

TEENAGERS EXPERIENCE OF ALCOHOL ABUSE FAMILIES IN KENYA

DOUGLAS WERU ALICE MEERA LAMA

Bachelor's Thesis

December 2013

Degree Programme in Nursing

Social Services, Health and Sport





DESCRIPTION

Author(s)	Type of publication	Date
ALICE, Douglas Weru	Bachelor's	26.11.2013
LAMA, Meera	Pages	Language
	47	English
	Confidential	Permission for
		web publication
	() Until	(X)

Title

TEENAGERS EXPERIENCE ON ALCOHOL ABUSE FAMILIES IN KENYA

Degree Programme

Degree Programme in Nursing

Tutor(s)

GARBRAH, William and KATAINEN, Irmeli

Assigned by

Abstract

The primary aim of this thesis was to identify the experiences of teenagers affected by parental alcohol abuse in Kenya. The purpose is to provide information that can be used to improve the services for teenagers affected by parental alcohol abuse. The empirical part of this study was conducted in August 2013. The qualitative research method was applied and narrative essay writing was used to gather data from twelve teenagers who were members of youth club in Nairobi. These participants were teenagers between 15 and 18 who might be directly or indirectly affected by this phenomenon. The empirical research confirmed the findings of the literature study that teenagers who are brought up in alcohol abuse families do certainly have a negative impact on their total development. It was found out that teenagers lifestyle was also impacted which affects the present and future of their life. This research will assist various stakeholders in generating recommendations to health care authorities and education institutions to provide necessary intervention programmes for these teenagers.

Keywords: alcohol abuse families, teenager, challenges and suffering, Kenya

Miscellaneous

Appendices, Figure

CONTENTS

1	IN	TRODUCTION	3
2	DR	INKING PROBLEM IN KENYA	5
	2.1	TYPES OF ALCOHOL ABUSED IN KENYAN FAMILIES	6
3	СН	ALLENGES IN ALCOHOL ABUSE FAMILIES	7
	3.1	DOMESTIC VIOLENCE	
	3.2	SHIFTING GENDER ROLES	9
	3.3	INTIMATE PARTNER VIOLENCE DUE TO ALCOHOL ABUSE	9
	3.4	Neglect	10
	3.5	PARENTING	10
	3.6	POVERTY	11
	3.7	DISEASES AND INJURIES DUE TO ALCOHOL ABUSE	13
	3.8	CHILDREN BLAMING THEMSELVES FOR THE PARENT'S ALCOHOL ABUSE	14
	3.9	SIBLING'S DISEASES IN ALCOHOL ABUSE FAMILY	
	3.10	SEPARATION OR DIVORCE	16
	3.11	SINGLE PARENTHOOD DUE TO ALCOHOL	17
4	AII	MS, PURPOSE AND RESEARCH QUESTIONS OF THE STUDY	19
5	IM	PLEMENTATION OF THE RESEARCH	20
	5.1	RESEARCH METHODOLOGY	
	5.2	SETTING	20
	5.3	RECRUITMENT AND PARTICIPANTS	21
	5.4	METHOD OF DATA COLLECTION	22
	5.5	Data Analysis	23
6	FI	NDINGS	25
7	DIS	SCUSSION	29
	7.1	DISCUSSION OF FINDINGS.	
	7.2	ETHICAL CONSIDERATIONS	31
	7.3	CREDIBILITY, TRANSFERABILITY, DEPENDABILITY AND CONFIRMABILITY	33
8	CO	NCLUSION AND RECOMMENDATIONS	35
R	EFER	ENCES	39
A	PPEN	IDICES	43
	App	pendix 1. Permission to perform the study	43
	App	pendix 2. Informed consent	45
	Apı	pendix 3. Brief essay Writing	47

FIGURE	
FIGURE 1. Data analysis layout	48

1 INTRODUCTION

The abuse of alcohol has given rise to untold suffering and pain amongst the Kenyan families in many ways for example death of loved ones, health problems and diseases, and trauma some of which are passed on to their loved ones. This leads to social problems like separation or divorce, family neglect and domestic violence within the family. The consequences of living in an alcoholic family are particularly difficult for young children and adolescents because alcoholism affects the process of socialization of values, morals, attitudes, behaviour, gender roles, self-control, and self-concept. The effects of alcoholism depend on the child's age, gender, relationship to the drinking and nondrinking parents, and relationship to other family members or other social network. (Berns 2011, 235.)

The alcohol abuse in the family has created many challenges for teenager who has to go through the ordeal every day in life. It is extremely difficult for a child especially those who are brought up in poor neighbourhoods. The poorer the family is, the more they likely to lack information on where to get any sort of help. Alcohol abuse has been a major concern in the world. The consumption of alcohol has been a biggest problem to most countries since the death mortality has been on rise. (Berns 2011.)

Alcohol related death and blindness of a key person in a family like father, brings about a lot of changes within the family because of burden of caring for the person who has gone blind due to alcohol abuse. This pushes the family more into poverty and to be stuck below the poverty line for a longer time or might be forever struggling every time with the financial difficulties. According to World Health Organization (WHO 2004), a survey of women in Nairobi found that with regard to alcohol consumption, about 44 % of the women reported that their

partners drink alcohol. While half of the women considered their partners drinking habit to social nature, 10 % said the habit was intolerable. Women who reported that their partner's drinks alcohol were significantly more likely to report lifetime violence. (WHO 2004.)

Teenagers are not spared when it comes to conflicts and some of them become the victims of abuse in the family. The alcohol abused parent may not be able to reason with a child or to guide a child during his or her growth or solve their children's problems since their reasoning capacity has been greatly affected or are inadequate because of consuming enormous amount of alcohol. As a result of such circumstances, alcohol abusive parents tend to use violence as a medium of correcting the mistakes the child makes instead of properly guiding the children. (WHO 2006.)

The aim of this study was to identify the experiences and challenges of teenagers who are brought up in alcohol abuse families in Kenya. The purpose of this study was to provide information that will assist various stakeholders in generating recommendations to health care authorities and education institution to provide necessary intervention programmes for these teenagers.

2 DRINKING PROBLEM IN KENYA

The personality and character of a teenager is determined by the upbringing of a child from infancy. The children are regarded as to be a well behaved, socially adjusted and bodily sound if the family environment in which they are brought up is caring and nurturing. There are many obstacles children have to undergo which directly affect the outcome later in life. The children might have a lot of stressors when they are raised for example, domestic violence, neglect, social isolation, poor conflict resolution, and use of drugs. This is mostly due to how they were brought up and how their parents taught them to cope with these challenges in life. Parents, those who relate to their children and how they embrace them in their life are a big determinant of how a child behaves and manage with challenges in life. Poor quality upbringing breeds poor morals and behaviour. There is a demonstrated relationship between the health and wellbeing of children and young people and the environment in which they grow up. (Healey 2011.)

The interrelationship of risk factors may place children at higher risk of abuse and neglect, and serious harm or injury. In particular, parental risk factors commonly associated with child abuse and neglect includes domestic violence, parental alcohol and drug abuse, and parental mental health problems. (Healey 2011.)

