

**Causes of Drug Abuse on the Behavior of Pupils of Selected  
Primary Schools in Kabare Education Zone Kirinyaga, Kenya**

**BY**

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**Research Report Submitted in Partial Fulfillment of the  
Requirements for the award of the Bachelors Degree of  
Education in Early Childhood and Primary Education  
Of Kampala International University**

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### DECLARATION

I **Rosemary Wanjiku BED/13202/61/DF** do hereby declare that this study research on Causes of Drug Abuse on the Behavior of Pupis of selected Primary Schools in Kabare Education Zone, Kirinyaga, Kenya is my own original work and to the best of my knowledge has never been submitted to any learning institution for any award. I further declare that, all materials cited in this paper which are not my own, have been fully acknowledged.



Date: 29<sup>TH</sup> AUG 2008

**Rosemary Wanjiku**

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## **APPROVAL**

This is to satisfy that this research study has been submitted in partial fulfillment of the requirements for the Degree in Bachelor of Education in Early Childhood and Primary Education with my approval as University Supervisor.

Sign.....

Date.....

**Miss Onego Roseline**

## **DEDICATION**

This project is dedicated to my dear husband Richard Wanjobi and my two sons George and Victor, who have tirelessly given me moral support. May

## ACKNOWLEDGEMENTS

I sincerely wish to appreciate the help of those without whom this work would have been true.

First and foremost, I express my indebtedness and deep sense of gratitude to my research supervisor Miss Roseline Onego, for her untiring help, wise counsel, patience, innumerable suggestions and inspiring guidance throughout the period of study despite her vast array of responsibilities.

I also want to thank my husband Mr. Richard Wanjobi for the love, care, concern and endless help that he offered to me throughout my study.

Special thanks goes to Kiangueni Primary school staff who made it easy for me by relieving me some of the school work.

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## **ABSTRACT**

Many pupils have dropped out of school in the past in Kabare Education Zone. The researcher felt that one of the factors causing the dropout is drug abuse. This because the children are seen abusing tobacco and alcohol immediately they leave school. The research was about causes of drug abuse on the behaviour of pupils of selected primary schools in Kabare Education zone.

The researcher used survey methods to reach out the pupils in the zone. The instrument used was questionnaires. The methods used in sampling the respondents included purposive sampling (for head teachers), lottery method (for teachers) and stratified sampling for parents and learners. The raw data was analyzed qualitatively.

The study revealed that drugs were commonly abused in the zone. The most prevalent drug was tobacco and alcohol. The causes of drug abuse were found out as frustrations and anger and the inability of parents to meet their children's developmental needs. The recommendations from the study aimed at improving schools through guidance and counseling of children from schools so as to improve on their morality and self esteem and to create in the sense of values and morals.

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# **CHAPTER 1**

## **INTRODUCTION**

### **1.0 Introduction**

Drug abuse is one of the emerging issues in our country today. It has created concern in many forums and the rate at which it is spreading is alarming.

Primary school pupils are now getting involved in drug abuse more often than not. We have seen them use them. This has made curriculum developers infuse the topic of drugs in almost every subject in the primary school syllabus. Drug abuse is a sensitive issue that requires to be handled carefully. Otherwise the truth about the matter may never be known.

### **1.1 Background Information**

The media – radio, television, newspapers, magazines and journals among others have highlighted the plight of those affected by the vice of drug abuse more often than ever before. The vice is affecting every one in the community, including the tender aged primary school children. Many educators, psychologists and law enforcers have been in one way or another been faced with this widespread vice in our dynamic society. Much has been said about drug abuse which is common among members of public and school going children. The Government of Kenya has formed the National Campaign against drug abuse (NACADA) commission to look into the matter. Its prime objective is to disentangle our youth from this fatal malpractice.

### **1.2 Statement of the Problem**

Among the many schools the researcher has taught in, pupils have continued to drop out of school at an alarming rate. Among the drop outs are pupils of very tender age, who, immediately after leaving the schools are seen taking drugs such as alcohol and tobacco.

This shows that they acquired the habit while they were still in school, despite the warning, discipline and advice from teachers and parents. Additionally, over the years there has been a significant academic performance decline, which hypothetically was linked to drug abuse by pupils. Worse still there have been cases of indiscipline in schools. Pupils report to school whenever they feel and fail to observe the timetable. They have proved rude and arrogant to their teachers and even take up fight with teachers in

schools. The researcher therefore examined the causes of drug abuse among school pupils and how it can be curbed effectively in order to rectify pupils' behaviour.

### **1.3 Purpose of the Study**

The purpose of this study was to determine the causes of drug abuse on the behaviour of pupils in selected primary schools in Kabare Education zone of Kirinyaga District.

### **1.4 Objectives of the Study**

To determine the correlation between drug abuse and the behaviour of Primary school pupils in Kabare Education Zone.

#### **Specific**

- (i) To find out the drugs commonly abused by primary schools pupils
- (ii) To investigate the causes of drug abuse among primary school pupils
- (iii) To determine if there is significant relationship between drug abuse and behaviour of primary school pupils.
- (iv) To suggest best intervention strategies that can solve the problem.

### **1.5 Research Questions**

In the course of the study the researcher was guided by the following questions:

- (i) Which drugs are commonly taken by primary school pupils?
- (ii) What are the causes of drug abuse among primary school pupils?
- (iii) Is there any significant relationship between rug abuse and pupils' behaviour?
- (iv) What can be done to deter them from taking drugs?

### **1.6 Scope of the Study**

The research was conducted in Kabare Education Zone, Kirinyaga district, Kenya. The researcher chose six schools in the zone which are along the murram road from Kerugoya to Kimunye. These schools are Gakoigo, Gatunguru, Kiang'ombe, Ngungu, Ithare and Kabare boarding Primary schools. The schools chosen were nears one another and hence made it easier to distribute the questionnaires.

### **1.7 Significance of the Study**

The researcher hopes that the study will help in establishing the drugs that are commonly abused by school pupils and how they get access to them. The researcher targets parents, Education sector and the government as “end-users” of the research findings.

The results will guide the government in enforcing laws regarding drugs so that young children are not victims. The education sector will benefit from the research results because the results will provoke training of teachers on drug and drug abuse. Parents will understand the cause of drug abuse among their children; the behaviours associated with drug taking and thus will see the need of supporting teachers and government in curbing drug abuse especially from literature review.

On accessing the results of the research to the community, school learners or interested groups will benefit positively and see the need of curbing this malpractice. Pupils who would otherwise have been wasted by drugs will be sustained and molded into responsible and resourceful citizens. The research will help in resolving and making policies to be suggested to curriculum developers for vetting and implementation.

### **1.8 Limitation of the Study**

The researcher was required to meet respondents during school time, when she was supposed to be working in her own station. This made her to share the day’s prompting her to work in a hurry. The researcher needed money for transport and production of questionnaires. Other miscellaneous expenses were telephone, pens writing pads and binding. The researcher spent a lot of time in one station as some teachers only allowed her dispatch questionnaires during break time. This delayed translated into a very strenuous exercise to the researcher.

