

**EFFECTS OF DRUG ABUSE ON THE PERFORMANCE OF EMPLOYEES IN
KENYAN PUBLIC UNIVERSITIES: A CASE OF MAASAI MARA UNIVERSITY**

BY

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RESOURCE DEVELOPMENT**

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DECLARATION

Declaration by the student

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DEDICATION

In memory of my late dad Andrew Rono and my mum Cecilia Rono who laid for me a strong foundation in academics, my husband Wilckens Korir and my children Sasha, Nimrod and Dickens and to the entire family.

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ABSTRACT

In the current dynamic and highly competitive environment, employee performance is key to achievement of competitive advantage for organizations. Maasai Mara University has been facing employee performance challenges as reflected in employee absenteeism, poor time management and low quality of services offered. The purpose of this study was to examine the effects of drug abuse on the performance of employees in Kenyan Public Universities; A case of Maasai Mara University. The specific objectives of the study were: to find out the types of drugs abused by employees and the reasons for the abuse; to determine the effect of drug abuse on employee rate of absenteeism; to investigate the effect of drug abuse on employee time management; to find out the effect of drug abuse on quality of services offered by employees; and to examine effective ways of managing drug abuse in the University. The study was guided by the addictive experiences theory and a conceptual framework which depicted drug abuse as influencing employee performance. A descriptive survey research design was adopted. The target population was 540 permanent employees of the university. Education and psychological measurement table of Krejcie and Morgan (1970) as cited by Kasomo, (2006) was used to determine study sample of 217 employees. Simple random sampling was used to select the sample from the lecturers and support staff while management staff were picked purposively. Reliability of the instruments was confirmed using Cronbach's Alpha Coefficient based on a pilot study data. This gave a reliability of 0.81. Expert opinions, literature searches and pre-testing of open-ended questions were used to examine content validity and faced validity. Primary data was collected using a questionnaire, interview schedule and focus group discussions. Quantitative data was analyzed using descriptive statistics while qualitative data analysis was based on commonly occurring themes in the data based on research questions. Quantitative results were presented using frequency tables and percentages. Further, Pearson correlation analysis was used to test the hypotheses of the study and Regression analysis was employed to test the relationships in the study. The study found that the most abused drug was alcohol supported by 189 (87.1%) of the respondents while the remaining 28(12.9%) indicated tobacco or cigarettes. The reason given for engaging in drug abuse included experimenting, peer pressure, to feel good, recreation, self-medication and loneliness. Furthermore, the study findings indicated that drug abuse affects employee rate of absenteeism in the university. The results of the study also showed that drug abuse affects employee time management through lack of concentration, work place conflicts and drinking during working hours. 187 (86.2%) of the respondents indicated that drug abuse affects quality of services while 30(13.8%) did not agree. Effective ways of managing drugs included rehabilitating drug addicts, disciplining the culprits, educating employees on dangers of drugs and formulating policies related to drug abuse. The study concluded that drug abuse at the university is a notable problem as it is a major cause of absenteeism, affects time management and the quality of services. The study recommended psychosocial support measures such as employee counseling as remedies to drug abuse. The study suggested that further research should be done on employees' inter-relationship and the role of NACADA in providing information about drug abuse.

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LIST OF ABBREVIATIONS AND ACRONYMS

ADA	-	Alcohol and Drug Abuse
CBO	-	Community Based Organization
FGD	-	Focus Group Discussions
ICAP	-	International Center for Alcohol Policies
IDU	-	Injection Drug Use
ILO	-	International Labour Organization
NACADA	-	National Campaign against Drug Abuse
NACADAA	-	National Agency for the Campaign against Drug Abuse Authority
NGO	-	Non-Governmental Organization
SPSS	-	Statistical Package for Social Sciences
UN	-	United Nations
UNO	-	United Nations Organization
UNODC	-	United Nation's Office on Drugs and Crime
TV	-	Television

OPERATIONAL DEFINITION OF TERMS

Drugs: Are chemical substances that alter the organic functions and the behavior of those who take them. A drug refers to any substance, natural or artificial, that by its chemical nature affects the structure or function in the living organisms. It refers to any substance which, when introduced into the human body will often alter the normal biological functioning of that body.

Drug Abuse: Is the compulsive, excessive, and self-damaging use of habit forming drugs or substances leading to addiction or dependence, serious physiological injury (such as damage to kidneys, liver, heart) and/or psychological harm (such as dysfunctional behavior patterns, hallucinations, memory loss, or death).

Drug and Substance Abuse: Refers to inappropriate use of intoxicating drugs to an extent that personal, academic, social and spiritual functioning is disrupted.

Addiction: Is defined as a chronic, relapsing brain disease that is characterized by compulsive drug seeking and use, despite harmful consequences. It is considered a brain disease because drugs change the brain, both its structure and how it works.

Employee Performance: Is a process of establishing a shared workforce understanding about what is to be achieved at an organization level. It is about aligning the organizational objectives with the employees' agreed measures, skills, competency requirements, development plans and the delivery of results.

Absenteeism: Is a habitual pattern of absence from a duty or obligation. Absenteeism may also be defined as the habitual non-presence of an employee at his or her job. It refers to the practice of regularly staying away from work without a good reason.

Time Management: Is defined as the process of organizing and planning how to divide time between specific activities. It refers to the way a person organizes and plans how

long he should spend on specific activities. Time Management may also be defined as the use of one's time effectively or productively, especially at work. It refers to the analysis of how working hours are spent and the prioritization of tasks in order to maximize personal efficiency in the workplace.

Service Quality: Is defined as an assessment of how well a delivered service conforms to the client's expectations. It refers to a comparison of expectations with performance. A business with high service quality will meet customer needs whilst remaining economically competitive.

Quality Customer Service: Entails providing efficient, quick and friendly service, building strong relationships with customers, handling complaints quickly and responding to customers.

CHAPTER ONE

INTRODUCTION

1.1 Overview

This chapter deals with the background of the study, statement of the problem, objectives of the study, research questions, justification of the study, scope of the study and limitations.

1.2 Background of the Study

Management of employee performance in an organization is function that aligns the employee knowledge skills, competency, development plans and delivery of results. The business dictionary defines it as activities related to a job that is required of an employee, and how well these are done. There are different types of resources that are used to enhance the smooth operations of an organization such as human capital, money, machinery and raw materials. Out of all these, human capital is the only living resource that an organization has. Any organization can be able to acquire the right materials or enough money or even up-to-date machinery to conduct their operations well but not every organization can afford the right human capital. Human resource is a very important asset to an organization because it helps an organization achieve competitive advantage over its rivals in the same industry. Because of this, employee performance is very important to the twenty first century organizations in that it will enable them compete favorably with other organizations in a dynamic environment.

