

# Effects of Consumers Perceived Barriers to the Implementation of Alcoholic Drinks Control Act, 2010 on Compliance

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#### Abstract

Alcohol is the most commonly abused substance in the country and poses the greatest harm to Kenyans as evidenced by the numerous calamities associated with excessive consumption and adulteration of illicit brews. This problem of alcohol misuse has led to increased demands for law enactment to respond to alcohol-related incidents and with widespread public concern about the effects of alcohol on the community. This study sought to establish effect of consumers' perceived barriers to the implementation of Alcoholic Drinks Control Act, 2010. The study adopted descriptive survey design. The target population comprised of all alcohol premises operators and alcohol consumers in hospitality alcohol establishments in Eldoret town. Purposive sampling was used in selecting five Hospitality alcoholic premises as per the Act licensing categories in the Eldoret Town. This included; a bar, a club, a restaurant, a hotel and members club. Simple random sampling was used to select 10% operators from the selected alcoholic hospitality establishments generating 21 alcohol operators while systematic sampling was used to generate 84 alcohol consumers. Questionnaire and interview schedule was used to collect data. Data was analysed using descriptive statistics; frequencies and percentages, and subjected to regression analysis to establish the effect. The study established that perceived barriers significantly affect compliance ( $\beta = -0.191$ , p = 0.038), and that it predicts40.7% compliance to the act. The study recommended that there is need for active grassroots and community engagement in the legislative implementation processes related to alcohol. This should include informal social control related to community norms or the activities of concerned citizen groups or community alcohol prevention coalitions.

**Keywords:** Consumers perceived barriers, Implementation, Compliance

#### Introduction

Alcohol consumption and related problems vary widely around the world, but the burden of disease, death and its effects on alcohol consumers has remained to be significant in most



countries (Norstrom et al., 2013). Alcohol consumption is the world's third largest risk factor for disease and disability, in middle-income countries, it is the greatest risk. Almost 4% of all deaths worldwide are attributed to alcohol. These are more than the deaths caused by HIV/AIDS, Violence or Tuberculosis. Alcohol consumption is also associated with many serious social issues, including violence, child neglect and abuse, absenteeism in the workplace, among others (Brandish & Sheron, 2010).

In Kenya, the consumption of alcohol dates back to prehistoric times but the abuse was not as pronounced as it is today. Alcohol was consumed during special occasions like weddings, initiation ceremonies and meetings of elders. There were regulations as to who could drink and the age factor was also taken into consideration. For example, women, young men and children were not allowed to drink. Today in Kenya, alcoholism is widespread, findings from a National Survey on Alcohol and Drug Abuse conducted by NACADA in 2012 shows that 27.3% of Kenyans population are currently using alcohol, 9.1% tobacco, 4.2% Khat 1.0% bhang and 0.1% heroin (NACADA, 2012).

Alcohol is the most commonly abused substance in the country and poses the greatest harm to Kenyans as evidenced by the numerous calamities associated with excessive consumption and adulteration of illicit brews (NACADA, 2012). These emerging notable trends in the production, manufacture, sale, promotion and consumption of alcoholic drinks tends to increase alcohol abuse in the country. The observation has been exposed by relentless media focus on a "drunken" drinking culture and alcohol-related violence in the country (Mureithi, 2010). This problem of alcohol misuse has led to increased demands for law enactment to respond to alcohol-related incidents and with widespread public concern about the effects of alcohol on the community (NACADA, 2009).

The above concerns informed the need to develop appropriate legislation in response to this growing problem. Kenya did manage to enact the Alcohol Drinks Control Act, 2010 on the 22<sup>nd</sup> November, 2010 (Kenya Gazette, 2010). The Act provides for comprehensive control of manufacture, sale, consumption, distribution and promotion of alcoholic drink in Kenya. The Act provides for effective licensing process as well as strengthened institutional framework for the control of alcoholic drink in alcohol industry.

