

Addressing the prevalence of alcohol and drug abuse among the youth in the Presbyterian churches in Kenya

Author

Lucy Mutare Mathai^{ID}

Email: mathaimu2006@gmail.com

lmathai@chuka.ac.ke

Chuka University, Kenya.

Cite this article in APA

Mathai, L. M. (2022). Addressing the prevalence of alcohol and drug abuse among the youth in the Presbyterian churches in Kenya. *Journal of humanities and social sciences*, 1(1), 21-34. <https://doi.org/10.51317/jhss.v4i1.201>



A publication of Editon
Consortium Publishing (online)

Article history

Received: 05.06.2022

Accepted: 08.08.2022

Published: 25.08.2022

Scan this QR to read the paper online



Copyright: ©2022 by the author(s).
This article is an open access article
distributed under the license of the
Creative Commons Attribution (CC BY)
and their terms and conditions.



Abstract

This article sought to assess the reasons for the prevalence of alcohol and drug abuse among the youth in the Presbyterian churches (PCEA) and to investigate the success rate of the strategies used by the PCEA in addressing alcohol and drug abuse among the youth. Three PCEA regions were selected using the multistage cluster sampling technique. A proportional sampling technique was used to get PCEA Presbytery moderators, church elders, Parish ministers and youth members. The youth who are abusing alcohol and drugs were identified through the snowball sampling technique. Purposive sampling was used to select the Youth Director. A descriptive survey research design was used to obtain qualitative data. Instruments for data collection were questionnaires, structured interview schedules and focus group discussions. Data were analyzed qualitatively and presented in summary form using frequency tables and discussions. The study established that the reasons for the prevalence of alcohol and drug abuse among the youth in the PCEA are peer influence, curiosity and easy availability of alcohol and drugs. The strategies used by PCEA in addressing alcohol and drug abuse include seminars and workshops (56%), bible studies (31%), alcoholic forums (44%), youth camps and conferences (56%), rallies and crusades (43%), guidance and counselling programmes (45%), youth engagement in community work (71%) and having a drug education desk (30%). The study recommends that the Church should reassess the strategies with the aim of making them more effective. The youth should be involved in the management of the strategies.

Key terms: Prevalence, alcohol and drug abuse, youth.

INTRODUCTION

The last two decades have recorded a rapid increase in alcohol production and consumption as well as illicit drugs. The UN body in charge of drugs and crime (2015) argues that there has been an increase globally in the overall global situation regarding the production, use and health consequences of illicit drugs. According to the United Nations Office for Drug Control and Crime Prevention (2002), alcohol and drugs destroy lives and communities, undermine sustainable human development and generate crime.

Alcohol problems, including at-risk drinking, drug abuse and dependence, are highly prevalent in many countries in Africa. In Africa, an average of 1 in 18 people suffers from drug-use disorders or drug dependence, with the youth being the most affected (United Nations, 2014). The vulnerability of Africa to drugs and crime remains a grave concern, with increasing seizures of heroin indicating the region's role as a key transit area for global drug trafficking routes (UN, 2014).

Kenya has also been experiencing a rapid increase in the production, distribution and consumption of multiple drugs of dependence. At the greatest peril are the youth who are deliberately and tactically recruited into alcohol and drug culture through uncontrolled media influences, curiosity, and peer pressure (NACADA, 2014).

A report of PCEA 21st General Assembly (2012) showed that there was an increase in alcohol and drug abuse among the youth in the Church from 8 to 12 per cent (PCEA General Assembly Report, 2012). During the PCEA annual youth conference, it was noted that alcohol and drug abuse is a major problem faced by Christian youths. It was agreed that every effort must be made to educate the youth on the dangers of alcohol and drug abuse (Annual Youth Conference Report, 2016). In response to the challenge of alcohol and drug abuse among the youth, the PCEA has initiated mitigation programmes. These include youth

conferences, seminars, workshops, guidance and counselling, retreats, education on the dangers of alcohol and drug abuse, youth camps, revival weeks and weekend challenges and Bible study, among others.

In addition, the PCEA has established a drug education desk, which in consultation with the Theological Education by Extension (TEE) department and the Presbyterian University of East Africa (PUEA), develops alcohol and drug education materials (PCEA Records, 2015). The Parish ministers, with the assistance of church elders, are directly involved in coordinating the programmes on alcohol and drug abuse among the youth in the various congregations. Despite the existence of these programmes, the problem of alcohol and drug abuse continues to persist. This study sought to assess the reasons for the prevalence of alcohol and drug abuse among the youth in the PCEA and also investigated the success rate of the strategies used by the PCEA in addressing alcohol and drug abuse among the youth.

LITERATURE REVIEW

Prevalence of Alcohol and Drug Abuse among the Youth

A study by NACADA (2012) revealed that 8 per cent of 10-14-year-olds have consumed some in their lifetime, and about 13 per cent of them have ever used other drugs such as cigarettes. The foregoing information shows that alcohol and drug abuse is on the rise in society, particularly among the youth. This study sought to assess the reasons for the prevalence of alcohol and drug abuse among the youth in the Presbyterian churches (PCEA) and investigated the success rate of the strategies used by the PCEA in addressing alcohol and drug abuse among the youth.