Alcoholism in Kenya has led to separation and divorce and also men leaving their families. The political instability in a country has created a high rate of unemployment today that most youths and adults are indulged in alcoholism due to lack of hope and uncertainty in future. Consequences of unemployment have given rise to extreme poverty as such family bread winners are unable to

support their own members in the family. The amount of pressure in a family is so intense that to provide and sustain their livelihood without any source or support from government or nongovernment institution is a huge obstacle. So most bread winners in the family has escaped into alcoholism as a source of coping mechanism. In such condition the myth of father being a role model for their children is greatly compromised as a result of negligence, domestic violence, effects in psychosocial condition of children. (Mwaura 2005, 98.)

2.1 Types of alcohol abused in Kenyan families

According to World Health Organization (WHO 2011), the types of alcohol consume in a Kenyan families comprises 44% beer, 27% spirits and 28% are others. The other 28% alcoholic beverages in WHO report are traditional locally brewed alcohol. Since these locally brewed alcohols are easily and cheaply available, the consumption of such type of alcohol is highest within the households.

Amongst the locally brewed alcoholic beverages *Chang'aa* ranks the top on consumption list. It is prepared from different types of grains mostly malted millet and malted maize. Another type is *Busaa* which is considered as traditional beer made from finger millet malt. In the coastal areas of Kenya, people consume *Palm wine* while *muratina* is also one of locally brewed alcohol prepared from sugar cane and muratina fruit. Also most Kenyan prefers to drink *banana beer* prepared from sorghum which is a whole grain and banana. (WHO 2004.)

A statistics from World Health Organization (WHO 2004), in the year 2000, 140 Kenyans died and many went blind while others were hospitalized due to heavy consumption of locally brewed alcohol known as *kumi kumi* in the slums in Nairobi city. This heavy toll of alcohol related deaths has results to children being orphan and most of these children are being brought up by single parents.

3 CHALLENGES IN ALCOHOL ABUSE FAMILIES

Every year, the harmful use of alcohol kills 2.5 million people, including 320 000 young people between 15 and 29 years of age. It is the third leading risk factor for poor health globally, and harmful use of alcohol was responsible for almost 4% of all deaths in the world, according to the estimates for 2004. (WHO 2011.)

Alcohol abuse effects can sometimes tend to hunt the children for the rest of their life. The main problem is that alcohol abusers do not seem to realize the impact they have imposed on their family and most extremely to the children in those families. The children brought up in the alcohol abuse families may undergo so much suffering but might never have a chance to get help or ask for help in their situations. Due to stigma and feeling ashamed to talk openly about alcohol abuse in the family, these problems are left unsolved. Similarly, the children probably will think that if they complain to anyone about their situation at home, it will jeopardize their livelihood since most of the parents are the sole bread winner in Kenyan families. Violence is a cycle. We see our parents being violent and then we do violent things and then our kids will do violent things. (Covell & Howe 2009, 9.)

3.1 Domestic violence

Parents need to encourage their kids, support them, spend time with them, and tell them they love them. Parents should not be allowed to hit their children, that is violence and things will only get worse. (Covell et al. 2009, 63.)

Most alcohol abusers are unable to analyze the situation, and handle conflict situations since alcohol impairs the cognitive information processing in the brain, hence these increases the chances of resulting into violence rather than handling the situation in a diplomatic way. It is very easy for an alcohol abuse person to misinterpret the situation, people's behaviour, and their intensions; hence the person is likely to be aggressive and violent. (Ostrowsky 2009, 32.)

83% of women and girls reported one or more episodes of physical abuse in childhood; 46% reported one or more episodes of sexual abuse in childhood (Federation OF Women Lawyers (FIDA) Kenya 2012, 7).

According to United Nations International Children's Emergency Fund (UNICEF 2010), children who are victim of violence in the family can have irreversible damages and negative impact which they tend to pursue it later into the adult life. This directly alters the health and development of such children and they can no longer trust any other individual.

Teenagers who experience violence either sexual, physical or in the form of conflict will further creates many emotional and behavioural problems later in life. Consequences in terms of cognitive development and functioning, performance, depression, reduced self-esteem, social stigma, involvement in behavioral health risk like smoking and obesity etc. are the result of exposure to violence. The result of Kenya Violence against Children Surveys (VACS) 2010, estimates that 11% of women between the ages of 15 to 19 years experienced physical or sexual violence. Sexual violence is found to be a problem in Kenya according to the Sub-national studies.

According to post-primary student's survey in Nairobi in 2004, 14% of girl's reported to experience sexual assault, and 24% boys reported to experience sexual assault. (UNICEF 2010, 15.)

Alcohol abuse affects the thinking and reasoning capacity of an individual and these greatly affects the way they handle a crisis situation or a conflict. There has been increase of gender based violence in families since most individuals are not capable of conflict resolution while they are drunk. (WHO 2006.)

3.2 Shifting gender roles

Due to political instability and unemployment or underemployment, in most African countries, there is an increase on shifting gender roles where men is no longer seen as only provider of bread winner in the family. This has led to conflict in a family since most men feel unwanted, burdensome, redundant and frustrated. Men abandon their family responsibility since they feel and experience the threat to their manhood and social status in a family and society at large. Mothers have taken up the responsibility of taking care of the families. This has led men to indulge in alcohol abuse to escape from the reality and the only way they feel they are man enough or the man who being respected and to retain their status is violence towards their family which has led to divorce which affects the children greatly. (Narayan, Patel, Schafft, Rademacher & Schulte 2000, 176.)

3.3 Intimate partner violence due to alcohol abuse

When there is violence in the family due to alcohol abuse, the possible outcome is devastating. This will directly affect the child. Drinking alcohol has led to difficult financial condition which in turn makes it difficult to provide for family and especially taking care of child and solving the problems. Teenager experience violence in different forms as aggressiveness such as scolding, beating, argument, slapping, destroys the objects. Torturing a partner psychologically as verbal abuse, intimidation, or humiliating in an alcohol abuse family end up either being physically harm or sexually abuse. Thus, the parent's relationship with their children might be experiencing fluctuation as a result of divorce, separation,

isolation, lack of care and affection. Later in life that child tends to be violent in nature who tries to impose own childhood experiences to others. Intimate partner violence refers to any behaviour within an intimate relationship that causes physical, psychological or sexual harm to those in that relationship. (WHO 2004.)

Furthermore, most women do not dare to report that their husband is alcoholic or abusive, which can be seen as normal practice in some of the communities due to the prevalent traditional practice of consuming alcohol for various reasons. Thus, the greatest difficulty for the woman is to report that her husband is not supporting for the family due to the alcohol abuse. Most families only suffer in silence for fear of victimization and stigma. (Gifford, Friedman & Majerus 2009.)

3.4 **Neglect**

Neglect means the failure of parents or carers to meet a child's physical and emotional needs when they have the mean, knowledge and access to services to do so; or failure to protect her or him from exposure to danger. (UNICEF 2011.)

Due to alcohol abuse by most fathers in the family there has been a sharp increase of fathers neglecting their children and family at large and this has led to children missing the important role a father plays in their life. Children themselves say that what they want of fathers is that they be a role model, offer a quality time, support them, show love, and provide physical contact. (Taylor & Daniel 2004, 265)

3.5 **Parenting**

A good parenting is important to the child in their early stage of development. The way parent's moulds or guide their children determine how the children will deal with the challenges they face later in life. Positive parenting has been identified as a major protective factor for children being raised in difficult circumstances such as low income single mothers in poor inner-city neighbourhoods. Where such children have experienced parental support, warmth, and positive socialization strategies, they show greater competence, social maturity, school performance, and importantly, significantly fewer behaviour problems than do their less positively parented peers. (Covell et al. 2009, 65)

Due to alcohol abuse in a family, the children who are affected do not cope well in school and also they have difficulty with how they associate with other children. Some children end up being violent and aggressive which increases their chances of being expelled from school or dropping out from school. (Head 2007.)

