt (Morris, 2019). The study above missed out other types of peer pressure that were bridged by the current study.

Additionally, there is negative peer pressure where youth is asking to join in conduct that is in contradiction of their family values, and ethical code that is a kind of undesirable peer pressure. The youth see the activities of extra peers with strong characters and putting in a situation of the one walking away or leading. It is common for youth with strong ethics to find themselves engaging in behaviors that goes in contradiction of their norms to obtain social acceptance. Youth often lack the abilities to create a reason or an excuse not to accept negative peer pressure. Lastly, a group dynamic might be a positive peer influence if the behaviors are age-appropriate, healthy, and informally acceptable. For example, if a peer group needs to create good grades, a youth can be completely predisposed to study. Therefore, parents are influential in the youth's life based on understanding and awareness of the forms of peer pressure encountering their youth. The study by Morris (2019) recommended that supporting healthy relationships, modeling accountable behavior, and maintaining an open, judgment-free family

dialogue are three critical mechanisms of upholding positive parental influence on a youth. The study above missed out other types of peer pressure that were bridged by the current study.

According to Morrison, Kalin, and Morrison (2014), peer pressure is positive when a peer supports and encourages another peer to do something good. Negative peer pressure is when well-known peers to each other around their age peers, pressurize other peers to do something that they would not do. Active peer pressure might be in the manner of a deliberate decision to drink alcohol or a verbal disapproval for declining to drink. Lastly, passive peer pressure is when a peer has a desire of fitting and adopting the practices and values of fellow peers. Furthermore, dividing passive pressure include social modeling of alcohol use and thoughts regarding peers' alcohol use disorder. The study above did not tackle other types of peer pressure that were filled by the current research.

A study by Quimby (2015) examined whether optimistic peer links might have a function in promoting healthy progress amongst the youth. The research was longitudinally amid African-American youth living in disadvantaged city centers and violent areas. The research focused on a form of peer pressure involving the indirect modeling of behaviors. The research discovered that as youth advanced from sixth to eighth grade, the extra positive peer connections they practiced, and the healthier results they stated over a period of time, increased self-esteem, school associations, parental involvement, and lighter violence. Furthermore, a sense of cultural identity looks to justify why some youth encountered a harsher increase in results as positive peer connotation also amplified. Youth with an inferior sense of cultural identity are extra delicate to peer relationship. Upcoming interventions ought to consider binding the ability of pro-social peers to substitute with healthy growth and development. Such mediations might be predominantly vital for youth who lack the recognized defensive factor of partaking a great

sagacity of cultural identity. The study above lacked other types of peer pressure among the youth that were bridged by the current study.

2.3.2 Factors Leading to Alcohol Use Disorder among the Street Youth

Neves, Teixeira, and Ferreira (2015) carried out a research on motivation and factors for the usage of alcohol in puberty. The drive of the research was to classify the influential factors that initiate teenagers to take alcohol, their desires, and their familiarity about alcohol use disorder. The research embraced the use of qualitative-quantitative approaches, comprising twenty-one youth from the town of Rio de Janeiro, between twelve and eighteen years old. In the study, a semi-structured consultation was used to apply closed questions. The study findings showed that 18% of them drunk alcohol, that alcoholic drink is the main drug taken, and that theatre, the organization of associates, and the move from inevitability were the key objectives of the alcohol taking. When the youth. Therefore, getting a stress-free life inspires alcohol drinking and, in spite of knowing some of the involving dangers, they drink alcohol, normally in groups. The study above missed out on alcohol use disorder among the street youth, a research variable that was bridged by the current research.

Media publicity assists impact communal models on alcohol through the creation of employments, promotion, and lies in an extensive variety of foundations, which includes social media, movies, television, and other methods of theatre (Neves et al., 2015). Though alcohol marketing and sales are extremely controlled, the media exposes individuals to a widespread diversity of alcohol adverts. A study by Tanski (2015) established that alcohol advertising outcomes in persons rising optimistic beliefs on consuming alcoholic substances, expanding and creating circumstances where alcohol usage is informally encouraged and acceptable. The above factors do initiate the start of intake and indulgence in taking and prolonged alcohol usage. The

study above lacked alcohol use disorder among the street youth, a research variable that was bridged by the current research.

Numerous cultural and social factors contribute to alcohol use disorder including segregation. A study by Yoo, Gee, Lowthrop, and Robertson (2010) established that the function of stress and stereotyping is evident in health-connected danger actions, including alcohol usage. Stressors and managing strategies often are known to clarify the effect of stigma and discrimination on the life of a person. The long-upheld model suggests that persons take alcohol to manage stress of their everyday lives, and work-connected triggers, ethnic, and color discrimination. Segregation is a critical communal stressor that provokes a biological response, which includes raised blood pressure and issue of anxiety, which have lifetime damaging impacts, through increased alcohol usage. The study above did not focus on alcohol use disorder among the street youth, unlike the current research.

Social effects on alcohol usage concentrate initially on environmental features namely environment and chances for alcohol buying and drinking. Freisthler, Lipperman-Kreda, Bersamin, and Gruenewald (2015) carried out a research on persons who dwelt in a community with poor structures. The features among the respondents included poor building conditions, housing, water, and sanitation indicators. The study revealed that they were one hundred and fifty percent extra probable to account dense alcohol consumption likened with those dwelling in better-built surroundings. Neighborhood features of alcohol usage dangers were helpful for community well-being platform preparation. Since it enables programmers and policymakers comprehend how varying complex issues of the built environment do influence well-being linked danger conducts of alcohol usage. The study missed out on alcohol use disorder among the street youth, a variable that was bridged by the current research.

The strongest influence that make youths to indulge in alcohol use disorder is peer pressure. A study by Studer et al. (2014) noted that there are links of advanced stages of alcohol use among peers and parents with enlarged alcohol use disorder among youth. Developmentally, population's communal situations change from the domestic unit through infantile to emphasis extra on their nobles and their associations throughout puberty. Parental alcohol usage appears to exercise some effects before age fifteen and decreases due time. The study found out that peer standards have a vital function in this stage of life. By the sun set of puberty period, parent stimuli connected to alcohol intake are minor likened with noble stimuli. More emphasize on peer pressure have underlined the danger networks connected with alcohol use disorder. Peer pressure, peer alcohol values and norms, and interacting with drug-using peers were connecting with alcohol use disorder. Researches denote that exiting the home environment, joining higher educational institutions, and entering social gatherings advanced alcohol consumption as an outcome of more socially agreeable values involved in drinking. The study missed out on alcohol use disorder among the street youth, a variable that was bridged by the current study.

Okwarah (2017) conducted a research on the occurrence and links of alcohol use disorder amongst young secondary institute going scholars in Kajiado and Murang'a regions. The study findings revealed that individual-level issues linked with the current intake of alcohol included: male gender, cigarette use, and missing school. At the institutional level, students who found it easier to get an adult to buy alcohol-drinks on their behalf were 2.1 times more probable to consume alcohol in Murang'a County likened to Kajiado County. The research maintains that there exists a great prevalence of alcohol use disorder among the youth in the study areas associated with both individual and institutional-level factors. Other factors linking with alcohol use disorder among youth included other drug use disorder, health danger conducts including

bodily fighting, bullying and sexual actions, poor school attendance, psychosocial anguish in the form of depression, anxiety, and suicidal thoughts, hostile childhood occasions, family associates with alcoholic issues, youth drinking alcohol, poor protective measures namely parental regulation, alcohol anticipations, personality traits, educational level, older phase and rank point average. The study above missed out on alcohol use disorder among the street youth, a research variable that was filled by the study.

A study by Mutiso, Kasundu, Chebet, and Mwirigi (2012) examined issues facilitating to alcohol use disorder among youth in Kenya in the context of Bamburi Location. The descriptive research design was embraced as it clarified why youth involve in alcohol use disorder in Kenya. A review study was accompanied for the aim that it provided the data based on solitary designated section whose result conclusions provided an overview for the entire state. The selected sample size for the research was two hundred and ten youth diagonally in entire the sub-locations within Bamburi locality. The study discoveries revealed that curiosity and demographic features besides sex do influence the youth to indulge in alcohol use disorder in the location. Social, economic and cultural issues likewise contribute to alcohol use disorder in the location among the youth. Though different factors were prominent to alcohol use disorder, this study focused on demographic issues, cultural-social, and economically resulting to the ubiquity of the danger in the location of Bamburi. Numerous demographic issues were causal to alcohol use disorder like occupation, age, marital status, and religion. Demographic issues too worked in adjacent relationships with cultural-social issues namely one's alleged esteem by other people, the social setting, noble pressure stimulus, communal education from adults, one's philosophy in terms of duties, beliefs, values and norms. The economic issues likewise played a function in shaping one's conduct in circumstances of deviance. Besides, personal status influenced an

individual's indulgence in such behaviors. The study above looked at drug use disorder in general, a gap that was filled by the current study on alcohol use disorder among the street youth.

Ndegwa, Munene, and Oladipo (2017) examined issues linked with alcohol use disorder amid college and university undergraduates in Kenya. Target populace of the research was Daystar University in Athi River and Nairobi learners. Research findings established that utmost youth had a modest danger for alcohol use issues. Besides, age, gender, year of a student in the university, and place of dwelling, peer and parental intake, social media, and availability and affordability to alcohol were all issues that influenced alcohol use disorder. The above study missed out on alcohol use disorder among the street youth, a variable that was filled by the current research.

A study by Nkonge (2017) classified the three factors namely demographic issues, cultural-social, and economic issues as influencing alcohol use disorder among the youth. On demographic factors, the issues established were one's occupation, level of education, gender, and age. Regarding gender perspective, the quantity of male-youth abusing alcohol is great than in female-youth. Cultural and social issues influencing alcohol use disorder included peer pressure, enthusiasm factors namely the necessity to relief stress, necessity to delight the power of alcohol, and easiness of availability of the drugs and substances in the research area. The research likewise exposed that adults do not build an optimistic association with children; thus, they do not handle issues linked to alcohol use disorder. Also, adults allow youth to captivate in substance and drug selling provided they obtained something in return. Besides, as a consequence of busy schedule working, they lack time to manage youth. Similarly, the society is overwhelmed in facilitating to this danger since there exists poor society ownership in this locality. The situation worsen youth with an opening chance to exploit the consumption

substances and drugs. There also exists inaccessibility of exemplary people, and those present promotes the intake of alcohol that brands it “cool.” The research similarly discovered that peer pressure has a vital role in facilitating substance and drug misuse in the locality compared to other cultural and social factors. The economic issues influencing substance and drug misuse comprised of poverty, unemployment, and that drugs and substances are not expensive. The research findings discovered that entire economic issues had a most importance in regard to drug and substance use disorder leading to unemployment cases. The above study missed out on the street youth, a variable that was filled by the current research.

Wacuka (2017) conducted a study on drug and alcohol misuse among vulnerable youths in Kenya and it was contextualized among social units of Slums within Mukuru Kwa Njenga in Nairobi County. The research found out that the key causal factor to the intake of alcohol and substances in Mukuru Kwa Njenga is anxiety. The situation was accompanied by mass media, peer pressure, family break-ups in terms of separation and divorce, the burden to excel in academics, and parental influences. The above research was conducted in a different locality, a variable that was filled by the current study.

2.3.3 Effects of Alcohol Use Disorder among the Street Youth

Alcohol use disorder leads to severe issues upsetting the physical and psychological well-being of many individuals. UNODC (2012) approximates that in the year 2010, fifteen point five to thirty-eight point six million persons globally were addict alcohol users. Around 200,000 populations globally increase yearly in alcohol-connected deaths. The World Health Organization [WHO] (2011) noted that three hundred and twenty thousand youth between the ages of 15 and 29 perish from alcohol-linked reasons yearly. Overall, harmful alcohol use

outcomes in two point five million deaths yearly that arise due to intentional and unintentional injuries.

Alcohol use disorder damages the health of individuals wide-open to the abuser by subjecting them at critical danger of fates and ferocious behaviors. According WHO (2011), alcohol use disorder entails a form of alcohol consumption that causes mental and physical injury to health. The said damages that are alcohol-connected incline to happen in youth. Alcohol drinking weaken the physical and psychological fitness of the abuser.