Despite the efforts made to regulate the consumption of alcohol, Kenyans from some sections of the society have continued to experience negative effects of alcohol consumption. In Kenya, currently, the number and frequency of deaths resulting from consumption of alcoholic drinks has reached alarming levels that requires control. For instance, 12 people died in Nairobi's Shauri Moyo Estate in April 2010; 5 died in Thindigwa, Kiambu County in July 2010, 23 people died in Kibera slums, Nairobi County in August 2010 and in the same month 5 died in Ngobit, Laikipia County (NACADA, 2011). One of the most conspicuous cases was the use of illicit drink in November 2010 which resulted in 140 deaths and loss of sight among some users in the poor Nairobi neighbourhoods Mukuru Kwa Njenga and Mukuru Kaiyaba, Nairobi County. Similar



incidents have also been reported in Murang'a county, Nakuru County, Kapsabet, Nandi county, Thindigwa, Kiambu County and Langas, Uasin Gishu County (Kenya Police reports, 2010).

The successful compliance to the Act depends the consumers' perception. There is likely to be less resistance if the public have the perception that they clearly understand the basic problem and the consequences associated with alcohol consumption (Babor *et al.*, 2003). In the absence of adequate information, people invent their own answers which may lead to imaginary problems and this could make implementation of the law challenging. Few studies have focused on how people perceive alcohol control laws.

#### Statement of the Problem

The Kenya Alcoholic Drinks Control Act, 2010 contains important measures that will greatly reduce the harm caused by excessive consumption of alcohol, hence lessen the negative effects of alcohol. However, the laws also pose a threat on the economic and social benefits of alcohol consumers. This Act may impede on the freedom, privileges and what they perceive as their rights. The Act has established regulations, restrictions and prohibitions on how alcohol should be sold and consumed. But despite the fact that the law has been operational for the last six years, not much has been achieved on its objectives.

Few studies have been conducted in Kenya have mainly concentrated on extent and effects of alcohol consumption. Kobia (2011) did a study on factors influencing alcohol consumption in Majengo slums of Nyeri Municipality; NACADA (2010) conducted a study on alcohol use in Central Province of Kenya. Musau (2012) also did a study on the Effects of Alcohol Abuse by the Family Institution in Kenya. However, none has focused on the effect of perceived barriers on compliance with the alcohol Act.

#### **Literature Review**

### **Perceived Barriers of the Alcohol Act**

It is one thing to enact alcohol laws and formulate policies; it is quite another thing to implement them; hence, the importance of the National Police Service, the law enforcing organ. Under the current constitutional order, the National Police Service was established by Article 243 of The Constitution of Kenya, 2010. As law enforcers, it is their duty to see to it that Kenyans and other people within the Kenyan territory comply with alcohol laws and policies. In so doing, the police are supposed to be guided by the provisions of Article 244 Clauses (a) and (b) which state that they shall: (a) Strive for the highest standards of professionalism and discipline; and (b) Prevent corruption and promote and practice transparency and accountability.

However, numerous surveys, such as those done by Transparency International (2014), have indicated that the security organ is riddled with corruption. For example, the Transparency International report of 2014 indicates that the police in the country received 43.5% of the total bribes extorted. It is little wonder that following the crackdown on illicit alcohol the Cabinet



Secretary for Internal Security announced that 99 chiefs and assistant chiefs had been dismissed. He also revealed that 15 police officers and 5 officers in charge of police divisions and 7 officers in charge of police stations were said to be accomplices in the production and consumption of non-standardized alcohol. It is also ironical that some police officers are themselves alcohol dependent (Ombati, 2015).

The same malady of corruption seems to have afflicted the Kenya Bureau of Standards (KEBS). The bureau is a statutory body charged with, the responsibility of standardization in commerce and industry. With regard to alcohol, the body helps to determine the quality of alcohol beverages imported, produced, sold and consumed in Kenya. Sadly, the bureau does not seem to be equal to the task. For instance, following the president directive to crackdown on 'second generation' alcohol, the Bureau moved quickly to suspend 385 alcoholic brands it had previously certified due to corrupt deals. In a related development, the Interior Ministry suspended affected manufacturing companies' licenses because of the illegal ways they were allocated licenses (Odalo, 2007).