3.6 **Poverty**

In areas of extreme poverty, pressure on the family increase. When the fathers leave the family, the mothers have to provide for the children and many are driven into prostitution. Such women end up being alcoholics to avoid facing the facts of their lives, and they end up mistreating their children. The girls may be encouraged to join their mothers in prostituting and boys become street children, always hungry and drugged-leading to premature death in both cases. In this scenario, everyone eventually becomes promiscuous and AIDS runs rampant. (Mwaura 2005, 98.)

The consequence of domestic violence and negligence in a family where alcohol is prevalent is incapability to cope with the stressors and difficult financial condition. Poverty is remarkably high in such family where women have to shift their roles to become a breadwinner in the family consequently which are very

difficult to work and raise the children on its own. There is no right support or help from any institution which affects the children directly. There is always a risk of such children end up compromising their life either due to disease or hunger or a fear of children indulging themselves in substance abuse, unprotected sexual activities, teen pregnancy, young female being involved in prostitution and young boys being involved in illegal criminal activities. The dreadful end results for such children would be either death or getting a disease like AIDS or being convicted for juvenile charges. (Mwaura 2005.)

For those who still live with the parent, evidence suggests a greatly increased likelihood that they will experience abuse and neglect, and lives in poverty, and that they are more likely to do poorly at school, become involved in crime and to develop drug or alcohol problems themselves. (Barlow 2009, 112.)

Most families who have alcohol abuse parent or a family member are compelled to live in poor neighbourhoods which have poor housing, poor drainage, poor security, and poor public health in sanitation. The families tend to hide their poverty and when abuses happen privately, it is normally kept that way since most social problems in such neighbourhoods are largely ignored by media and also receive very little attention form the government. Children brought up in poor neighbourhoods perform poorly in terms of education, have poor health due to poor living condition and sanitation and are prone to diseases which sometimes end up losing their life also. The children who live in alcohol abuse family do not have a way out of poverty since the little money the family manages to get is mostly lost in alcohol consumption and food. This becomes a very big challenge to children who would wish to move out of poverty. In Kenya there is no financial assistance for these families hence most of these young children are engaged in child labor to contribute to the family. (Barlow 2009, 112.)

Furthermore, poverty has pushed these teenagers to the extreme. In order to meet the ends meet, instead of heading to the school, they walks half a kilometer to the city to work for the living. Nevertheless, in Kenya, school offers meals, shelter, education and hope. (UNICEF 2011.)

3.7 Diseases and injuries due to alcohol abuse

The children who have alcohol abuse member in their household brings sorrow and despair amongst the children, the thought that they might lose one of their own or the bread winner due to alcohol related disease and injury makes most children to be stressed and depressed in the process. The fear that they might not be able to eat or they might end being the bread winner of their family at tender age is terrifying for them. Most end up losing hope and some might even not be able to handle the situation very well hence engaging themselves in substance abuse, suicide and violence. Some of the family members due to a loss of a loved one who was the bread winner they might engage in prostitution so as to provide for the family. (Pyne, Claeson & Correia 2002, 10.)

The effect of alcohol is greatly seen and well documented in scientific literature which indicates that majority of men who abuse alcohol have chronic diseases and extensive injuries. Alcohol also plays a significant role in causing disability through neuro-psychiatric conditions that impaired the wellbeing of individuals, families, communities. (Pyne et al. 2002.)

Alcohol related chronic diseases are also heavy toll to the family with young children and a family member who has chronic illness due to alcohol intake is a big burden to the children since most of the children are turned into care givers of the affected family member since the family cannot afford to provide 24 hour heath care needed for the affected family member which in turn greatly affects

the child in terms of continuing education and choosing a better carrier choices in life. (Pyne et al. 2002.)

3.8 Children blaming themselves for the parent's alcohol abuse

Children suffer from a great extent of psychological problems living in an alcohol abuse family. Although they have difficulties in learning, fear or anxiety, eating disorders or attempted suicide, such problems still seems to be invisible in the eyes of people and society which are supposed to be accepted by the society where the child brought up from. Most of the time, they feel embarrassed because of their parent drinking habit or member of family abusing alcohol. In such condition, child seems to withdraw themselves from any social contact including inviting friends or any one in their house or ask for any sort of help which they are in desperate need. Withdrawal and isolation are considerably the end result when child feel ashamed of them or feel angry if alcoholic parents are unable to provide for them. Feeling of guilty or thinking that the reason behind the consuming alcohol by the parents might be because of them. (Berns 2011, 235.)

Thus, children face a lot of obstacles. They try to escape from reality and also mostly blaming the parent who is not alcoholic for not supporting the alcoholic one to quit drinking. The parent and the society should guide these children with care and sensitivity since most children show signs of problems and challenges in their family in form of poor performance in school, aggressiveness, withdrawal and isolation, violence towards other students, physical complaints and finally most children might find themselves involved in substance abuse. (Berns 2011, 235.)

A study of youngsters from preschool through age 18 found out that teenager who abuse drug showed identifiable personality characteristics. (1) Interpersonal alienation, (2) poor impulse control, (3) manifest emotional distress. These traits were directly related to poor parenting as per developmental point of view. Teenagers become sexually active because of lack of proper proactive guidance from their parents. Resulting in teenage pregnancy and teenage boys involving in promesious activities. The matter of concern is unprotected sex amongst teenagers or adult can result in fatal conditions of HIV infection. (Holmes 1995, 11.)

3.9 Sibling's diseases in alcohol abuse family

Consumption of alcohol during pregnancy is considered high risk. When a pregnant mother consumes alcohol, there is great risk and high probability that the child may be exposed prenatally to alcohol abuse (Fetal alcohol syndrome). It is a huge burden to the other siblings in a family since they end up learning the truth about their brothers or sisters disease through school, neighbours, and also may be through counseling. On such situation they end up feeling guilty and bad when their diseased sibling is mocked in the society due to the abnormality. (Berns 2011, 235.)

Amongst the distinguishing features of this syndrome are prenatal and postnatal growth retardation and facial abnormalities, including small head circumference; widely spaced eyes; short eyelid openings; a small, upturned nose; and a thin upper lip. Most fetal alcohol syndrome children have mental retardation. Fetal alcohol syndrome is the leading known preventable cause of mental retardation. (Berns 2011, 235.)

3.10 Separation or divorce

When the parents decide to get separated or divorced from each other due to tensions aroused by alcohol abuse in a family, children are the one who suffers a lot and becomes vulnerable. Children cannot speak a word to their parents or their opinions are not asked when they decide to get separated. As a result child becomes vulnerable and even life is under threat when they cannot cope with the situation. (Sember 2005, 12.)