Robin (1998), as cited by (M'Mbui, 2011) observe that performance may be influenced by a number of factors which include: individual personality, the values instilled in them attitudes and competence of an individual which is a mixture of how they perceive things and their motivation. In spite of this, it was also indicated that biographical characteristics

like their age, their sex, status of marriage and seniority level could not really give exact and reliable facts of links to improve employee accomplishments and their job satisfaction.

In order to establish how well or badly employees may have performed, a performance management tool has to be used to assess them. There are various tools that could be used in measuring success in an organization according to Guck (2013). The first tool is the 360-degrees feedback that is used on managers by the people that work with them on a day-to-day basis. Secondly, the balanced score-card could be used which entails a combination of quantifiable information such as sales quotas and budget position. A further tool that can be used in management by objectives where managers come up with goals for the employees then they get to be measured at the end of a period to see whether these goals have been attained. Self-evaluation is a tool that is utilized by an individual to measure their own performance in comparison with that of their superior (Guck, 2013).

Organizations are facing increased competition due to globalization, and factors from the external environment. Each and every organization has the responsibility to enhance the performance of their employees because of its importance in achieving optimum goals (Nassazi, 2013). The effective management of your employees' performance should: contribute to business success by ensuring that individuals efforts are linked to business objectives; improve the motivation and performance of staff by giving them positive feedback and by providing them with opportunities for training and development; provide a basis for linking rewards to performance; give the company more information about individuals and their needs (Cushway, 2015). A job performance that is good gives an individual an assurance of security hence they do not move from one job to another in

search of a new position. This happens when their managers are able to appreciate their expectations and professional goals, as well as giving them feedback from time to time just to make sure that they are at their best. In a nutshell, good job performance enhances the reputation of an employee hence encouraging them to develop their careers (McQuerrey, 2014).

Recruitment of the right staff, employee redundancy, talent retention, development of staff as well as issues with performance management processes tend to be the major obstacle that Nigeria and Uganda face in achieving optimum productivity in their organizations. This may be resolved however by good rewarding systems and development and training (Onyije, 2014 and Kyakulumbye, 2013) as cited by (Kibichii, Kiptum, & Chege, 2016).

In Pakistan productivity is perceived as a threat to many organizations because many managers do not appreciate good performance management techniques. This can be improved by implementing proper performance management techniques such as motivation to increase the psych of employees (Karimi, Malik and Hussain, 2011 and Khan and Gautam, 2014) as cited by (Kibichii, Kiptum & Chege, 2016).

Drug abuse is one of the major problems facing Kenya today. It transcends all borders imaginable, including those for institutions of higher learning. Cases of drug and alcohol abuse have tremendously increased in the recent years. The Kenya Government, in recognition of the seriousness of the problem of drug abuse, initiated the National Campaign against Drug Abuse (NACADA) in 2001. This organization is charged with the responsibility of coordinating activities of individuals and organizations in the campaign against drug abuse. Effective response to the challenge of drug abuse, as well

as mitigation of the negative effects of use of drugs relies critically on accurate information on extent and pattern of use of various intoxicating substances and drugs by different segments of the population. It has been realized that many Kenyans are taken captives by Alcohol and Drug Abuse (ADA) and that it is no longer only a teenage problem. Research has now shown that, the prevalence of alcohol and drug abuse among adults in Kenya is expanding rapidly to the destruction of the society. Kenyans cannot afford to ignore or be quiet about it and least of all Maasai Mara University whose employees are not spared.

According to NACADA (2009), Kenyans generally hold positive attitudes towards illicit drugs such as alcohol, miraa, tobacco and its products and a good number use such drugs and substances. Peer pressure and availability of drugs in the community are closely associated with drug and substance abuse among youths. There are a number of issues that need urgent attention for reduction in drug abuse among the different segments of the population including scaling up of prevention activities, development of Behaviour Change Communication (BCC) strategy, and review of alcohol, drug and substance abuse policies.

1.3 Profile of Maasai Mara University

Maasai Mara University is a public university located in Narok County in Kenya. The university was found in 2008 as a campus of Moi University and elevated to a fully-fledged university in 2013. Currently the university has a student population of about eight thousand. Officially recognized by the commission for University Education of Kenya, Maasai Mara University is a coeducational Kenyan higher education institution. The university offers courses and programmes leading to officially recognized higher education degrees in several areas of study. The university also provides several

academic and non-academic facilities and services to students including a library, as well as administrative services.

1.4 Statement of the Problem

In today's unpredictable and highly competitive business environment, organizations are required to achieve certain performance standards by improving their performance, otherwise, a lot of problems will surface, including running the risk to close down the business. This performance relates to the firm or individual level which sees the human resource/employee becoming the most determining factor to achieve the jobs. In fact, an abundance of resources such as infrastructure or physical facilities can be meaningless without the support of qualified human resources to ensure continuity of business operations. Within the framework of professionals, good employee performance mirrors the ability to contribute through their works leading to the behavioural achievement that is in accordance with the goals of the organization. No doubt, the level of an enterprises' success depends on the performance of its human resources or employees (Iskandar Muda et al.2014).

Public universities all over the world are considered to be centres of excellence which immensely contributes to national development. The presence of drug abuse in these institutions can therefore seriously affect the stability and training programs in universities and hence national development. However, empirical examination of how drug abuse impacts on employee performance in public universities in Kenya has been lacking in literature. Employee performance in Maasai Mara University has been deteriorating as revealed by increasing incidences of absenteeism, poor time management, quality of service among others.

Further, few studies have been reported on the relationship between drug abuse and employee performance in public universities in developing countries like Kenya. The aim of this study was to investigate the effect of drug abuse on the performance of employees in public universities in Kenya; A case of Maasai Mara University.

1.5 General Objective

The general objective of the study was to determine the effects of drug abuse on the performance of employees in Kenyan Public Universities, a case of Maasai Mara University.

1.6 Specific Objectives of the Study

The specific objectives of the study were:

1. To find out the types of drugs abused by employees and the reasons for the abuse.
2. To establish the effect of drug abuse on employee rate of absenteeism in Maasai Mara University.
3. To investigate the effect of drug abuse on employee time management in Maasai Mara University.
4. To determine the effect of drug abuse on the quality of services offered by employees of Maasai Mara University.
5. To examine the effective ways of managing drug abuse in the university.