The research is also limited by scope yet there are many primary schools that one being affected by the same problem. In the same way, there are also other problems that need to be investigated into.

## **CHAPTER 2**

### **LITERATURE REVIEW**

#### **2.0 Introduction**

Ives (2002) defined a drug as a substance which changes the way we think or feel. He further states that drug abuse is the use of such substances for other uses other than medical.

Allan and Bacan (2002) defines drug abuse as the inappropriate use of any substance that alters the feelings or state of consciousness. School children in our society have been reported by media as using very many substances that affect their feelings and consciousness. This has been in recent past, caused out pupils to have special educational needs (SEN). Some of the problems associated with substance use are General learning difficulties (GLD), specific learning difficulties (SLD's) and emotional and behavioural Difficulties (EBD's).

In traditional African society, children were not exposed to substances, especially beer. This was for grown ups only as opposed to the today's society where there are many outlets for the beer. In an inclusive setting, children are seen to use the drugs with the Community turning a deaf ear to the malpractice.

Kaguthi (2004) points out that the use of alcohol, Bhang and Miraa (Khat) has indigenous roots and that the three substances have been widely used in the indigenous society, there however exists no evidence, that substance abuse has been part of indigenous heritage. Indeed, the indigenous society for the most part regarded drunkenness as a disgrace.

#### **Global Study**

The wide use of drug abuse is one of, if not the most pressing global concern of our time. Drug abusers globally exceed 60% of the global population. According to Kuala Lumpor (Dec 8, 2006) statistics show women are less susceptible to drug abuse than their male counterparts. Deputy Internal Security Minister Datuk, Mohammed Jahari Bararum told the Dewan Negara (senate) that between 1988 and Oct 2006, only 5586 female drug addicts were detected in Malaysia. Scully R.E, Mark E.J., M.C Neely W.F. etal (2001) are smokers in USA. Three thousand adolescents begin smoking each day. Almost all

teenagers in the United States of America use alcohol. This is a clear indication that almost everyone in the world has been involved in drug abuse in one way or the other.

### **Regional Study**

A Kenyan weekly magazine (2006) had this to say “Even though Kenyans are actually demanding the review of the country’s constitution, there are fears that the general public is supposed to benefit from the changes may not live to enjoy them. This is due to high incidences of the drug abuse among the country’s youth with the rate at which the youth are imbibing narcotic drugs. There will be no country to speak of how to enjoy these reforms,” says W.A. Kugo of the Presbyterian church of East Africa, P.C.E.A. The abuse is most prevalent in Primary and Secondary school students in Nairobi and Central Province. A record survey conducted in the Province by the Provincial administration reveals that over 60% of the boys in Primary schools have abused drugs by the time they get to secondary schools. Most of the drugs says Rev. Kugo, “ have the effect of making the user rather very lethargic, or very sadistic and violent, among other reactions,” The common drugs that are being used are alcohol, tobacco, Bhang, Miraa, Marijuana and inhalants. The youth abuse imported drugs such as amphetamines, heroin, cocaine and madrax as well as tranquilizers, cough mixture and indigenous alcoholic drinks.

And as a result of what has been termed as drug related indiscipline in three districts of central province – Nyeri, Kirinyaga and Kiambu violence of students has forced the closure of more than 30 schools between June and July. So far the worst case of violence was that of Nyeri High School where dugged students purportedly irked by the power and privilege accorded 2 school prefects, doused the latter’s cubicles with petrol and set it ablaze as four students slept. All four died after having sustained burns on over 70% of their bodies. While talking on the schools issue the principal Mr. Patrick Mungai said “It has been established that the residence of the nearby villages have been supplying the students with drugs particularly marijuana probably grown in the nearby Mt Kenya four of the schools in the province by the deputy principal was shocked to learn that students in one school in Kirinyaga grew Marijuana around the school flower beds and in Agricultural and young farmers club plots. Most of the non-drug users have been cowed to silence by addicts, who threaten them with violence. In one incident at Karangari High School in Kiambu district students set their new constructed multi-million shillings

dormitory complex on fire, supposedly as a show of solidarity with their colleague suspended over drug use.

What has made it easy for the students in the province to have access to drugs is the proximity to major urban areas like the capital city Nairobi and also that the fact that it is one of the most densely populated area in the country. The violence results from the family and economic pressure as opportunities and other areas of self advancement diminish. It is factors like these that have conspired to produce a large number of frustrated young people in Education Institutes with non-effective counseling facilities. Wilson John, a professional counselor agrees and attributes this to the terms of sacrifice service that the teacher works under. He says, "One cannot expect a poorly paid teacher to work effectively". At the same time he adds, "The teacher is a product of the society, a society fraught with the misuse of drugs. It is very possible that some teachers particularly in the younger age group and more so, from urban settings are drug users or peddlers. "The spectra of violence have also raised questions of how effective the current mode of counseling in school is. There is an argument that is inadequate and some counselors are at cross-roads on what to do. One teacher counselor says: "These children are violent and rebellious. A teacher may be risking both his life and that of his family when trying to rectify the situation. "Rev. Kugo has been working to sensitize stakeholders in the Education sector on the issue of drug abuse.

In July he held two seminars, one in Nyeri and another in Kiambu whose mission, he says, "Is to point out to parents, teachers, school managers and the civil administration that drug use is a reality in schools and suggest ways of curbing the problem.

## **2.1 Types of Drugs Commonly Abused by school pupils**

The current lifestyle in the world has exposed our children to very many substances. Parents are either too busy or ignorant to oversee what their children do.

According to Ives (2002) alcohol and volatile substances such as gases, glue and aerosols are used by young people to get intoxicated. These substances are all in our homes, schools and work places.

Kaguthi (2004) state that, there is a growing concern in the country over the growing numbers of people both male and female and both student and non student using increasingly diverse types of substances that the law permits or prohibits. The substances the law permits are miraa, some medicine used without curative need, alcohol and tobacco. The last two are the leading substance of abuse in the country.

Quite often, radios and televisions broadcast that trafficking is rampant today. This is an indication that there is ready market for these drugs. It shows that our people are using other illegal drugs apart from the ones listed above.

Coombs (2002) notes that children experiment with alcohol and tobacco and to some extent, in developed countries “Marijuana”. The society assumes that tobacco and alcohol are less dangerous than their illegal counterparts. The society views alcohol, the drug most widely used by young people, as not dangerous. It is legal, accessible and relatively cheap. For example, for people at any age, alcohol is a socially approved way to get high and suppress anxieties.

“The youth abuse a wide variety of substances, alcohol, tobacco, bhang, miraa and inhalants, but they are increasingly abusing imported substances such as amphetamines, heroin, cocaine and madrax – as well as tranquilizers, cough mixtures and indigenous alcoholic drinks.” Kaguthi (2004) pg 26-27.

The researcher feels that alcohol may only be acceptable for use by everyone in other cultures to save the African. However, the influence from west is eroding our norms at an alarming rate.

## **2.2. Ages at Which Pupils start abusing drugs**

Our children are curious and adventurous. If the truth about when they start using substances is unearthed, parents, teachers and other responsible stake holders would be startled. There are many reasons as to why our children engage in substances used when they are still very young.