Despite the police playing a major role in enforcing ADA policies, they have been accused of being corrupt. Kenya still maintains a poor score on the global corruption index 2015, whereby bribery levels remains high. The police department remains the most bribe prone institutions (Transparency International, 2015). A report released by the ant graft agency, Ethics and Anti-Corruption Commission (EACC) rated the Ministry of Interior in which the police force docket falls as having the highest incidences of corruption at 40.3% in 2015 (Standard Newspaper March 16, 2016 p 4). NACADA have also accused the police of taking bribes from unlicensed bar operators, and those operating beyond stipulated hours or selling alcohol to underage persons therefore reversing the gains made in the fight against alcohol and drug abuse.

# Methodology

## **Research Design**

Research design is the arrangement of conditions for collection and analysis of data in a manner that aims to combine relevance to the research purpose with economy as procedure (Kothari, 2008). This study employed descriptive survey design, the design allowed the researcher to get information about a social system and give a description on the phenomena under study. It was used due to its versatility to accommodate various methods of data collection such as questionnaires and interview as well as data analysis of qualitative and quantitative data in order to deeply understand the problem under investigation.

# **Study Area**

The study was undertaken in Eldoret town which is one of the major towns in Kenya. Eldoret is located in the North Rift of Kenya and is also the administrative town of Uasin Gishu County. Eldoret is a hub for business, serving the North rift region of Kenya. The town is characterised with the massive growth of hospitality premises that target different types of customers (Uasin-Gishu County Integrated Development Plan, 2013). The town was suitable for the study since it



was characterized with different categories of hospitality establishments and which were very relevant in provision of required information for the study.

# 3.4 Target Population

Target population refers to the specific population about which information is desired. According to Ngechu (2004), a population is a well-defined or set of people, services, elements, events, group of things or households that are being investigated. The target population comprised of all alcohol premises operators and alcohol consumers in hospitality alcohol establishments in Eldoret town.

# 3.5 Sample Size

Patton (2002) argues that the sample size depends on what one wants to know, the purpose of the inquiry, what is at stake, what is useful, what will have credibility and what can be done with available time and resource. This study employed purposive, simple random and systematic sampling. Purposive sampling was used in selecting five Hospitality alcoholic premises as per the Act licensing categories in the Eldoret Town. This included; a bar, a club, a restaurant, a hotel and members club. Simple random sampling was used to select 10% operators from the selected alcoholic hospitality establishments generating 21 alcohol operators.

Systematic sampling was used to select the respondents who were consumers of alcohol drinks. The average number of consumers that visited the premise was established from the management as per the sitting capacity of the premise and the number was used to determine the intervals. The first consumer to enter the alcohol premise after the stipulated opening hours was selected purposively and thereafter every n<sup>th</sup> consumer was systematically selected based on the interval established to select 4 respondents from each alcohol premise giving a sample size of 84 respondents shown in Table 1.

**Table 1: Sample Size** 

Alcohol premises	-	Alcohol operators	
categories	Population	Sample size (10%)	sample size
Hotels	42	4	16
Restaurants	56	6	24
Members clubs	2	1	4
Clubs	32	3	12
Bars	73	7	28
Total	210	21	84

Source: Uasin Gishu County Public Health Office, 2016



#### **Data Collection**

The study employed both primary and secondary data sources were employed in the study. Primary data was obtained by the researcher at the time of doing research from the field of study. These documents are directly connected with the events or people being researched and they include first-hand accounts of an event, interviews, questionnaires, observations and focused group discussions (Sekaran, 2003). The study used primary sources of data and it was collected by use of questionnaires, and interview schedule. Questionnaires were used by consumers in this study while interview guide was used on the operators of the alcohol premises.

#### **Data Collection Instruments**

According to Kombo and Tromp (2006), social science commonly uses questionnaires, interview schedules and standardized test as research instruments. This study used both quantitative and qualitative data collection techniques.