A study done by the National Institute on Drug Abuse (2003) indicates that minors of age 12 and 13 are already abusing drugs by age 12 or 13, which likely means that some may begin even earlier. Early abuse

includes such drugs as tobacco, alcohol, inhalants, marijuana, and psychotherapeutic drugs. If drug abuse persists into later adolescence, abusers typically become more involved with marijuana and then advance to other illegal drugs while continuing their abuse of tobacco and alcohol. The study also shows that early initiation of drug abuse is associated with greater drug involvement, whether with the same or different drugs.

The above studies focus on when the youth start abusing drugs and the types of drugs they abuse. However, the studies do not focus on why the problem of alcohol and drug abuse persists. This study investigated why alcohol and drug abuse continues to persist among the youth in the PCEA, and yet the Church has mitigating programmes. The study established that the foremost reasons for the persistence of alcohol and drug abuse among the youth in the PCEA were as a result of peer influence or social influence, curiosity or exploration and easy availability of alcohol and drugs.

According to studies by Hawkins *et al.* (1997), parenting practices have a lot of influence on early initiation into the use of alcohol and drugs by children. For example, parents who communicate and are involved with their children at ages 10 and 11 and who set clear expectations for their children's behaviour, practice good supervision and consistent discipline and minimize conflict in the family have children who, at ages 11 and 12, are more likely to see alcohol use as harmful and less likely to initiate alcohol use early. They are also less likely to misuse alcohol at ages 17 to

18. Schools adopt a variety of alternatives to address the issue of alcohol and drug abuse. This includes offering after-school programmes, incorporating life-skills training into drug education curricula, helping parents become better informed, providing counselling, identifying problem behaviours for early intervention, and promptly referring students to health care professionals for intervention. However, despite the efforts by the government, Church, schools and parents, the problem of alcohol and drug abuse persists, particularly among the youth. This study assessed the reasons for the prevalence of alcohol and drug abuse among the youth in the Presbyterian churches (PCEA) and investigated the success rate of the strategies used by the PCEA in addressing alcohol and drug abuse among the youth.

RESULTS AND FINDINGS

Reasons for the Prevalence of Alcohol and Drug Abuse among Youth in the PCEA

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

The findings of the youth respondents are presented in Table 1.

Table 1: Reasons for Prevalence of Alcohol and Drug Abuse among the youth in PCEA

Factors	Frequency	Percentage
Peer influence/social influence/social networks	58	15.0
Curiosity/experimentation/adventure/exploration	55	14.0
Lack of parental care/poor upbringing	18	5.0
Idleness/joblessness/inactive engagements	34	9.0
Frustrations	15	4.0
Boredom	23	6.0

Poor role models to emulate/family disruptions	30	8.0
Perverse social media/ media influence	29	7.0
Stress and psychological problems/depression	25	6.0
Pleasure/enjoyment/craving/relaxation	19	5.0
Show-off/prestige	12	3.0
Availability/accessibility at low prices	40	10.0
Some see it as fashionable "swag."	16	4.0
Permissiveness in society/moral decadence	8	2.0
Systemic abuse and relapse	8	2.0
Total	390	100.0

The results presented in Table 1 show factors influencing youths to alcohol and drug abuse. As indicated, the majority, 58(15%) of the youth reported that they abused alcohol because of peer influence or social influence. The results further show that alcohol abuse among the youth was a result of several other reasons that included curiosity or exploration 55(14%), lack of parental care or poor upbringing 19(5%), idleness/joblessness or inactive engagements 34(9%), and frustrations 16(4%). Other salient reasons for youth engaging in alcohol and substance abuse were low self-esteem or hopelessness 23(6%), poor role models to emulate 3(8%), perverse social media or media influence (7%), stress and psychological problems such as depression (6%), pleasure, enjoyment, craving, relaxation 19(5%), show-off or for prestige (3%), availability or accessibility of alcohol and other substances of abuse at low prices (10%), fashionable "swags" 16(4%), permissiveness in society or moral decadence 8(2%) and systemic abuse or relapse 8(2%). A detailed discussion is presented in the following sections:

Peer Influence/Social Influence/Pressure

The study further establishes that teenagers are influenced by peer pressure through; fearing of being labelled, being rejected, and loneliness, pleasing others, desire to appear grown up and not understanding how to avoid or handle a situation. Famous people whom some youths look up to portray alcohol use and abuse of drugs to be fashionable.

Youths presume this to be normal behaviour and try to fit in to be like them. Reverends Murigu, Mugendi and Ndoria (2017) support this view by asserting that most youths who associate with drug abusers end up like them. Reverends Kirima, Ndanyu and Mwirichia (2017) also reported that some youth are influenced by mass media into the habit of alcohol and drug abuse.