The misuse of illegal substances grounds important social and health issues not only for the persons who misuse them, however even for other people in communities and families (WHO, 2012). For instance, the health issues caused by illegal substance misuse namely cardiovascular dysfunctions, lung diseases, and kidney failures affects the society in general. Alcohol-linked deaths due to misuse, substance-induced fate, medical situations, or suicide connected with or deteriorated by alcohol misuse, signify the greatest severe health outcome of substance misuse, which usually impacts youth (UNODC, 2012).

There are negative outcomes for youth who misuse alcohol. A study by Birch, Beyer, Avery and Brown (2014) denoted that youth who misused alcohol are more probable to suffer from negative effects. The negative effects include loss of appetite, weight loss, eczema, no schooling, and headaches and sleep disorder and the greatest conjoint effects of alcohol use disorder are coma and vomiting. Youth are not resistant to the long-lasting illnesses and circumstances related with more alcohol intake among adults, and deaths from liver illness are now happening at puberty ages. Youth who engage in alcohol intake and drive, or allow themselves to be driven by a drunkard, are more probable to cause a car accident. Youth who intake alcohol is additional expected to endure a severe damage, frequently as a consequence of

an outbreak. Alcohol misuse in puberty, in a developmentally delicate era, postures therefore, a specific menace to the developing brain abilities of supervisory working and long term memory.

Additionally, youth are probable to be more destitute than grownups to mutually elusive brain injury and ongoing intellectual shortfalls resulting from alcohol use disorder. Alcohol might increase moods of melancholy due to anxiety or stress since the consumption is linked with lasting and more severe and undesirable results. Besides, here exists an association among youth alcohol usage and cerebral health issues, thus, all youth with alcohol issues ought to have psychological assessment. Alcohol intake in evening might affect a youth's presentation at school on the next day. This is because it consumes time to digest alcohol and the course differs depending on the amount of alcohol that was taken and divergent metabolic ability. Hence, there exists relations among alcohol intake and resulting actions with peers and friends (Birch, Beyer, Avery & Brown, 2014). Therefore, extreme alcohol intake can be harmful to a youth being able to uphold relationships, predominantly if the drinking levels are advanced than amongst the peer group generally.

A study by Mutiso et al. (2012) denoted that impacts of substance misuse among the youth are varied. They array from distinct to communal impacts namely poor personal hygiene, health, homosexuality, rape cases, and high rates of dropping out of school, high degree of separation cases, prostitution, unstable lifestyles, amplified crime and sometimes death. Notably, the study revealed that crimes have mounted because of substance misuse in the locality. Substance dependency and addiction has influenced people to involve in antisocial activities with greatest of them being gangsters to get easy stream of cash to purchase the substance. Others are recognized to start betting in the locality to get rapid cash. Besides, early pregnancies and

divorces among youth have grown into widespread in the locality. Hence, single headed families are extensive in the locality with greatest being controlled by youth.

The impacts of substance and drug misuse as exposed by the research of Nkonge (2017) included great rates of school dropout, drug dependency and addiction, and greater rates of wrongdoing, deteriorating health, escalating of illegal activities namely betting in an effort to generate rapid money. Also, additional impacts comprised of separation, and nonconformity. In tallying to this, there are recognized circumstances of demises as an outcome of substance misuse, plus substance connected actions.

A study by Barrow (2011) noted that youth who have been raised in families where both or one parents are drunkards may end up copying their parents' action models. There exist several well-known circumstances of youth raised by drunkard adults becoming drunkards whereas girls ultimately get wedded to drunkards or are thus distressed that they evade marriage overly. This is because youth from such homes are brought up in dysfunctional families, their expressive needs are thus not addressed. Thus, it is often to witness youth from such homes being involved in circumstances that are at expressively painful. Similarly, Wacuka (2017) noted that drinking of alcohol and additional substances and medications directed to depletion of aggressiveness, addiction, money, divorce, and upsurge in crimes, family disharmony and even death. Thus, the above studies (Barrow, 2011; Wacuka, 2017) lacked the variable of alcohol use disorder among the street youth, a variable that was bridged by the current study.

2.3.4 Measures of Minimizing Cases of Alcohol Use Disorder among Street Youth

Society mobilization is an approach considered to maximize societal willingness and involve societies in deterrence actions and activities to lessen the use of damaging alcohol among youth. A study by Wagenaar, Murray, and Gehan (2010) established that actual society

deployment might provide deterrence activities plus involving extra civic associates to stop alcohol use disorder. Active civic enlistment is vital to applying a jointly helpful approach of deterrence ways that is ecological plans and an institute-connected deterrence prospectus. Furthermore, the study proposes that there are seven stages that aid as an escort for society mobilization as network base, assessing public readiness, increasing the base, evolving a plan of act, applying the plan of act, looking for feedback, and publicity of results, and supporting the application. The study above missed out street youth, a variable that was filled by the current research.

According to Gruenewald, Holder, and Treno (2013), environmental tactics can be used to change the physical, social, and economic surrounding of a society to diminish the damaging risks of alcohol use disorder. In this framework, the targeted three environments included homes, school and retail stores. The fundamental aim is a design to assist parents, retailers and school administrators to embrace necessary actions envisioned to decrease the availability of dangerous substances and drugs among youth. Environmental strategies supplement more traditional and unusual methods in many ways. The emphasis is on varying public schemes slightly than separate comportment, use of the native news television to aim at society groups or leaders before an action to alternate different action through media news. Regarding this, the society is seen as a reserve to assemble for scheme alteration before the aim group of data receivers and disseminators, and pursue to lessen source or related jeopardy before decrease claim for substances and other drugs. The study above missed out street youth, a variable that was filled by the current research.

Griffin, Botvin, Nicholas, and Doyle (2013) revealed that students has an ongoing antiquity linked to a school setting as a plan to lessen alcohol use disorder among youth. There

exists experiential indication that the Life Skills Training (LST) upsurges behavioral-thoughtful services, reduces the inspirations to consume alcohol, and then reduces vulnerability to social inspirations that endorse alcohol use. This constituent of a society prevention interference is set with request to decrease connecting the mass that is the decrease of youth who indulge in alcohol use disorder. The key ways of involvement are education dealing with information on dangers of alcohol usage, native values and norms, and lifetime abilities, for fighting communal stimuli to respire or swallow damaging products. Teaching such abilities can be done by the use of a mixture of moralistic techniques like a social rehearsal, then a demonstration, feedback and support, and social exercises. Besides, imparting information to strengthen no drug usage standards and to reduce production of drug normative prospects. The study above missed out street youth, a variable that was filled by the current research.

Mutiso et al., (2012) noted that the key issues towards fighting alcohol use disorder is dishonesty and poor anxiety by the society in general. Recommended actions to fight the threat are to finish exploitation and emphasis on defensive schooling among youth. Preventive schooling reduces crosswise of all schools in the society within a state. All institutions of learning from primary to secondary, colleges, and universities ought to support and provide inclusive education on alcohol use disorder and restriction to all students, and this works well for the youth in the society. Besides, developing a well learner-centered curriculum to distribute information to learners. The teaching and learning process ought to use communicating plans that are learner-centered. The study above looked at school learners, unlike the current study that focused on street youth.

A study by Chesang (2013) noted that alcohol misuse is one of the highest evils challenging the country today among the youth. Occurrences of alcohol use disorder and

connected anti-social actions have enormously increased in latest periods. Hence, becoming an issue of worry to the countries, teachers, parents, NGO firms, and other relevant organizations. Kenya has documented the gravity of the substance issues then created NACADA in initial period of 2001. This body is mandated with the role of coordinating plans of persons and groups in the movement against substance use disorder. It must initiate a civic education movement and cultivate an act strategy intended at decreasing substance misuse among youth. The research revealed that alcohol use disorder among youth is advancing in spite of the controlling approaches that have been embraced. The study suggested that as an initial parameter to stop and avert alcohol use disorder is informing adults on the risks of alcohol misuse, the associated harms, and their purposes as role reproductions. Learning institutions ought to have a curriculum that emphasizes that alcohol intake is harmful and wrong and that there exists a need for the beginning of rehabilitation programs for alcohol addicts. The study above missed out peer pressure and street youth, variables that was filled by the current study.

A study by Nkonge (2017) noted that one of the creativities by the society is informing the communal members and the youth by educating them on the critical outcomes of alcohol misuse. Other measures included Church crusades condemning alcohol use disorder, trial of those fond of buying and selling substances and drugs, making events to retain the youth busy while identifying and eliminating the sources and delivery channels of drugs and substances misused. The study above missed out peer pressure, a variable that was bridged by the current research.

The study findings of Wacuka (2017) proposed that the subsequent actions be engaged to control drug and alcohol misuse in Mukuru Kwa Njenga Slums. The study proposed rehabilitation centers, counseling and guidance, cognizance movements, and noble education.

The study recommended the implementation of laws on the delivery and sale of alcohol and other illegal substances, and drug dealers. Besides, the formation of job opportunities, and propose customs of improving living and working conditions in informal structures to decrease anxiety and establish more rehabilitation centers to assist the alcohol addicts. The study above missed out peer pressure, a variable that was filled by the current study.

2.4 Research Gap

The literature review has produced findings that have indicted a connection between peer pressure and alcohol use disorder among street youth. The review has also confirmed that there are factors including social and economic that influence the youth to indulge in alcohol use disorder. However, in trying to minimize cases of alcohol misuse and more particularly alcohol use disorder, very little weight has been embraced on the role of peer pressure. Therefore, the current study endeavored to search for the relationship that exists amongst noble pressure and alcohol use disorder among; the street youth in Kariobangi Sub-County within Nairobi County in Kenya. Besides, the study further came up with recommendations on how to nurture positive peer pressure and other appropriate mechanisms that street youth can embrace to minimize cases of alcohol use disorder.

2.5 Conceptual Framework

A conceptual framework is a researcher's understanding about the connected ideas and variables with an assumption of the existing relationship (Grant & Osanloo, 2014).

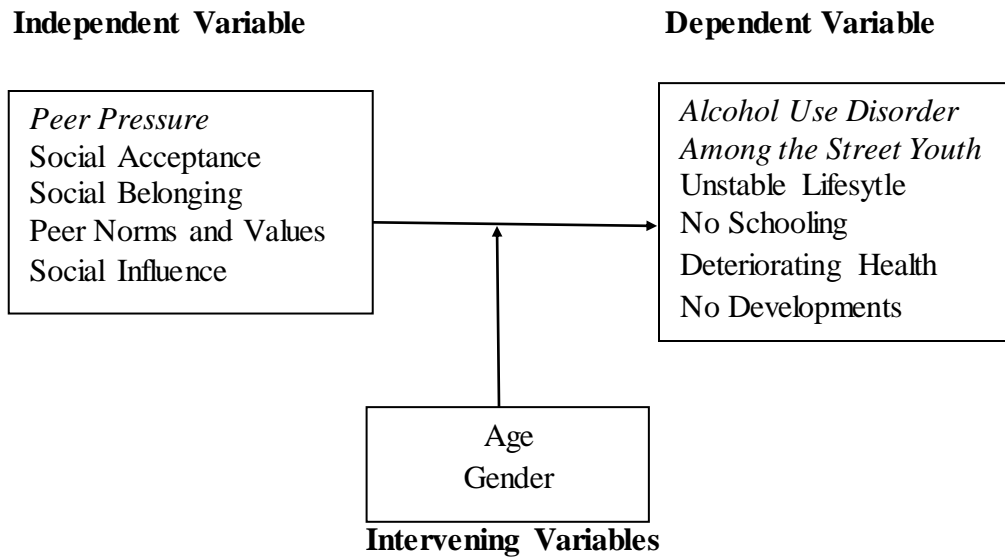


Figure 1: Conceptual Framework

The figure shows that alcohol use disorder among the street youths (DV) which was observed in terms of unstable lifestyles, no schooling, deteriorating health, and no developments namely socially and economically consequently depends on peer pressure (IV) which was influenced by social acceptance, social influence, social belonging, and peer norms and values of street youth. The intervening variables based on the study findings were age, and gender were also seen to be a factor that either strengthens or weakens the connection between noble pressure and alcohol use disorder among the street youth.

2.6 Chapter Summary

This chapter has reviewed literature studies according to the research objectives namely types of peer pressure among the street youth, factors leading to alcohol use disorder among the street youth, effects of alcohol use disorder among the street youth, and measures of minimizing cases of alcohol use disorder among street youth. Generally, many studies were conducted in developed countries, hence there was need to fill the gap in developing countries like Kenya.