Kaguthi (2004) notes that children experiment with alcohol which is no longer restricted to senior age-groups or to special occasions. Instead, alcohol is readily available to adults



and to youth between age 10-24 years. That is children, teenagers and young adults. He further states that not only does the youth consume alcohol but also use the drugs to the extent that a substance poses dangers to the health of the youth, and ultimately to the well being of the nation.

According to prevention pipe line (1996) cited in Coombs (2002), about 4.5 million teenagers ages 12-17 years are smokers in the United States of America. Three thousand adolescents beg in smoking each day. Coombs (2002) continues to say that alcohol is used by almost all teenagers in the United States of America.

### **2.3 Causes of Drug Abuse among Pupils**

Those who abuse substances give varied reasons as to why they do so. Several studies (coombs, 2002, Insel & Roth (2000), Kaguthi (2004), revealed that people abuse drugs for as many reasons as their number. For instance Kaguthi (2004) reveals that during adolescence, young people have a number of developmental needs – independence from parents, adventure and peer approval among others. Sadly many parents do not realize how strong these needs are and thus do nothing to help their kids meet them. As a result, some teens turn to drugs.

The survey notes that peer pressure influences the youth to use substance under false impression such that some substances stimulate appetite for food, increase strength to perform tasks, give wisdom or instill courage to commit crime. The easy availability of most substances appear on top of the cause of prevalence of substance use and abuse among Kenya's youth. Ingredients for making alcoholic drinks and tobacco products are grown in the community.

Kaguthi (2004) emphasizes that greatest initial influences that make a young person experiment with substances that make a young person experiment with substances are the person, the family and peer groups. A family or community in which adults drink alcohol, smoke bhang or chew miraa can influence youth to use the substances, which they may also abuse in the long run.

Ives (2002) explains that people who inhale gases and glue do so for many reasons. The primary objective however, is to get intoxicated.

Invest (2002, pg 4) states ‘..... Alcohol might reduce shyness, for example. Drug use may help users feel part of a group, it may help them feel what they perceive as ‘more normal’. This according to the researcher shows that those who use drugs have immediate feelings. They may laugh, sing, dance, speak or fight and so forth according to the leading trail of their character. Some may, find that drug use relieves some of their problems. Nevertheless, the researcher hopes that by the end of the research, she would confirm the various causes of drug abuse among pupils.

#### **2.4 Drug Abuse Indicators among Pupils**

Every time an adult is asked whether the youth under his or her care take drugs, he/she answers with doubt and mostly says “No. however, when interrogation is done more deliberately, the outcome is startling.

There are many tales – tale signs in our youth today that depict use and abuse of drugs. The indicators vary from region to region and may depend on the type of drug used.

Ives (2002) outlines some of the most indicators as follows:

- (a) The person may be irritable or aggressive
- (b) Loss of appetite
- (c) Loss of interest in hobbies
- (d) Getting a different group of friends
- (e) Unusual drowsiness or extreme tiredness.
- (f) Furtive and secretive behaviour, evidence of telling lies
- (g) Unexplained loss of belongings
- (h) Unexplained requests for money
- (i) Unusual smells, stains or marks on body or cloths
- (j) Intoxicated behaviour
- (k) Sudden changes of mood

The researcher notes that most of the symptoms are indicators of use of alcohol, tobacco, miraa and inhalants. These indicators have been noted in our children but have not been followed keenly. The researcher expects to get information on the most common symptoms, regarding frequency of occurrence.

## 2.5 Intervention Strategies

The intervention strategies in this issue are meant to dissuade those who haven't started using drugs from starting to use them, and helping those who have already started to stop. The strategies may involve the victim, the teacher, the parents, medics, the psychiatrist and other relevant stakeholders in the community.

Many psychiatrists and psychologists have come up with wonderful strategies in the recent past. For example, the Schools' Curriculum and Assessment Authority (SCAA) (1995) circular cited in Ives (2002) said that children with special needs, when they are taking medication will need to distinguish between appropriate and inappropriate drugs. The circular also gives some guidance, for teaching pupils with learning difficulties, whom it said "... May need help than others in understanding what sorts of behaviour are not acceptable and desirable in resisting peer pressure and developing confidence and skills to resist drugs. (SCAA (1995) par 13.

The researcher wishes to clarify that this shows the possibility of children with learning difficulties engaging in substance abuse. It is the responsibility of the teacher to help them as suggested in the circular.

The most essential aim is to give all pupils the facts, emphasize essential aim is to give all pupils the facts, emphasize benefits of a healthy life style, and give all young people knowledge and skills to make informed and responsible choices now and later in life. SCAA (1995) cited in Ives (2002) recommended that teachers should be trained in the field of tackling drugs and drug abuse and should be supported by parents. The teacher should also apply external inputs such as visiting speakers (peer educators and external speakers) where their contribution should be followed up through discussion and reflection with teacher afterwards. The researcher notes that drug education and prevention is best delivered by building cumulatively on knowledge, attitudes and skills. Teachers should ascertain what their pupils already know. All schools should have policies based on drug education and drug related incidents, which have been agreed upon by staff, parents and care-givers.



A close look at these suggestions shows that counseling and support are given more weight. It is therefore notable that our pupils will not be helped by policies as much as psychological help from qualified personnel.

## **2.6 Conclusion**

This review has showed that many educators have had a chance to look into the issue of drug abuse. The books and circulars reviewed were got from the west and from Kenya. The review has provided the researcher with a cross-section of various aspects in the wide range of drug abuse.

The information gained here in is an eye-opener to the direction of more research on drug abuse.

## **CHAPTER 3**

### **RESEARCH METHODOLOGY**

#### **3.0 Introduction**

The researcher used the most convenient approach and strategy to reach a broad cross-section of the subjects in the research population. This contributed positively to efficiency and speed.

#### **3.1 Research**

The researcher used the survey design as this exposed her to many respondents. The advantage of this method is that the more respondents the more accurate the generalization made. The design gave the researcher an opportunity to select samples of individuals from known populations and the researcher was able to employ questionnaire to collect data. Out of the 21 schools in Kabare Zone, the researcher was able to present her questionnaires to 6 schools.

#### **3.2 Sampling Procedure**

After considering the advantages and disadvantages of different sampling procedures the researcher opts to use convenience sampling. This sampling involved choosing the nearest and most convenient person to act as a respondent. This method did not consume a lot of time and it was easy for the researcher.

#### **3.3 Sample Population**

The sample selected by the researcher was six schools which is to be 30% of the population in the zone. The researcher feels that the sampled population in the zone was adequate representation of the zone. The sample included 450 pupils from class six to eight, in the six schools.

#### **3.4 Instruments**

The researcher asked questionnaires as the targeted group was literate and hence able to supply required information through them. The pupils in the sampled population were able to answer written questions. The researcher took all the questionnaires to the sampled population and gave them out with permission from head teacher of every school. The researcher explained the importance of the questionnaire to the pupils. The questionnaires were independently and to be collected later by the researcher.