Children are supposed to be brought up in a nurturing and caring family environment which is the responsibility of the parents in order to help in their mental, emotional and cognitive development. But the children who is used to both parents and they have to separate, choosing between parents to live become very difficult for them. Thus, divorce and separation has negative impacts on children. Majority of children whose parents separates express their reaction to it in terms of being depressed and grieving. The situation becomes so intense that they becomes more vulnerable and lacks self-esteem to cope with any kinds of problems. They become angry with their parents for not taking care of them and getting a divorce so they end up blaming them and on themselves. Lack of trust with parents can even lead to being withdrawn and isolated from others and forming any new relationship again. (Sember 2005, 12.) Children end up having fear that they might be abandoned and forgotten since most parents' ends up marrying later in life. This is a challenge for young child who might end up having abandonment issues and trust. (Sember 2005.)

In Kenya mostly separation of the parents are common. Whereby single parent is left to take care of the children in the family. For many of the teenager, they become part of this conflict and are traumatized. The family has to face a number of stressors with regards to economic issues, parenting, provision of basic needs

and infrastructure, security. Thus, teenagers get caught up in higher risk of developing conduct disorders, alcohol or drug abuse, engaging in irresponsible sex, poor academic performance, involving in crime and violence, etc. (Holmes 1995, 11.)

3.11 Single parenthood due to alcohol

Due to influence of alcohol abuse when partners decide to get separated, children are vulnerable victim of this situation. Single parent who have to take care of the children and support them, have to bear so many burdens to survive. Being single parent is not considered as economical rather it can bring about more poverty in a family. (Yarber & Sharp 2010.) The absence of one parent will also risk subjecting children to higher levels of parental authoritarism or neglect and to lower levels of parental involvement and supervision. (Yarber et al. 2010.)

Single parent always have to try so hard to balance their working life and family life in which child can be sometimes forgotten and most of the times neglected. The pressure to support and balance the life and family is so intense that they indulged themselves in alcoholism. Children tend to be more withdrawn and have a fear of even losing their single parent because of alcohol. Sometimes children think that alcohol is solution for the problem when they see their single parent drinking. (Yarber et al. 2010.)

In Kenya, most of single parents are women who are separated from their alcoholic husband. Most of these women are dependent upon their spouse income but when they self-have to search for a job in the employment market, the competition is fierce. They face many challenges due to illiteracy, lack of work skills and competence; life becomes more challenging for her and her children whom she is taking care off. Poverty, lack of basic needs and care from the parent

to their children pushes the children to go to extra limit. As such most of the children have to leave their innocent childhood and pursue their life as a bread winner in the family. Many children end up being child labor workers even though child labor is illegal. Sustaining the ends meet, many young girls turn into prostitution. Also, boys get involved in criminal activities like stealing which is easier way to access money for them. These children are victimized by the alcohol abuse in a family and have to choose this path of money making unwillingly or compelled to do so to take care of the family as a whole. (FIDA Kenya 2007.)

4 AIMS, PURPOSE AND RESEARCH QUESTIONS OF THE STUDY

The aim of this study was to identify the experiences and challenges of teenagers who are brought up in alcohol abuse families in Kenya. The purpose of this study was to provide information that will assist various stakeholders in generating recommendations to health care authorities and education institution to provide necessary intervention programmes for these teenagers.

In order to achieve the set aims and purposes, it is necessary to answers the following research questions.

- 1. What are the experiences of teenagers in alcohol abuse families in Kenya?
- 2. What are the challenges faced by teenagers in alcohol abuse families in Kenya?

5 IMPLEMENTATION OF THE RESEARCH

5.1 Research Methodology

Qualitative research method was applied in this study. This method was used because qualitative research helps to explore the spread of the attitudes and diversity towards an issue but not the intensity of the participants (Kumar 2011). Qualitative research is implemented on a natural setting and provides insight on the meaning that participants attach to their behaviour, how they interpret situations, and how their perspectives are on particular issues. (Pratt 2006.)

Qualitative data can be collected systematically by gathering, organizing, interpreting, analyzing, and communicating particular issue or problem in the world. A good qualitative research helps one to understand the world, their society, and its institutions. This methodology can provide knowledge that targets societal issues, questions, or problems and therefore serves humankind. It focuses on lived experience, interprets participant's viewpoints and stories, and is appropriate and helpful for achieving a variety of research goals. (Tracy 2013.)

5.2 **Setting**

The research was conducted purposively in Nairobi in Kenya. Nairobi is the capital city of Kenya. Kenya is one of east African countries with a population of 38,610,097 million the capital city of Kenya is Nairobi with a population of 3,138,369. Mostly it is a religious country with Christianity being the most followed religion and secondly Muslim. (Kenya National Bureau of Statistics 2009.) Nairobi province has major slums in the country and this is the place where the majority of population dwells. As a whole Nairobi has 44 percent of poverty incidence. The eight political constituencies in Nairobi Province

contribute 6 percent to total national poverty. With an estimated 874,058 poor people, almost half (49%) of them are concentrated in 3 of the eight constituencies. (Geographic Dimensions of Well- being in Kenya.) According to United Nations Development Program (UNDP 2013), unemployment rate stood at 40% mostly due to political instability during 2008-2009 post-election violence.

The data collection was done in a youth club which is located in Nairobi. The youth club is involved in mentoring youths to become better citizens in future and provide guidance to them. The youth club empowers young generation by conducting training programs such as leadership management, computer skills, sports and cultural activities. The selection for this setting was due to the youth being computer literate that helped in conducting the research. In addition, the youth in this club have directly or indirectly experienced parental alcohol abuse their life.

5.3 Recruitment and Participants

According to Tracy (2013), a research field can comprised of many potential sites, settings, and participants. But some sites and participants will be more important and resourceful than others for studying certain phenomena. The participants included twelve teenagers from ages 15 to 18. Moreover these participants are the vulnerable groups who are directly affected by the abuse of alcohol in families. So, without any biasness, they are likely to provide complete and diverse information (Kumar 2011).

Simply put, the researcher decides what needs to be known and sets out to find people who can and are willing to provide the information by virtue of knowledge or experience (Rose 2009).

When choosing the samples, the gender of the participants was not restricted. The exclusion criteria for the sampling group were: youth who cannot read and write in English, participants who do not show willingness to participate in the research and those whose do not meet the age criteria which are listed beforehand. According to Kumar (2011, 211), the selection of sample size depends entirely upon the findings and the kind of relationship or connection we want to form. The question of sample size is less important in the qualitative research if data can be collected till the saturation point. This means that once the researcher thinks he or she is not getting much new information from respondents, the researcher shall stop collecting further information.

The formal permission for the research was submitted to department of youth club, for approval. The participants were given complete information by the youth leader who worked as an intermediary in the research about the research aim, expectation and procedure of the research. The signed inform consent form was carried out to ensure their anonymity and confidentiality. In addition, the participation was voluntary (see appendix 1).

5.4 Method of data collection

The noun narratio in Latin means narration or a story, and the verb narrare means to tell or to narrate (Heikkinen 2002, 7).

Descriptive responses obtained in reply to open ended question in narrative format was used in the study because the data generated by focus groups and narratives are always qualitative in nature (Kumar 2011, 138).

Collection of the data took one day and narrative form of study was used to collect data. The participants wrote brief essay about a teenager (see appendix 2).

According to Shkedi and Asher (2005, 60), one of the most common human activities which is universal, is telling about the past and the present, as well as about future or a form of discourse we learn when we are children is through telling a story. Narrative study is more important since it does not limit respondent's answers and the respondent is free to tell the story the way they want without any fear and biasness.