CHAPTER THREE

RESEARCH METHODOLOGY

3.1 Introduction

The section granted a comprehensive account of the methodology that was utilized in the study to answer the study questions. It included a study design, and location of the study, aimed population, selection design with the specification of the sampling frame, sampling methods, and sampling size determination. The chapter also described the research instruments while describing both the validity and reliability of the research tools. Lastly, the section provided the processes for data gathering and examination of information and some ethical deliberations.

3.2 Research Design

The design is the researcher's general strategy for answering the study questions (Polit & Beck, 2010). This study adopted phenomenological approach as the qualitative research technique for information gathering and examination. This design was selected by the researcher since its chief interest was in examining and describing human experiences provided by the people involved in the phenomenon. The researcher selected this approach in order to address the scarcity of data on factors contributing to alcohol use disorder among street youth living or working in Kariobangi Sub-County. Accordingly, the phenomenological design purposes at a detailed pursuit for knowledge where small is recognized on the theme of the target populace (Kombo & Tromp, 2010). The method was appropriate for obtaining information, perceptions, and opinions from the respondents regarding the influence of peer pressure on alcohol use disorder of street youth in slum areas with specific reference to Kariobangi Sub-County. Lastly, the approach offered ways of uncovering a bottom-line understanding of these involvements from the viewpoint of the distinct respondents.

3.3 Location of the Study

Kariobangi sub-county is located in Embakasi North Constituency within Nairobi County was selected purposefully as the research site. Embakasi North Constituency includes five electoral wards namely Dandora Area I, Kariobangi North, Dandora Area II, Dandora Area IV and Dandora Area III which served as sampled areas for research. Since the wards consists of the majority of street youths compared to other informal settlements within Nairobi County (Gongera, et al., 2013). This location of the study population was the ideal locale by the researcher since the constituency is within Nairobi County where the majority of street youth are wandering due to socio-economic hardships. The phenomenon is rampant in the region due to uncontrolled rural-urban migrations and unstable family set-ups (Gongera, et al., 2013).

3.4 Target Population

The target populace refers to the entire population, or the total environment of interest to the scholar (Oso & Onen, 2011). It also entails the greater group with one trait in common from which the sample is taken. The study targeted all the street youth in slum areas within Kariobangi Sub-County within Nairobi County which has a populace of 24,528 people as per 2019 Census (The Government of Kenya, 2019), out of which the researcher obtained 200 respondents for research.

3.5 Sampling Techniques and Sample Size

The motive for selecting is that it provides a quick choice because it addresses the survey population in a little period and provides a rapid sample size. Sampling design is less expensive than a census because it contains less respondents, while providing comprehensive data and a great accuracy since it handles a small number of subjects (Orodho, 2009). It should be noted that sampling design specifies for every possible sample its probability of being drawn.

Therefore, this section of the study has discussed the sampling frame, techniques, and sampling size determination.

3.5.1 Sampling Frame

A sampling frame is an accurate and complete list of the available populace, where the sampling can be drawn from (Kothari, 2014). According to Stephanie (2014), a perfect sampling frame should include all the people in the target population, eliminate the people, not in the target population and should also include all the information that can be used to contact the selected individuals. For this study to be conducted, each street youth selected within the ward to participate in this research obtained an equivalent opportunity to contribute in the research. The list of all the wards cited in Kariobangi Sub-County was the sampling frame in this study through the help of social workers. Through the use of purposive sampling, five wards were selected and 40 respondents from each ward were selected to participate in the research. This selection approach was, consequently, a principled illustrative of the entire population under study.

Table 1: Sampling Frame

| Wards Selected Within Embakasi North Constituency of Kariobangi Sub-County | Sample Size |
|---|--------------------------------|
| 1. Dandora Area I | 40 |
| 2. Kariobangi North | 40 |
| 3. Dandora Area II | 40 |
| 4. Dandora Area IV | 40 |
| 5. Dandora Area III | 40 |
| Total = 5 wards selected | Total = 200 Respondents |

3.5.2 Sampling Techniques

This investigation utilized the Stratified Random Sampling Technique. This is a technique of selection that comprise the partition of a populace into slighter sub-groups called divisions. This technique is similarly known as Quota or Proportional Random Sampling technique. In the stratification process, the strata were created on the basis of peers' communal characteristics or attributes namely street youth and alcohol use disorder due to their social status. The method was used by separating the whole population into same groups known as strata using random sampling techniques to obtain the quota samples. The proportional samples were then selected from each ward (Creswell, 2014).

3.5.3 Sample Size Determination

Both Oso and Onen (2011) note that a sample is a mini-group, which has been selected from a population in the research to exemplify. This research embraced the Morgan and Crejcie (1970) formulation to obtain the selected sample. The formulation applied a 95% sureness interlude and an estimated fault of 5%.

$$S = \frac{x^2 NP(1-P)}{d^2(N-1) + x^2 P(1-P)}$$

Where:

S = the required sampling size

X² = the table worth of chi-square for 1 degree of liberty at the anticipated sureness glassy (i.e. 3,841)

N = the populations size

P = the populace quantity (0.50 is recycled to deliver the supreme sample)

1-P = projected proportion of letdowns

d^2 =square of the maximum stipend for error amid the true quantity and sample quantity (in this research, it was established at 5%)

Consequently, founded on the populace of the research (1591), and relating a 95% sureness interlude with an estimated error of 0.05 the outcomes are handled in the following:

$$S = \frac{1.96^2 \times 1591 \times 0.5(1-0.5)}{0.05^2 \times 1590 + 1.96^2 \times 0.5(1-0.5)} = \frac{1527.9964}{4.9354} = 309.5$$

Mugenda and Mugenda (2010) noted that in an evocative research, a sample of 10% - 50% of the target populace is acceptable. Using the figure above, this study used 129.2% to obtain the sample size for the current study as follows:

$$\begin{aligned} &= (129.2/200)309.5 = 199.6 \\ &= 200 \text{ Respondents.} \end{aligned}$$

3.6 Description of Research Instruments

Data from the research area were collected using three research tools that included a set of Interview Guides, Focused Group Discussions, and a Qualitative Questionnaire that were used to get information from street youth within the selected wards in Kariobangi Sub-County. Therefore, these research tools helped to solicit qualitative data from the respondents.

3.6.1 Interview Guides

According to Mwaturia (2015), interrogating is a method mainly utilized to get a comprehension of the fundamental motivations and reasons for individuals' preferences, attitudes or conduct. Interviews are suitable for removing delicate and individual data from defendants through morality and individual contact amid the interviewer and interviewee. The interview guides for street youths had four sections namely types of peer pressure, factors that lead to alcohol use disorder, effects of alcohol use disorder, and procedures that can be used to minimize cases of alcohol misuse among street youth. The interview sessions were conducted

face-to-face with street youth through the direction and guidance of social workers. The researcher used one interview guide for the street youth in all the sampled areas of wards within Kariobangi to get appropriate data regarding the effect of peer pressure on alcohol use disorder amid street youth in slum areas of Kariobangi Sub-County, Nairobi County, Kenya.

3.6.2 Focused Group Discussion

To supplement the data obtained through interview sessions, focused group discussions (FGD) were conducted. Focused Group Discussions were conducted in social halls through the guidance of the social workers. For this study, two Focus Group Discussions were held. One discussion group comprised six respondents namely three male and three female street youth of Kariobangi Sub-County. The respondents were asked to reflect on the effect of peer pressure and alcohol use disorder amongst street youth, and they were asked to speak about their experiences while living in the streets. The discussions were conducted in either English or Swahili by the note taker and were later translated into English.

As noted by both Kruger and Casey (2009), the purpose of using Focused Group Discussions is to collect data to promote a comfortable environment for respondents to reveal their thoughts in which they can freely express their opinions, experiences, and attitudes about a certain topic. This was realized through the help of the social workers within the sample areas of wards within Kariobangi. Moreover, Focused Group Discussions allowed the researcher to get both individual and interactive opinions by looking at how the subjects reacted to one another and this allowed the researcher to record both words and nonverbal behaviors. Also, it gave the chance to learn about the language that the respondents used to describe the researcher's topic of interest concerning the effect of peer pressure on alcohol use disorder amongst street youth in Kariobangi Sub-County, Nairobi County, Kenya.

3.6.3 Qualitative Questionnaire

Mwaturia (2015) revealed that a qualitative questionnaire endeavor to produce extra in-depth responses. Such tools are typically intended to examine what has changed as a result of the phenomenon under study. The qualitative questionnaire for street youths had four sections namely types of peer pressure, factors that contribute to alcohol use disorder, effects of alcohol use disorder, and measures that would be used to minimize cases of alcohol use disorder among street youth. The filling in of all questionnaires was done in social halls through the guidance of social workers. The researcher used the same qualitative questionnaire for the street youth in all the sampled areas of wards to get appropriate data regarding the effect of peer pressure on alcohol use disorder among street youth in slums areas of Kariobangi Sub-County, Nairobi County, Kenya.

3.7 Validity, Pilot Testing and Reliability of the Research Instruments

The segment focuses on validity, pilot testing, and reliability of the research tools before data collection using Qualitative Questionnaire, Interview Guides and Focused Group Discussions.

3.7.1 Validity of Research Instruments

This research used content validity regarding research tools. Content validity notes whether the research tools measures what they were designed to measure (Borg & Gall, 2010). In this research, three types of validities were embraced. First of all, content validity notes the level to which study instruments sufficiently represent and measure the content of the trait or property that the researcher intends to measure. To achieve this, the research supervisors did an evaluation on the instruments to assess content validity, about the area of research. Furthermore, literature researching was aided to create content validity. Besides, the scholar made the tools in close

discussion with his research supervisors whose skillful opinions and judgment were counter-checked with polished materials, which helped to improve content validity.

Secondly, paradigm validity indicates the level to which a research tool precisely signifies a concept, and yields a remark, separate from that which is shaped by a quantity of additional construct. To realize this, the researcher used Chi-Square Test on paradigm validity as denoted by Borg and Gall (2010). Lastly, on qualitative questionnaire, interview guides and focused group discussions, construct validity was used that notes the degree to which the tool's marks relate with an outside standard at current or in the forthcoming (Borg & Gall, 2010). To realize this, the correlation coefficient between the two measures namely peer pressure and alcohol use disorder was used since it worked in the study by Okwarah (2017). Therefore, the study instruments were proved to be valid and reliable.

3.7.2 Pilot Testing

After going to see the designated streets for gathering information, a piloting of discussion guides was carried out in Kibera Slums within Nairobi, Kenya where twenty respondents were used for data collection. This exercise was done in Kibera Slums to enable the researcher to adjust, restructure, and eliminate any vague items on study tools. The pilot testing results were never involved in the last study conclusions. A trial testing targeted to attain the clarity, accuracy, and appropriateness of the research tools and to pin-point their reliability and validity. The study participants were the street youth; hence, misapprehension and lack of know-how of the queries was a possible restriction. To guarantee easy interpretation and comprehension of the queries, pre-testing was carried out to methodically assess the suitability of each tool that was used in research. Items were then re-worded and deleted as required. Such adjustments that were made ensured further clarity and understanding.

Again, Wilkinson (2012) exposed that a piloting aids to recognize those tools that might be misinterpreted, and such tools will be improved consequently, thus, advancing validity. Besides, piloting empowered the researcher to examine the dependability of the tools and gave room for familiarization with the administration of the instruments that were used in collecting information. Regarding this, data that was obtained were treated with confidence and privacy.

3.7.3 Reliability of Research Instruments

Reliability is a quantity of the mark that a study tool gives constant effects or information after recurrent trials as noted by Mugenda and Mugenda (2010). Besides, Orodho (2009) noted that dependability is the constancy in creating an accurate outcome. The researcher used internal consistency to measure reliability. Internal constancy is a degree founded on the associations among diverse items on the similar test. It measures whether numerous items that suggest to measure the identical overall construct yield the same scores. In this regard, Cronbach's Alpha Coefficient method was used since it worked in a research done by Morris (2019).

3.7.4 Trustworthiness of the Qualitative Instruments

In data collection, the qualitative instruments such as interview guides and focused group discussions emphasis on information reliability unlike concentrating on the data alone. Therefore, information trustworthiness has four main mechanisms namely dependability, integrity, conformability, and transferability. In his view, Amankwaa (2016) noted that if integrity has been established, it is not essential to likewise and distinctly prove reliability. Since integrity appears further connected to cogency while reliability appears extra connected to dependability. To ensure reliability, the researcher used data audit. Data audit was carried out so that the examiner could establish if the study circumstance applied to their conditions while not generalizing beyond the sample.