1.7 Hypotheses of the study

The study was based on the following hypotheses;

HO1: There is no significant relationship between drug abuse and employee rate of absenteeism in Maasai Mara University

HO2: There is no significant relationship between drug abuse and employee time management in Maasai Mara University.

HO3: There is no significant relationship between drug abuse and the quality of services offered by employees of Maasai Mara University.

1.8 Justification of the study

Drug abuse is associated with social, health and economic problems including increasing death rates as a result of medical and accident related cases and deterioration of health standards for the affected individuals. Drug abuse may result in absenteeism at the workplace in situations where employees' whereabouts are unaccounted for. In some cases, some employees may report to work late and leave early because of drug abuse. This study contributes to the literature on effects of drug abuse, incorporating insights on the effects of drug abuse on the performance of employees in Kenyan Public Universities. Drug abuse is a major development and health problem. It affects not only the abuser but also the relatives and workmates of the victims. Drug abuse causes or worsens physical, psychological, sexual, relationship or social, job or financial and legal problems. This research highlights some of the effects of drug abuse on the performance of employees in Maasai Mara University.

The rising number of drug abusers and the less productivity at work by the drug abusers who are employees in Kenyan Public Universities place growing demands on the institutions affected. Some of the employees have lost their jobs because of missing days or weeks of work due to drug abuse. Others have been in suspension for some times after being got drunk and disorderly in the work place. The problem of drug abuse should therefore be taken in light of its future implications for the development of the institutions of higher learning in Kenya. The research was carried out in Maasai Mara University and the findings of the study will be used to improve the management of drug abuse in Kenyan Public Universities generally.

1.9 Significance of the Study

The study identifies the drugs which are commonly used by the employees of Maasai Mara University; therefore, corrective measures can be taken by discouraging the sale of such drugs within the University and even in areas surrounding the University. The findings from the study are useful and significant to all the Public Universities in Kenya. The data, information, findings, discussions and recommendations from the study are beneficial in formulation of policies that can guide in dealing with drug abuse cases in the Kenyan Public Universities. The findings are useful to scholars and researchers and provide information to the existing body of knowledge and literature and by recommending areas for further research.

1.10 Scope and Limitations of the Study

1.10.1 Scope of the Study

The focus of this study was the effects of drug abuse on the performance of employees. The scope of the study was confined to the effects of drug abuse on the performance of employees of Kenyan Public Universities. The study was confined to a selected Public University (Maasai Mara University) and it included Administrators, Lecturers, Heads of Departments and Support Staff of the University. The study focused on the drugs commonly abused by the employees and the reasons for the abuse; the effect of drug abuse on employee rate of absenteeism; the effect of drug abuse on employee time management; the effect of drug abuse on the quality of services offered by the employees and the perceptions of effective ways of managing drugs in the university. However, the study did not include the effect of drug abuse on employee interrelationship and the role of NACADA in providing information about drug and substance abuse.

1.10.2 Limitations of the Study

According to Mugenda and Mugenda (2003), a limitation is used to describe what a test or research instrument is not able to achieve because of rules, regulations, resources and logistical problems. The study was limited to only one Public University, leaving out the other Public Universities in Kenya. The research was carried out in Maasai Mara University and generalizing the findings to the other Kenyan Public Universities should be done with a lot of care because not all the Public Universities are in similar environments.

The research focused only on the effect of drug abuse on employee rate of absenteeism, the effect of drug abuse on employee time management and determined the effect of drug abuse on the quality of services offered by the employees. Other effects of drug abuse not operationalized in this study were not being considered.

Among the problems encountered included the lack of adequate literature about drug abuse by the employees of the Kenyan Public Universities, lack of adequate time to travel to Maasai Mara University, lack of enough finances to cater for the research, respondents fearing to be victimized after giving detailed information, and people were not willing to express their feelings about drug abuse. However, efforts were made to assure all the respondents of confidentiality so as to encourage them respond to the questionnaires or provide information for the focus group discussions and interview schedule. The University is situated in the Maasai land but the employees come from different tribes thus they use English and Kiswahili for communication so the researcher did not face problems to do with language barrier when interviewing employees of the University. Creating of a rapport was therefore done easily.

CHAPTER TWO

LITERATURE REVIEW

2.1 Overview

This section presents the review of literature related to the study. It presents the existing literature on the topic under investigation. Specifically, the chapter covers concept of employee performance, concept of drug abuse, theoretical framework, empirical review of literature and conceptual framework. Finally, at the end of the chapter, the research gap is given.

2.2 Concept of Employee Performance

Rotundo and Sackett (2002) view employee performance as the ability of an employee to perform effectively in his job. Afshan et al. (2012) define performance as the achievement of specific tasks measured against predetermined or identified standards of accuracy, completeness, cost and speed.

Performance is divided into organizational and employees' performance (Riyanto, Sutrisno & Ali, 2017). Job performance in many organizations is however subjectively measured, that is it is not independently measured and will be dependent on other factors in the work environment. Job performance is regarded as the results obtained from the work of an employee (Riyanto, Sutrisno & Ali, 2017). Staff performance is the measure of whether a person executes their job duties and responsibilities satisfactorily. Employee performance can also be defined as how well employees carry out job related activities assigned to them in regard to facilities provided and their efficiency in utilizing such (Bruning & Campion, 2019). Pradhan and Jena (2017) defined employee performance as a measure of how well an individual carries out tasks assigned to them all dependent on a single person. They further define performance in relation to behavior which

differentiates performance from outcomes. Outcomes result from external influences as well as an individual's outcome, which can be in the form of non-observable actions such as decisions and answers. However, performance is under an individual's control whether it is mental or behavioural.

Singh, Burgess, Heap, Almatrooshi and Farouk (2016) explains that employee performance is among the leading factors that influence an organization's success. The level of productivity of an individual employee benefits both the employees and the organization. According to Bandura (1997) as cited by Lou (2013) employees who record high performance show high levels of employee performance, mastery of job and high self-efficacy. The many rewards associated with high employee performance enhance their career opportunities (Riaz, Akhtar & Aslam, 2018).