Hoffman et al. (2006) established that peer influence is a direct and significant predictor of adolescent substance use. Baron and Kenny (1986) further support that peer social influence is significantly associated with substance use. This study's findings, therefore, suggest that many youngsters are pulled into alcohol and drugs by their colleagues. Bandura and Walter's (1977) social learning theory of personality concurs with this fact. The argument is that behaviour is learnt over time. The high alcohol and drug abuse rates among youth indicate that addressing peer influences may be particularly important with this population. Peer influence or social influence emerged as one of the causes of alcohol and drug abuse among the youth in the PCEA.

Curiosity/Experimentation/Adventure

Notably, the findings of this study are congruent with the findings of Santrock (2001), who reported that some youth use alcohol and drugs for the purposes of satisfying curiosity. Reverends Kithinji, Ndoria and Rukenya (2017) were of the view that youth are curious to discover sensations and get unique,

profound feelings. This argument was also brought to the fore by Rev. Mwirichia and Rev. Ndumia (2017), who asserted that the youth drink alcohol and take other drugs because they desire to try new things. Sometimes they want to know what it feels like to be drunk, intoxicated, or high.

Imbosa (2002) asserts that the youth's curiosity to adventure in alcohol, among other drugs, is partly aroused by seductive advertisements on print and electronic media, which make the youth falsely believe that it is good to take drugs to satisfy their curiosity.

Lack of Parental Care/Poor Upbringing

In their study seeking to find out familial, social and individual factors contributing to risk for adolescent substance use, Whitesell et al. (2013) observed that poor upbringing of children or lack of parental care exacerbates the problem of substance abuse among youth in such families' settings. Parents using drugs and alcohol can be even more traumatic to their children than peer pressure.

When interviewed, Reverends Muriungi, Murigu and Ngere (2017) indicated that;

Parents have failed to give direction to their children. Some parents live apart from their children due to various economic and social reasons. Parents failing to guide their children, especially in cases where both parents are working, encourage the vice of alcohol and drug abuse. The parents - children relationship is crucial in shaping the children's behaviour development and overall development.

Idleness/Joblessness/Inactive Engagements

The findings of this study concur with Agrawal and Dick (2008), who found that the youth generally consume alcohol and other drugs mainly because they are idle or have no meaningful engagements. Reverends Mwangi, Kimathi, Nyaga, and Gitau (2017) supported this by saying;

In trying to keep themselves busy, idle youth often find themselves indulging in alcohol and

substance abuse. Further, this clergy reported that there are many youths in PCEA who are alcoholics. Some have resulted in alcoholism due to unemployment, idleness and general lack of engagement.

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

Frustrations of Life

Merton (2008) emphasizes that if an individual finds no avenue towards the achievement of his goals, he may be compelled to indulge in anti-social behaviour, and one way of doing that is by retreating from social participation through drug addiction. An excerpt from Rev. Kithinji and Rev. Mungai (2017) reveals that frustrations and emotional stress due to failures, sorrows of miseries of life lead the youth to drug abuse.

Boredom

Miller (2013) suggests that boredom or even fear of it motivates youngsters to engage in anti-social behaviour. In support of this, Rev. Kiriungi pointed out that: boredom is a precursor for youth engagement in alcohol and substance abuse in many communities. It is, however, more perverse in urban areas where agents of socialization are limited. Although drug abuse is considered to be a satisfying form of recreation and the community can substitute an equally thrilling but more conventional form of diversion.

Broken Homes /Family Disruptions

According to Davis (2014), children need both parents to grow up as normal law-abiding youth. The community has failed to live according to the expected moral standards. The parents and teachers expose their behaviour to the teens, which they tend to copy. This has influenced the young as they imitate the

elders in all manners. This has led to disrespectful children and unruly behaviour when children cannot be corrected. One of the clergies Rev. Mugendi (2017) had this to say in relation to broken homes in Kenya exacerbating the percentage of youngsters involved in alcohol and drug abuse;

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

Due to the disruption of family relationships and separation from social institutions (such as schools), homeless peers often become the primary social support network for homeless young adults. Homeless young adults draw upon peer relationships to fulfil multiple needs, including love, companionship and safety. These peer relationships often provide an educational function to newly homeless youth regarding street survival.

Media Influence

Media was cited as a factor influencing the youth to begin consuming alcohol and drugs. Maithya (2012) reports that: mass media, advertisement, radio, television, newspaper and the internet have promoted alcohol and drug abuse. Electronic media has continuously presented alcohol consumption and drug abuse without the seriousness it deserves. Much content on media shows, advertisements, and other forms of mass media shows young people using and enjoying substances without negative consequences. The youth have tended to imitate the advertisers and even tried to experiment with some of the adverts. The implication of this is that campaign against alcohol and drug abuse via print, and electronic media can also be an avenue to have a positive influence on the youth's avoidance of alcohol abuse. When interviewed to give views on media influence and youth use and abuse of alcohol and drugs, Rev. Ndoria (201) indicated

that most of the youth involved in drug abuse have access to the media such as music, movies, and television programmes that glorify drugs.