Moreover, the research used respondent results and triangulation process to create trustworthiness. The researcher had a lengthy appointment and firm interpretations of study subjects. Amankwaa (2016) noted that triangulation requests the similar study questions of dissimilar research participants and gathers information from diverse sources via altered approaches to response the similar questions. Respondent checks happen when scholars ask contributors to analyze the information composed by assessors and the investigator's explanations of that information. The respondents were normally accorded the participant check procedure because it offered them a casual opportunity to prove their declarations and seal in any gaps from previous consultations henceforth producing trustworthiness.

Regarding conformability, the internal consistency of data categories was observed to duplicate earlier work. That is why Amankwaa (2016) indicated that investigators need to plan rules that define group traits and that can, eventually, be recovered to validate the presence of each data bit that remains allocated to the category as well as to deliver a base for future studies to re-produce the same results. Therefore, the researcher was skilled to duplicate the results to display that those marks were not based on biases.

Additionally, transferability oversimplifies research answers and tries to apply them to diverse settings. Researchers cannot demonstrate ultimately that consequences based on the clarification of the information are transferrable, however, they can create that it was likely (Amankwaa, 2016).

3.8 Data Collection Procedures

The scholar attained an introduction dispatch and an ethical approval from the faculty of Counselling Psychology at Tangaza University College. At that time, the researcher applied for a study permit from National Commission for Science, Technology and Innovation (NACOSTI)

for permission to research Kariobangi Sub-County within Nairobi County. Upon receiving the research permit, the researcher scheduled for data collection. It should be noted that the researcher sought for informed consent from the respondents before data collection process that took a duration of two weeks. With the aid of a research assistant who was trained, the researcher met the street youth in social halls through the help of social workers to conduct face to face interviews. The first week was utilized for interview sessions since both the researcher and research assistant would meet an average of twenty to twenty-six street youth per day. All data obtained from the interview guides was either recorded with the consent of the interviewee or noted down. Besides, three days of the second week, the researcher scheduled for focused group discussions with street youth in social halls through the help of social workers and research assistant. Regarding this, all reports from focused group discussions were obtained from the respective chairpersons of each group established. Additionally, four days of the second week was scheduled purposely for administration of qualitative questionnaires. Through the help of both social workers and research assistant, filled in questionnaires were collected as agreed upon by the respondents. Therefore, out of 200 targeted respondents, 180 respondents availed themselves for data collection that paved way for data analysis.

3.9 Data Analysis Procedures

After gathering information using interview guides, qualitative questionnaire, and Focused Group Discussions, the obtained data were analyzed using the qualitative methods. The obtained data were organized and assembled according to the appropriate study questions to create the initial codes. The codes created were reviewed, revised and combined into themes. The qualitative information derived from flexible queries was examined by the Content and Narrative Analysis Techniques. Content Analysis involved grouping topics into meaningful

segments, coding, and analyzing them into categories. Furthermore, qualitative data derived were presented in narratives in form of direct quotes. Regarding testing of assumption, the alternative assumption was tested using Karl Pearson's coefficient of correlation and ascertained to be true.

Based on data analysis and coding, the researcher audio taped all interview sessions conducted and transliterated them for coding and scrutiny. Each respondent received the complete record of their interview session for the aim of member-checking, which was to authenticate that the transcription reflects what they intended to share in the interview sessions. Ten of the one hundred and eighty respondents added about one to two lines of additional data to their transcripts. Seven of them did not retort and the rest did not have anything to add to their recorded data.

The researcher read the recorded data and listened to audio tapes many times, looking for similar categories and establishing them with a code. The organization scheme proceeded until the researcher attained at code saturation. To guarantee validity and reliability, the researcher engaged a research assistant to help in coding the transcripts. Once the research assistant and researcher arrived at an agreement regarding the codes, the codes were then validated by a peer reader. Analogous codes were congregated into categories and these categories formed themes that appear as major findings in the current study. Through this analysis, the co-coders and researcher established on four major themes that responded the primary study questions and the central questions of the research.

Consequently, the four major themes were as follows: types of peer pressure among street youth, factors that lead street youth to alcohol use disorder, effects of alcohol use disorder amongst the street youth, and measures to minimize cases of alcohol use disorder amongst the street youth. Under each theme, a table generated by SPSS gives an account of the sub-themes

and the sources for the theme. Sub-themes are the codes that tally to each theme as related codes were combined to produce a major theme. The sources in this study refer to the number of respondents who shared experiences that replicated and authenticated that particular code as presented in chapter four.

3.10 Ethical Considerations

After obtaining an introduction letter and an ethical approval from the Faculty of Youth Studies at Tangaza University College, the researcher sought for study permit from NACOSTI, which was presented to the selected five wards of Kariobangi Sub-County where the research was conducted. Wards within Kariobangi Sub-County had the streets with street youth where the researcher aimed to conduct the study. After obtaining permission from respective leaders, and after gathering in social halls including local churches, informed consent and agreements were sought in which all the respondents were informed on the purpose of the study and its benefits so they would willingly contribute. Besides, the researcher also provided debriefing in the same social halls. This is an official form of offering both psychological and emotional provision as a result of a disturbing occurrence. The aim of debriefing was to avert the progress of post-traumatic illness and extra harmful outcomes among participants as a result of alcohol use disorder. These ethical and legal considerations were of great concern since such research involved human participation.

The researcher also observed the confidentiality of the respondents' information that was obtained by not disclosing it to anyone. The researcher also sought permission from the respondents for note taking and recording during data collection. Regarding this, all audio taped interview sessions were shared with the respective respondents to obtain approval. The researcher treated all the respondents equally; hence no biasness was present. Gender equality

was observed since both genders were allowed to participate in this research. All the academic resources used in this research were likewise acknowledged and referenced to curb plagiarism. Consequently, the collected data were handled with high integrity and the final research project was shared soon after with the participants who requested it.

CHAPTER FOUR:

RESULTS

4.1 Introduction

The section presented results, explanation, and exhibition of the study results. The drive of this research was to assess the influence of peer pressure on alcohol use disorder among street youth in slum areas with specific reference to Kariobangi Sub-County in Embakasi North Constituency within Nairobi County in Kenya. This qualitative study used a phenomenological approach to describe, examine and analyze the life experiences of street youth. The chapter described the demographic details of the sample and explains the following four main themes that arose from the analysis: (a) types of peer pressure among street youth, (b) factors that lead street youth to alcohol use disorder, (c) effects of alcohol use disorder among the street youth, and (d) measures to minimize cases of alcohol use disorder among the street youth. Based on the study findings, 180 was equivalent to 100% as used throughout the study. Besides, coding was done in which similar themes were identified and relationships between them ascertained.

4.2 Response Rate

The respondents involved were the street youth of Kariobangi Sub-County in Embakasi North Constituency within Nairobi County in Kenya. The average response rate was well above 80 percent which according to Mugenda and Mugenda (2010) is adequate for analysis. The retort rate summary is offered in Table 2.

Table 2: Response Rate

| Wards | Sample Size | Responded | Response Rate (%) |
|------------------|--------------------|------------------|--------------------------|
| Dandora Area I | 40 | 35 | 19.0 |
| Kariobangi North | 40 | 36 | 20.0 |
| Dandora Area II | 40 | 34 | 18.0 |
| Dandora Area IV | 40 | 37 | 21.0 |
| Dandora Area III | 40 | 38 | 22.0 |
| Total | 200 | 180 | 100 |

Table 2 ascertains that 180 (90%) respondents contributed in the research grounded on the wards that were selected as research areas within Kariobangi Sub-County while 20 (10%) respondents did not participate in the study. Table 2 indicates that the average response rate was more than 80% which according to Mugenda and Mugenda (2012) is adequate for data analysis.

4.3 Demographic Details

From the interview sessions conducted with the street youth, the researcher was able to obtain upbringing data of the defendants grounded on age bracket and gender as exemplified in Table 3.

Table 3: Demographic Details of Street Youth (n=180)

| Variable | Frequency (F) | Percentage (%) |
|-----------------|----------------------|-----------------------|
| Age | | |
| 13-18 years | 35 | 20.0 |
| 19-25 years | 65 | 36.0 |
| 26-30 years | 80 | 44.0 |
| Total | 180 | 100.0 |
| Gender | | |
| Male | 99 | 55.0 |
| Female | 81 | 45.0 |
| Total | 180 | 100.0 |

Table 3 above shows the study findings on the street youth who participated in this current study grounded on age bracket and gender. In regard to age bracket, majority of the respondents (80) that is 44% declared that they were in age bracket between 26-30 years old. This was followed by 65 (36%) and 35 (20%) respondents who revealed that they in the age brackets of 19-25 and 13-18 years old respectively. This is a clear indication that many youth had been stayed longer enough in the street of Kariobangi Sub-County and were mature enough to understand the influence of peer pressure on alcohol use disorder among the street youth.

Moreover, there were 99 (55%) male and 81 (45%) female respondents who participated in this study in terms of attending interview sessions, Focused Group Discussions and filling in the qualitative questionnaires. This implies that gender equality was observed by the researcher to avoid any form of biasness. Therefore, the demographic data above informed the researcher on the social background of the study participants in relation to peer pressure and alcohol use disorder among the street youth.

4.4 Types of Peer Pressure among Street Youth

The first major theme of the types of peer pressure among the street youth emerged when respondents were asked to explain the types of peer pressure that were embraced by street youth. The sub-themes, which are the codes that tally to the main theme, are given in the Table 4 below:

Table 4: Types of Peer Pressure among Street Youth

| Theme A | Sub-theme | Sources |
|---|------------------------|---------|
| Types of Peer Pressure among Street Youth | Negative Peer Pressure | 172 |
| | Direct Peer Pressure | 1 |
| | Spoken Peer Pressure | 1 |
| | Positive Peer Pressure | 160 |
| | Indirect Peer Pressure | 1 |
| | Unspoken Peer Pressure | 1 |
| Theme A | 6 sub-themes | |

The second major theme of types of peer pressure among the street youth when 96% of the respondents declared that negative peer pressure was a dominant one among the street youth followed by positive peer pressure as supported by 89% of the respondents. Besides, the study findings revealed that direct, spoken, indirect and unspoken types of peer pressure were supported by 1% of the respondents for each item. In support of negative peer pressure, the study findings are described by the following respondent:

“I started living on the streets at a very young age. Not long after my street life started, I made some friends who used to drink alcohol and other drugs. Because I liked them and would spend a lot of time around them, I learned using alcohol from them. As we live in a closely tied group, we use alcohol to protect ourselves from cold and to numb ourselves from feeling the hunger and other unpleasant things on the streets. When my older

friends in the group used to drink alcohol, they would give it to me to test it. Before I knew it, I learned using alcohol and became dependent on alcohol” (Code 3).

The opinions of the other two participants on theme were different. They said that there are positive peer pressures like advising each other not to get pregnant and to keep each other from getting drunk. In regard to positive peer pressure, one respondent had the following to ascertain:

“I live with many friends of mine on the streets as a group. Most of the time, my female friends advise me not to get drunk because other street boys might rape me and I can become pregnant. Some of my friends also counsel me on what to do not to get pregnant since we are all sexually active. We are all girls who are struggling to feed ourselves each day. There is no sense in adding another mouth to feed into the group” (Code 55).

4.5 Factors Leading to Alcohol Use Disorder among Street Youth

The second major theme of factor leading to alcohol use disorder emerged when respondents were asked to explain what influenced them to indulge in alcohol use disorder. The sub-themes, which are the codes that tally to the main theme, are given in the Table 5 below:

Table 5: Factors Leading to Alcohol Use Disorder among Street Youth

| Theme B | Sub-theme | Sources |
|--|--------------------------------|----------------|
| Factors Leading to Alcohol Use Disorder among Street Youth | Peer Pressure | 171 |
| | Stress-Free Induction | 163 |
| | Media Influence | 137 |
| | Availability and Affordability | 136 |
| | Anxiety | 132 |
| | Curiosity | 136 |

| Theme B | 6 sub-themes |
|---------|--------------|
|---------|--------------|

In examining factors leading to alcohol use disorder among street youth, 95% of the respondents revealed that peer pressure was the major contributing factor. This was followed by stress-free induction as denoted by 90% of the study participants. The study findings on peer pressure and stress-free induction were supported by the following respondents:

“Like for me, I was told by my peers that alcohol taking is normal for all of us. In fact, you cannot fit in the rest if you are not taking alcohol. So, when I was new, they started introducing me slowly until now I am used to it” (Code 67).