The significance of measuring performance is cited by Haden (2013), who explains that it should be conducted as an ongoing process. The author further explains that the performance evaluation should entail all the aspects of employee achievements and work ethics. Multiple tools of measuring performance have been developed and businesses have the liberty of choosing the one that best suits them. However, the 2014 Global Assessment Report points that organizations use either talent metrics or objective metrics to track performance. Rachel Scott (2016) as cited by Gichuki & Munjuri (2018) proposes five metrics for measuring an employee's performance. She says that performance can be measured by looking at the attendance of an employee i.e. punctuality and consistency in carrying out their duties. How helpful employees are to their colleagues and other stakeholders. The output of an employee is determined by their efficiency in carrying out tasks, their initiative and the quality of work they give.

2.2.2 Indicators of Employee Performance

Van-Looy and Shafagatova, (2016) defined performance indicators as numerical value that shows the quantitative value or performance of a given system. However, performance is not only measured by quantitative means, but also qualitative indicators (Kravchenko, Pigosso & McAloone, 2019). The direction of an indicator shows the level of performance. Favourable performance is indicated by the movement of the indicator in one direction while the movement in the opposite direction is indicative of poor performance. Success is often the repeated periodic achievement of operational goals. Choosing the right key performance indicators (KPIs) relies on what is important to the organization and importance of dependent on the department within an organization which is measuring it. Performance indicators are routinely associated with performance improvement initiatives.

Different management frameworks such as the balance score card are used to select KPIs. Becker and Mustric (2008) declared that the elements in the human resource score card are key leading indicators for the success of workforce. Key performance indicators have always been assigned to each perspective in the strategy map but are being adapted in the entrepreneurial sector as well. Gerathy (2003) observed that according to their experience performance indicators are valid and effective when applied in a comprehensive and consistent manner. Dawabsheh et al. (2019) pointed out that there should be a direct link from the overall organizational goals to the performance indicators. Employees' performance is indicated by industrial peace within organizational goals due to minimized strikes, lockouts and malpractices which can affect productivity (Wassem et al., 2019). Employees' performance in an organization is evident by attainment of set goals, reduced labour turnover, reduced absenteeism, late coming and early leaving of an

organization (Locke and Latham, 2019). This comes as a result of employees' motivation from job restricting which cuts down boredom due to undertaking of a repetitive job without a change.

2.3 Concept of Drug Abuse

Governments all over the world are facing growing problems arising from drug abuse. Drug abuse is a global problem that poses a great danger to the lives of individuals, society and political stability and security in many countries (United Nations, 2013). The use of illicit drugs has increased throughout the world and the major world trend is the increasing availability of many kinds of drugs among ever widening spectrum of consumers (United Nations, 2013). Drug abuse globally has become a serious problem affecting everyone. Addiction leads many people into a state of hopelessness that in some cases ends fatal (Patricia, 2014). Patricia (2014) argues further that drug abuse is responsible for lost wages, soaring health care costs and broken families. According to her, the problem of drug abuse affects everyone including parents, children, teachers, government officials, tax payers and workers (Patricia, 2014). Urgent measures are required for combating the problems caused by drug abuse including: ill health, poor time management, accidents, violence, habitual lateness, frequent absences, neglect of personal grooming, interpersonal problems, employee experiencing poor coordination, poor concentration and/or visual disturbance among the employees in organizations due to drug abuse so as to participate fully in economic and social development of their countries.

According to Whittinghill, D., Whittinghill, L. R., & Loesch, L. C. (2000), substance use and job behaviors were assessed in a sample of municipal employees from a large city in the southwestern United States. Job behaviors included psychological and physical

withdrawal, positive work behaviors, and antagonistic work behaviors. Employees who reported substance use at or away from work were found to more frequently engage in withdrawal activities and antagonistic work behaviors than did nonusers, although users and nonusers did not differ on positive work behaviors. Hierarchical regression models were tested to determine whether substance use contributed unique variance to the prediction of job behaviors after controlling for variance associated with personal and job background domains. Substance use added unique variance to the prediction of psychological and physical withdrawal behaviors but not to positive or antagonistic work behaviors. Various policies against drug abuse have been developed across the world. However, there are cases of increased drug and substance abuse trends particularly in developing countries where few interventions have been put in place. The United Nations (UN) estimates that there are 28 million drug users in Africa. According to the United Nations (UN) Statistics 2013, 37,000 people in Africa die annually from diseases associated with drug abuse (United Nations, 2013).

2.3.1 Review of literature from other parts of the world

Alcohol and other drug related problems can occur in any workplace. Estimates of the cost of injuries, absenteeism, lost production, workers compensation and rehabilitation services, arising from the misuse of alcohol and other drugs in the workplace vary in the current research data available. The abuse of alcohol and other drugs may damage physical and mental health. The impairment of behavior can cause affected employees to injure themselves or others. Workmates are often placed in the uncomfortable position of feeling obligated to cover for poor work performance. Employers may be faced with lateness, inefficiency and absenteeism, lost time and production from dangerous incidents and damage to plant, equipment and other property. (www.legislation.nsw.gov.au)

Many factors have been put forward as possibly contributing to the misuse of alcohol and other drugs including: grief, harassment, bullying or victimization, family and relationship problems, long and/or irregular working hours, interpersonal conflict, tight deadlines and unrealistic performance targets, health concerns, high risk of personal injury or illness at work, gambling, discrimination, financial problem, poor job design or hazardous work processes, loss of control and lack of participation in any decision making process.

According to the United Nations (2013) the heroin world market is moving towards countries with transition economies and some developing nations. United Nations (2013) reports that in Southeast Asia, Methamines have become the most troublesome drug. In Africa, the consumption of cannabis, which is on the rise, has become quite prominent. On the other hand, the worldwide market for this drug regrettably continues to be dynamic, including its increasing consumption in South America and Eastern Europe. The International Center for Alcohol Policies released a report, Noncommercial Alcohol in Three regions, which looks at Central and Eastern Europe (such as Belarus and Ukraine), Sub-Saharan Africa (such as Ethiopia, Ghana, Kenya, and Zimbabwe), and South East Asia (such as Sri Lanka, Malaysia, etc). The report defines noncommercial alcohol as traditional beverages produced for home consumption or limited local trade and counterfeit or unregistered products.

According to the report released by the International Center for Alcohol Policies (ICAP) in the Science Daily, November 20, 2008, the consumption of illicit or noncommercial alcohol is widespread in many countries worldwide and contributes significantly to the global burden of disease. According to Science Daily (April 24, 2009) liver disease is the

most prevalent cause of alcohol-related deaths, followed by car accidents and cancer. According to Fischer and Higgs (2011), unsafe injecting practice associated with illicit drug use contribute to transmission of blood-borne viruses, such as HIV and Hepatitis C, and continue to place a major demand upon health service resources in Australia and throughout our region. Prevalence of non-injecting illicit drug use is on the increase, impacting on the health and well-being of communities. Alcohol continues to contribute, disproportionately, to the global burden of disease, causing many to question common views on the use of this substance. Consideration of public health policy reform lies at the heart of this debate, with a need to challenge the views of societies and the role substances use plays in our concept of health.