The data collection was done by first sending a mail to the youth leader of the youth club in Kenya who mobilized and contacted the target group according to the research criteria. The email was directly sent to the youth leader. To maintain confidentiality, the youth leader uploaded the essay question to the computers which were supposed to be used. Once the essay writing was completed, the results were transferred directly to our electronic mail by the youth leader. The advantage of collecting data using this method was to protect the anonymity of the participants by ensuring that the identification such as participants name, name of the institution or member were not disclosed. Furthermore, the process is less expensive and less time consuming. Narrative research does not aim at objectives or generalized knowledge, but at a local, personal and subjective knowledge. (Heikkinen 2002.)

Therefore, to collect the data from the participants was easier as the participants express the incidents through their own narration which might had happened to them previously in the form of free written answers. Moreover, the narrative question asked is relevant to our focus group which includes teenagers.

5.5 Data Analysis

Content analysis means analyzing the contents of interviews or observational field notes in order to identify the main themes that emerge from the responses given by your respondents or the observation notes made by you.(Kumar 2011, 278.)

Twelve participants responded to the question. The essays were written in a word document. The collected responses were eighteen pages in A4 size paper with Times New Roman font of Microsoft word 2010. The font size was 12. The data collected in the form of essay was in English. The initial stage for analyzing data was data management. The data was stored in an organized file. Then the collected data in the form of essay were read thoroughly several times to prevent any sort of incompleteness, carefully checking the responses to minimize the error. A memo was written in the margin of notes to identify major information. Then a list of codes which match the text was developed using numbers. Categories of information were developed and we tried to make our themes as precise as possible. The main theme was extracted from research question. Subthemes were derived after reading through the collected data. After identifying the themes, sub-themes were classified under the different main themes after going through the transcripts of the notes. The main theme was represented by bold font whereas sub-themes were represented by italic font. Lastly to integrate these themes, we used verbatim responses in our result. Responses from the participants falling under the same theme was copied and pasted together while those which does not corresponds to our main theme and sub-theme was deducted.

Examination of all the responses given to all the questions by one respondent at a time helps to avoid inaccuracy (Kumar 2011, 256).

6 FINDINGS

The research was conducted in youth club in Kenya. The participants were teenager's age ranging from 15 to 18 years of age. After analyzing the data several themes and subthemes emerged from the results.

Broken home

Nearly half of the participants said that the parents of the teenager would separate or divorce. Most of them said that the teenager might end up being brought up by a single parent. Single parenthood was the major concern and challenge to the participants. Two participants said that they have had experience since their parents have been divorced and one participant said that the parent separated and now he does not even know where his father is.

"Sometimes this teenager reminds me of my life before my mum separated with our father, I would wake up in the middle of night because my father would be yelling and shouting at my mum and at the same time hitting her on her head. This was one of my worst nightmares that I would not want anyone to go through what I went through. To think about the teenager life with alcoholic parent makes me think of the worst that could be happening to him."

Some of the participants indicated that the teenager might be orphaned eventually due to the alcohol abuse by the parents. They indicated that alcohol abuse parents tend not to live longer hence the teenager will be left alone.

"One of our neighbours's just lost his both parents which involved a car accident. They were coming from a club at 2am at night and police told their relatives that they were both drunk, now my neighbour friend has to move and stay with his grandparent since he was left without parent. My fear is that the teenager might eventually become orphan."

Bad influence on teenagers lifestyle

More than half of participants said that the teenager might end up being influenced by parents to use the alcohol or other drugs since he is brought up in

the environment that encouraged alcohol abuse. One of the participant said that it felt "cool" to see his parent drinking alcohol and smoking. Some responders narrated that the teenager in case is female might become pregnant due to lack of proper guidance from parents and those who thought that the teenager is a boy indicated that he might be involved in promiscuous behavior.

"my parent were always busy drinking alcohol left me without any advice on how to handle myself while with boys and I ended up being pregnant.....I wish my parents were there for me when I needed them most for advice, my hope is that the teenager might be lucky that he or she might get advice from his parents despite that they are alcoholic...."

Stress

Few responders said that the teenager might be in a stressful environment hence he might be stressed and might not be able to cope with the situation. One of the participants had expressed concern that the teenager might suffer also depression if he or she did not have anyone to talk to about the alcohol problem in the family. He noted that the teenager might be affected by the situation and might never recover from the situation.

"The worst that can happen to the teenager is to grow up hating his parents and blaming himself for what is happening in his life since the challenge the teenager might have is to learn how to deal with the situation and my end up having stress and may not be able to cope with life. The teenager might develop lack of trust and may not be able to have a good relationship with people or friendship."

Violence in the family

Nearly all the respondents said that the teenager will experience violence in their family and the violence which might be physical towards their parents and also towards the teenager.

"The idea that he might be living with someone who is abusive makes me feel sorry for him since I have experienced violence through my father..... He would grab me by my hand and smack my head off to the wall while punching me on my

stomach and..... He had a stick which he would request me to collect so that he can punish me with it."

Only few responders said that they had encountered with sexual violence mostly caused by non-biological fathers. Physical violence and verbal abuse was mostly mentioned by all the responders who indicated that the teenager might experience from the alcoholic parents.

"The embarrassment my friend always felt when we visited him since his father could not stop verbal and mental abuse.....name- calling was the order of the day. I can almost relate what might be happening to the teenager since I have had more than ten friends whose parents are alcoholic and violence has been subjected to them like every day."

Most of the responders said that the teenager parents may fight most of times and there is always conflict in the family.

"I can only imagine how difficult the teenager's life is to live with a parent who is alcoholic, I have friends at school whose parents always drink and they end up beating them up. My friends always have bruises in their hands and sometimes on their face. It's a great tragedy what the teenager might be going through and I would not wish to be in that situation."

Neglect

Some of the participants narrated how the parents may not be there when needed most. Majority of them said that the teenager may feel neglected when it comes to their parents being there especially in school and religious activities which they are required to attend. Majority of the respondents said that the most important thing that the teenager might lack was food in the family. Some of the respondents said that the teenager could sometimes go without food due to financial problems.

"...to be feb and cared for is one of the most important things that a teenager should never have to worry about, my feeling is that the teenager might be

neglected in a way that me not be fed well and may be alone most of the time due to the lack of parents presence in his life."

Few participants said that shelter could be a huge challenge to the teenager since the family might lack money to pay the house rent in the city. Most respondents indicated that the teenager might end up living on the streets due to family problems which are associated with alcohol abuse in a family. Half of the participants narrated that there is high possibility that the teenager will be having challenge with is education and he might have poor performance and eventually might drop out of school or not be able to get a good carrier due to lack of education.

"Education is the key to life to good life, without proper guidance the teenager might drop out of school or may perform poorly due..."

7 DISCUSSION

7.1 Discussion of findings

According to analysed data, majority of respondents narrated that teenager might experience negligence in alcoholic families. In terms of negligence, respondents wrote that teenager might have challenges of lack of basic needs like food, and shelter. Teenager becoming street child might be a challenge also to the teenager. Not surprisingly, teenagers who are growing up in an environment where parental alcohol abuse prevails, tends to experience different life challenges than teenagers brought up in an non/alcoholic environment. As stated by United Nations International Children's Emergency Fund (UNICEF 2011), neglect means the failure of parents or carers to meet a child's physical and emotional needs when they have the mean, knowledge and access to services to do so; or failure to protect her or him from exposure to danger. Nevertheless, in Kenya, school offers meals, education and hope which is one of the necessity of teenager while growing up (UNICEF 2011).