Confidentiality was assured and so the best information was got since there was no fear of discrimination. The Respondents will not be required to write down their names in the questionnaires.

### **3.5 Data Collection Procedures**

The data was collected using questionnaires. The researcher gave out questionnaires to selected individuals. The respondents were asked to answer the questions by ticking appropriately in boxes provided or filling in blanks in case of open ended questions.

The questionnaires were filled in the absence of the researcher and collected later.

### **3.6 Data Analysis**

The study was carried out by use of questionnaires which was hand-delivered to pupils. A total of 450 pupils given questionnaires, the questionnaires were returned filled appropriately. Given that the data collected was qualitative in nature. Descriptive statistics was used to analyze the data. It analyzed using tables, graphs and percentages.

## CHAPTER 4

### RESULTS, FINDINGS AND DISCUSSIONS

#### 4.0 Introduction

The study was carried out by the use of questionnaires which were hand delivered to the pupils. A total of 450 pupils were given the questionnaires. The questionnaires given out were all returned and filled appropriately.

#### 4.1 Data Tabulations

The researcher used tables, graphs and percentages to analyze the data.

**Table 1:** Drug Abused by Primary school pupils in Kabare Zone, Kenya

TYPE OF DRUG	FREQUENCY	PERCENTAGE
Tobacco	27	6
Alcohol	14	3
Miraa	4	1
Bhang	2	0.5
Cocaine	1	0.1
Heroin	0	0
Mandrax	0	0
None	402	89.4
<b>TOTAL</b>	<b>450</b>	<b>100</b>

**Source:** Field work data

Out of the 450 pupils in 6 schools 27 of them use tobacco, 14 use alcohol, 4 use miraa, 2 sniff glue and 1 use bhang. Other drugs such as cocaine heroine and mandrax are not used by any child in the zone.

The commonly abused is tobacco by about 6% of the sampled out population. It is then followed by alcohol with 3%, miraa 1%, inhalants 0.5% and bhang 0.1%. This means that the pupils are using the substances that are accessed. By the look of it, the narcotics such as heroine and mandrax are not used. This could be due to inaccessibility.

Tobacco and alcohol are all in our homes, schools and work places. The law permits the use of tobacco and alcohol and hence children in adolescent stage experiment with them. The society assumes that tobacco and alcohol are less dangerous, legal, accessible and relatively cheap and therefore can be used by people at any age.

**Table 2:** Ages at Which School Children Start Abusing Drugs

CLASS	APPROXIMATE AGES	FREQUENCY	PERCENTAAGES
4	9-10	0	0
5	11-12	1	2
6	12-13	8	17
7	13-14	16	33
8	14-15	23	48

**Source:** Field Work Data

The table shows that most of the pupils who abuse drugs start doing it when they are in classes 7 and 8. Those who abuse drugs while in classes 5 and 6 constitute 19% as



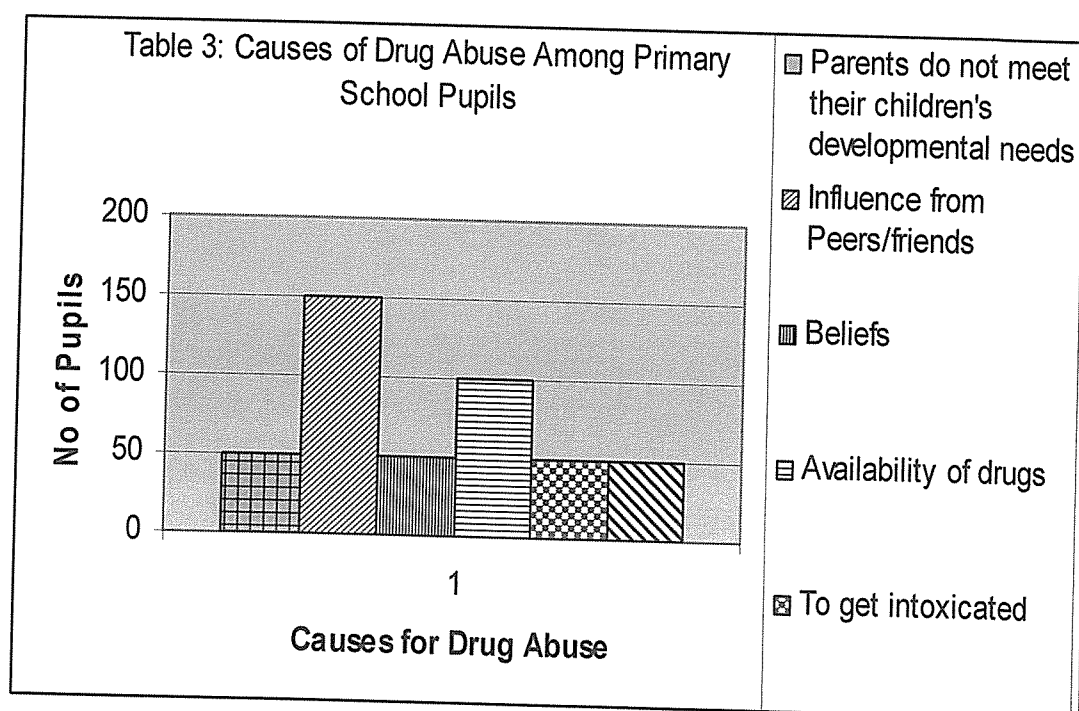
compared to those in classes 5 and 6 constitute 19% as compared to those in classes 7 and 8 who constitute 81%.

The pupils in classes 7 and 8 are aged 13-15 years. This is the onset of adolescence. But we need to note that out of 450 pupils in the zone, only 48 pupils use drugs.

During adolescents the pupils are curious and adventurous, they experiment with substances like alcohol, tobacco and even miraa which are no longer restricted to senior age groups or to special occasions.

Alcohol is readily available to adults and to youths aged 10-24 years. That is children teenagers and youth adults.

**Table 3: Causes of Drug Abuse Among Primary School Pupils**



Source: Field Word Data

Out of 450 pupils who filled the questionnaires a hundred and fifty said that children abuse drugs due to influence from friends. Fifty of them said it is because their parents do not meet their needs. A hundred said it is because drugs are readily available to them. The other reason was to get intoxicated given by fifty pupils. Fifty said it was because they were taught about drugs and so they wanted to find out if what was in books was true.