Stress and Psychological Problems/Depression

The study further revealed that 6% of the respondents believed that stress and psychological problems such as depression exacerbated substance abuse. Regarding stress or depression as a cause of alcohol and drug abuse among the youth, Rev. Muriungi (2017) responded in the affirmative by asserting that;

Among the common reasons for youth to abuse alcohol, among other drugs, is stress derived from daily life experiences. Adolescents that are stressed or depressed as a result of broken relationships can result to alcohol drinking". Teenagers are emotionally unstable, and they tend to think that drugs can numb any pain and make them feel better in tough situations.

This supports previous research by NACADA (2015) suggesting that those who use alcohol are more likely to abuse drugs, and this becomes a common and normative daily activity that provides not only respite from the daily stress of living but activity around which social and emotionally supportive interactions occur.

Pleasure/Enjoyment/Craving/Relaxation

Mutie and Ndambuki (1999) argue that some youth in Kenya take drugs because of the "pleasure principle". A qualitative response gotten from Rev. Ndanyu (2017) supports this by saying;

Some youth take drugs because they want to feel "high". The youth do not undergo stress, and money is not their problem. They come from well-to-do families, with video and television sets, computer games and cars at their disposal. Materially they lack nothing. They take drugs for the pleasure of it and for more fun. They want to feel good.

Prestige and Show Off

This study further established that 3.0% of the respondents felt that some youth drank alcohol and took drugs for prestige and to show off. The act of taking alcohol and drugs for prestige and show-off is supported by Muchemi (2013) in a study of drug and substance abuse among youth in the informal settlements within Nairobi. Regarding prestige and show-off being a cause of alcohol and drug abuse among the youth, Rev. Ndumia (2017) responded in the affirmative by asserting that prestige has become a strong force, motivating the youth to abuse alcohol and other substances as they intend to attract people's attention to admire them.

Availability and Accessibility

Ten per cent of the 390 youth that was surveyed indicated that availability or accessibility to alcohol and drug sources at low prices induced them to abuse alcohol and drugs. Availability of drugs has to do with questions of whether drugs can be within reach of the abusers easily. In some cases, drugs are readily available, for example, cigarettes in shops, cheap alcohol in wines and spirits shops, khat, marijuana etc. Some students are used by dealers to peddle drugs, and this increases the accessibility of drugs to adolescents. Breakdown of social structure; modern society has become more tolerant of immorality. This is reflected by the qualitative responses generated from elders Kimathi, Kithinji, Murigu, Muthomi and Mwangi (2017);

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

Fashionable "swags"

Some see it as fashionable "swags". The slang word "swag" generally means to have or do something that

is "cool". Rev. Gitau and Kirima (2017) stated that the perceived misconception that taking alcohol makes you appear cool, smooth, looking good, stylish and having lots of money to flash during a drinking spree to draw the attention of others compels many youths to abuse alcohol and drugs.

In a study of childhood and adolescent predictors of alcohol use and problems in adolescence and adulthood in the national child development study, Maggs, Patrick, and Feinstein (2008) established that many young adults begin to take and abuse alcohol because they have a false perception that it is fashionable.

Permissiveness in Society/Moral Decadence

The global drug survey report (2014) indicated that many young people below age 30 use alcohol because they are exposed to consumption at home or in other environments. This is reflected by the qualitative responses given by elders Maina, Wambugu and Gitonga (2017);

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

Acuda, Othieno, Obondo and Crome (2011) support this by arguing that children and youth start using psychoactive substances in the context of personal and environmental exposure. Furthermore, regular recreational exposure and alcohol drinking by adults in society is a strong predictor of alcohol abuse and dependency among the youth.

Systemic Abuse and Re-lapse

Hawkins, Catalano and Miller's (1992) study of risk and protective factors for other drug problems in adolescence and early adulthood found that the most common relapse trigger is self-pity, whereby addicts expect too much from other people. Self-pity is a

wasted emotion in recovery because it makes the individual powerless and unwilling to deal with the real cause of their problems. This is reflected by the qualitative responses obtained from Rev. Kaburu (2017) and Rev Maina (2017),

Expecting too much from other people is a common relapse trigger for addicts to have low expectations for themselves but high expectations for everyone else. This way of thinking is destructive because it always leads to disappointment and pain.

Success Rate of the Strategies used by PCEA to address Alcohol and Drug Abuse among the youth

This study sought to investigate the success rate of the PCEA alcohol and drug abuse mitigation strategies. These prevention Programmes work to boost protective factors and eliminate or reduce risk factors for drug use.

A Likert scale ranging from very effective =5, effective =4, Not sure =3, fairly effective = 2, and Not effective = five was used to measure Programme effectiveness on account of the measure indicated and a summary of the results is presented in Table 2.