Separation or divorce and being orphaned were the experiences mentioned by most of the participants. This finding was similar to those documented by Sember (2005, 11). He has stated that separation or divorce of parents impose a negative impact on the children where children tend to cope with the situation by being depressed or grieving. Moreover death of the parent due to alcohol abuse caused by diseases and injuries might be emotionally overwhelming for the teenagers. The family has to face a number of stressors with regards to economic issues, parenting, provision of basic needs and infrastructure, security. Thus, teenagers get caught up in higher risk of developing conduct disorders, alcohol or drug abuse, engaging in irresponsible sex, poor academic performance,

involving in crime and violence, etc. (Holmes 1995, 11.) The fact that they might be left alone or become orphan is the matter of concern for such teenagers (Pyne et al. 2002).

Many of the participants addressed that the teenager might become most vulnerable to the parental alcohol abuse in terms of violence in the family. In addition, sexual violence, physical or verbal abuse and conflicts were the findings noted from the narration. The finding of this study appear to support the previous study by Covell et al. (2009) where they have stated that violent parent can make the matter worse. Supporting the finding, according to FIDA (2012), 83% of women and girls reported one or more episodes of physical abuse in childhood; 46% reported one or more episodes of sexual abuse in childhood.

Findings found out that the teenager lifestyle changes might be complicated, where use of drug and alcohol, teenage pregnancy and stress were stated. According to Holmes (1995), a study of youngsters from preschool through age 18 found out that teenager who abuse drug showed identifiable personality characteristics. Interpersonal alienation, poor impulse control, manifest emotional distress. These traits were directly related to poor parenting as per developmental point of view. Teenagers become sexually active because of lack of proper proactive guidance from their parents. Resulting in teenage pregnancy and teenage boys involving in promesious activities. The matter of concern is unprotected sex amongst teenagers or adult can result in fatal conditions of HIV infection.

According to the findings the participant had also narrated that the teenager might drop out from school. This finding can be supported by Barlow (2009),

where he has stated that teenagers living with alcoholic parent are likely to do poorly at school.

7.2 Ethical considerations

To carry out the research it is utmost important to know the principles of conduct. Basis of ethical conduct is any sort of difficult situation stemming from a moral plight. Sometimes in research process there might be creation of ethical conflict in regard to gaining access to participants or community, causing potential harm to individuals, breaching confidentiality, improper handling of information, human rights violation, and being bias or prejudice which are considered to be unethical (Kumar 2011, 242).

The collection of data was done by narrative story writing via email. The process was performed in a youth club in Nairobi. The youth leader received mail which comprised of the narrative question, then saved the question in the form of word document in all the computers to be used. The participants wrote their story, which was collected and sent to researchers email. Before commencing the question essay, the participants were assured about maintaining the anonymity and confidentiality. They were provided information by the youth leader about our research aim and purpose. They were informed that they were no obligation and pressure if they want to withdraw from the writing process. Apart from that informed consent form was signed before commencement. Thus, the participants were able to express their own experience and opinion freely that was necessary to get rich information.

Furthermore, research integrity gives high significance to the honesty and integrity whereby all researchers are obliged to assume in their own research tasks (Finnish advisory board on research integrity 2012).

Qualitative studies frequently conducted in settings involving the participation of people in their everyday environments. Therefore, any research that includes people requires an awareness of the ethical issues that may be derived from such interactions. Ethics in health research includes appropriateness of the research design, the methodological design, and the funding sources, as well as behaviours in reporting data. (Orb, Eisenhauer & Wynaden 2001, 93 – 96.)

The research was conducted keeping in mind the ethical issues. Prior information was given to the concern bodies to collect information. Informed consent was obtained from the respondents which included justification for conducting research, aim and purpose, expectation and procedure. Seeking informed consent helped us to ensure that participants were autonomous, information provided by respondents was kept anonymous, and to maintain confidentiality by making sure the sources are kept confidential. Apart from that the signed consent form ensured the voluntary participation of the participants without biasness.

Instructions were given to not to write down the names, gender, institution name and any names of staff members. They were given the time duration of 1 hour 45 minutes but were also informed about withdrawing from the procedure if they want to. Furthermore, writing an essay was easier way of communication to convey a message how teenager feels and deals with this ordeal when parents drinks.

The data collected was stored in a specific file in the computer which was given a password where only researchers could access the file. This helps to protect the anonymity of the participants. The analysed data will be destroyed one month after presentation of our thesis.

7.3 Credibility, transferability, dependability and confirmability

In Kumar's book (2011, 184-186) Guba and Lincoln have suggested four determinants to confirm trustworthiness and authenticity of the study. Trustworthiness in a qualitative research is confirmed by four indicators such as credibility, transferability, dependability and confirmability.

The study was qualitative which helped to explore various experiences, beliefs, thoughts and feelings of the participants as they reflect their feelings and perceptions in the form of essay according to the research question. The participants are the only best medium to ensure that whether the research finding was able to justify their feelings and opinion exactly.

Credibility is judged by the extent of respondent concordance whereby you take your findings to those who participated in your research for confirmation, congruence, validation and approval. (Kumar 2011, 185.) The analyzed data was forwarded back to the participants through email to verify the credibility of the research. The researcher uses the appropriate and different sources and methods to provide evidence. Building a trusting relationship with participants, getting acquaintance with their culture and trying to find out the misinformation arises during the study are important to consider credibility. (Creswell 2007, 207-208.)

Dependability concerns with whether the same result can be obtained with regards to the method, design, analysis process if it is observed again. At the same time, keeping data for longer period and the collecting time extends, there might be a problem in terms of collected data with regard to its stability and constancy. (Kumar 2011, 185.)

According to Graneheim and Lundman (2003, 105-112), Polit and Hungler (1999), transferability refers to the extent to which the findings can be transferred to

other settings or groups. It is valuable to give a clear and distinct description of culture and context, selection and characteristics of participants, data collection and process of analysis to facilitate transferability. Research study was performed accurately outlining all the different section of the study which was further helpful for other interpretations to use the result findings to carry out the research in relationship with the challenge and suffering face by teenager in alcohol abuse family.

8 CONCLUSION AND RECOMMENDATIONS

According to the essays written by the study participants it seemed clear that alcohol abuse in Kenyan families' impacts negatively on the lives of teenagers as a whole. The researchers found that the problems are somehow similar and consistent with the literature. The study also revealed that the problem of alcohol abuse in family does not only affect the user but also has a ripple effect towards the family.

The study demonstrated that the participants had enough experience and evidence of what might be happening in the life of teenagers in alcohol abuse families in Kenya. Through their narration and also their account of their own personal life experience gave evidence that there is great challenges facing the teenagers in alcohol abuse families in Kenya. This research will assist various stakeholders in generating recommendations to health care authorities and education to provide necessary intervention programmes for these teenagers.

The researchers felt that there was need to identify the assistance given to the teenagers in alcohol abuse families hence the researcher recommends further studies to be carried out in Kenya involving a large sample and also involving other locations in the country because the study was only carried out in the capital city of Nairobi.

REFERENCES

American Journal of public Health. 2000. Accessed on 13 July 2013. http://www.jamk.fi/kirjasto, Nelli Portal, EBSCO.