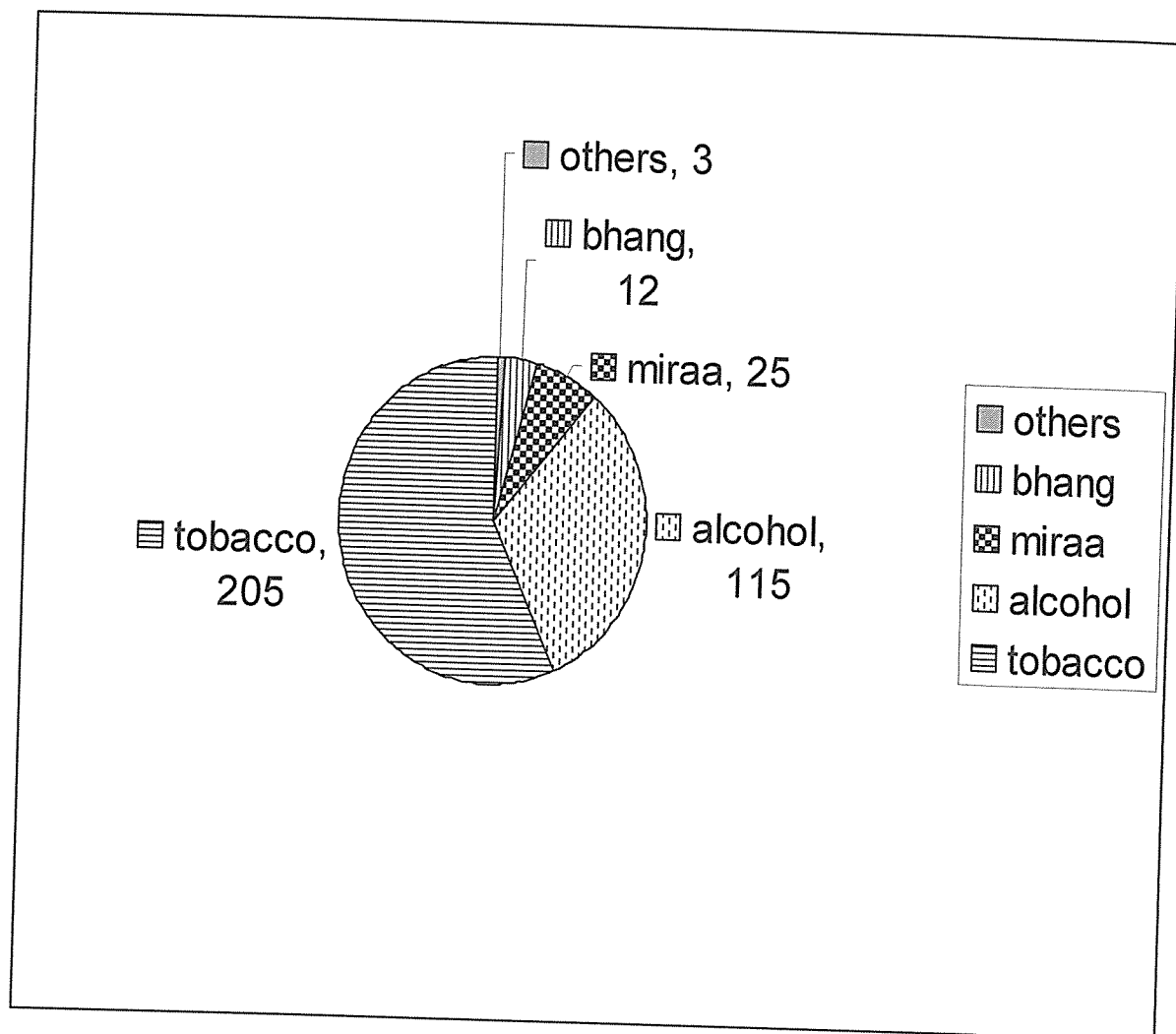
Young people have a number of developmental needs during adolescence and parents are not able to meet these needs that are independence from parents, adventure and peer approval among others. Many parents do not realize how strong these needs are and thus do nothing to help their kids meet them. As a result some teens turn to drugs.

Peer pressure influences the youth to use the substance. The easy availability of most substances appears to top the causes of prevalence.

Pupils inhale gases and glue to get intoxicated. Others take alcohol to reduce shyness for example drug abuse may help users feel part of a group. It may help them feel what they perceive as "more normal".

Those who use drugs have immediate feelings. They may laugh, sing, dance, speak or fight according to the leading trail of their character.

**Table 4: Drugs Commonly Abused by Community Members**



**Source:** Field Work Data

The teachers' questionnaires showed that tobacco is the drug mostly used by community members, followed by alcohol and miraa respectively.

When this prevalence is compared with the 115° s, similar result is observed.

Kabare zone is in the rural areas of Kirinyaga District where community members live below the poverty line. The community members abuse drugs such as alcohol tobacco, miraa, bhang and others, and as a result they end up running away from responsibilities. The children are left in the hands of their mothers who are not able to meet their needs fully.

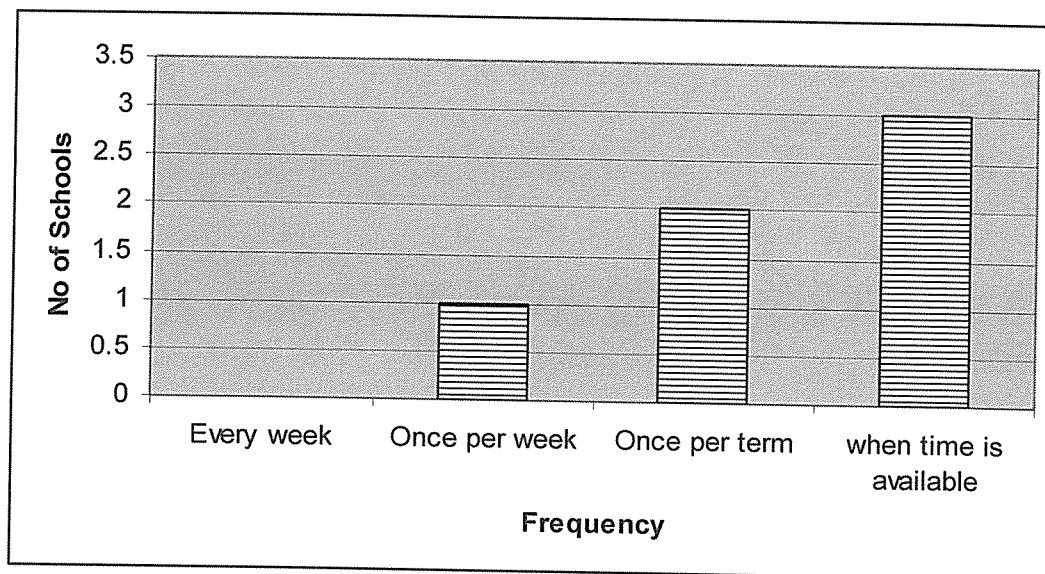
Community members have small plots of land and due to overpopulation the piece of land cannot sustain the family and hence some people end up growing substances like tobacco and Bhang making the substances readily available to our children. This has made many people to be drunkards and drug addicts in Kabare zone.