According to Wodak, A. (2008) HIV Infection among injecting drug users (HIV/IDUs) has become a recognized problem in an increasing number of countries. Some HIV/IDU epidemics evolve slowly and some rapidly, and the rate is unpredictable. HIV prevention among IDUs involves education, needle syringe programs, drug treatment, and community development. This strategy is often referred to as “harm reduction”, which implies that reducing harm from drugs is a higher priority than reducing consumption. Kelada, L., Hasking, P., & Melvin, G. (2016) asks several questions in the assessment stage about consequence, covering the physical, psychological, sexual, relationship, job, financial, and legal consequences of alcohol drug-use. Another key assessment issue with alcohol/drugs is the potential for suicide. Green, K. M., Doherty, E. E., Reisinger, H. S., Chilcoat, H. D., & Ensminger, M. (2010) state that the “recognition of substance abuse as a suicidal endeavor stems from as far back as 1938 when Menninger likened addiction to chronic suicide.” The most important task in assessing the potential for problems with

alcohol/drugs is determining if there is a family history of alcohol/drug abuse and addiction.

2.3.2 Kenya National Drug and Legislation

The Kenya National Drug and Legislation involve drug control, legislation and legal framework under which treatment and rehabilitation of drug abuse takes place. The narcotic drugs and psychotropic substances (control) Act 1994, is the latest Kenyan legislation against drug trafficking and abuse. This enactment was followed by the setting up of the Inter-ministerial Drug Control Committee in 1995 whose responsibility was to coordinate, monitor and evaluate drug policies in the country. The greatest achievement of the inter-ministerial committee was the production of the drug control master plan in 1999 which was approved in early 2001. The same year the National Agency for the Campaign against Drug Abuse (NACADA) was majorly formed to enhance advocacy against drug abuse in the country. Its objectives were coordination, implementation, monitoring and evaluation of programs on the campaign against drug abuse in Kenya. National Agency for the Campaign against Drug Abuse has been holding consultative meetings to develop a strategic plan that would include public awareness campaigns, intervention of special groups, counseling services and rehabilitation for the vulnerable, the youth and support services. These included institutional framework of drug abuse control, strategies of drug abuse treatment and in prevention education activities, (National Agency for the Campaign against Drug Abuse, 2007). From a newspaper article by Steve Mbogo in the Business Daily dated July 8 2008, titled, *'Tough times for smokers as ban comes into force'*, it is evident that the National Drug Policy is being enforced. According to this article, 'Smokers were required to start buying cigarettes in packets, as tobacco companies comply with a new law meant to protect the public from

exposure to cigarettes smoke. The law would end what had been a culture of buying cigarettes in sticks instead of packets or boxes. The tobacco Control Act of 2007, which came into effect in October 2007, provided for a nine month implementation period. 'This article has cited the Implementation of the Tobacco Control Act of 2007 which clearly indicate that the Kenyan government has put down measures to curb the abuse of drugs and substances in the country. *The Special Issue on Behavioral and Social Science* © Centre for Promoting Ideas, USA www.ijhssnet.com 190.

2.4 Theoretical Framework

The theories of drug abuse generally express that several factors determine the dependence of people on certain drugs; such factors vary from one person to another. The study was based on addictive experiences theory. According to this theory, a person can begin to use or try a drug for any of the whole range of human motivations; indeed, the desire to alter consciousness through drug use seems to be nearly universal. The reasons for initial use can determine whether or not the user will ultimately become addicted. The following are reasons for starting to take a drug: a sense of adventure; a need for stimulation; a desire to emulate others in the peer group; and personal needs, such as to avoid pain, to escape from reality, to gain a predictable gratification in the absence of other life rewards, to compensate for a sense of personal inadequacy (Peele, 1985). People use drugs when they find such use to be rewarding in terms of values, needs, and overall life structure. Conceivably a drug can fulfill positive functions for an individual such as enabling him or her to work better or to relate to others. Even in this case there is the danger that functioning in a positive sense will become dependent on continued drug use. In all cases, use of the drug will probably make it harder for the person to eliminate underlying and unresolved problems.

While the experience the drug produces for the person must provide rewards for him or her in order to maintain drug use, this is not to say that its objective impact on the user's life will not be negative. Thus narcotic or barbiturate users find the removal of pain and the absence of anxiety induced by the drug to be rewarding, even though these effects make them less sensitive to and less effective in dealing with their environment. In fact, it is this very depletion of capabilities which best guarantees continued use of the drug. Addiction occurs along a continuum, so that it is impossible to designate an exact point at which a drug habit becomes an addiction. There are several criteria in terms of which it is meaningful to evaluate a drug involvement for its addictive potential. Some of these criteria derive from initial motivations for using a drug and from the motivations for continuing use. If a drug is used in order to eradicate consciousness of pain, problems, and anxieties, then its use will tend to be addictive. Another aspect of this type of abuse is the inability of users to derive pleasure from drug use, since they are relying on the drug primarily to avoid unpleasantness rather than for any positive effect. In this case, a criterion for abuse and addiction is that the drug is relied on at regular times for the very predictability of its effects.

The most crucial criterion for the addictiveness of an involvement is whether use of the drug destroys or harms other involvements. For when this is the case, abuse moves inexorably along the continuum toward addiction as other reinforcers fall away and the drug experience becomes the primary source of reward for the individual, (Peele 1985). To cease being addicted to a drug, one must develop the ability to derive real rewards from the world to replace the unrealistic rewards that the drug provides. Such rewards include those which come from basic competence, from the ability to carry out

meaningful work which is rewarded by others, from the capacity to form intimate relationships with other people, and from having a comfortable and satisfying relationship generally with one's environment. While it may be necessary to restrict or eliminate drug use in order to accomplish these goals, simple cessation of use in no way implies that these goals are accomplished. This theory is relevant to this study since it includes an analysis of the feelings which led to use of drugs, explores more functional methods of coping with these feelings, and tries to encourage practice (actions) which are incompatible with reliance on the drug experience.

