

Socio-Cultural Factors Influencing Drug and Substance Abuse Among Married Couples in Kawangware, Congo, Nairobi County, Kenya

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Abstract

Drug and substance abuse is not exclusive to married couples and is influenced by various factors. This study sought to establish the socio-cultural factors influencing drug and substance abuse among married couples in Kawangware, Congo, Nairobi County, Kenya. The study's theoretical framework was the Biopsychosocial Model of Substance Abuse, an integrative Theory. The study employed a qualitative method of phenomenological research design. A total of 15 participants, including women and men, aged 18-60 years, were selected using purposive sampling. Data were collected through unstructured, in-depth interviews. The study employed manual coding up to the second cycle to avoid subjectivity and bias; it also used NVivo software. Thematic analysis was thereafter used to analyze audio-taped data. The study established that socio-cultural factors influence drug and substance abuse, for example, peer and social pressure, environment, desire to fit in, religious beliefs and attitudes, and cultural norms and practices. The study recommended that similar research be conducted, albeit with an objective of exploring biopsychosocial treatment of drug and substance abuse among married couples. It also recommended that a larger sample be collected to enable the findings to be objectively generalized to the whole population. It was also recommended that the Nairobi County Government employ counsellors and psychologists in all Sub-County wards to offer free counselling services to married couples with problems of drug use.

Keywords: *Socio-cultural factors, drug and substance abuse, neighborhood, poverty, cultural norms, and religious beliefs.*

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1. Introduction

Drug and substance abuse is not exclusive to married couples. Substance abuse is a pattern of harmful use of any substance for mood-altering purposes. "Substances" can include alcohol and other drugs (illicit or licit), as well as some substances that are not drugs at all (McClellan, 2017). Drug and substance abuse has been a public health concern throughout the history of humankind due to its significant negative impact on individuals, families, and society (Abuse, 2020; Lowin et al., 2020). Married couples have children in many instances. However, drug and substance abuse is one cause of dysfunction in families, and it has a negative impact on

individual holistic well-being, which includes the mental, physiological, psychological, economic, social, and spiritual aspects of life (Charzynska, 2021; Detels et al., 2015; Rogers, 2020).

Globally, from late 2019, there has been a rising new trend of substance abuse among teenagers, youths, and married couples, which has increased during the COVID-19 pandemic. The stringent measures implemented by the government to reduce the spread of the coronavirus resulted in the loss of gainful employment (Rogers, 2020; Zaami & Vari, 2020). The impact of substance abuse is great, and it overburdens society in various ways, including economic degradation, lost productivity, destabilization of social relationships, and increased disability and deaths (United Nations Office on Drugs & Crime [UNODC], 2021).

The global population trend on the use of illegal drugs was recently documented in the United Nations Office on Drugs and Crime's World Drug Report (United Nations Office on Drugs & Crime [UNODC], 2021). According to the report, an estimated 275 million people aged 15-64 years had abused drugs at least once by 2019. This was an increase of 22 percent from the figures reported in 2010. In the same report, an estimated 500 million deaths were attributed to drug and substance abuse and substance use disorders. Additionally, morbidity rates from drug and substance abuse stand at an estimated 18 million people. Hence, these people's lives were compromised by infectious diseases, including human immunodeficiency virus/acquired immunodeficiency syndrome (HIV/AIDS), and Hepatitis C (World Health Organization [WHO], 2019). Further, UNODC (2021), the World Drug Report showed that the COVID-19 pandemic ushered more than 255 million people into poverty due to lack of employment and/or job cuts. This, in turn, led to an increase in drug and substance abuse globally. The resultant economic hardship pushed many people into drug and substance abuse, including married couples. As a result, developing countries with low incomes were the hardest hit by this situation.

Africa occupies second position worldwide after Asia with an estimated 28 million people abusing drugs, while Canada and the United States of America have 32 million drug users (United Nations [UN], 2019). Among African countries, West Africa and Central Africa are the highest consumers of illegal drugs, with cannabis being the most abused drug, with rates between 5.2% and 13.5 %, respectively, mainly due to their porous borders (United Nations, 2019). It is therefore clear that drug and substance abuse affects humankind of all races worldwide (Uwusu-Bempah, 2021). Despite the fact that drug and substance abuse papers have been widely researched and published, they are still of interest to many researchers because of their nature, complexity, and effect (Tran et al., 2019).