**Table 5: Intervention Strategies**

INTERVENTION MEASURE	FREQUENCY	PERCENTAGES
Guidance and Counselling	225	50
Corporal punishment	63	14
Counseling at home	90	20
Take culprits to rehabilitation centres	36	8
Expel them from school	36	8
TOTAL	450	100

**Source:** Field Work Data

**Table 6: How Frequent is Guidance and Counseling**



**Source:** Field Work Data

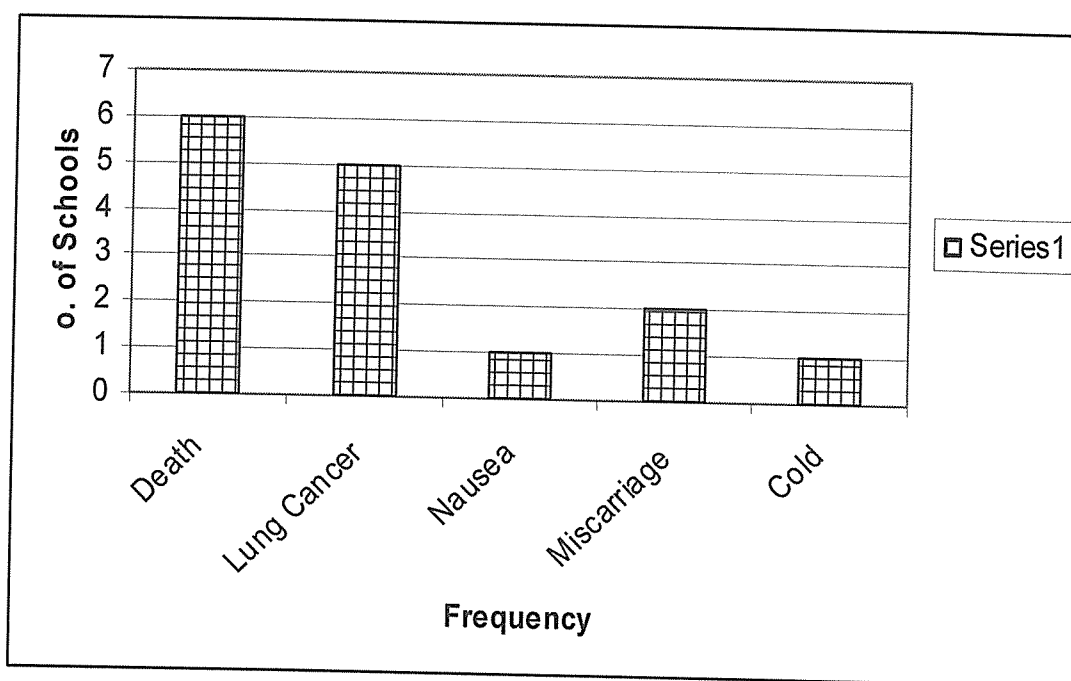
The six schools gave information as to how they go about guidance and counseling. Out of the six schools, three guide and counsel their pupils when time is available. Two do it once per term and one school does it once per month.

It can therefore be seen that about half of the schools in the zone do not do guidance and counseling. Those who do it are also not very keen on it. For example, once per term may not be very effective.

Pupils need to be reminded now and then and so teachers should be taken to refresher courses and be in serviced in the field of tackling drugs and drug abuse and should be

supported by parents. The teacher should be supported by parents. The teacher should also apply external inputs such as visiting speakers (peer educators and external speakers) where their contribution should be followed up through discussion and reflection with teacher afterwards. This would motivate the teacher in carrying out guidance and counseling.

**Table 7: Problems Caused by Drug Abuse**



**Source:** Field work Data

The six schools gave information on Problems caused by drug abuse. Out of the six schools one said drug abuse caused cold, two schools said drug abuse caused miscarriage; another one school said drug abuse caused Nausea. Five schools said drug abuse caused lung cancer and all the schools said drug abuse caused death.

Drug abuse leads to addiction. Addiction is the habit that has got out of control, resulting to a negative effect on one's health.

Substance use predisposes the youth to diseases and poor health, conflict with law, poor academic performance – which translates into drop out of educational institutions, into narrowing opportunities in life and into inability to get or keep jobs.

Drug abuse is associated with risky sexual behaviour whose consequences can be unplanned pregnancies and sexually transmitted diseases (STDs). It can lead to quarrelsomeness, violence or criminal behaviour. In this context, substance abuse appears to be the cause of unrest, arson, rape or death in the country's educational institutions.

Tobacco causes mild nicotine poisoning characterized by dizziness, faintness rapid pulse, cold, clammy skin and sometimes nausea, vomiting and diarrhea.

Other effects of drugs include cardiovascular diseases, stroke, aortic aneurysm, pulmonary heart diseases, lung cancer and cancer of pharynx, larynx, trachea, mouth, pancreas, bladder kidney, cervix and colon. Non-users are also affected by environmental tobacco smoke (ETS) which causes hundreds of thousands of respiratory diseases in children and is carcinogenic to humans.

Smoking also doubles a pregnant woman's chance of miscarriage and increases her risk of ectopic pregnancy.

**Table 8:** Secondary School Intake in Kabare Education Zone

TYPE OF SCHOOL	FREQUENCY	PERCENTAGES
National secondary schools	0	0
Provincial secondary schools	20	13 1/3
District secondary schools	30	20
Day Secondary schools	60	40
Others	40	26 2/3
TOTAL	120	100

**Source:** Field Work Data

Out of one hundred and twenty candidates who did K.C.P.E. last year none qualified to join a national secondary school. Twenty candidates were able to secure form one places in provincial secondary schools which constituted 13 1/3%. This was a very small percentage compared to 20% of the pupils who secured places in district secondary schools.

Sixty pupils in Kabare zone were able to secure form one places in Day secondary schools. The percentage of day secondary intake was the highest as it was 40%.

Fourty pupils who sat four K.C.P.E. last year in Kabare zone, their whereabouts were not known. This was because they could not attain marks to make them secure form one places. Others had dropped out of the school due to drug abuse and bad behaviour which led to poor performance. Others had gotten married before K.C.P.E. was done and so when they came to do it they could not perform.



## **CHAPTER 5**

### **SUMMARY, DISCUSSION, CONCLUSION AND RECOMMENDATIONS**

#### **SUMMARY**

##### **5.0 Introduction**

This chapter discusses key findings of the study. It presents an overview of causes of drug abuse on the behaviour of pupils on selected Primary schools in Kabare Education zone, Kirinyaga, Kenya.

##### **5.1.1 KEY FINDINGS**

The key findings were based on the outcomes of 450 questionnaires administered in Kabare Education zone of Kirinyaga District, Kenya.

##### **5.1.2 Drugs Abused by Primary School Pupils in Kabare Education Zone.**

The researcher found that primary school pupils abuse a wide variety of drugs, alcohol, tobacco, bhang, miraa and inhalants. Imported substances such as cocaine heroine mandrax are not used by any child in the zone. The drug commonly abused is tobacco followed by alcohol, miraa inhalants and bhang.

This means that the pupils are using substances that are easily accessed. By the look of it the narcotics such as heroin and mandrax are not used. This could be probably be due to inaccessibility.

The researcher founds that majority of the pupils abuse tobacco and alcohol. This is because children in adolescent experiment with alcohol and tobacco. The society assumes that tobacco and alcohol are less dangerous than their illegal counterparts. The society views alcohol, the most widely used by young people as not dangerous. It is legal,

accessible and relatively cheap. For example at any age, alcohol is socially approved way to get high and suppress anxieties.