Several theories can be used to explain substance abuse in society and one of them is the social conflict theory. Clayton and Scott (2006) note that from the perspective of social conflict theory, substance abuse is primarily a problem of structural inequality and class conflict. While substance abuse is generally omnipresent throughout society, social conflict theory argues that minorities, the lower class and other marginalized groups are more likely to disproportionately suffer negative consequences as a result of substance abuse. While the use of mind-altering substances has been a persistent activity throughout human history, the term substance abuse is generally used to describe an unhealthy, debilitating and antisocial dependence on any chemical substance. Generally, this is most often used to refer to illicit or illegal drugs as well as some legal but regulated substances such as alcohol or prescription medications. Substance abuse is generally regarded as personally and socially detrimental, and is usually considered a punishable offense by many state regulatory agencies.

Additionally, Kelman (2004), this theory helps us understand drugs and drug use in at least two respects. First is, most of drug use in poor urban areas results from the poverty,

racial inequality, and other conditions affecting people in these locations. They turn to illegal drugs partly to feel better about their situation, and partly because the illegal drug market is a potentially great source of income that does not require even a high school degree. Kelman (2004) further postulates that conflict theory emphasizes that racial and ethnic prejudice and inequality help determine why some drugs are illegal as well as the criminal penalties for these drugs. For example, the penalties for crack are much harsher, gram for gram, than those for powder cocaine, even though the two drugs are pharmacologically identical. Crack users are primarily poor African Americans in urban areas, while powder cocaine users are primarily whites, many of them at least fairly wealthy. These facts prompt many observers to say that the harsher penalties for crack are racially biased. Other evidence for this argument of conflict theory is seen in the history of the illegality of opium, cocaine, and marijuana. It is evident that racial and ethnic prejudice played an important role in why these common drugs in the nineteenth century became illegal: prejudice against Chinese immigrants for opium, prejudice against African Americans for cocaine, and prejudice against Mexican Americans for marijuana. Moreover Bartos & Wehrm (2002), postulate that conflict theory emphasizes the huge influence that multinational corporations have in the marketing and sale of the legal drugs like alcohol, tobacco, and many prescription drugs that often have harmful individual and societal consequences. To maximize their profits, these companies do their best, to convince people to use their products. They also spend billions of money to lobby state administrations. For example tobacco industry hid for year's evidence of the deadly effects of its products. All these efforts illustrate conflict theory's critical view of the role that corporations play in today's society. This study has therefore used this theory and

establish how class conflicts at Maasai Mara University contribute to drug abuse and the effects it has on the employees.

According to Bower, (1988) chaos is the irregular, uncertain discontinuous aspect of change within the confines of a patterned whole. This means that there are those events we cannot predict in an organizational life and even in our desire to create order and control of the situation; events often seem one step ahead of us. Chaos theory describes the behaviour of certain non- linear dynamical systems that under specific conditions exhibit dynamics that are sensitive to initial conditions (popularly referred to as the butterfly effect). As a result of this sensitivity, the behaviour of chaotic and unpredictable results can and will occur in systems that are sensitive to their initial conditions. Disaster and emergencies epitomize on the unpredictability or non- linearity of human events. There are many events that we can predict in the society but not disaster. Man cannot therefore predict when a disaster will occur, the number of fatalities or the amount of resources and personnel required to bring order to chaos. Factors to be considered in disaster safety cannot be accurately defined, quantified or even understood at any time. This then leaves man with only the option of continuously improving the effectiveness of safety measures undertaken and having a successful disaster response plan within his organization to effectively stop or respond to any eventuality. It is imperative that the society prepares itself to tackle disasters since disasters that are related to drug and substance abuse such as car accidents affect those involved and not involved in drug and substance abuse. It is the responsibility of everyone in the society to act against drug and substance abuse because we could all be directly affected by the related disasters. In a study by Kellert (2008), it is postulated that chaos is the uncertain and unbalanced

discontinuous characteristics of transformation within the confines of a patterned whole. This implies that there are those moments we cannot foretell in firms life and even in our aspiration to maintain order and control of the situation; events often seem one step ahead of us. Chaos theory describes the behaviour of certain non- linear dynamical systems that under specific conditions exhibit dynamics that are sensitive to initial conditions (popularly referred to as the butterfly effect). As a result of this sensitivity, the behaviour of chaotic and unpredictable results can and will occur in systems that are sensitive to their initial conditions. Disaster and emergencies epitomize on the unpredictability or non- linearity of human events. There are many events that we can predict in the society but not disaster. Man cannot therefore predict when a disaster will occur, the number of fatalities or the amount of resources and personnel required to bring order to chaos. According to Reed (2016), the factors to be considered in disaster safety cannot be accurately defined, quantified or even understood at any time. This then leaves man with only the option of continuously improving the effectiveness of safety measures undertaken and having a successful disaster response plan within his organization to effectively stop or respond to any eventuality. It is imperative that the society prepares itself to tackle disasters since disasters that are related to drug and substance abuse such as car accidents affect those involved and not involved in drug and substance abuse. It is the responsibility of everyone in the society to act against drug and substance abuse because we could all be directly affected by the related disasters. Additionally, Chaos theory is applicable to drug abuse because it can help us understand sudden changes in the behavior of a system, unpredictability, and irregular behavior, all of which occur in abuse of drugs,” Chaos theory looks for simple models of complex behavior. The tools

for building such models are nonlinear equations, which can show complex and surprising behavior such as rapid shifts from stability to an oscillating state. The study has therefore utilized this to help understand the rapid changes of employee's behaviour within the university.

Peele (1985) notes that some of the issues specific to alcohol abuse deal with the social-learning concepts which manifest, such as the degree to which the drinker believes him/her-self capable of controlling his/her drinking, and the belief that alcohol is an effective means of modifying moods. The fact that age, socioeconomic status, and minority status are considered predictors of problem drinking; it challenges the disease model concept of alcoholism and calls attention to the cognitive aspects of the process. However, this should not be considered to negate the disease model but rather exemplify the need for holistic interventions that are inclusive of values and beliefs along with biological variables. Even where there is a known genetic basis for alcoholism, there are significant variations in the rates of alcoholism which could be attributed to social regulation (Peele, 1985).