## Questionnaire

Questionnaire was the main tool used to collect data. According to Kothari (2008), questionnaires are usually free from the interview bias as the answers are in respondent own words. The questionnaire choice was therefore based on the fact that questionnaires are free from bias of the interviewe. The research instrument allows respondents to have adequate time to give well thought out answers and it is also appropriate for literate, educated and cooperative respondents.

The questionnaires were developed on the basis of the objectives of the study and variables as captured in the literature review. The questionnaire contained five parts. Part one was background information of the respondents. Part two was general questions on consumer's knowledge on the Act. Part three was consumer's perceived barriers on compliance with the Act. Part four was about consumer's perceived shortcomings on compliance with the Act. Part five contained information on consumer's perceived barriers on compliance with the Act.

#### **Interviews**

Orodho (2009) postulates that many people are willing to communicate orally than in writing and they would provide data more readily and fully than on a questionnaire. In this case, structured interview was used. Interview as a method of research typically involves a face to face meeting. It is an interaction of the researcher (interviewer) and the interviewee. A great deal of qualitative material comes from talking with people whether it is through formal interviews or casual conversations.

This method becomes appropriate in situations where by chance or training there are persons who will provide the most knowledgeable information possible on the topic of study. As a result, the key informer for this study were operators of the alcohol premises. They were



selected purposively on the basis of their information and knowledge on issues of the stipulations and implementation of the Act which is the basis of the study.

# **Data analysis and Presentation**

Data analysis involves organization, interpretation and presentation of collected data in order to reduce the field information to a usable size (Onen & Oso, 2005). The questionnaire data was first subjected to preliminary processing through validation, coding and editing and tabulated before in readiness for analysis with the help of the statistical package for social science (SPSS). Multiple regression model was used to determine the extent in which the independent variable affects dependent variables.

### **Findings**

# **Response Rate**

A total of 94 questionnaires were issued to the consumers, however 80 questionnaires were fully filled and returned by the respondents. This represents 85.1% response rate. According to Babbie (2002) any response of 50% and above is adequate for analysis thus 85.1 % is even better.

# Perceived Barriers on compliance of the Alcoholic Drinks Act, 2010

The study sought to examine the perceived barriers on compliance with the Alcoholic Drinks Control Act, 2010. To achieve this objective, the respondents were asked to rate their perception on a five Likert scale questions on their perception to barriers as 5= strongly Disagree; 4 = Disagree; 3 = Neutral; 2 = Agree and 1= Strongly Agree. The results of data analysis are presented in Table 2.



Table 2: Perceived Barriers on the Alcoholic Drinks Control Act, 2010

Statement	Stro		Dis	agree	Ne	utral	Ag	ree		ongly	Mean
	Disa	1		1		1		I		gree	
	F	%	F	%	F	%	F	%	F	%	
Lack of constant media advertisements	5	7.3	10	12.6	1	1.3	36	45. 4	28	34.7	2.1
on "Mututho law"											
Lack of community involvement	2	3.1	6	7.3	0	0	36	45. 3	36	45	1.8
Lack of knowledge of the contents of the "Mututho" Act	1	1.3	6	8.4	1	1.2	32	40. 2	40	49.8	1.7
Lack of professionalism from the administrative units	1	1.4	16	19.7	3	5.4	34	41. 7	26	31.9	2.1
Lack of cooperation from the alcohol industry	3	3.8	5	7.2	0	0	38	46. 8	34	42.3	1.8
Lack of stakeholders' consultations	4	5.2	5	6	0	0	30	38. 1	41	50.7	1.8
Lack of constant educative campaigns in the community	19	23. 6	10	12.4	0	0	15	19. 4	36	44.8	2.5
Corruption "Toa kitu kidogo" slogan	4	4.9	6	6.8	0	0.0	40	46. 5	36	40.6	1.7
Overall mean											2.2

Source: Field Data, 2017

Table 2 shows that (34%) respondents strongly agreed with the statement that Lack of constant media advertisements on "Mututho law" was a barrier to the Law compliance, (45%) respondents agreed with the statement while (13%) of respondents disagree with the statement, (7%) also strongly disagree with the statement and (1.0%) respondents was undecided on the statement. The study found that a majority (79.0%) of the respondents in Eldoret Town believed that lack of advertisements on what the law and its importance to the society has greatly impeded the functioning of the law.