According to the NACADA report (2019), an estimated 5.4 percent of Kenyans between the ages of 15 and 65 have abused drugs at least once in their lifetime. The rise of drug and substance abuse in an area can be attributed to its geographical position, poverty, inequality of resources, and corruption of the region/ state. For instance, the geographical location of Mombasa, Kenya's main port, which serves Uganda and Rwanda, positions it as an ideal destination for some of the illegal drugs from the Middle East destined for the other two countries to find their way into Kenya's black market (NACADA, 2019). Hence, the higher abuse of illegal drugs on the Coast is negatively influencing Kenyan citizens.

Drug and substance abuse influence in Kenyan families among married couples has mainly been highlighted by the media, especially in Nairobi and its environs. In the recent past, a group of married women from Limuru, Kiambu County, demonstrated against the use of illicit brews, and petitioned the president on their spouses' non-performance, denial of conjugal rights, and neglect. The women attributed the problem to heavy drinking of illicit brews due to idleness, poverty, and unemployment (George, 2019).

The report by the Gender-based Violence Center at Nairobi Women indicated that since the onset of the COVID-19 pandemic, there was an increase in gender violence due to drug and substance abuse among married couples in the informal settlements: Kibera, Dagoretti Corner, Waithaka, and Kawangware (Gender Based Violence, 2020). Based on this report, the researcher carefully chose Kawangware as the study site and was guided by the Congo Kawangware village elder in identifying the married couples -participants who have lived experience of drug and substance abuse. Furthermore, the study choice was based on the 2019 Kenya Population and Housing Census reports. The report indicated that Kawangware has a population of 291,595, consisting of 9 villages: Coast, Sokoni, Congo, Gatino, Muslim, Kibiro, Riruta, Kabiria, and Wanyee (Kenya National Bureau of Statistics, 2019).

1.1 Problem Statement

In Kenya, there exists a serious drug and substance abuse problem among married couples. Yet, married couples' offspring are regarded as the formation of the family and society. Drug and substance abuse among married couples in Kenya has been on the increase, and it negatively influences the user. In addition to persons around them, including their spouses, often leading to neglect, separation, and divorce. Literature reveals that drug and substance abuse among married couples has been on the increase since the 1980s. Associated Press (AP) news on 10th June 1989, reported that the late former President Daniel Moi banned the brewing of traditional local brews: "chang'aa" and "busaa" (distilled water and charms) due to their influence on married couples and families. The ban included the use of local brews during traditional ceremonies. The president reiterated, "I am not prepared to lead a drunk nation" (apnews.com, 1989).

In respect to the above, the Kenyan government, in a Gazette Notice dated April 26, 2001, established the National Agency for the Campaign against Drug Abuse (NACADA) to undertake public education and awareness campaigns against drug and substance abuse, especially among the youth in schools and other institutions of higher learning. The National Authority for the Campaign Against Alcohol and Drug Abuse (NACADA, 2021) report outlined community preventive measures of alcohol sale in the community, getting involved in the provision of licensing of alcohol drink-selling outlets, operating hours, enforcement of alcohol sale age limit to above 18 years, and ensuring that the environment is safe.

Despite these measures by the Kenyan government, not much has been achieved, going by recent past media reports that have repeatedly given stories on the continuing negative effects of drug and substance abuse among married couples. In addition, there is scant literature on factors influencing drug and substance abuse among married couples in Congo Kawangware, Nairobi, Kenya. The current study sought to establish the socio-cultural factors influencing drug and substance abuse among married couples in Kawangware, Congo, Nairobi County, Kenya.

2. Literature Review

2.1 Theoretical Review

The Biopsychosocial model of substance abuse looks at the influence of drug and substance abuse from an integrative approach, having looked at the dynamic trends of the influence of drug and substance abuse (Gatchel et al., 2020). The influence of drug and substance abuse is multiple and complicated, and differs among individuals. (Littieri & Pearson, 1980). Traditional theories of drug and substance abuse, such as choice theory, symptomatic theory, biomedical theory, and disease theory, have been developed from a single perspective approach (Kelly et al., 2021). Therefore, they look at the influence of drug and substance abuse from a single perspective. Specifically, the Social learning/ cognitive theory was used to guide the study.