2.5 Empirical Literature

2.5.1 Drugs abused and Reasons for the abuse

According to Arthur (2009) numerous substances can be abused by addicts who seek a high feeling of experience. Some substances are uppers, while others are downers. Some addicts use one and then the other to bring themselves up or down. Uppers are a category of drugs known for their mentally and physically stimulating effects. They provide temporary boosts in alertness, energy and mood. Unfortunately, once the drug's effects have worn off, one is left feeling exhausted and depressed. One may therefore opt to continuously use uppers as a means of maintaining the feeling; unfortunately, this can

lead to physical dependency and addiction. The commonly abused uppers include cocaine, Adderall, Ritalin, Methamphetamine, Caffeine and Nicotine. Downers are drugs that decrease mental or physical activity. Downers are functional opposite to uppers or stimulants which are drugs that increase activity of the mind or body. Depressants are widely used as prescription medications and illegitimately as recreational drugs. Downers can be divided into two categories: opiates and sedative- hypnotics. Opiates include drugs like heroine, morphine, fentanyl and other powerful pain medications. They induce feelings of pleasure and relaxation in a similar manner to uppers by controlling dopamine production and their side effects are also similar. With prolonged use, people with opiate abuse problems have experienced feelings of unshakable apathy and depression. Due to their incredibly addictive nature and high risk of overdose, opiate pain medications are closely monitored and usually reserved for patients with severe pain, such as late-stage cancer patients, people with pain disorders, and those who have recently undergone surgery. Unfortunately, opiate pain medications are widely abused, especially by teens and young adults who gain access to the drugs via family medicine cabinets or the street market. This type of downer is responsible for a large portion of the yearly overdose deaths. Sedative-hypnotic downers are a class of drugs used to induce sleep. This can include drugs used to treat insomnia as well as those used for sedation during medical procedures. Examples of the common sedative-hypnotic downers are Barbiturates, Valium, Quaaludes, Phenobarbital, Rohypnol and Xanax. As the name suggests, sedative- hypnotics induce feelings of drowsiness, euphoric “floating” sensations and inhibits movement and speech. Muscle relaxants and alcohol are also categorized as downers.

By suppressing the function of certain organs and bodily processes including breathing and the circulatory system, misuse and abuse of sedative-hypnotic downers can be extremely dangerous. Typically, use of these drugs is prescribed for specific medical conditions and closely monitored by a doctor, but just as with opiates, they can find themselves in the wrong hands. Additionally, sedative- hypnotics are highly addictive and withdrawal process can be dangerously taxing on the body; medical supervision in a detox facility is advised.

According to Arthur (2009) alcohol is a socially accepted drug. Social acceptability varies from country to country and from place to place. Due to cultural differences, the definition of socially acceptable is different around the world. Socially acceptable things are those which are not considered taboo in our society and are very much common at places where we live. Alcohol is socially acceptable because it has been around since biblical times and people have been using it in most cultures throughout history. Its use throughout history has prompted it to be socially acceptable in society. Social acceptability makes alcohol one of the most abused substances. Alcohol is treated as if it is not a drug and has no negative consequences. Many social functions involve alcohol. Effects of alcohol take too long to show up so it is often thought to be harmless and not dangerous. This perception of alcohol being harmless would make people drink alcohol without worrying about the risks they are taking. Alcohol can also be a force for good as it brings people together and forms social bonds. Its use at social events and occasions help build friendships and improve socializing skills. It can also make people happier and can be an emotional stabilizer (knowalcohol.com). The biggest factor of alcohol being socially acceptable would be the media. The various advertisements shown on the

television by alcohol beverage companies have a major influence on society's perception of alcohol. Its images of people having a good time and feeling refreshed make people who watch the advertisements think that it has these positive effects and no negative effects. Alcohol is portrayed by the media as fun and relaxing. Alcohol use by characters in various movies and TV shows have also influenced drinking. Adolescents who watch such movies are more prone to drinking at a younger age. Because access to alcoholic beverages is convenient, alcohol abuse affects a large population. This means that alcohol is readily available to the public. Selling alcohol in grocery and convenience stores is common in many countries. Grocery or convenience store refers to any retail establishment where groceries are regularly and customarily sold for consumption. Such establishment shall have and maintain groceries which are readily available to the public. In some states, licensing of alcohol sales is done. Lawmakers and others who support the expansion of alcohol sales emphasize the convenience to consumers (NABCA Research, 2016).

Tobacco is a legal cash crop and is grown in some parts of Kenya. Tobacco is usually consumed in form of cigarettes or cigars. Apart from smoking, tobacco is also sniffed or chewed. Tobacco is an addictive drug. For much of the 20th Century, smoking was regarded as a socially learned habit and as a personal choice. It is only in the past decade that the fundamental role of nicotine in sustaining smoking behavior has begun to be more widely accepted. It is now recognized that cigarette smoking is primarily a manifestation of nicotine intake. Smokers regulate the way they puff and inhale to achieve their desired nicotine dose (Jarvis 2004). Peer pressure is one of the reasons why people use tobacco. Children, for instance, start using tobacco for the first time when they

get it from a friend or a parent who urges them to try it. By the time the child goes to the store to purchase tobacco, many might have already been using it for several days or even weeks. People may also start to use tobacco due to social pressure and association. Being in an environment that condones tobacco use (for instance, sports, bars, outings or any place they are around others who use it) can be a great motivator. Users are often able to quite for a significant length of time but begin again to use when they are around others who dip or smoke. The smoke from cigarettes has harmful effects on those around the smoke. Absorption of cigarette smoke from the lung is rapid and complete, producing with each inhalation a high concentration arterial bolus of nicotine that reaches the brain within 10-16 seconds, faster than by intravenous injection. Nicotine has pervasive effects on brain neurochemistry. It activates nicotine acetylcholine receptors which are widely distributed in the brain and induces the release of dopamine in the nucleus accumbency. This effect is the same as that produced by other drugs of misuse (such as amphetamines and cocaine) and is thought to be a critical feature of brain addiction mechanisms. Nicotine is a psychomotor stimulant, and new users it speeds simple reaction time and improves performance on tasks of sustained attention. However, tolerance to many of these effects soon develops, and chronic users may not continue to obtain absolute improvements in performance, cognitive processing or mood (National Institute of Health, 2001). According to the World Health Organization, a major effort has been underway to curb the world's use of smoking tobacco as state and federal laws increasingly restrict where people can smoke, and taxes on cigarettes and other tobacco products are higher than ever. Study has shown that heart disease, lung disease and cancer are linked with smoking yet people continue with the smoking. Despite all of the

scientific evidence of tobacco's health dangers and public health advertising, nonsmokers are still being persuaded to take that first drug that can lead to lifelong addiction (American Heart Association). Cocaine: Cocaine addiction can be detrimental to the substance abuser because it drains all aspects of his life. Financial, family and emotional issues surface with the addiction. LSD: LSD (Lysergic Acid Diethylamide) can be a drug of choice for individuals wanting to escape the reality of life. Many addicts choose LSD because it is undetectable in drug tests. Marijuana: A common, inexpensive drug that is usually inhaled is marijuana, also referred to as pot. Unlike other substances, marijuana is not as physically addictive. However, marijuana is viewed as a gateway drug to other substances. Prescription Drugs: Prescription substance abuse is on the rise and affects teens as well as adults. Prescription drugs are usually found by the addict initially in the home.