“Taking alcohol while in the streets is one way of releasing the stress that we face in the streets. Life is not easy. We lack food. Even to get water is a problem. Sometimes you are harassed by the police. So life here is full of stress. The only hope that we have is to sniff and take alcohol if you get access to” (Code 69).

Therefore, peer pressure and stress-free induction were found to contribute to alcohol use disorder among street youth in Kariobangi Sub- County.

Moreover, in illustrating factors leading to alcohol use disorder among street youth, 76% of the study participants declared that they indulged in alcohol use disorder due to media influence. Media influence was associated to TV shows and spreading alcohol related adverts through social media among street youth. In regard to media influence on alcohol use disorder, one respondent had the following to assert:

“There are several television shows that promote the use of alcohol. Such adverts are also spreading in our social media platforms. In fact they encourage taking alcohol so much. That you become very strong and feel good after taking it” (Code 78).

Therefore, the street youth of Kariobangi Sub-County were influenced to indulge in alcohol use disorder due to media influences.

Furthermore, the research results revealed that 75% of the respondents denoted that availability and affordability made them indulge in alcohol use disorder among street youth. This was followed by 75% of the study participants who revealed that curiosity made street youth to indulge in alcohol use disorder. In regard to availability and affordability and curiosity, the following were supported by the study participants:

“In the streets, we live together and we do share things in common. Some people are generous hence they give us some drinking staff. Sometimes we get alcohol thrown in the dust pins. And a times we can buy the cheap ones. So getting access to alcohol is very easy since they are always available and affordable. A times we also ask our well-wishers to buy for us. Other bad boys, they steal and get money to buy” (Code 35).

“I personally came to the streets without knowing how alcohol and sniffing tastes like. Out of curiosity and peer pressure, I started tasting alcohol and sniffing. So that I would be able to feel the way others felt, and be able also to cope with street life. In fact, I tell you that you only drink and survive minus that, life in the street in very hard.” (Code 65).

Therefore, affordability, availability and curiosity were other factors that led to alcohol use disorder among street youth in Kariobangi Sub-County.

Additionally, in exemplifying more factors leading to alcohol use disorder, 73% of the respondents revealed that anxiety was a factor that contributed to alcohol use disorder among street youth. Anxiety as a factor was related with distress, traumatic and depression episodes. In regard to anxiety, one of the respondents had the following to assert:

“I personally use alcohol more especially when faced with anxiety issues. I have also witnessed my peers use alcohol when they are distressed and with low mood. You feel high when using alcohol that is supplemented by sniffing. In fact those are the means we have to console ourselves since life in the streets is hard and stressful” (Code 58).

Therefore, anxiety was one of the factors that led the street youth to indulge in alcohol use disorder in Kariobangi Sub-County.

4.6 Effects of Alcohol Use Disorder among Street Youth

The third major theme of effects of alcohol use disorder emerged when defendants were requested to classify effects that followed when they indulged in alcohol use disorder. The sub-themes, which are the codes that tally to the main theme, are given in the Table 6 below:

Table 6: Effects of Alcohol Use Disorder among Street Youth among Street Youth

| Theme C | Sub-theme | Sources |
|--|--|----------------|
| Effects of Alcohol Use Disorder among Street Youth | Death | 75 |
| | Poor Health | 76 |
| | Loss of Memory | 50 |
| | Poor Judgment | 56 |
| | Poor Personal Hygiene | 68 |
| | Rape cases, Unprotected Sex and Unwanted Pregnancy | 65 |
| | Upsurge in Crimes | 73 |
| Theme C | 7 sub-themes | |

In describing about effects of alcohol use disorder among street youth, 94% of the respondents declared that death among street youth has become rampant due to alcohol used

disorder. Death incidents was attributed to road accidents, suicide, and overdrinking. The study findings on death were supported by the following respondents:

“I remember that day very well. It was last year around December, when one of us wanted to cross the road. As he hurried since it was late in the night. He crossed the road without checking properly, a car came from behind and crushed him down on the spot. The driver was over speeding and had no mercy on him and he drove away without helping him. Then, he died like that” (Code 1).

“There is one incident that happened around this area. This girl became pregnant and had a baby. Life became too challenging for her until one day she took a lot of alcohol and ended up committing suicide. She threw herself into a well that was not covered. People saw her doing the act, but, it was too late. They would have helped her. The baby was taken into Children’s home in Nairobi” (Code 11).

“I remember that day. It was in the morning around ten o’clock. I was just walking around these streets looking for something to eat. Then I saw one of us sleeping down. Reaching near, there was no sign of any movement. Then, we realized that he overdrunk stolen alcohol and was not able to carry himself. It had rained heavily that night and the dirty waters killed him” (Code 12).

Based on the study findings on theme one above, this is a clear indication that the street youth of Kariobangi Sub-County are subjected to death due to alcohol use disorder.

Secondly, in unfolding the effects of alcohol use disorder among street youth, 95% of the participants acknowledged that poor health came as a result of alcohol use disorder among the street youth. Poor health among the street youth was associated to both physical and mental

injuries, related diseases, loss of appetite and weight loss. The study findings on poor health were supported by the following study participants:

“I have experienced physical injuries as a result of drinking alcohol. Sometimes the brain is damaged. But, we have no option we have to drink and keep off the stress in the streets (Code 21).

“In fact there a lot of diseases associated with drinking alcohol. Like now I have seen many street youth suffering from this diseases of sugar. Yes, diabetes and high blood pressure. So when you become sick, you suffer since no one is willing to give you medicine” (Code 22).

“I, personally, I lack appetite when I have taken alcohol. When I include sniffing, it becomes worse. This definitely leads to loss of weight” (Code 77).

Therefore, street youth of Kariobangi Sub-County were characterized by poor health due to alcohol use disorder.

Thirdly, in illustrating the effects of alcohol use disorder among the street youth, 63%, 70%, and 85% of the respondents declared that alcohol use disorder amidst the street youth led to loss of memory, poor judgment, and poor personal hygiene respectively. The study results on the sub-themes of loss of memory, poor judgment, and poor personal hygiene were supported by the following study contributors:

“I have experienced loss of memory when drunk. In fact, alcohol can make you forget where you normally stay. After drinking a lot, you find yourself in places that totally new and you forget everything including the problems one is facing” (Code 13).

“I have seen others have poor judgment as a result of drinking alcohol. Sometimes alcohol gives you a false sense of perceptions. You might be walking, and you see people

in double double. If you are near a road, you see several roads. That is why a person may die as a result of accident due alcohol use disorder” (Code 17).

“When you drink alcohol, you do not have time for personal cleanliness. The situation becomes worse for us in the streets who do not even get access to water as a basic need. In fact, that is why in most cases we are very dirty and do not observe any personal hygiene at all” (Code 32).

Moreover, in describing the effects of alcohol use disorder among the street youth, 81% and 91% of the respondents declared that alcohol use disorder led to rape cases, unprotected sex and unwanted pregnancy and upsurge in crimes respectively. The study findings on the sub-themes were supported by the following research participants:

“As a girl in the streets, you are not safe at all. If you see this kid that I am having, it was a result of rape. In fact, several boys were seducing me then I refused. They organized and attacked me one night and raped me. Even nowadays you are just raped and we are used to because they say that I am their wife. It is painful, but, noting you can do since you are in the streets. And they do it mostly when they are drunk” (Code 27).

“When you are drunk alcohol, you do not mind anything. That is why we have unprotected sex frequently that leads to unwanted pregnancy. In fact there is a girl who has now two kids in the streets because these boys when they are drunk, they want you by force” (Code 31).

“Drinking alcohol makes one to engage in crimes such as stealing from people who are passing by. Sometimes, these street guys can attack and rob you everything, more especially at night” (Code 44).

The above study findings were confirmed by Mutiso et al. (2012) who revealed that alcohol use disorder leads to rape cases, unprotected sex, unwanted pregnancy and increased crime rates among the youth.

4.7 Measures of Minimizing Cases of Alcohol Use Disorder among Street Youth

The fourth major theme of measures of minimizing cases of alcohol use disorder emerged when respondents were asked to suggest measures that can prevent them from indulging in alcohol use disorder. The sub-themes, which are the codes that tally to the main theme, are given in the Table 7 below:

Table 7: Measures of Minimizing Cases of Alcohol Use Disorder among Street Youth

| Theme D | Sub-theme | Sources |
|---|---------------------------------------|----------------|
| Measures of Minimizing Cases of Alcohol Use Disorder among Street Youth | Promoting positive peer pressure | 175 |
| | Proving basic needs | 174 |
| | Counseling services | 160 |
| | Using rehabilitation centers | 166 |
| | Advocacy against alcohol use disorder | 168 |
| | | |
| Theme D | 7 sub-themes | |

In suggesting the measures that can be used to minimize cases of alcohol use disorder among street youth, 97% of the study participants proposed promoting positive peer pressure, 96%, 88%, 92%, and 93% of the respondents recommended for providing basic needs, counselling services, sending them to rehabilitation centers, and enhancing advocacy against alcohol use disorder among the street youth. The study findings on appropriate measures to minimize cases of alcohol use disorder were reinforced by the subsequent study contributors :

“It is hard to stop drinking but street youth can try to influence one another positive. Encouraging them to do good and avoid bad behaviors. Personally, I think that if the street youth get basic needs like food and water, they can stop drinking and sniffing which they use to compensate for lack of food” (Code 33).

“I think counseling services can help in one way. You know the counselors can advise you to stop drinking” (Code 48).

“Those who have become addicted drinking alcohol, I think they should be taken to rehabilitation centers so that they can stop drinking alcohol because it is bad. The government also should restrict the use of alcohol more especially among the youth by creating awareness and advocacy against alcohol consumption among the youth” (Code 45).

Therefore, if all the measures discovered above are embraced to latter, then cases of alcohol use disorder among the street youth would be lessened to a great extent more especially in Kariobangi Sub-County.

4.8 Summary of the Study Findings

This chapter as illustrated qualitative data analysis and presentation using tables and percentages. The study findings revealed six types of peer pressure that were embraced among street youth namely negative peer pressure, positive peer pressure, direct peer pressure, indirect peer pressure, verbal and unspoken peer pressure. Moreover, the study findings revealed that peer pressure, stress-free induction, media influence, availability and affordability of alcohol, anxiety and curiosity factors led the street youth to alcohol use disorder. Lastly, the study findings revealed the following effects of alcohol use disorder among the street youth: death,

poor health, and loss of memory, poor judgment, poor personal hygiene, and upsurge in crimes, rape cases, unprotected sex, and unwanted pregnancy among street youth.

CHAPTER FIVE:

DISCUSSION

5.1 Introduction

The current research evaluated the influence of peer pressure on alcohol use disorder among street youth in slum areas with specific reference to Kariobangi Sub-County in Embakasi North Constituency within Nairobi County in Kenya. This chapter has shown the research results in connection to the three major themes that emerged from the research conducted among the street youth. Besides, the themes were supported by related literature review. Therefore, the following themes namely types of peer pressure among street youth, factors leading street youth to alcohol use disorder, and effects of alcohol use disorder among street youth were discussed in this chapter in details. Lastly, this chapter has developed a theory and a conceptual model using inductive approach based on the study findings.

5.2 Types of Peer Pressure among Street Youth

Peer pressure is the effect of a peer group on persons of that group that inspires him/her to alternate their values, attitudes, or conducts in order to obey the group norms. Peer pressure is not continuously an evil thing since peer groups might really have an optimistic effect on a person's conduct. Some street youth, a peer group might be a foundation of security, a cultural opportunity and a basis of reassurance. Besides, the many types of peer pressure revealed by this study, the change among undesirable and positive peer pressure has a remarkable effect on an individual (Morris, 2019). The study findings on types on peer pressure were supported by the following study participant:

“I have experienced both negative and positive peer pressure. Most of the time, is my peers who bring alcohol for me to drink. But, sometimes other peers advise me not to drink alcohol since it will make me sick. (Code 108).