Social learning/ cognitive theory is among the social learning theories. The theory incorporates behavior and learning. Albert Bandura developed social learning theory in 1977 and later developed cognitive theory in 1986. Bandura believed that behaviorism alone could not effect change in learning. He suggested that for effective learning to occur, there must be an interaction between behavior and environment because the two affect each other. The theory concept is that learners should be able to observe and imitate behavior exhibited within their social setting (Mahlbeck & Vito, 2022).

The theory emphasizes the interaction and disposition between the individual and the environment as the determinant of substance use. The principles of the theory hold that learning is a process involving behavioral and cognitive aspects that takes place in a social context (Bandura, 1977). Thus, based on the aforementioned principles of social learning theory, it is evident that a complex behavior such as substance abuse cannot be acquired through a single learning mechanism. Substance abuse must be reinforced or maintained with several contingencies (Brooks & McHenry, 2009). According to social learning theory, married couples abuse drugs and substances because of the social environment, such as social media adverts, which benefit from alcohol neighborhoods, which encourage alcohol drinking, and the peers who abuse substances. The study chose the theory because it seemed appropriate for explaining married couples' engagement in drug and substance abuse in the context of behavioral learning and cognitive rewards.

2.2 Empirical Review

Sociocultural model, unlike other factors, postulates that society as a whole plays a significant role in an individual's drug and substance abuse (National Institute of Drug Abuse [NIDA], 1980). The model believes that the society in which people live influences their drug use. At the same time, the model links socioeconomic status, that is, people of the lower class have unequal resources compared to the upper class. Thus, citing poverty, unemployment, and financial instability as influencing factors to drug and substance abuse (Walters & Rotgers, 2013).

Horvath et al. (2018) noted that people learn through visuals, as well as through observation, auditory, and reading and writing. Horvath et al. suggested that the most common way people learn is through observation. Observation is done through social groups such as peers, families, friends, and society. People are sociable beings; thus, they tend to interact with others and imitate those they look up to as role models (Horvath et al., 2018).

The model also looks at society structures, residents' views on drugs, and users' choice of particular substances abused as exacerbating factors (Nwagu et al., 2017). Horvath et al.'s assertion that learning through observation can be linked with social learning theory, which posits that behavior is learned through observation (Bandura, 1961).

2.2.1 Environment and Drug and Substance Abuse

Availability and cost of drugs are associated with drug abuse. Kaushik (2006) noted that the availability of illegal drugs such as heroin, cocaine, and mandrax, together with the availability of legal substances such as cigarettes and alcohol, may lead to drug abuse (Kaguthi, 2006). The ready availability of most drugs appears to be the most important cause of the prevalence of substance use and abuse amongst the Kenyan youth and adults. For instance, medicines (drugs) are purchased from chemists even without a physician's prescription. According to a survey by Kenya's National Authority for the campaign against alcohol and Drug Abuse (NACADA) on rapid situation assessment of the status of the drug and substance abuse in Kenya (NACADA, 2017). Drug accessibility was found to be one of the major contributing factors to drug abuse in Kenya.

Based on the proposed study, factors influencing drug and substance abuse among married couples in Congo-Kawangware in Kenya, the target population lives below a dollar a day, and the population suffers from a high crime rate (UN-HABITAT, 2020). These social factors could influence their use of drugs and substances.

Further research on the influence of environmental factors on drug and substance abuse was carried out on Vietnam veteran soldiers, who found that environmental factors such as cheap drugs, availability of drugs, delivery mode, and hard conditions of living influenced drug and substance use among the US soldiers during the Vietnam War. Among the drugs, heroin was affordable and easily accessible and cost less than 6 US dollars only (Wayne & Weier, 2017; Becona, 2018). Additionally, the same research established the environmental factor influence on drug and substance abuse among soldiers who tested positive for heroin while in a Vietnam camp before going back to the US for a holiday.