In addition, (45%) respondents strongly agreed with the statement that there was lack of community involvement on the Act development and implementation stage, (45%) respondents strongly agreed with the statement while (7%) respondents were in disagreement with the statement while (3%) were strongly in disagreement with the statement. A majority



(90%) of the respondents sampled were of the view that there was lack of community involvement on the functioning of the Act and that had impended the good will of the Act.

Further, (50%) respondents strongly agreed with the statement that there was lack of knowledge of the contents of the "Mututho" Act, (41%) respondents agreed with the statement while (8%) respondents were in disagreement with the statement and (1%) respondents strongly disagree with the statement. The study therefore indicated that a majority (94%) of the respondents believed that there was lack of knowledge of the contents of the "Mututho" Act.

In addition, (32%) respondents strongly agreed with the statement that there was lack of professionalism from the administrative units on alcoholic drinks Act, (42%) respondents agreed with the statement while (20%) of respondents disagree with statement and (5%) of respondents were neutral on the statement. The study found that (74%) the respondents were of the view that there was lack of professionalism from the administrative units in the implementation of the Act. This was attributed to corrupt administrative officers who are in charge of enforcing the Act.

Similarly, (42%) respondents strongly agreed with the statement that there was lack of cooperation from the alcohol industry, (47%) respondents agreed with the statement, (7%) respondents strongly disagreed with the statement while (4%) respondents disagreed with the statement. A majority of (89%) of the respondents believed that alcoholic drinks act was impeded by lack of cooperation from the alcohol industry.

Further, (51%) respondents strongly agreed with the statement that there was lack of constant educative campaigns in the community, (38%) respondents agreed with the statement while (6.0%) respondent was in disagreement with the statement and also (5%) strongly disagreed with the statement. The study findings showed that a majority (89%) of the respondents sampled were of the view that there was lack of constant educative campaigns in the community on Alcoholic Drinks Control Act.

In addition, (46%) respondents strongly agreed with the statement that corruption "Toa Kitu Kidogo" slogan was a barrier to the implementation of the alcoholic drinks act, (41%) respondents agreed with the statement while (5%) respondents were in disagreement with the statement and also (7%) respondents strongly disagree with the statement. It emerged that a majority (86%) of the respondents were of the opinion that corruption has derailed the function and the implementation of alcoholic drinks Act.

The managers, during interviews noted that the devolution of alcohol control functions to County government, has been a challenge to the implementation of the Act stipulations. The new Constitution mandated the County Governments to undertake liquor licensing and drug control. However, most County Governments see liquor licensing function as an avenue for



collecting additional revenue. This practice, is posing a major challenge to earlier gains made in regulating the number of alcohol outlets licensed in the town.

In addition, the operators of the alcohol hospitality establishments they noted that among the barriers to the implementation of the Act was that guests especially the tourists demanded to be served at all times including morning hours. At the same time, the Act has pushed consumers to go for illicit drinks which are always served at all times in unlicensed premises and that's why the country has been experiencing high numbers of death due to consumption of illicit brews. In addition, the operators noted that implementers have been unable to effectively enforce the law as alcohol vendors have crafted ways of going around the Act through corrupt deals.

The overall mean of the perceived barriers to compliance to the act was 2.2, the results indicate that the barriers to the act includes; lack of awareness campaigns through the media, lack of community involvement, lack of professionalism from the administrative units, and corruption.

#### **Inferential Statistics**

Regression analysis was conducted to establish the effect of perceived barriers of Alcoholic Drinks Control Act, 2010 on compliance.

# **Model Summary**

The model summary presents the extent to which the independent variable predict the change in the dependent variable. The R square was 0.407, indicating that the perceived barriers of Alcoholic Drinks Control Act, 2010 predict 40.7% change on the dependent variables (compliance to the act). Therefore, the remaining percentages are predicted by other factors that were not considered in this study, as presented in Table 3.