Table 2: The Success Rate of PCEA Alcohol and Drug Abuse Mitigation Programmes

Programme	Success Rate						Mean	Rmk
	Responses Freq (%) n=842							
	VE	E	NS	FE	NE			
Seminars/Workshops/Conferences/Youth Camps/Forums	15(2)	30(4)	140(17)	469(56)	188 (21)	2.067	NE	
Bible Study	0	4(1)	195(23)	60(7)	583(69)	1.548	NE	
Rallies/Crusades/Retreats/Fellowship	10(1)	25(3)	235(28)	365(43)	207(25)	2.098	NE	
Rehabilitation	237(28)	315(37)	29(4)	261(31)	0	3.627	E	
Guidance and Counseling	35(4)	58(7)	240(29)	379(45)	130(15)	2.393	NE	
Church Work	62(7)	78(9)	145(17)	597(71)	31(4)	2.710	E	
Door-to-Door Evangelism/ Pastoral Visitation	0	54(6)	115(14)	360(43)	313(37)	1.893	NE	
Alcoholic Forum	96(11)	135(16)	220(26)	374(44)	17(2)	2.903	E	
Having a drug education desk	0	0	0	249(30)	593(70)	1.295	NE	
Overall Mean						2.282	NE	

Key: VE-Very Effective; E-Effective; NS-Not Sure; FE-Fairly Effective; NE-Not Effective; Rmk- Remark.

The study findings show that seminars/workshops/conferences/youth camps and forums (mean=2.067) were not effective, Bible Study (mean=1.548) was not effective, Rallies/Crusades/Retreats and Fellowship (mean=2.098) were not effective. Other Programmes included referral to rehabs (mean = 3.627) was

effective, guidance and counseling (mean = 2.393) was not effective, youth engagement in Church (mean = 2.710) was effective, Door-to-door evangelism/outreach Programmes (mean = 1.893) not effective, alcoholic forum (mean = 2.903) was effective and having an alcohol drug education desk (mean =1.295) was not effective. A discussion of the

effectiveness of each of these Programmes is given below. Overall, the programmes were found not to be effective (mean = 2.282).

Seminars/Workshops/Conferences/Youth Camps/Forums

The findings depict the majority, 469(56%) of the respondents reported that seminars/workshops/conferences/youth camps or forums were fairly effective as compared with 188(21%) who indicated non-effectiveness of these Programmes. The results show that the overall mean of effectiveness was 2.067. This may be construed to mean seminars/workshops/conferences/youth camps or forums were not very significant since the weighted mean of 2.067 was not even half (mean 2.50) on the Likert scale with a maximum mean value of 5.00.

Education through seminars/workshops/conferences/youth camps or forums is one of the most commonly used intervention approaches to tackle youth drinking (Anderson & Baumberg, 2006).

Bible Study

The results in Table 2 show that Bible Study was not an effective means of curbing alcohol and drug abuse, as reported by the majority 583(69%) of the respondents (mean=1.548). This was in tandem with Hodge's (2011) findings that though many youths in the Church loved the Bible study and took it seriously as a source of socializing and getting spiritual insights, it was, however, not significant as an avenue to stop youth alcohol and substance abuse.

The study established that the PCEA Bible study Programme involved a group of youth between (15-25) years which were mostly in high schools, colleges and universities. The group meets every Sunday after service. The study established that Bible study was in the form of mentorship talks and topical discussions

derived from the Bible done by the members themselves.

The researcher observed that the Bible study was different from devotional reading and prayer since Bible study was more analytical with emphasis on interpretation, especially in the contemporary world. The youth who developed this spiritual habit of Bible study was developing a Biblical worldview that would enable them to recognize the truth about the scriptural teachings with regard to alcohol and substance abuse. Reflection allows the youth to consider the significance of the truth in the light of their lives. As one youth Gitonga (2017) indicated;

Through Bible study, I have learned what is good and bad, and I am able to overcome peer pressure at University. In fact, the knowledge guards me against evils that are destroying the youth; also, I am guided in the right direction more so grounded very well to be a practical Christian and influence my generation.

The youth coordinator Rev. Githiora (2017), challenges the Bible study by saying: that some of the members of this group did not differentiate between Bible study and service; hence they do not attend the youth service.

Rallies/Crusades/Retreats/Fellowship

Holding rallies, crusades, retreats and youth fellowships were identified by the respondents as part of the PCEA Programmes aimed at provision of spiritual support for alcohol and drug addicts. Despite all of the Church leaders viewing rallies, crusades, retreats and youth fellowships as protective measures against substance abuse by offering emotional and spiritual support, positive social interactions, and ongoing commitment/follow-up, which includes long-term accountability, the study established that only 365(43%) indicated that rallies, crusades, retreats and youth fellowships were fairly effective in mitigating youth alcohol and drug abuse while 235(28%) were

unsure of the effectiveness of the Programmes to do so. Most presbyteries and congregations have initiated these Programmes for young people and older adults.

Interviewed Church leaders believed that building a sense of community and positive peer relationships through rallies, crusades, retreats and youth fellowships helped prevent substance abuse among its congregants. One moderator Rev. Kirima (2017), stated;

Our mission as a church is partly to model that love of Christ, not only to one another within the Church but to the community at large. So we try very hard to meet this through reaching people in crusades, evangelical rallies and fellowships, among others. This has helped a lot in mitigating alcohol and drug abuse.