The research suggested that when they returned to Vietnam, they tested negative for heroin. The proponents of the sociocultural model link the environment with drug and substance abuse. Thus, they suggest changing the social environment in which one lives as a mitigating factor rather than treating individuals (Nwagu et al., 2017). To mitigate the societal problem of drug and substance abuse, a strategy should be in place to alleviate poverty, poor housing, and improve affordable health care facilities.

2.2.2 Neighborhood and Drug and Substance Abuse

Research shows that too much leisure time or idleness, peers, and poverty can influence an individual to drug and substance abuse (Hendricks, 2015). Additionally, the proponents of availability theory suggest that the availability and affordability of the drug and substance may be an influential factor. However, further research established that the influence may vary depending on where an individual lives and what he abuses (McKinney et al., 2015). The above research findings indicate that the situation is similar in developing countries, including Kenya. In Kenya, in informal settlements such as Kibera, Mukuru, Mathare, and Kawangware, or in upcountry villages, the illicit brew sells for as little as 10 Kenyan shillings (less than 10 US

dollars) and can easily be found within a radius of 50 meters. Thus, the less privileged people take advantage of cheap liquor (Oketch, 2008).

2.2.3 High-Level Poverty and Drug and Substance Abuse

Various studies have established that poverty influences drug and substance abuse (Galvao et al., 2018). In Kenya, low-income families are forced to seek alternative means of meeting their basic needs. Some parents include their children in drug trafficking without regard for the consequences and future impacts, so long as they bring money. This, in turn, predisposes both parents and children to drug use. People with no gainful employment are at a higher risk of abusing substances because major drug traffickers engage individuals from low-income backgrounds to peddle drugs, and in the process, they learn to abuse the same drugs. This has mostly been observed in the coastal regions. Similar research was carried out in Murunga, Kenya. The study established that people from poor families and street children use drugs as an excuse to forget the high cost of living (Were et al., 2022).

2.2.4 Social Media and Drug and Substance Abuse

Alcohol information is readily accessible through advertisements on social media, including Video, YouTube, Facebook, Instagram, television, and other channels (Dalvi, 2021). Recent research on social media influence on alcohol advertising established that it affects all genders and ages (Ding et al., 2017). However, Ding noted men are found to be inclined to adverts of “strength and power.” This is always associated with maturity, class status. This is always associated with maturity, class status, and being a “man”. For instance, the famous Tusker beer advert “kuwa imara Kama simba” has been translated to mean that, to be a man, one needs to drink (Otieno, 2018). This literature presents numerous social learning theories through which people learn by imitation.

2.2.5 Cultural and Traditional Ceremonies and Drug and Substance Abuse

All cultures are unique and have different meanings assigned to drinking alcohol during ceremonies (Pete, 1994). For example, in western cultures, the British and Irish are allowed to drink large quantities of alcohol, beer, during good, happy social occasions such as a baby’s birth, but they should not be intoxicated. Further, ethnographic research findings on the social and cultural roles of alcohol drinking in special ceremonies among adults are for socialization and strengthening relations in a society (Social Issue Research Center [SIRC], 2021). In this respect, as postulated by Pete (1994), there are approved and disapproved cultural norms regarding alcohol consumption, and beverage choice depends on culture, occasion, location, and time. However, if rules and regulations are not observed, alcohol drinking can be taboo. Also, if alcohol consumption is not monitored and regulated, there is a high likelihood of abuse (Kastanaskis et al., 2014).

African approved cultural norms associated with drinking include the passage of rites, birth, marriage, and the transition to death. Africans purposely observe and celebrate these occasions as part of developmental and growth achievements. Most African cultures respect the dead; death is a transitional journey to the next spiritual world. Traditional Africans believe the spirit does not die; hence, they perform rituals to keep the spirit alive and happy. During such occasions, elders and married people drink traditional brews/ alcohol (Aketema, 2021). Additionally, a study conducted in Kenya showed cultural influences on alcohol use (Mbutia et al., 2020).

Further, Quintero (2016) and Hovarth et al (2018) suggested that ethnic background can influence drug and substance use. They noted that members of certain ethnic backgrounds can be vulnerable to drug and substance abuse. For example, African Americans and Asian Americans, among others.