### **5.1.3 Ages at Which School children Start Abusing drugs**

Most of the pupils who abuse drugs start doing it when they are in class 7 and 8. The pupils in classes 7 and 8 are aged 13-15 years. This is the on set of adolescence. The youth consume alcohol and also use drugs to the extent that a substance posses dangers to the health of the youth and ultimately to the well being of the nation.

### **5.1.4 Causes of Drug Abuse Among Pupils**

The researcher found that pupils gave varied reasons as to why they abuse drugs. Some said the reason was that parents do not meet their developmental needs, others said it was due to influence from friends, others beliefs, while others claimed the drugs were readily available and others said it was because they wanted to get intoxicated.

The researcher noted young people have a number of developmental needs – independence from parents and peer approval among others. Sadly many parents do not realize how strong these needs are and thus do nothing to help their kids. As a result, some teens turn to drugs. The researcher further found that Peer Pressure influences youth to use the substance under false impression such as that some substances stimulate appetite for food, increase strength to perform tasks, give wisdom or instill courage to commit crime.

The easy availability of most substances appears to top the causes of prevalence of substance use and abuse among pupils in Kabare zone. Ingredients for making alcoholic drinks and tobacco products are grown in the community.

Family history influences use of drugs. A family or community in which adults drink alcohol, smoke bhang or chew miraa can influence youth to use the substances, which they may also abuse in the long run.

#### **5.1.4 Drug Abuse indicators Among Pupils**

After analyzing the questionnaires the researcher found that pupils gave various drug indicators such as irritability, aggressiveness, usual drowsiness, loss of interest in class work, unusual smells, stains and marks on clothes.

The researcher noted that most of the symptoms are indicators of alcohol, tobacco miraa and inhalants. These indicators have been noted in our children but have not been followed keenly.

The indicators vary from region to region and may depend on the type of drug used. Other indicators just to mention include loss of interest in hobbies, getting different group of friends furtive and secretive behaviour, evidence of telling lies, unexplained loss of belonging, unexplained request for money, intoxicated behaviour and sudden changes of mood.

Pupils with these indicators are rude and difficult to deal with.

### **5.1.5 Intervention Strategies**

The researcher found that guidance and counseling was not taking place in our primary schools but most of the pupils felt that it was the most appropriate strategy to curb the vice.

The other strategy supported by many pupils was counseling by parents and pastoral caregivers at home.

Although corporal punishment, taking children to rehabilitation centres and expelling them from school were suggested by a very small percentage. The researcher felt that they should not be put in place instead, guidance and counseling should be initiated in our schools to save the younger generation.

The researcher noted that drug Education and Prevention is best delivered by building cumulatively on knowledge, attitudes and skills. It is therefore notable that our pupils will not be helped by policies as much as psychological help from qualified personnel through guidance and counseling.

Effective drug education in schools should provide children with knowledge and awareness they need to make informed decisions. It should develop skills which will allow children to make decisions about their behaviour and put them into practice.

Action should be taken to increase young people's resistance to drug misuse on different stages of their lives and in different settings so that messages are sustained and skills

developed over time. Different approaches will be effective according to the age and circumstances of the young people concerned.

## **5.2 DISCUSSION**

Kaguthi (2004) points out that the use of alcohol, bhang and miraa (khat) has indigenous roots and that the three substances have been widely used in the indigenous society. There however exists no evidence, that substances abuse has been part of the indigenous heritage.

He emphasizes that the initial influence that make young persons experiment with substances are the person, the family and peer groups. A family or community in which adults drink alcohol, smoke bhang or chew miraa can influence youth to use the substances. He also points out that alcohol is readily available to adults and youth between 10-24 years.

According to the information gathered in this study, alcohol was/is abused by about 3% and tobacco by 6%. This finding shows that in Kabare zone, tobacco is more prevalent than alcohol.

Ives (2002) and Kaguthi(2004) say that children abuse drugs when their developmental needs are not met, due to peer pressure, due to easy availability of drugs and family influence.

The respondents in Kabare zone said that peer pressure, availability of drugs and parents' inability to meet their children's developmental needs are the main causes of drug abuse among others.

This shows that the writer's findings have tallied with this researcher's findings – The leading cause being peer pressure.

On the intervention strategies Ives (2002) says that children need to understand what sort of behaviours are not acceptable and desirable in resisting peer pressure and developing confidence and skills to resist drugs.

The United Kingdom government Policy contained in White Paper, "Tackling Drugs to Build a better Britain." Says that effective drug Education in schools should provide children with awareness they need to make informed decisions. This can be explained as Guidance and Counseling.

From these views, we note that Guidance and Counseling is emphasized more than any other method.

From Kabare zone, the respondents to the questionnaires emphasized Guidance and Counseling by teachers and parents. About 50% said counseling was the best strategy and about 20% said the parents should advise their children while at home. This can be seen to tally with Ives (2002) and the United Kingdom White Paper fore-mentioned. Other methods such as corporal punishment and taking the child to rehabilitation centres may make him/her even more hardened as he/she repels the authority.

## **5.2 CONCLUSION**

The researcher found out that children abuse drugs for as many reasons as their number. However Peer Pressure was the one noted as the major cause followed by availability of

drugs. Other causes noted were parents' inability to meet their developmental needs, to get intoxicated and beliefs.

The research showed that in Kabare zone 6% of the pupil's abuse tobacco while 3% abuse alcohol.

Although Guidance and Counseling is not done as well as would be expected many pupils 50% said it was the best method to control drug abuse. Those children who felt that Guidance and counseling be done by parents at home were 20%.

### 5.3 RECOMMENDATIONS

According to what has been found out, the researcher wishes to make recommendations which according to her own view will help in alleviating the problem of drug abuse among the primary school children.

- (i) The children abuse the drugs which are commonly abused by the community members. These include alcohol, tobacco and miraa. The government should come up with a Policy to suppress the availability of the same to our children. Those who are caught brewing the illicit brews should be jailed with no option of a fine for a period of one year. They should not be jailed through probation.
- (ii) The Policy on tobacco use should be reinstated. That is, no one should smoke in the public. This will make our children forget that people do smoke. A Policy should also be set up whereby smoking dens should be put up beside bars. Let those who smoke go there and smoke.

- (iii) The issue of drug abuse should be infused in all school subjects like that of AIDs. This will make our children grow with the knowledge of how harmful the legal and illegal drugs are.
- (iv) Billboards, advertisements and posters on alcohol and tobacco should be banned with immediate effect. Those who need the drugs know where to find them. Let us not tell everyone how good these drugs are, when they really are not.
- (v) Guidance and Counseling should be revived in schools by setting aside one lesson per week for it. Here the pupils can be grouped according to their ages and counseled on emerging issues, including drugs. Those who do the counseling should be Early Childhood Education graduate teachers and/or those who have undergone the guidance and counseling course elsewhere.
- (vi) The radio lesson should incorporate drug abuse lessons. This could be done once a week. There can be a lesson for the lower primary and another for upper primary, preferably on the same day so that if a guest speaker was used as a commentator, he may find it convenient.