**Table 3: Model Summary** 

Model	R	R square	adjusted R square	Std. error of the estimate	
1	.651ª	.407	.132	.35717	

a. Predictors: (Constant), Barriers

Source: Field Data, 2014

# 4.7.2 Analysis of Variance

The ANOVA indicate the extent in which the data fit into the regression model. The ANOVA results were significant (F = 5.017, P = 0.003) indicating that the data fit into the model.



**Table 4. ANOVA** 

Model		Sum of	df	Mean	F	Sig.
		Squares		Square		
1	Regression	1.920	3	.640	5.017	.003b
	Residual	9.695	76	.128		
	Total	11.615	79			

a. Dependent Variable: Complianceb. Predictors: (Constant), Barriers

Source: Field Data, 2014

# **Coefficients of Independent Variables**

The coefficient indicates the extent in which independent variable contributes to the change in the dependent variable. Perceived barriers was significant ( $\beta$  = -0.191, p = 0.038). The findings revealed that perceived barriers of Alcoholic Drinks Control Act, 2010 significantly affects the consumer's compliance with the act.

Table 5: Coefficients of independent variables

Model			dardized cients	standardized coefficients	t	sig.
		В	Std. Error	Beta		
1	(Constant)	1.821	.333		5.469	.000
	Barriers	183	.103	191	1.787	.038

a. Dependent Variable: Compliance

Source: Field Data, 2014

The model was therefore presented as;

 $y = \alpha + \beta_1 X_1 + \varepsilon$ 

 $y = 1.821 + (-0.0.191 X_{1}) + \epsilon$ 

#### **Discussions**

The effect of the perceived barriers on the implementation of the Alcoholic Drinks Control Act, 2010 was addressed by the respondents by giving their feelings on various issues. These levels were of perceived barriers on lack of; constant advertisement, community involvement, knowledge on the Act, professionalism from enforcers of the law, cooperation from alcohol sector and corruption on the implementation of the Act. The study findings showed there was high consensus of 90% and above among respondents that perceived barriers have impeded the functioning of the Act.

Generally, the residents feel that that the compliance level of the Act is wanting. The majority (90%) do not think that the law has been successfully been implemented. The residents feel that the law can be made effective if they are fully educated and directly involved in its



implementation processes. Their approach is more persuasive, educational non-judgmental and makes people feel respected hence less psychological reactance to complying with the Act.

Notably 74% of the respondents faulted administrative police for taking advantage of the law to solicit for bigger bribes rather than prosecuting law offenders. The results concur with the report by Transparency International (2014), which indicated that the police in the country received 43.5% of the total bribes extorted. The respondents believe that all stakeholders need to be involved in the implementation of the law and there more needs for it to be more psychoeducational rather than forceful orders. The study indicates that intensive civic education is needed and that if must refrain from using threats as this makes the consumers more determined to resist any attempts that controls them as "children". Other enforcement agencies such as Kenya bureau of standards does not seem to be equal to the task. Odalo (2007), established that, following the president directive to crackdown on 'second generation' alcohol, the Bureau moved quickly to suspend 385 alcoholic brands it had previously certified due to corrupt deals. Therefore, to enhance compliance of the act, there is need for concerted effort by various enforcement agencies.

#### **Conclusions and Recommendations**

The findings indicated that consumers perceived barriers to implementation of Alcoholic Drinks Control Act, 2010 significantly affect compliance. The major barriers to the act were lack of knowledge of the act to the public. This has created some resistance, as the public feel that the law is infringing into their rights. There were also notable concerns on the implementing agencies; police, County governments and KBS, where they seem to lack coordination on implementation of the act. Therefore, a wholistic approach involving all stakeholders including, business practitioners, Patrons, Educational institutions, Government officials, churches, consumers and agencies and all other interested parties should play their role in the alcoholic act implementation process to enhance compliance.

There is need for active grassroots and community engagement in the legislative implementation processes related to alcohol. This should include informal social control related to community norms or the activities of concerned citizen groups or community alcohol prevention coalitions.

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