3. Methodology

A phenomenological research design was used in the study. The study was carried out in Congo Kawangware in Dagoretti North Sub-County. The researcher focused on married couples aged 18 years and 60 years who are residents of Congo-Kawangware. This study sampled fifteen (15) married couples who were residents of Congo Kawangware. This study employed a purposive sampling technique to sample 15 participants (married couples) to meet the purpose of the study of people with lived experience of the phenomenon (Cozby & Bates, 2005). In addition, this sampling method was based on the researcher's judgment regarding the characteristics of a sample and the purpose of the study. Only married couples who were admitted, who were abusing substances, and who were known by the Congo village elder were eligible for the interview. The study used unstructured interviews to collect data. The researcher conducted a pretest with a smaller sample of six (6) participants in Makina -Kibera to check on the clarity of the interview questions. The researcher analyzed qualitative data through descriptive coding because it reflects themes or patterns that are obvious on the surface or are stated directly by the participants using NVIVO software and hand coding (manually). Ethical issues observed in this study included informed consent, confidentiality, risk, plagiarism, benefits, voluntary participation, debriefing, and data sharing.

4. Results and Discussion

4.1 Background Characteristics

The study found that most participants were male. This was observed in 53% of the study sample, with 47% being female. From the collected data, it was established that most participants were aged between 25 and 44 years. This was noted in a cumulative 80% of the study sample. The study noted that 40% of the participants were aged 25-34 years, 40% were aged 35-44 years, and 20% were aged 45 years and above. It was further noted that some participants were in their second or third marriage, with their first marriage having failed to work out. Upon further probing, the researcher noted that uncontrolled drug and substance abuse and the related negative impacts led to some marriages being dissolved. The study also found that the highest number of children among participants was 7, while one participant had no children. The study showed that on average, participants had 3 children. Further, most of the participants in the study were Christians. This was noted in 80% of participants, with 20% identifying as Muslim. Furthermore, most of the participants had attained secondary school level. This was noted among 53.3% of the participants. Those who had attained primary level were 33.3%, while 13.4% had attained college/university level. Additionally, most of the participants were businesspeople. This was noted among 26.7% of the sample. Other occupations cited included beautician (6.7%), housekeeping (6.7%), house management (13.3%), public transport operator (13.3%), sales (6.7%), and security guards (13.3%). It was also established that 1 participant was a housewife, while 1 participant was not engaged in any occupation at the time of the study.

4.2 Socio-cultural Factors Influencing Drug and Substance Abuse among Married Couples in Congo Kawangware, Nairobi County, Kenya

4.2.1 Peer and Social Pressure

The study established that peer and social pressure were predisposing factors for drug and substance abuse. Specifically, the study found that these pressures include career pressures, family demands, and peer pressure. The study noted that some participants were forced into drugs by their peers and continued using drugs so as to maintain their status of being “the man in the group”. One of the most well-known ways for people, especially teens and young adults, to start using drugs is through external pressures from other people. Commonly known as peer pressure, people may begin using drugs because of the influence of their peers. For them, it becomes something they all share in common, and so they feel pressured to continue to use drugs even if they understand the dire consequences.

In relation to social pressure, married couples, especially young couples, experience social pressure to use drugs from television, social media, and other celebrity influences. When people see drug use being glorified in the media, they not only feel pressured to participate as well but also see no harm in taking drugs as well.

Regarding career pressure and occupation, the study found that pressure to attain certain career or professional goals and to engage in specific occupations increased participants' pressure. To help perform better or alleviate such pressures, it is possible to turn to drugs to help cope, forget failures, or boost performance.

In relation to family demands, the study established that demands from family members over certain expectations led to drug and substance abuse. For instance, it was noted that demands from in-laws for men to pay dowry, have weddings, bear children, or even provide financial and subsistence support were stressful and depressing. This is due to the already limited financial and resource capability, and the pressure to deliver on such demands would at times get the better of participants, to the point of resorting to drugs to help cope or forget such demands.

Furthermore, family and household demands, which include balancing work with raising children and meeting household financial obligations, at times became overwhelming and difficult to manage. This was especially true for young mothers who cannot face feelings of isolation, loneliness, and anxiety. Drug use thus becomes an easy way for them to cope.