Barlow, J. 2009. Substance abuse: The implication of research. Policy and practice. Jessica Kingsley Publishers: London, GBR. Accessed on 25 July 2013. http://www.jamk.fi/kirjasto, Nelli Portal, ebrary.

Berns, M., R. 2011. Child, family, community: socialization and support. Edition 9 Accessed on 26 July 2013.

http://books.google.co.uk/books?id=4SbovM1yyMAC&pg=PA234&dq=challenges +faced+by+children+in+a+alcohol+abuse+family&hl=en&sa=X&ei=7x_yUYa6C4a HPfikgLgE&ved=0CFIQ6AEwBQ#v=onepage&q=challenges%20faced%20by%20c hildren%20in%20a%20alcohol%20abuse%20family&f=false

Covell, K. & Howe, B., R. 2009. Children, Families and violence: Challenges for Children's Rights. Jessica Kingsley Publishers. London and Philadelphia.

Creswell, W., J. 2007. Qualitative Inquiry & Research Design: Choosing among five approaches. 2nd Ed. Sage Publication.

Elo, S. & Kyngäs, H. 2008. Journal of advanced nursing- Informing practice and policy worldwide through research and scholarship 62, 107-115. Accessed on 23 July 2013.

http://onlinelibrary.wiley.com/doi/10.1111/j.1365-2648.2007.04569.x/full#ss3

Federation of Women Lawyers (FIDA) Kenya. 2007. A shadow report to the 5th and 6th combined report of the government of the republic of Kenya, on the international convention on the elimination if all forms of discrimination against women (CEDAW). 39th session, New York, USA. Accessed on 12 September 2013.

http://www.google.fi/url?sa=t&rct=j&q=&esrc=s&frm=1&source=web&cd=2&cad =rja&ved=0CDEQFjAB&url=http%3A%2F%2Fwww.iwrawap.org%2Fresources% 2Fpdf%2FKenya%2520SR%2520final.pdf&ei=yceNUp6dLILK4ATnyoDADw&us g=AFQjCNG8 sk6Juo9xEV15ePKlsU3D6eBBA&sig2=f TxqCZrY-4rl T wLDxCw

Federation OF Women Lawyers (FIDA) Kenya. 2012. Gender- based domestic violence in Kenya. Accessed on 12 September 2013.

http://www.womankind.org.uk/wp-content/uploads/2012/03/FIDA-Kenya-Report-on-Gender-Based-Domestic-Violence-in-Kenya.pdf

Geographic Dimensions of Wellbeing in Kenya. Who and where are the poor? A constituency level profile volume. Accessed on 3 November 2013.

http://www.google.fi/url?sa=t&rct=j&q=&esrc=s&frm=1&source=web&cd=4&ved=0CGkQFjAD&url=http%3A%2F%2Fwww.knbs.or.ke%2Fsurveys%2Fpoverty%2Fpdf%2FKenyaPovAtlasIIfinal2cl.pdf&ei=gMyNUtymCqiY4wScvoGIBw&usg=AFQjCNFoCbacnCkNYFVjE-N913_WhH2m1w&sig2=PtfCP3MdhMi_lwq-IlSQXQ&bvm=bv.56988011,bs.1,d.bGE

Guidelines of the Finnish Advisory Board on Research Integrity. 2012.

http://www.tenk.fi/sites/tenk.fi/files/HTK ohje 2012.pdf

Gifford, M., Friedman, S., & Majerus, R. 2009. Alcoholism. Greenwood publishing group.

Graneheim, U. & Lundman, B. 2003. Qualitative content analysis in nursing research: concepts, procedures and measures to achieve trustworthiness. Nurse education today. 2004. 24, 105–112.

Head, G. 2007. Better leraning, better behaviour. Duendenic academic press: London. Accessed on 24 July 2013. http://www.jamk.fi/kirjasto, Nelli Portal, ebrary.

Heikkinen, H. L. T. 2002. Whatever is narrative research? In Huttunen, R. Heikkinen, H. & Syrjæla, L. (Eds.), Narrative research: Voices of Teachers and Philosophers (pp. 13–25). Jyväskylä, Finland: SoPhi. Accessed on 2 November 2013. https://www.jyu.fi/hum/aineistot/tutkijakoulu/Narrative.pdf

Holmes, G., R. 1995. Helping teenagers into adulthood: A guide for the next generation. Greenwood press publication. Westport, CT, USA. Accessed on 4 November 2013. http://www.jamk.fi/kirjasto, Nelli Portal, ebrary.

Kroll, B. & Taylor, A. 2003. Parental substance misuse and child protection. Jessica Kingsley publishers. Accessed on 25 July 2013.

http://books.google.co.uk/books?id=LsqRLKFvqgC&printsec=frontcover&dq=kroll+and+taylor+2002&hl=en&sa=X&ei=i4jwUZROo7esgbbxIDgAw&ved=0CDEQ6wEwAA#v=onepage&q=alcohol&f=false

Kumar, R. 2011. Research Methodology: a step- by- step guide for begynners. 3rd Rev. Ed. Sage Publication.

Mwaura, N. 2005. Kenya today: breaking the yoke of colonialism in Africa. Algora Publishing.

Narayan, D., Patel, R., Schafft, K., Rademacher, A. & Schulte, K., S. 2000. Voices of the poor: Can anyone hear us? World Bank Publications: Washington, DC, USA. Accessed on 24 July 2013. http://www.jamk.fi/kirjasto, Nelli Portal, ebrary.

Orb, A., Eisenhauer, E. & Wynaden, D. 2001. Ethics in qualitative research. Journal of nursing scholarship. 2000. 33. 93 – 96.

Ostrowsky, K., M. 2009. Self-medication and violent behavior. LFB scholarly publishing LLC: TX, USA. Accessed on 25 July 2013. http://www.jamk.fi/kirjasto, Nelli Portal, ebrary.

Pratt, N. 2006. Qualitative Research. Published by Open University. Accessed on 22 December 2013.

http://www.edu.plymouth.ac.uk/resined/qualitative%20methods%202/qualrshm.htm

Pyne, H., Claeson, M. & Correia, M. 2002.Gender dimensions of alcohol consumption and alcohol related problems in Latin America and the Caribbean. World Bank publications: Washington, DC; USA. Accessed on 25 July 2013. http://www.jamk.fi/kirjasto, Nelli Portal, ebrary.

Rose, K., S. 2009. Assessing Emotional Intelligent Among Information Technology and Non-information Technology Professionals. Published by ProQuest LLC. Accessed on 28 October 2013.

http://books.google.fi/books?id=0_1Gi1M01I0C&pg=PA41&dq=bernard+2002+purposive+sampling&hl=en&sa=X&ei=70pvUtPEB8XbtAa60oCoCg&ved=0CC0Q6AEwAA#v=onepage&q=bernard%202002%20purposive%20sampling&f=false

Sember, M., B. 2005. How to parent with your ex: working together for young child's best interest (2nd edition). Sphinx publishing, an imprint of sourcebooks, inc.: Naperville, IL, USA. Accessed on 26 July 2013. http://www.jamk.fi/kirjasto, Nelli Portal, ebrary.

Shkedi, A. 2005. Multiple Case Narrative: A qualitative approach to studying multiple populations. John Benjamins Publishing Company. Amsterdam, NLD. Accessed on 4 November 2013. http://www.jamk.fi/kirjasto, Nelli Portal, ebrary.