The study results showed that there are both negative and positive peer pressures among the street youth in the study area. The study participants reported that although there are mostly peer pressures are negative, there are also positive pressures. As the current study result showed most street youth do not indulge in alcohol use disorder before they emerge into streets. Rather the research revealed that they learn from their peers who are already on the streets. They have to look like their peers, and since their peers engage in alcohol use disorder, these new street youth will also become like them. The study revealed that although there are some peers who try to positively pressurize their peers to stop using alcohol, there are mostly peers who encourage their friends to indulge in drinking of alcohol.

According to a study by Jorge et al. (2018) while many organizational influence do not essentially feel satisfied for the individual on engaging in alcohol drinking, the results of the peer pressure are likely to be naturally positive. Positive peer pressure results in an individual doing things that make them feel good, make better choices and generally have greater outcomes than at the start. Negative peer pressure, on the other hand, causes the peers being influenced to feel guilty, make bad choices and practice harmful behavior. Therefore, the street youth accept peer pressure because they want to be accepted and fit in a group.

Nonetheless the risk, peer groups endure a very important portion of a person since they have many benefits to person. Peer group is a harmless dwelling to encounter like-minded persons, permits one to yield positive risks and examine values and views of others, find out what they can do and what they excel at as well as their weaknesses, make them healthy and help

them choose to participate in vigorous activities as well as accept one another to help advance their aptitude to create individual choices and preferences.

The current study results also suggested that peer group pressure has also negative features that make street youth be irresponsible and make poor decisions. Street youth at the study area are forced to steal and use substances which are the result of poor self-decisions the current study results of the negative peer pressure showed congruency with the different studies results of Eshetu (2011) which stated that decision making among street youth is not just left to individual youth rather to some peer groups.

5.3 Factors Leading Street Youth to Alcohol Use Disorder

The study findings revealed that peer pressure, stress-free induction, media influence, availability and affordability of alcohol, anxiety and curiosity lead the street youth to indulge in alcohol use disorder. Mutiso, Kasundu, Chebet, and Mwirigi (2012) confirmed that curiosity among the youth indulge them into alcohol use disorder. Similarly, a study by Ndegwa, Munene, and Oladipo (2017) established that many youth had a modest danger for alcohol use issues. Age, gender, year of a student in the university, and place of dwelling, peer pressure, and parental intake, social media, and availability to alcohol were all issues that influenced alcohol use disorder. The study above concretized that social, and economic factors contributed to alcohol use disorder among the street youth. Additionally, Studer et al (2014) revealed that peer pressure, peer alcohol values and norms, and interacting with drug-using peers were connecting with alcohol use disorder. Besides, Neves, Teixeira, and Ferreira (2015) noted that stress-free induction inspires alcohol drinking among peers and, normally in groups. For all the factors, peer pressure emerged as a dominant factor that contributed to alcohol use disorder among street youth.

Additionally, a study by Unger (2018) revealed that following disturbance of family associations and parting from social organizations, street peers frequently convert into key social provision systems for extra street youth. Street teenagers hold peer groups to achieve various needs comprising of companionship, love, and safety. Such peer associations habitually offer an enlightening function to new street youth concerning street endurance. The associations among street youth might offer a helpful function by shielding the person, particularly newly-street youth, from the hardship of the thoroughfare routine due to anxiety. Regarding this, Wacuka (2017) confirmed that anxiety contributes many youth to indulge in alcohol use disorder. Nonetheless the help of street peer groups, the street youth repeatedly imitate the conduct of their peer group, exclusively regarding alcohol use disorder. Thus, it is vivacious that communal systems are significant for street youth, nonetheless peer groups might negatively affect intensified alcohol use disorder amid these youth. Therefore, the influence of peer pressure on alcohol use disorder is multifaceted and complex phenomenon practiced among street youth. There is need to understand support measures of decreasing the influence of negative peer pressure and cultivate strategies to deal with apparent alcohol use disorder among the street youth.

On the contrary, a study by Abus (2011) embraced multi-nominal logistic reversion examinations that observed the effect of social systems and fiscal influences amongst a group of street youth with different stages of alcohol use disorder. Besides, for persons with alcohol use disorder the part of future time expectations was inspected. A sample of 185 street youth aged between eighteen and twenty-three years were engaged from a communal area and interrogated applying self-report tools. Results propose that social systems, financial factors, media influence, and upcoming anticipations are important forecasters of the glassy of alcohol use disorder among

youth in the streets. That is why a study by Tanski et al (2015) established that alcohol advertising through media outcomes in persons rising optimistic beliefs on consuming alcoholic substances, expanding and creating circumstances where alcohol usage is informally encouraged and acceptable. Identification of areas that put street teenagers at jeopardy for alcohol use disorder and addiction had inferences for operative involvement.

Besides, few studies have revealed the relationship between financial resources and alcohol use disorder among street youth. However, Valois (2017) established indication that occupation enlarged the risk of alcohol use for youth who worked more than fifteen hours per week. Indeed, for street youth, it relics indistinct how monetary resources effect alcohol use disorder. Researches have exposed that street youth face obstacles to occupation, namely lack of skills and education, unbalanced housing, dishonor in the workstation, cerebral health issues, integral evils and imprisonment (Baron, 2019). Even though the majority of such youth speak their interest in finding of formal employment, they often must go back to the street thrift. Panhandling is the greatest mutual source of revenue for youth in the streets. But, they too earn revenue by prostitution, substance delivery, and theft, exchange of sex for cash and from parentages and other domestic associates or peers (Valois, 2017). The essential for financial capitals is vibrant, however the glassy of admittance to these possessions might affect the harshness of alcohol use disorder amongst street youth. Therefore, there are other social and economic factors that influence the street youth to indulge in alcohol use disorder. The study findings on factors leading to alcohol use disorder were supported by the following study participants:

“Since I was introduced to alcohol drinking by my peers, I have been witnessing release of stress and I feel good. Remember, life here is not a joke. We suffer to cope with it by just drinking alcohol since it makes you forget about the stresses. (Code 121).

5.4 Effects of Alcohol Use Disorder among Street Youth

The research findings indicated that youth in the streets who are indulging in alcohol use disorder face different problems. The effects of alcohol use disorder identified by the study included death, poor health (physical and mental injuries, diseases, loss of appetite, and weight loss), loss of memory and poor judgment, poor personal hygiene, rape cases, unprotected sex and unwanted pregnancy, and upsurge in crimes. In a nut shell, the problems can be categorized into social and economic effects, as well as causing physical and psychological damage in those who indulge in alcohol use disorder. A huge body of study has also defined the irregular design of mental dysfunction due to alcohol use disorder. Encompassed are issues in general feeling, confidence, behavior, and interactivity. Formerly, some of these mental problems might be apparent before the start of alcohol use disorder, though mental functioning frequently deteriorates over a while in persons with alcohol use disorder (Birch, Beyer, Avery & Brown, 2014). The study findings on the effects of alcohol use disorder were supported by the following study participant:

“Indeed, alcohol is harmful to our health. Sometimes the brain is damaged, injured or rained on. But, we have no alternative we have to drink alcohol and eliminate the stress in the streets (Code 67).

Also, alcohol use disorder may contribute to different hallucinations that have existed related to long-lasting substance usage. Additional effects of alcohol misuse are straight connected to the organic influence of psychoactive ingredients namely anxiety and touchiness

resulting from withdrawal and the conducts that upshot from reliance on alcohol namely longing and obsession with gaining anticipated drug ingredients (Monica, 2011). The discovery was consistent with the outcome of the present research. The study findings with street youth indicated that most street youth who indulge in alcohol use disorder suffer from mental, and physical health problems.

Moreover, a study by Quigley (2019) revealed that the mainstream of those identified with an alcohol use disorder started drinking at a tender stage. Weighty drinking throughout puberty is related with weighty drinking throughout early adulthood. Juvenile drinking is too connected with an enlarged risk of anxiety, depression, sleep trouble, self-injuries, and suicidal conduct and better participation in additional perilous actions namely high-risk erotic conduct and illegal behavior. Therefore, alcohol use disorder have negative impacts on the lives of street youth.

Similarly, a study by Valois (2017) noted that alcohol can delay youth's ability to create fresh, long-lasting, and clear reminiscences of events and facts. Alcohol has toxic impacts on the myelination procedure. Myelination aids to steady and haste mind processes. Disturbance of the myelination route can lead to mental deficits. The pharmacological impacts of alcohol and additional biochemical ingredients utmost directly interfere with optimum mind functioning. Constant usage of alcohol and other substances over a period of time might retain youth from proceeding to more complex phases of reasoning and social interface. Thus, youth with alcohol use disorders frequently perform inferior on recall tests and have reduced abilities to plan.

Additionally, Bonnie and O'Connell (2016) denoted that alcohol is broadly available and aggressively permitted throughout humanity. Alcohol usage is recognized, as a usual part of rising up a person. However, juvenile drinking is unsafe, not solitary for the teenager however

likewise for the culture at large, as apparent by the quantity of alcohol-involved motorized automobile crashes, killings, perversities, health issues like brain injuries, and additional injuries. Persons who commenced drinking timely in life run the risk of mounting severe alcohol issues, counting alcoholism, advanced in life.

They too are at better danger for a diversity of hostile concerns, counting risky erotic action. Mutiso et al. (2012) denoted that impacts of substance misuse among the youth included loos of memory, poor judgment and poor personal hygiene and death. A study by Birch, Beyer, Avery and Brown (2014) confirmed that youth who misused alcohol are more probable to grieve from negative effects. The negative effects included mental and physical damages, loss of appetite, weight loss, due to severe headaches, sleep disorder and vomiting. The World Health Organization [WHO] (2011) confirmed that 320000 youth between the ages of fifteen and twenty-nine die from alcohol-linked reasons every year. Hence, harmful alcohol use outcomes in two point five million deaths yearly that arise due to unintentional and intentional injuries. Identifying the youth at utmost risk might aid to discontinue issues earlier before they progress. Thus, dropping research with alcohol and issues that escort alcohol usage would diminish cases of alcohol use disorder among street youth.

5.5 Improvement of Theory

The current research intended at examining the influence of peer pressure and alcohol use disorder among the street youth. Grounded on the research results, the researcher ascertained that peer pressure influenced alcohol use disorder among the street youth. Thus, the developing theory arrived by the researcher is that peer pressure dominantly influenced street youth to indulge in alcohol use disorder though direct reinforcement. Therefore, there is need for improvement regarding the theory utilized in the current research. The Social Learning Theory of

Albert Bandura maintains that human beings obtain most arrays of behavior by observational learning instead of direct reinforcement. It should be noted that direct reinforcement that Bandura negated is crucial in explaining about the influence of peer pressure and alcohol use disorder among street youth as proved by the current study. Direct reinforcement entails the arrangements in which the reinforcer is obtained through the completion of the task. This type of reinforcement results naturally directly from the appropriate behavior. For example, if a street youth interacts with their peers in a group activity appropriately, they are more likely to be invited to participate in group activities.

5.6 Summary

This chapter as discussed the three key themes that arose from the research findings. The themes included types of peer pressure among the street youth, factors leading to alcohol use disorder amongst the street youth, and effects of alcohol use disorder amid the street youth. Founded on the study results, both positive plus negative peer pressure emerged as the dominant types of peer pressure among the street youth of Kariobangi Sub-County. Besides, peer pressure was found out to be the dominant factor in facilitating street youth to indulge in alcohol use disorder. Lastly, the researcher as developed both a theory and conceptual model based on the study findings while using inductive approach.

CHAPTER SIX:

SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

6.1 Introduction

The chapter dealt with the research results, deductions, limitations, suggestions and parts for additional research. A summary of the key study results has been given in regard to the study, deductions have been arrived from the research findings, and a number of recommendations have been suggested based on the study findings in an attempt to minimize cases of negative peer pressure and alcohol use disorder among street youth in our contemporary society. Finally, areas for further study were also identified to fill the knowledge gaps that the current study created.