4.2.2 Desire to Fit in

The study established that the desire to fit into certain societal prescriptions and ascriptions influences drug use among married couples. Since human beings are social creatures, it is important for them to feel like they belong or fit in. This can affect people of any age, but is most influential during young adulthood. If others around them are using drugs, they may fear feeling left out or that they will not fit in. As a result, they place pressure on themselves to use drugs as well. Participant 03 noted;

I received an invitation from a friend to attend a party with drugs or alcohol; it becomes difficult to turn down. So, I just take the alcohol so that I fit in with that situation.

Wanting to feel liked and loved by family and friends is a huge reason people start using drugs.

4.2.3 Religious Beliefs and Attitudes

The study established that religious beliefs and attitudes are associated with drug use and abuse. Interestingly, the study observed that even those participants who were Christians and Muslims who attended church and mosque regularly still used drugs and other substances. Participants 01, 03, 04, 05, 06, 07,08, 09, 12, 13, 14, and 15 said;

I drink alcohol and smoke; however, my religion prohibits the use.

On the same line, but on the church denomination participant 02 asserted,

Catholic has no issue with drinking alcohol, but not in excess.

4.2.4 Cultural Norms and Practices

The study established that social-cultural factors also play a major role in determining one's behavior in relation to drug and substance use. For instance, some cultures recommend taking stimulants, depressants, and hallucinogens such as beer, liquor, wine, tobacco, and cannabis sativa during cultural functions. Some liquor or drugs are culturally accepted, and during these cultural ceremonies or festivities, people are grouped in age sets and provided with the drugs. The social and cultural environment plays a great role in influencing drug abuse. Participant 05,07,10,13,14,15 noted,

My culture allows moderate alcohol consumption by adults, married people, during special occasions and/or events.

On the same, participant 11 asserted,

My culture does not encourage alcohol and drug abuse, especially for women.

Furthermore, the study established that some substances are culturally prohibited in certain cultures, while others are allowed. Participant 08 expressed,

My culture condemns the use of some drugs like bhang but allows the drinking of local brews and beer during special occasions such as traditional weddings and burials.

4.3 Discussion

The study established that socio-cultural factors such as peer and social pressure, desire to fit into society, religious beliefs and attitudes, cultural norms and practices, and environmental factors influenced drug and substance abuse. The study noted that some participants were forced into drugs by their peers and continued using drugs so as to maintain their status of being "the man in the group". One of the most well-known ways for people, especially teens and young adults, to start using drugs is through external pressures from other people. Commonly known as peer pressure, people may begin using drugs because of the influence of their peers. For them, it becomes something they all share in common, and so they feel pressured to continue to use drugs even if they understand the dire consequences. A study by The National Center on Addiction and Substance Abuse (2003) confirmed this when it established that the more friends a girl has who smoke, drink, or use drugs, the likelier she is to do so herself. If five of her close friends drink alcohol, she is over seven times more likely to drink.

In relation to social pressure, married couples, especially young couples, experience social pressure to use drugs from television, social media, and other celebrity influences. When people see drug use being glorified in the media, they not only feel pressured to participate as well but also see no harm in taking drugs. This finding agrees with the findings of Wachuka (2017) and

Otieno (2018), who concluded that mass media advertisements influenced drug and substance abuse among married couples. Regarding career pressure and occupation, the study found that pressure to attain certain career or professional goals and to engage in specific occupations increased participants' pressure. To help perform better or alleviate such pressures, it is possible to turn to drugs to help cope, forget failures, or boost performance.

In relation to family demands, the study established that demands from family members over certain expectations led to drug and substance abuse. For instance, it was noted that demands from in-laws for men to pay dowry, have weddings, bear children, or even provide financial and subsistence support were stressful and depressing. This is due to the already limited financial and resource capability, and the pressure to deliver on such demands would at times get the better of participants, to the point of resorting to drugs to help cope or forget such demands. Furthermore, family and household demands, which include balancing work with raising children and meeting household financial obligations, at times became overwhelming and difficult to manage. This was especially true for young mothers who can face feelings of isolation, loneliness, and anxiety. Drug use thus becomes an easy way for them to cope.