In addition, Rev. Ngere (2017) indicated that;

We believe prayer is an extremely powerful and comforting act. We engage the youth in open prayer through planned contacts in Church missions that include crusades, rallies, retreats and fellowships and Keshas. We believe that God's word influences every area of our lives. There is a measure of protection against substance abuse in the world.

Rehabilitation

One of the most recognized and extensively used approaches to alcohol abuse intervention is the rehabilitation of those affected. The findings portray majority, 315(37%), indicated that the rehabilitation Programme was effective. In addition, 237(28%) concurred by indicating that the Programme was a very effective means to help addicts (mean=3.627). Even though this response was elicited, it was noted that PCEA does not have a rehabilitation centre, and therefore they make referrals.

Guidance and Counseling

Table 2 indicates that the majority, 379(45%) of the respondents, reported that the guidance and

counselling Programme was fairly effective, while 240(29%) were unsure of the effectiveness of this Programme. In a study of strategies for regulating alcoholism and drug abuse in Kenya's life Ministries, Oketch (2014) found that prevention programs like guidance and counselling can be helpful for the individual who experiences problematic alcohol and drug use. Typically, the counsellor offers assessment, brief counselling, and referral to more extensive care. Unfortunately, research data on the impact of guidance and counselling Programmes in reducing alcohol and drug abuse among the youth is scarce, with few studies examining substance use problems (Merrick, 2007). This study filled this gap by establishing that the Programme of guidance and counselling was fairly effective (mean=2.393).

Youth Engagement in Church/Community Work

The results show that the majority, 597(71%), reported that the Programme initiated to engage youth in church work was fairly effective. The overall aim of youth engagement in Church or community work was to achieve favourable behavioural outcomes by ensuring the youth were kept busy and prevent idleness, which is the precursor for alcohol and substance abuse. There is evidence that this Programme has not produced a convincing behavioural change in alcohol in the short term as there are problems with sustainability. A high level of attrition is thought to affect the effectiveness of this Programme. However, no evidence was found to support this strongly. One of the clergies Rev. Kirira (2017) did, mentioned during the interview that;

Many youths affected by the problem of alcohol and substance abuse were not attending Church or engaging in Church work. They choose to remain at home or go out to be with friends. This limits the effectiveness of using this approach in alcohol abuse intervention.

Youth involvement in Church work can protect against substance use by providing opportunities for pro-social activities, which themselves may promote antidrug conduct norms, and for interaction with non-deviant peers (Miller, 2013).

Door-to-Door Evangelism/Outreach/Pastoral Visitations

The results in Table 2 show that 360(43%) of the respondents find door-to-door evangelism/outreach and pastoral visitations fairly effective in curbing alcohol and substance abuse among the youth. This is congruent with the findings of Miller (2013) that outreach Programmes play a significant role in helping addicts to receive psychosocial support that facilitates their recovery. Some respondents reported that this was a serious Christian activity in their churches, in some cases involving the ministers and elders. Many of the sampled respondents reported that they were active members of home Churches in their Churches. They said that these were helpful in creating a bond of togetherness and a sense of belonging to one family amongst the members, irrespective of their tribal affiliations.

Alcoholic Forums

The results in table 2 further show that the majority, 374(44%) of the respondents, stated that alcoholic forums initiated by PCEA were fairly effective. The findings of this study support the work of Cook (2008), who established that the Church, among other alcohol and drug abuse mitigation agencies such as alcoholic anonymous, are involved in shepherding the flock of God through the provision of forums where the addicts share experiences and chat a way forward. In the Church framework, this psychosocial support is anchored in the Biblical and theological teachings.

Drug Education Desk

The results further show that the majority, 593(70%) of the respondents, indicated that the drug education desk operating only in the lay training Centre was not

effective in mitigating alcohol and drug abuse among the youth in the PCEA as compared with 249(30%) that said the Programmes was fairly effective.

The drug education desk provides information to evangelists to initiate public alcohol and drugs knowledge in all the PCEA Churches and to provide information on the impact of harmful consumption on the youth, family, and community.

CONCLUSIONS AND RECOMMENDATIONS

Conclusions: Based on the findings of this study, the reasons for the prevalence of alcohol and drug abuse among the youth in the PCEA are; peer influence, curiosity and easy availability of alcohol and drugs. Other salient reasons include: lack of parental care, idleness, lack of engagement and frustrations, low self-esteem or hopelessness, poor role models, social media influence, stress and psychological problems among others.

The success rate of the strategies used by the PCEA in addressing alcohol and drug abuse among the youth show that rehabilitation Programme in the Presbyterian churches was an effective means of helping alcohol and drug abuse addicts. Majority of the respondents reported that seminars, workshops, conferences, youth camps, alcoholic forums, guidance and counseling Programmes, rallies, crusades, retreats, youth fellowships and engaging the youth in church work were fairly effective in mitigating alcohol and drug abuse among the youth in Presbyterian churches. However, the results show that Bible study and drug education desk was not an effective means of curbing alcohol and drug abuse among the youth in Presbyterian churches.