6.2 Summary

The purpose of the current research was assessing the influence of peer pressure on alcohol use disorder among street youth in slum areas with specific reference to Kariobangi Sub-County in Embakasi North Constituency within Nairobi County in Kenya. Research was directed by the subsequent study purposes: The first objective was to analyze the types of peer pressure that are there among street youth in slums areas of Kariobangi Sub-County. Based on this objective, the study found out the following types of peer pressure existed among the street youth namely negative peer pressure, positive peer pressure, direct peer pressure, spoken peer pressure, indirect peer pressure, and unspoken peer pressure. The second objective was to identify the factors that lead street youth to the alcohol use disorder in slum areas of Kariobangi Sub-County. Based on this objective, the study established that peer pressure, getting stress-free lives, media influence, availability and affordability of alcohol, anxiety and curiosity lead the street youth to indulge in alcohol use disorder. The third research aim was to scrutinize the effects of alcohol use disorder among the street youth in slum areas of Kariobangi Sub-County. The study findings

established that alcohol use disorder among the street youth resulted to death incidents, poor health, and loss of memory, poor judgment, poor personal hygiene, upsurge crimes, rape cases, unprotected sex and unwanted pregnancy. Regarding this, there is a correlation between peer pressure and alcohol use disorder among street youth based on the correlation analysis done. Lastly, the objective to identify measures that can be embraced to minimize cases of alcohol use disorder among the street youth in slum areas of Kariobangi Sub-County was captured under recommendations in this chapter.

6.3 Conclusions

Founded on the above major results, the subsequent deductions are arrived by the researcher. The phenomena of street youth has become a major concern on the cities of countries, more especially in Kenya. The youths that are found on the streets do a lot of things in order to cope with the life on the streets. One of the things that these youths do is to indulge in alcohol use disorder that are harmful to their health.

Peers play a major role in alcohol use disorder among the street youth. Notably, the youth that had not used alcohol before and started being friends with those who use alcohol. Peers play the role of guiding their peers and offering protection, re-assurance and reinforcement of behavior that is similar to the members of the group as well as take the part of leadership. Hence, the above-mentioned roles lead peers into the habit of adopting new behavior, offering and encouraging them by giving alcohol to drink.

Another conclusion that can be drawn is that there are two major types of peer pressure namely positive and negative peer pressure that street youth face while they are staying on the streets. The negative peer pressure that the youth face can be described as being pressured by their peers into using alcohol that are harmful to their health. Street youth are pressured to look

for money to buy alcohol that they use, since alcohol is not for free and these street youth do not have means of income to afford these substances. While some of the ways these street youth look for money to buy alcohol they use are not harmful to others, such as begging, other ways the street youth resort to are harmful to themselves and others, such as stealing from and mugging the people.

The positive aspects peer pressure faced by the street youth mentioned in this study include the effort made by the members of the peer group to avoid, reduce or quit using alcohol supporting one another through the process of discontinuing alcohol use disorder, offering protection to one another as well as looking for money for food and sharing meals together.

Regarding the factors that lead street youth to alcohol use disorder, this study concludes that these factors are listed as peer pressure, stress-free induction, media influence, availability and affordability of alcohol, anxiety and curiosity. Based on the study findings, peer pressure is the dominant contributing factor which influences the street youth to indulge in alcohol use disorder to seek social acceptance, fitting in a group and the demands based on the group norms and values.

6.4 Limitations of the Study

The researcher met the subsequent limitations and challenges:

First of all, there was a challenge of a language barrier. This is where some respondents would not understand and read the English language, but they were conversant with the Swahili language. To deal with this challenge, the researcher had to record their conversations with their permission which were later translated into the English language for interpretation and analysis.

The respondents were uncomfortable talking about their life in the streets. Some were unable to acknowledge or recall their family backgrounds. However, embracing the technique of

non-judgmental empathetic understanding, they finally recognized their situations in the streets with ease. To give the respondents assurance, the researcher also promised them confidentiality and privacy of any information that was shared. Furthermore, some respondents would be disturbed by others who were passing by during the process of data collection. This took a long time than expected, but, the researcher had to wait patiently for them to concentrate and continue with data collection.

Lastly, the spread of the Covid-19 pandemic was a challenge more especially between the researcher, research assistant, social workers, and the respondents during data collection. To deal with this pandemic situation, the guidelines provided by the Ministry of Health were followed to the latter. Following these guidelines, the researcher did not collect data from those who did not observe Covid-19 protocols.

6.5 Recommendations

Therefore, grounded on the research findings, the researcher suggests for the recommendations:

The street youth ought to be encouraged to promote positive peer pressure by rewarding those who behave and act well. All forms of negative peer pressure ought to be discouraged among the street youth. This will be essential that the street youth can be able to do well always and avoid bad behaviors like indulging in alcohol use disorder.

Furthermore, the street youth should be encouraged to seek counselling services whenever they are faced by challenges of street life. Therefore, drinking alcohol is not a solution to their issues at and but rather postpones the process of seeking appropriate and workable solutions.

The community within the slum areas and the well-wishers should provide basic needs for the street youth. This will be helpful since the street youth need food clothing and even clean water. Therefore, responding to their basic needs will prevent the street youth from indulging into alcohol use disorder.

Additionally, state, NGOs or faith-based establishments ought to work collectively to lessen the amount of street youth by responding to their basic needs and issues at three stages. The primary stage of interference requisite be completed at personal level and it needs aiming street youth moreover as persons or groups who are presently consuming alcohol, at jeopardy of consuming them in the close upcoming or at danger of erotic and generative health issues by establishing their basic aids, therapy and humanizing admittance to health. The second stage of involvement is at communal and domestic glassy. At this glassy, backup communal actions, offering services and safeguarding the obtainability of possessions for youth in the streets. The third over-all involvement is actions outside the communal and labor dwellings of street youth. Humanizing and persuading these vulnerable groups through diverse devices like encouragement of taking safe and helpful setting at local and nationwide intensities are likewise suggested.

Besides, the government of Kenya through Nairobi County should come up with rehabilitation and vocational training centers for the street youth. The rehabilitation centers should enable the street youth to amend and change their bad behaviors namely alcohol use disorder as a result of negative peer pressure. While vocational training centers should provide the necessary knowledge and skills for the street youth to empower them so that they can start small businesses for instance.

Lastly, there is need to create awareness and advocacy against alcohol use disorder among the street youth. The street youth need to be informed on the deteriorating health issues associated with alcohol use disorder so that they can avoid using such substance.

6.6 Areas for Further Study

The researcher proposes for the subsequent areas for additional research so as to fill some knowledge gaps created by the study:

- i. The association between peer pressure and well-being among the street youth.
- ii. The correlation between social-economic status and alcohol use disorder among street youth.
- iii. The influence of anxiety on alcohol use disorder amongst youth in the streets.
- iv. The influence of curiosity among street youth on alcohol use disorder.

REFERENCES

- Abus, S. (2011). *Factors associated with substance use among homeless young adults*. London: Sage Publications.
- Ali, M. (2012). *Rapid situation assessment of street children*. Soweto: Sage Press.
- Amankwaa, L. (2016). Creating protocols for trustworthiness in qualitative research. *Journal of Cultural Diversity*, 23(3), 1-34.
- Anderson, P., Chisholm, D., & Fuhr, D.C. (2011). *Effectiveness and cost-effectiveness of policies and programmes to reduce the harm caused by alcohol*. New York: Lancet.
- Aptekar, L. (2014). Street children in developing world: A review of their condition. *Cross Cultural Research*, 1, 1-14.
- Bandura, A. (1977). *Social learning theory*. Eaglewood Cliff, N.J: Prentice Hall.
- Baron, S.W. (2019). Street youths and substance use: The role of background, street lifestyle, and economic factors. *Youth & Society*, 31(1):3–26.
- Barrow, S. (2011). *Drinking: Behavior and belief in modern history*. California, USA: Sage.
- Bonnie, R.J., & O'Connell, M.E. (2016). *Reducing underage drinking: A collective responsibility*. Washington, DC: National Academies.
- Borg, R.C., & Gall, M.D. (2010). *Educational research: An introduction*. New York: Longman Inc.
- Birch, D. N., Beyer, F., Avery, L., & Brown, N. (2014). *Impact of alcohol consumption on young people: A systematic review of published reviews*. Newcastle: Newcastle University.
- Castens, V., Luginga, F., Shayo, B., & Tolias, C. (2012). *Alcohol abuse in urban Moshi, Tanzania*. New York: Cornell University Press.

- Chesang, R. K. (2013). Drug abuse among the youth in Kenya. *International Journal of Scientific and Technology Research*, 2(6), 126-131.
- Creswell, J. W. (2014). *Research design: Qualitative, quantitative, and mixed methods approaches* (4th ed.). Thousand Oaks, CA: Sage Publications, Inc.
- Ennew, J., & Swart-Kruger, J. (2003). Introduction: Homes, places and spaces in the construction of street children and street youth. *Children Youth and Environments*, 13(1), 81-104.
- Eshetu, A. (2011). *Drug abuse among street youth in Addis Ababa*. Addis Ababa: Addis Ababa University Press.
- Freisthler, B., Lipperman-Kreda, S., Bersamin, M., & Gruenewald, P.J. (2015). Tracking the when, where, and with whom of alcohol use: Integrating ecological momentary assessment and geospatial data to examine risk for alcohol-related problems. *Alcohol Research*, 36(1):29-38.
- Gongera, E.G., Mugai, W.J., Mugai, N.W., Mugai, W.F., & Nyakwara, S. (2013). Socio-economic factors on alcohol abuse among the youth in Kikuyu District, Kenya. *Research on Humanities and Social Sciences*, 3(1), 96-110.
- Government of Kenya. (2019). *2019 Kenya population and housing census reports*. Nairobi: Government Printers.
- Grant, C., & Osanloo, A. (2014)). Grant, Understanding, selecting, and integrating a theoretical framework in dissertation research: creating the blueprint for your “house, “. *Administrative Issues Journal: Connecting Education, Practice and Research*, 4,(2), 12-26. Retrieved from <https://files.eric.ed.gov/fulltext/EJ1058505.pdf>.

- Griffin, K.W., Botvin, G.J., Nichols, T. R., & Doyle, M.M. (2013). Effectiveness of a universal drug abuse prevention approach for youth at high risk for substance use initiation. *Preventive Medicine*, 36(1):1–7.
- Gruenewald, P., Holder, H., & Treno, A. (2013). Environmental approaches to prevention of drug abuse. *American Society of Addiction Medicine*, 1, 383–393.
- Human Rights Watch Report on Street Children. (2015). *World report 2015: Events of 2014*. London: Policy Press.
- James, M., & Busher, S. (2009). Epistemological dimensions in qualitative research: The construction of knowledge online. *Online Interviewing Journal*, 1(2a), 5-18.
- Jorge, K.O. et al. (2018). Peer Group influence and illicit drug use among adolescent students in Brazil: A cross-sectional study. *Educational Journal*, 34(3), 1-14.
- Kombo, D. K. & Tromp, D. L.A (2010). *Proposal and thesis writing: An introduction*. Nairobi: Paulines Publications Africa.
- Kothari, C. R. (2014). *Research methodology: methods and techniques*. New Delhi: New Age International (P) Ltd, Publishers.
- Kruger, R.A., & Casey, M.A. (2009). *Focused group discussions*. London: Oxford University Press
- Monica H. (2011). Alcohol marketing, drunkenness, and problem drinking among Zambian youth. *A Research Journal of Human Sciences*, 30(1), 1-11.
- Morrison, T.G., Kalin, R., & Morrison, M.A. (2014). Body-image evaluation and body-image investment among adolescents: A test for sociocultural and social comparison theories. *Academic Journal Article*, 2(1), 1-42.

- Mueller, W. (2010). *Understanding today's youth culture*. Wheaton, IL: Sage.
- Mugenda, O.M., & Mugenda, A.G. (2010). *Research methods: Qualitative and quantitative approaches*, revised edition. Nairobi: ACTS Press.
- Mutiso, M. M., Kasundu, B., Chebet, P. S., & Mwirgi, P. W. (2012). Factors contributing to drug abuse among the youth in Kenya: A case of Bamburi Location. *Elixir International Journal*, 46, 8259-8267.
- Morris, F. (2019). *What are the six types of peer pressure?* Retrieved from: <https://www.talkitoutnc.org/peer-pressure/types-of-peer-pressure/>
- Mwaturia, R. (2015). *Research methodology: Methods and techniques*. New Delhi: Wiley Eastern.
- Nairobi Urban Slum Survey. (2017). Measuring patterns of substance use among street children. Nairobi: Sage.
- Neves, K.C., Teixeira, M.L.O., & Ferreira, M.A. (2015). Factors and motivation for the consumption of alcoholic beverages in adolescence. *Alcohol Consumption in Adolescence*, 19(2), 286-291.
- Ndegwa, S., Munene, A., & Oladipo, R. (2017). Factors influencing alcohol use among University students in a Kenyan university. *African Journal of Clinical Psychology*, 1, 102-117.
- Nkonge, J.K. (2017). *Factors influencing drug and substance abuse among the youth in Kenya: A case of Likii Sub-Location, Laikipia East Sub-County*. Nairobi: University of Africa.
- Ochieng' G.G. (2010). *Drug abuse in schools and its effects on students*. Nairobi: University of Nairobi.