The desire to fit into certain societal prescriptions and ascriptions influences drug use among married couples. Since human beings are social creatures, it is important for them to feel like they belong or fit in. This can affect people of any age, but is most influential during young adulthood. If others around them are using drugs, they may fear feeling left out or that they will not fit in. As a result, they place pressure on themselves to use drugs as well. Such desires and pressures do not normally occur just to impress friends or loved ones. Wanting to feel liked and loved by family and friends is a huge reason people start using drugs. Indeed, if drugs are a normal part of the environment, it does not seem abnormal to consume them.

Religious beliefs and attitudes are associated with drug use and abuse. Interestingly, the study observed that even those participants who were Christians and noted that they attended church regularly still used drugs and other substances. These findings are in line with previous studies, which affirmed that there were more drug and substance users who are Christians than those who are Muslims (Gikonyo, 2003; Ngesu et al., 2008). Religion also plays a bigger role in socializing people by providing the pros and cons to guide their behavior and social interactions, including the avoidance of drugs and substance abuse. However, as established in this study, this role is not being fulfilled as desired. In agreement, Marriage and Religion Research Institute (2019) and MacMillan et al. (2021) found that individuals who are committed to religion activities such as attending church and mosque regularly, helping the needy in the community, attending weddings among others, are less likely to consume alcohol and abuse drugs than those Christians and Muslims who rarely attend church and mosque, and also inactive in church and mosque activities.

The findings of this study, however, do not find a concrete, direct empirical relationship between religious beliefs and drug and substance abuse. These findings thus agree with the findings of Jose (2019) and Mednick et al. (2014), who noted that there was no clear link between religions and alcohol behaviors. However, these findings agree that non-believers were the group that consumed and abused alcohol the most. The current study, as well as the other previous studies, suggested further research to be carried out on the influence of religion and religious beliefs on drug and substance abuse.

Social-cultural factors also play a major role in determining one's behavior in relation to drug and substance use. Some cultures recommend taking stimulants, depressants, and hallucinogens such as beer, liquor, wine, tobacco, and cannabis sativa during cultural functions. Some liquor or drugs are culturally accepted, and during these cultural ceremonies or festivities, people are grouped in age sets and provided with the drugs. The social and cultural environment plays a great role in influencing drug abuse.

Environment and neighborhood - low-class residential areas such as slums, where illicit and cheap brews are easily accessible, promote drinking habits. Most people do menial jobs, some are idle, thus they indulge in criminal activities and substance abuse (Oketch, 2008). The result of the interview on neighborhood influence on drug and substance abuse in married couples shows that the neighborhood factor promotes substance use. This finding is similar, but not identical to the literature review on environmental influence on alcohol drinking by Hendricks (2015): he found that too much leisure time or idleness, peers, and poverty can influence an individual to substance abuse. Additionally, McKinney et al. (2015) and Oketch (2008) found that the availability and affordability of substances and drugs may vary depending on where an individual lives and what they abuse.

The findings of this study thus agree with Kaguthi (2006), who noted that the availability of illegal drugs such as heroin, cocaine, and mandrax, together with the availability of legal substances such as cigarettes and alcohol, may lead to drug abuse. This is also in line with the findings of a rapid assessment by NACADA (2017), which indicated that drug accessibility was found to be one of the major contributing factors of drug abuse in Kenya. The findings of this study are supported by findings of research conducted among Vietnam veteran soldiers (Wayne & Weier, 2017; Becona, 2018), which found that environmental factors such as cheap drugs, availability of drugs, delivery mode, and hard conditions of living influenced drug and substance use among the US soldiers during the Vietnam War.

5. Conclusion

The study concluded that socio-cultural factors influence drug and substance abuse among married couples in Congo Kawangware, and these factors were peer and social pressure, demands from family members and household demands, desire to fit into society, religious beliefs and attitudes, and cultural norms and practices.

6. Recommendations

The study recommended that the Nairobi County Government employ counselors and psychologists in sub-county wards in Kawangware, at least two counseling psychologists, to offer free counseling services to married couples with problems of drug use. The study also recommended that structures should be institutionalized at the community level to ensure that people are sensitized monthly on the influence of drug and substance abuse. This should be a concerted effort between the county government of Nairobi, non-governmental organizations (NGO's), counsellors and psychologists.

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