Recommendations: The church should ensure that programmes like seminars, bible studies, youth camps and youth conferences are regularized to equip the youth with values and skills to help them say no to alcohol and drug abuse. The drug education desk needs to be financed so that it can regularize these

programmes and prepare bible study material that address alcohol and drug addiction. Parish ministers need to take an active role to minister to the needs of the youth so that they will open up and talk about issues that can lead them to take alcohol and drugs. The church in collaboration with the government can establish preventive, treatment and rehabilitation services that are affordable and within reach so that the youth can make use of such services. Parents also need to be made aware of such services. The church should lobby the government to come up with stricter laws on alcohol and drugs with severe penalties for those who supply alcohol and drugs to minors. The church in collaboration with the government and other stakeholders should initiate income generating

projects for the youth with the aim of keeping them busy and to acquire income.

There is need to include the youth in management of youth programmes in order to make them see the need to serve in church groups. They should be left to participate in the process of planning, implementation and evaluation which eventually allows them to acquire a sense of ownership. By involving the youth, the church will be moving forward to developing future leaders who will take over the management of the youth programmes. So, the aspect of bringing young people together in different programmes promotes the spirit of unity and cohesiveness in the church.

REFERENCES

- Acuda, W., Othieno, C. J., Obondo, A., & Crome, I. B. (2011). The Epidemiology of Addiction in Sub
- Agrawal, A. & Dick, D. (2008). Are There Genetic Influences on Addiction? Evidence from Family Adoption and Twin Studies. *Addiction*, 103(7), 1069–1081.
- Bandura, A. (1977). Social learning theory of aggression. *Journal of communication*, 28(3), 12-29.
- Baron, R., Kenny, D. (1986). The Moderator-Mediator Distinction in Social Psychological Research: Conceptual, Strategic, and Statistical Considerations. *Journal of Personality and Social Psychology*, 51, 1173–1182.
- Cook, C. (2008). *Spirituality, Theology & Mental health: Multidisciplinary Perspective*. SCM Press.
- Davis, M. T. (2014). Religious and Non-Religious Components in Substance Abuse Treatment: A Comparative Analysis of Faith-Based and Secular Interventions. *Journal of Social Work*, 14(3), 243-259.
- Gitau, P. (2017). Interviewed on 8th December 2017 at Nairobi.
- Githiora, S. (2017). Interviewed on October 11 2017, in Nairobi.
- Gitonga, J. (2017). Interviewed on October 22, October 22 2017, at Chogoria.
- Hawkins, J. D., Catalano, R. F. & Miller, J. Y. (1992). Risk and protective factors for alcohol and other drug problems in adolescence and early adulthood: implications for substance abuse prevention. *Psychological Bulletin*, 112(1), 64.
- Hawkins, J., Graham, J. & Catalano, R. (1997). Exploring the Effects of Age of Alcohol Use Initiation and Psychosocial Risk Factors on Subsequent Alcohol Misuse. *Journal of Studies on alcohol*, 58(3), 280-290.
- Hodge, D. R. (2011). Alcohol Treatment and Cognitive-Behavioral Therapy: Enhancing Effectiveness by incorporating \ Spirituality and Religion. *Social Work*, 56(1), 2131.
- Hoffman, B. R., Sussman, S., Unger, J. B. & Valente, T. W. (2006). Peer Influences on Adolescent Cigarette Smoking: A Theoretical Review of the Literature. *Substance Use and Misuse*, 41, 103-155.
- Imbosa, M. (2002). *An Investigation into Strategies Used in Addressing Drug Abuse Problems: A Case Study of Nairobi Provincial Boys' Secondary Schools*. Research Project Report: Kenyatta University.
- Kaburu, D. (2017). Interviewed on 12th October 2017 at Nanyuki.
- Kathuri, N. & Pals, D. (1993). *Introduction to Educational Research*. Egerton University, Educational Media Centre.