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## **APPENDICES**

### **APPENDIX A: TIME FRAME**

The researcher will take seven months to prepare the proposal, conduct the research and make research report for the presentation. It will be done as follows:

- |                    |  |
|--------------------|--|
| ▪ April            | - Writing the topics                           |
| ▪ May/June         | - Writing the proposal                         |
| ▪ July             | - Forwarding the proposal through the internet |
| ▪ August/September | - Collecting information                       |
| ▪ October          | - Typing the report                            |

## APPENDIX B: BUDGET

The researcher will use Kshs. 7,000/= to collect and process the research report for the presentation. This amount will be used as follows:

▪ Transport	- 1,000/=
▪ Typing the report	- 2,500/=
▪ Photocopying the Questionnaires	- 1,000/=
▪ Stationery	- 1,000/=
▪ Binding the report	- 1,000/=
▪ Lunch	- <u>500/=</u>
TOTAL	- <u>7,000/=</u>

## APPENDIX C: PUPILS' QUESTIONNAIRE

*Do not write your name on this question paper. Answer these questions correctly*

1. How old are you? ..... years.
2. In which class are you? Std .....
3. Cigarette (tobacco), Miraa, Cocaine, Heroine, Madrax, glue and alcohol are some of the drugs taken by some pupils in your class.  
Agree  Disagree   
Strongly agree  Strongly disagree
4. To be a grown up one has to be involved with drugs so that people in the society can recognize you.  
Agree  Disagree   
Strongly agree  Strongly disagree
5. Groups are good in educating their colleagues.
6. Bad behaviours taken from the groups.  
Agree  Disagree   
Strongly agree  Strongly disagree
7. Group leaders force others into drug abuse  
Agree  Disagree   
Strongly agree  Strongly disagree
8. Become rebellious when they take drugs.  
Agree  Disagree   
Strongly agree  Strongly disagree
9. Share their secrets on behaviour.  
Agree  Disagree   
Strongly agree  Strongly disagree

10. Relatives behave well and exemplary.
- |                |                      |                   |                      |
|----------------|----------------------|-------------------|----------------------|
| Agree          | <input type="text"/> | Disagree          | <input type="text"/> |
| Strongly agree | <input type="text"/> | strongly disagree | <input type="text"/> |
11. Behaviors taken from parents.
- |                |                      |                   |                      |
|----------------|----------------------|-------------------|----------------------|
| Agree          | <input type="text"/> | Disagree          | <input type="text"/> |
| Strongly agree | <input type="text"/> | strongly disagree | <input type="text"/> |
12. Relatives fail to guide them.
- |                |                      |                   |                      |
|----------------|----------------------|-------------------|----------------------|
| Agree          | <input type="text"/> | Disagree          | <input type="text"/> |
| Strongly agree | <input type="text"/> | strongly disagree | <input type="text"/> |
13. Loneliness encourages bad behaviour.
- |                |                      |                   |                      |
|----------------|----------------------|-------------------|----------------------|
| Agree          | <input type="text"/> | Disagree          | <input type="text"/> |
| Strongly agree | <input type="text"/> | strongly disagree | <input type="text"/> |
14. Abandoned children turn to bad behaviour to generate an income.
- |                |                      |                   |                      |
|----------------|----------------------|-------------------|----------------------|
| Agree          | <input type="text"/> | Disagree          | <input type="text"/> |
| Strongly agree | <input type="text"/> | strongly disagree | <input type="text"/> |
15. Abandoned children find appreciation from drug abusers.
- |                |                      |                   |                      |
|----------------|----------------------|-------------------|----------------------|
| Agree          | <input type="text"/> | Disagree          | <input type="text"/> |
| Strongly agree | <input type="text"/> | Strongly disagree | <input type="text"/> |
16. Lonely children associate with anyone they find.
- |                |                      |                   |                      |
|----------------|----------------------|-------------------|----------------------|
| Agree          | <input type="text"/> | Disagree          | <input type="text"/> |
| Strongly agree | <input type="text"/> | strongly disagree | <input type="text"/> |
17. Drugs can be accessed in shops.
- |                |                      |                   |                      |
|----------------|----------------------|-------------------|----------------------|
| Agree          | <input type="text"/> | Disagree          | <input type="text"/> |
| Strongly agree | <input type="text"/> | strongly disagree | <input type="text"/> |

18. Drugs can easily shared.
- Agree ☐ Disagree ☐
- Strongly agree ☐ Strongly disagree ☐
19. Everything is available in their homes.
- Agree ☐ Disagree ☐
- Strongly agree ☐ Strongly disagree ☐
20. Angry and frustrated children are guided by emotions.
- Agree ☐ Disagree ☐
- Strongly agree ☐ Strongly disagree ☐
21. Anger and frustration make them act indiscriminately.
- Agree ☐ Disagree ☐
- Strongly agree ☐ Strongly disagree ☐
22. Below are some indicators of drug abuse which ones have you ever noted among some of your schoolmates?
- ☐ Irritable and aggressive
- ☐ Unusual Drowsiness
- ☐ Loss of Interest in class work, hobbies and friends
- ☐ Unusual smells, stains and marks on body or clothes
23. Why do you think pupils abuse drugs?
- ☐ Easy availability of drugs
- ☐ To get availability of the drugs
- ☐ Influence from friends/peers
- ☐ Family history
- ☐ Belief, e.g. drugs increase strength, appetite for food, wisdom
- ☐ Anger and frustration

24. What do you think the school administrators can do to curb drugs in your school?

☐

Guiding and Counseling by teachers and social workers

☐

Corporal punishment by teachers

☐

Expel them from school

☐

Tell parents to counsel them at home

☐

Take them to approved schools

25. How many pupils do you think take drugs in your class?

Pupils

## APPENDIX D: TEACHER'S QUESTIONNAIRE

Do not write your name on this question paper, answer the question correctly

1. How many pupil in your class take drugs.....pupils?

2. What type of drugs do they take?

.....

3. Name the problems caused by drug abuse

.....

4. How often do you do counseling in your school?

☐ Once a week.

☐ Every week.

☐ Once per term.

☐ When time is available.

5. Does drugs affect K.C.P.E performance?

☐ Yes.

☐ No.

6. How was your K.C..P.E secondary intake last year ?

National schools.....pupils.

Provincial secondary schools.....pupils.

District secondary schools.....pupils.

Day secondary schools.....pupils.

Others.....pupils.

7. Name the drugs that are commonly abused by the community members.

.....





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## Office of the Director

.....

### TO WHOM IT MAY CONCERN:

Dear Sir/Madam,

RE: INTRODUCTION LETTER FOR MS/MRS/MR..... *Rose Mary Wanjiku*

REG. #..... *BED/13202/61/DF*

The above named is our student in the Institute of Open and Distance Learning (IODL), pursuing a Diploma/Bachelors degree in Education.

He/she wishes to carry out a research in your Organization on:

*Causes of Drug Abuse on the  
Behaviour of Pupils of selected Primary  
Schools in Kabare Education Zone  
Kirinyaga, Kenya*

The research is a requirement for the Award of a Diploma/Bachelors degree in Education.

Any assistance accorded to him/her regarding research will be highly appreciated.

Yours Faithfully,