- Okwarah, P.O. (2017). *Prevalence and correlates of alcohol use among underage high-school students in Murang'a and Kajiado counties, Kenya*. Nairobi: Jomo Kenyatta University.
- Orodho, J. (2009). *Elements of education & social science research methods*. Nairobi: Kanezja Publishers.
- Oso, V., & Onen, D. (2011). Determining sample size for research activities. *Educational and Psychological Measurements*, 30(4), 607-610.
- Polit, D. F., & Beck, C. T. (2010). Generalization in quantitative and qualitative research: Myths and strategies. *International Journal of Nursing Studies*, 47(11), 1451-1458.
- Quigley, J. (2019). *Alcohol use by youth*. Oxford: Oxford University Press.
- Quimby, D. (2015). *Positive peer pressure among Black American youth and the role of ethnic identity and gender*. Chicago: Loyola University.
- Simons-Morton, A., Lerner, M., & Singer, N. (2015). Factors associated with alcohol consumption, problem drinking and related consequences among youths. *Journal of Psychiatry and Clinical Neurosciences*, 60, 40-54.
- Sorre, B. (2010). *Patterns of migrations among street children in Kenya*. Nairobi: Lambert Academic.
- Shorter, A., & Onyancha, E. (2012). *Street children in Africa: a Nairobi case study*. Nairobi: Paulines Publications Africa.
- Steinberg, M., & Monahan, A. (2017). *Alcohol and drug use in European university students*. London: Lancet Press.
- Stephanie. (2014, December 12). *Statistics how to*. Retrieved from <https://www.statisticshowto.datasciencecentral.com/sampling-frame/>

- Studer, J., Baggio, S., Deline, S., N’Goran, A.A., Henchoz, Y., Mohler-Kuo, M., Daeppen, J.B., Gmel, G. (2014). Peer pressure and alcohol use in young men: A mediation analysis of drinking motives. *Introduction Journal on Drug Policy*, 25(4):700-708.
- Swinson, R.P., & Eaves, D. (2018). *Alcoholism & addiction*. London: Oxford University Press.
- Swisher, H. (2011). *Ding education: Pushing or parenting*. London: Sage.
- Tanski, S.E., McClure, A.C., Li, Z., Jackson, K., Morgenstern, M., Li, Z., Sargent, J.D. (2015). Cued recall of alcohol advertising on television and underage drinking behavior. *Jama Pediatric*, 169(3), 264-271.
- Tumwesigye, N.M., & Kasirye, R. (2018). Problem drinking, alcohol-related violence, and homeless among youth living in the slums of Kampala, Uganda. *International Journal of Environmental Research and Public Health*, 1-13.
- UNICEF. (2010). *The street children*. New York: Oxford University Press.
- United Nations Office on Drugs and Crime. (2012). The contemporary drug problem: Characteristics, pattern and driving factors. In *World drug report 2012*. Retrieved from http://www.unodc.org/documents/data-and-analysis/WDR2012/WDR_2012_Chapter2.pdf
- Unger, J.B. (2018). Early adolescent street youth: An overlooked population with unique problems and service needs. *Journal of Early Adolescence*, 18(4):325–348.
- UNCRC. (2012). *United Nations convention on the rights of the child*. London: Sage.
- Valois, H. (2017). Personal strengths of homeless adolescents living in a high-risk environment. *Advances in Nursing Science*, 26(2):90–101.
- Wacuka, C. (2017). *Alcohol and drug abuse among vulnerable in Kenya: The case of families in Mukuru Kwa Njenga Slums in Nairobi*. Nairobi: Jomo Kenyatta University.

- Wagenaar, A.C., Murray, D.M., & Gehan, J.P. (2010). Communities mobilizing for change on alcohol (CMCA): Effects of a randomized trial on arrest and traffic crashes. *Addiction Journal*, 95, 209–217.
- Wilkinson, A. M. (2012). The scientist's handbook for writing papers and dissertations. Englewood Cliffs, NJ: Prentice Hall.
- World Health Organization. (2011). *Alcohol: Fact sheet*. Retrieved from <http://www.who.int/mediacentre/factsheets/fs349/en/index.html>
- World Health Organization. (2012). *Management of substance abuse: Other psychoactive substances*. Retrieved from http://www.who.int.substance_abuse/facts/psychoactives/en/index.html
- World Health Organization. (2013). *Youths and drugs: Report of WHO study group France*. Paris: WHO Press.
- Yoo, H.C., Gee, G.C., Lowthrop, C.K., & Robertson, J. (2010). Self-reported racial discrimination and substance use among Asian Americans in Arizona. *Journal on Immigration and Minority Health*. 12(5), 683-690.

APPENDIXES

APPENDIX I: Informed Consent Letter

Dear respondent, I am a scholar at Tangaza University College. I am researching the Influence of Peer Pressure in Alcohol Use Disorder among Street Youth in Slum Areas of Kariobangi Sub-County. I have a set of flexible queries that I would like you to answer to get information, which will be used in the academic study only. The information you give will be extremely valued and handled with privacy. No contributor's result will be offered separately but in a collective form. Please, there is no need of mentioning your name during interview sessions or declaring it writing during Focused Group Discussions. In this study, there is no reward or monetary compensation, you are free to contribute to this research and pull out any time and you are asked to respond freely and voluntarily.

Thanks for your contribution.

Name of researcher: Tesema Habtamu Masresha

Signature of the researcher Date...../...../.....

Statement to be signed by the participant:

- I approve that the researcher has clarified entirely the kind of the research and the series of undertakings which I will be asked to embark on. I ratify that I have had satisfactory chance to ask queries about this study.
- I comprehend that my contribution is out of willingness and that I can pull out at any period through the process, minus requiring to provide a cause and I decide to participate in this research.

Signature.....Date...../...../...

APPENDIX II: Focused Group Discussion Guides for Street Youth

Dear respondent,

Dear respondent, I am a student at Tangaza University College. I am researching the Influence of Peer Pressure in Alcohol Use Disorder among Street Youth in Slum Areas of Kariobangi Sub-County as portion of my requirements for a Master's Degree in Counselling Psychology. Your answers will be treated with confidentiality and privacy and preserved in the office of the researcher until the completion of the research.

Section A: Research Items

1. (a). Between negative and positive peer pressure, discuss the most common type of peer pressure that is used by the street youth.
(b). Discuss any other types of peer pressure that are practiced among street youth.
2. (a). Is there a connection between peer pressure and alcohol use disorder among street youth? If your answer is YES from the above, explain:
(b). Discuss any three factors that lead to alcohol use disorder among street youth.
3. (a). Is drinking alcohol harmful to a street youth?
(b). If your answer is YES from 3(a) above, discuss effects of alcohol use disorder among street youth.
4. Suggest the measures that can be used to reduce cases of alcohol abuse among the street youth in slum areas.

Thank You!!

APPENDIX III: Interview Guides for Street Youth

Dear interviewee,

Dear respondent, I am a student at Tangaza University College. I am researching the Influence of Peer Pressure in Alcohol Abuse among Street Youth in Slum Areas of Kariobangi Sub-County as portion of my necessities for a Master's Degree in Counselling Psychology. Entirely your answers will be preserved with confidentiality and privacy.

Section A: Research Items

1. (a). Between negative and positive peer pressure, mention the most common type of peer pressure that is used by the street youth.

(b). Mention any other types of peer pressure that is practiced among street youth.
2. (a). Is there a connection between peer pressure and alcohol use disorder among street youth?

(b). If your answer is YES from 2 (a) above, explain:

(c). Mention any three factors that lead to alcohol use disorder among street youth.
3. (a). Is drinking alcohol harmful to a street youth?

(b). If your answer is YES from 3(a) above, name effects of drinking alcohol among street youth:
4. (a). Suggest the measures that can be used to reduce cases of alcohol abuse among the street youth in slum areas.

Thank you!!

APPENDIX IV: Questionnaire for Street Youth

Dear respondent,

Dear respondent, I am a student at Tangaza University College. I am researching the Influence of Peer Pressure in Alcohol Use Disorder among Street Youth in Slum Areas of Kariobangi Sub-County as portion of my requirements for a Master's Degree in Counselling Psychology. Your answers will be treated with confidentiality and privacy and preserved in the office of the researcher until the completion of the research.

Section A: Demographic information

1. Indicate your gender: Male ☐ Female ☐
2. Indicate your age bracket: 13-18 Years ☐ 19-25 Years ☐ 26-30 Years ☐

Section B: Types of Peer Pressure among Street Youth

3. (a). From the following list, identify the most common type of peer pressure that is used by the street youth.

Negative Peer pressure ☐ Positive Peer Pressure ☐

- (b). Name other three types of peer pressure that is practiced among street youth.

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Section C: Factors Leading Alcohol Use Disorder among Street Youth

4. (a). Is there a connection between peer pressure and alcohol use disorder among street youth? YES ☐ NO ☐
- (b). If your answer is YES from the above, explain:

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(b). Identify any three factors that lead to alcohol use disorder among street youth

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Section D: Effects of Alcohol Use Disorder among Street Youth

5. (a). Is drinking alcohol harmful to a street youth?

YES ☐ NO ☐

(b). If your answer is YES from the above, identify effects of drinking alcohol among street youth:

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Section E: Measures of Minimizing Alcohol Use Disorder among Street Youth

6. Suggest any three measures that can be used to minimize cases of alcohol drinking among street youth.

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APPENDIX V: A Map of Kariobangi Sub-County



Figure 2: A Map of Kariobangi Sub-County

APPENDIX VI: Ethics Clearance Letter



TANGAZA UNIVERSITY COLLEGE

The Catholic University of Eastern Africa

OFFICE OF THE DIRECTOR OF POST-GRADUATE STUDIES

E-mail: dir.pgssr@tangaza.ac.ke

Website: www.tangaza.ac.ke

OUR Ref: DPGSR/ER/09/2021

Date: 2nd September 2021

Tesema Habtamu Masresha
Institute of Youth Studies
School of Arts and Social Sciences
Tangaza University College

Dear Tesema,

RE: ETHICS CLEARANCE FOR TESEMA HABTAMU MASRESHA, REG. NO. 19/00025

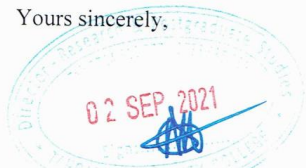
Reference is made to your letter dated 11th August 2021 requesting for ethical clearance of your research proposal to carry out a study on *"Influence of peer pressure on alcohol use disorder among street youth in slum areas of Kariobangi Sub-County, Nairobi County, Kenya"*.

I am pleased to inform you that, your research proposal has been reviewed and you can now apply for research permit. You are advised to submit your proposal to the National Commission for Science, Technology and Innovation (NACOSTI), for the issuance of a research permit and further guidance before commencing the data collection exercise for your study. You are also advised to adhere to the code of ethics of protection of human subjects during the entire process of your study.

This approval is valid for one year from 2nd September 2021.

Please, ensure that after the data analysis and final write up, you soft copy of the thesis to the Director of Post-Graduate Studies – Tangaza University College for records purposes.

Yours sincerely,



DANIEL M. KITONGA (Ph.D.)
Director, Post-Graduate Studies
Tangaza University College

CC: Dr. Fr. Hubert Pinto – Programme Leader, MA in Counselling Psychology (IYS)

APPENDIX VII: Research Permit By NACOSTI

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|---|---|
|  <p>REPUBLIC OF KENYA</p> <p>Ref No: 956173</p> |  <p>NATIONAL COMMISSION FOR SCIENCE, TECHNOLOGY & INNOVATION</p> <p>Date of Issue: 16/September/2021</p> |
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|  | |
| <p>This is to Certify that Fr. Habtamu Masresha Tesema of Tangaza University College, has been licensed to conduct research in Nairobi on the topic: INFLUENCE OF PEER PRESSURE ON ALCOHOL USE DISORDER AMONG STREET YOUTH IN KENYAN SLUM AREAS OF KARIOBANGI SUB-COUNTY, NAIROBI COUNTY, KENYA for the period ending : 16/September/2022.</p> | |
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APPENDIX VIII: Plagiarism Report

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