SOS Children's Villages International. Accessed on 19 July 2013. http://www.sos-childrensvillages.org/Where-we-help/Europe/Finland/Pages/default.aspx

Taylor, J. & Daniel, B. 2004. Child Neglect: Practice issues for health and social care. Jessica Kingsley publishers: London, GBR. Accessed on 24 July 2013. http://www.jamk.fi/kirjasto, Nelli Portal, ebrary.

Tracy, J., S. 2012. Qualitative Research Methods: Collecting Evidence, Crafting Analysis, Communicating Impact. John Wiley & Sons publication. Accessed on 26 October 2013.

http://books.google.fi/books?id=JnDCKj5LGIC&dq=qualitative+research&source=gbs_navlinks_s

United Nations development Programme. 2013. Discussion Paper: Kenya's youth employment challenge. Accessed on 12 November 2013.

http://www.google.co.uk/url?sa=t&rct=j&q=&esrc=s&frm=1&source=web&cd=9&cad=rja&sqi=2&ved=0CIABEBYwCA&url=http%3A%2F%2Fwww.undp.org%2Fcontent%2Fdam%2Fundp%2Flibrary%2FPoverty%2520Reduction%2FInclusive%2520development%2FKenya_YEC_web(jan13).pdf&ei=1AKPUrX8M4eFtQaR94CoBA&usg=AFQjCNGZuaYWZ1v7Jr9PZStQcEyJ4bUIbg&bvm=bv.56988011,d.bGE

United Nations International Children's Emergency Fund. 2011. Kenya. Accessed on 6 November 2013.

http://www.unicef.org/infobycountry/kenya_61031.html

United Nations International Children's Emergency Fund. 2010. Violence against children in Kenya: Findings from a 2010 National survey. Accessed on 5 November 2013.

http://www.unicef.org/esaro/VAC in Kenya.pdf

World Health Organization. 2006. Facts on Alcohol and Violence. Accessed on 16 July 2013.

http://www.who.int/violence_injury_prevention/violence/world_report/factsheet_s/fs_intimate.pdf

World Health Organization. 2004. Global Status Report on Alcohol Accessed on 16 July 2013. http://www.who.int/substance_abuse/publications/en/kenya.pdf

World Health Organization. 2011. Kenya: socioeconomic context Accessed on 22 July 2013.

http://www.who.int/substance_abuse/publications/global_alcohol_report/profiles/ken.pdf

Yarber, D., A. & Sharp, M., P. 2010. Focus on Single Parent Families: Past, Present, and Future. Greenwood publishing group. Accessed on 3 November 2013. http://www.jamk.fi/kirjasto, Nelli Portal, ebrary.

APPENDICES

Appendix 1: Permission to perform the study

Heklokantie 1D 1

40600 Jyvaskyla FINLAND

Tel: +358417000129

Email G1418@jamk.fi

28 October 2013

To,

The CEO

Youth Club, Nairobi, Kenya

Respected sir/madam,

PERMISSION TO PERFORM OUR RESEARCH STUDY IN YOUR YOUTH CLUB

We are Bachelor degree student of Jyväskylä University of Applied Sciences (JAMK), studying degree program in Nursing. We are writing our thesis on the topic "The alcohol abuse amongst Kenyan families – Teenagers suffering".

The purpose of the study is to find out the challenges and suffering teenagers faced in an alcohol abuse family and identify any sort of help teenagers are offered. We would like to request you for your kind permission to collect the information in your institution on the month of November.

We are going to collect the data by using electronic email through narrative essay writing in your youth club. The selection criteria for this study includes

Teenagers from age 15 to 18

Teenagers who are members of the youth club

Teenagers who live in Nairobi and can communicate in English

The collected information will be used only for research purpose, maintaining the anonymity of each participants and intermediaries. We are hereby with firm conviction that this request will meet your kind consideration and approval.

Thank you.
Yours faithfully,
Douglas Weru Alice
&
Meera Lama
CEO, youth club, Nairobi

Appendix 2: Informed consent

Jyväskylä University of Applied Sciences (JAMK)

School of Health and Social Studies,

Jyväskylä, Finland.

Email G1418@jamk.fi

F7650@jamk.fi

1st November 2013

Dear participant,

Informed consent

We are Bachelor degree student of Jyväskylä University of Applied Sciences (JAMK), studying Degree Program in Nursing. We are interested in collecting information on the research topic "The alcohol abuse amongst Kenyan families – Teenagers suffering". The purpose of the study is to find out the challenges teenagers faced in an alcohol abuse family and identify any sort of help teenagers are offered in regard to alcohol abuse in a family.

We are going to send a link question to you where you can write a short essay about a teenager. We will conduct the process on November 2013. It will be necessary to analyze the samples from approximately twenty participants to understand and achieve our research objectives.

You are being asked to participate in the study because you meet the criteria for

conducting our research and are resident and member of the youth club in

Nairobi. Participants may withdraw from the study at any time since your

participation is entirely voluntary without any obligation to answer the question

which you find it as discomfort or objectionable. There is no penalty for it. If you

decide to participate, you will be asked to write a short essay which will last for

45 minutes. There are no remunerations for taking part in the research study.

Any information obtained from you will be kept strictly confidential and

anonymous. Information will not be shared with anyone outside the research

team.

Your signature on the consent form below means that you have freely agreed to

participate in this research study. Consent is done after you have read and

understand its contents. If you have any questions or complaints regarding the

research, you may contact us or the head of Department of Nursing.

Thank you for your participation

Yours truly,

Douglas Weru Alice and Meera Lama

Tel. +358417000129

Email <u>G1418@jamk.fi</u>

F7650@jamk.fi

Participants Signature____

Date

Appendix 3: Brief essay writing

Imagine about a teenager. The teenager lives in Nairobi with his both parents who are alcoholic. Write about the experiences teenager might face where parents are alcoholic?

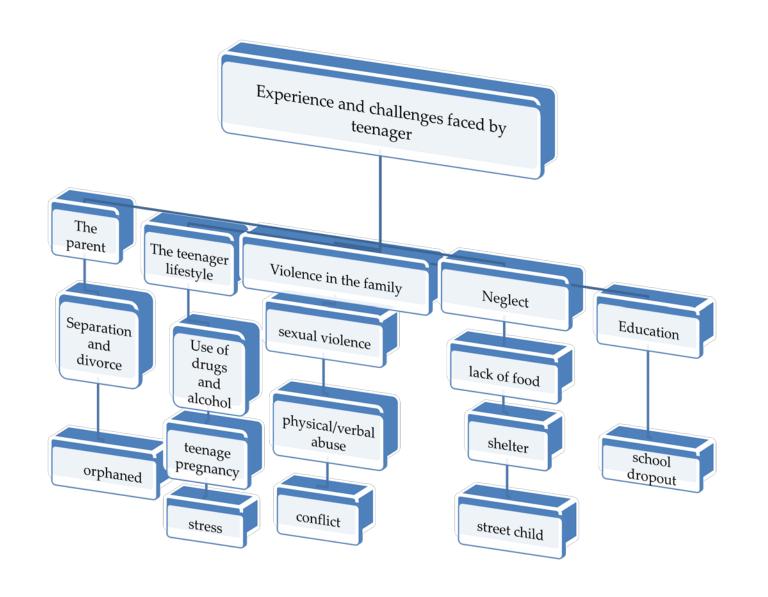


Figure 1. Data analysis layout.