- Kimathi, M. (2017). Interviewed on 20th November 2017 at Chogoria.
- Kirima, P. (2017). Interviewed on 7th December 2017 at Nairobi.
- Kithinji, H. (2017). Interviewed on 12th November 2017 at Meru.
- Maggs, J. L., Patrick, M. E. & Feinstein, L. (2008). Childhood and Adolescent Predictors of Alcohol Use and Problems in Adolescence and Adulthood in the National Child Development Study. *Journal of Addiction*, 103, 7-22.
- Maina, P. (2017). Interviewed on 26th November 2017 at Nyeri.
- Maithya, R. (2012). *Drug Abuse in Secondary Schools in Kenya: Developing a Programme for Prevention and Intervention*. LAP Lambert Academic Publishing.
- Merrick, J., & Merrick, E. (2007). Equal Treatment: Closing the Gap. A Formal Investigation into Physical Health Inequalities Experienced by People with Learning Disabilities and/or Mental Health Problems. *Journal of Policy and Practice in Intellectual Disabilities*, 4(1), 73-73.
- Merton, G. B. (2008). From Safe Sanctuaries to Strong Communities: The Role of Communities of Faith in Child Protection. *Family Community Health*, 31, 173-185.
- Miller, M. B. (2013). Personalized Feedback Interventions for College Alcohol misuse: An update of Walters, B. & Bandura,
- Muchemi, R. (2013). *Drug and Substance Abuse among Youth in the Informal Settlements within Nairobi*. Paper Presented at NACADA Conference, Kenya, 2013.
- Muchemi, R. (2013). *Drug and Substance Abuse among Youth in the Informal Settlements within Nairobi*. Paper Presented at NACADA Conference, Kenya, 2013.
- Mungai, K. (2017). Interviewed on 18th November 2017 at Meru.
- Murigu, S. (2017). Interviewed on 11th October 2017 at Chogoria.
- Muriungi, E. (2017). Interviewed on 9th November 2017 at Nanyuki.
- Muthomi, A. (2017). Interviewed on 4th November 2017 at Chuka.
- Mwangi C. M. (2015). *Challenges of Ministering to the Youth: A Case Study of Presbyterian Church of East Africa Langata Parish, Nairobi County*. A Master of Arts Thesis in Religious Studies, University of Nairobi, Kenya.
- Mwangi, D. (2017). Interviewed on 10th December 2017 at Nairobi.
- Mwangi, D. (2017). Interviewed on December 10 2017, in Nairobi.
- Mwangi, N. (2017). Interviewed on 4th December 2017 at Meru.
- Mwangi, N. (2017). Interviewed on December 4 2017, at Meru.
- Mwirichia, J. (2017). Interviewed on 9th December 2017 at Nairobi.
- Mwirichia, J. (2017). Interviewed on December 9 2017, in Nairobi.
- NACADA. (2012). *Rapid Assessment of Drug and Substance Situation in Kenya*. NACADA.
- NACADA. (2015). *Summary Report of Morbidity and Mortality Caused by Alcohol Consumption in Various Parts of the Country as of May 11 2014*. NACADA.
- National Institute on Drug Abuse (NIDA). (2003). *Preventing Drug Abuse among Children and Adolescents*. NIH Publishers.
- Ndanyu, C. (2017). Interviewed on November 12th 2017 at Nanyuki.
- Ndanyu, C. (2017). Interviewed on November 12th November 12th 2017 at Nanyuki.
- Ndoria, S. (2017). Interviewed on November 10th 2017 at Nyeri.
- Ndoria, S. (2017). Interviewed on November 10th November 10th 2017, at Nyeri.
- Ndumia, C. (2017). Interviewed on November 17 2017, at Nyeri.

- Ngere, H. (2017). Interviewed on 7th December 2017 at Nairobi.
- Ngere, H. (2017). Interviewed on December 7 2017, in Nairobi.
- Nyaga, G. (2017). Interviewed on 15th December 2017 at Nyeri.
- Oketch, S. (2014). *Understanding and Treating Drug Abuse*. Queenex Holdings Ltd.
- PCEA General Assembly Report. (2012). *Proceedings of the Twentieth General Assembly*. Jitegemea Press.
- PCEA Records. (2015). *Report on the Implementation of Alcohol and Drug Abuse Programmes in PCEA*. Jitegemea Press.
- PCEA. (2012). *Report on the Implementation of Alcohol and Drug Abuse Programmes in PCEA*. Jitegemea Press.
- PCEA. (2016). Annual Youth Conference Report. *PCEA Annual youth Conference Proceedings Book*. Jitegemea Press.
- Rukenya, L. (2017). Interviewed on 8th December 2017 at Nairobi. Saharan Africa: A Synthesis of Reports, Reviews and Original Articles. *American Journal of Addiction*, 20, 87-99.
- Santrock, J. W. (2001). *Educational Psychology*. McGraw-Hill Companies, Inc.
- The Global Drug Survey Report. (2014). *Global Status Report on Alcohol and Health*. World Health Organization.
- UNDCP. (2002). *United Nations Office for Drug Control and Crime Prevention*. United Nations.
- UNODC. (2015). *World Drug Report 2015*. New York: United Nations.
- Wachira, N. (2017). Interviewed on December 15 2017, at Nyeri.
- Wambugu, P. (2017). Interviewed on October 26 2017, at Meru.
- Waruta, D., & Kinoti, H. (2000). *Pastoral Care in African Christianity*. Nairobi: Acton Publishers.
- White, W., & Laudet, A. (2006). Spirituality, Science and Addiction Counseling. *Counselor Magazine*, 7(1), 56-59.
- Whitesell, M., Bacand, A., Peel, J., & Brown, M. (2013). Familial, Social and Individual Factors Contributing to Risk for Adolescent Substance Use. *Journal of Addiction*, 13(2), 1-9.