2.5.2 Drug Abuse and Absenteeism

Absenteeism refers to failure of employees to be at their place of work for directly or indirectly avoidable reasons [drug abuse in this case] (Armstrong, 2003). Absenteeism is an employee's intentional or habitual absence from work. The term absenteeism can therefore be defined as the fact or habit of frequently being away from work, usually without a good reason. It may also be defined as the habitual non-presence of an employee at his or her job. Bacharach et al., (2010) argue that after a heavy drinking episode, hangovers may result to employees calling in sick or reporting late. The absence of employee from the workplace has been defined by Public Management Research Association (2018) as workplace absenteeism. According to Robbins, Odendaal and Roodt (2004) absenteeism is what occurs when an employee fails to report for duty as scheduled, without looking at the reason or cause. Markussen, Rogeberg and Gaure

(2009) argue that several aspects contribute to employee absenteeism including the following: nature of work, age and gender of employee, education and occupation. According to Griep, Rotenberg, Chor, Toivanen and Landsberis (2010) absenteeism can be directly used to ascertain the level of staff morale and also indirectly measure an employee's health and well-being. They argue that motivated and committed employees usually have to be sick before they book for their sick off.

Drug abuse may result into absence of the affected employees from their workplaces. A research carried out by Kaithuru and Stephen (2015) reveals that alcohol accounts for up to 10% of workplace absenteeism and up to 50% of lateness. According to the Institute of Alcohol Studies (2009) employee absenteeism due to alcohol had a financial impact averaging to \$ 1.5bn per year. In more recent studies, there is some evidence of the effect of alcohol on absence. For example, it has been shown that the risk of short-term absenteeism is increased the day after alcohol consumption (McFarlin and Fals-Stewart, 2002). In an attempt to establish a link between substance use and absenteeism, McFarlin and Fals-Stewart (2002) examined patterns of drinking and absenteeism over a 4-week period for 244 employees across three different organizations. Results revealed that participants were about twice as likely to miss work the day after consuming alcohol (McFarlin and Fals-Stewart, 2002) compared to those who did not consume alcohol. Although it is commonly assumed that alcohol consumption has a significant impact on employee absenteeism, the nature of the alcohol-absence relationship remains poorly understood. This relationship is likely governed less by the amount of alcohol consumed and more by the way it is consumed (Journal of Applied Psychology, 2010). The harmful use of alcohol is one of the world's leading health risks and has been implicated in 5.9%

of deaths globally (World Health Organization, 2014). Research has consistently shown that *excessive* drinking over time increases the risk of a wide variety of chronic health problems including liver, musculoskeletal and cardiovascular problems (Hanebuth, Meinel, and Fischer, 2006). Moreover, the incidence and severity of such chronic health problems have been directly associated with the level of employee sickness absence (Gmel and Rehm, 2003). Additionally, because alcohol may have both immediate and longer-term adverse effects on mental function (i.e., pattern recognition, reasoning, detection of auditory and visual stimuli, ability to divide attention, time estimation, hazard perception, anticipation time, coordination and general reaction time), the risk of injury stemming from work and non-work accidents may be greater for those with higher levels of modal consumption (Moskowitz and Fiorentino, 2000). And to the extent that injuries such as those resulting from falls or motor vehicle accidents may be associated with long recovery periods, there may be a further basis for positing a link between modal alcohol consumption and sickness/injury-based workplace absence.

2.5.3 Drug Abuse and Time Management

Time has been defined ambiguously and even in a sort of contradictory manner. According to Olpin and Hesson (2012) time is nothing more than the occurrence of events in sequence, one after another. Kerzner, (2009) defines time management as a resource that, when lost or misplaced, is gone forever. Time management has also been defined as the process of skillfully applying time to finish and perfect a specific activity within time constraint (Harris, 2008). Becker and Mustric (2008) divide time into categories: quantitative and qualitative. Wu, D. (2009) argues that quantitative time is seen to represent time as quantities, that is, time can be measured and counted into seconds, minutes, hours, days, weeks, months, and years. On the other hand, qualitative

time is associated with a meaning of an activity the time is spent on (Wu, D. 2009). According to Kristan (2010) time management is about taking charge, carefully, consciously, purposefully – not shrinking from difficulties, but engaging them. In Forsth's argument, time management must not be seen as only concerned with packing more activity on the available time, though this may be part of it; it must be in ensuring that objectives are met (Forsth, 2010). Time management can therefore be defined as the act or process of exercising conscious control over the amount of time spent on specific activities, especially to increase efficiency or productivity. It refers to any change that a person makes to his life that will allow him to make better use of his time. Felton and Sims (2009) associate the concept of time management with one's self- management. They argue that the focus of time management is priorities and systems from self- management. Self-management is the powerhouse of time management (Felton and Sims 2009). Drug abusers may not be in a position to manage themselves well so that they can manage their time. Employees who abuse drugs end up wasting too much time which could have been utilized in more productive work.

2.5.4 Drug Abuse and Service Quality

Quality can be defined as 'the totality of inherent characteristics of a product or service that bear on its ability to increase the demand for that product or service at a fixed price' and can best be measured by capturing customer perceptions of the performance of those characteristics. It is critical to corporate success as it plays a vital role in improving organizational productivity. In considering quality, it is important to note that quality and profit are not mutually exclusive. Quality has also become a key differentiator to survive in an increasingly competitive marketplace (Salah, S., & Rahim, A. 2018). Quality is a key requirement in every field. According to the Cheng, T. C. E., & Chiu, I. S. F. (2008),

to survive in today's environment of global competition, never-ending change and complexity, rising customer expectations and continuous cost pressures, focusing on quality is no longer a choice; it is mandatory. Zeithaml et al. (1990) argues that quality is much more in the eye of the audience and service quality can only be based on customer perceptions.

Service quality is an achievement in customer service. The term service quality may also be defined as an assessment of how well a delivered service conforms to the client's expectations. It refers to a comparison of expectations with performance. A business with high service quality will meet customer needs whilst remaining economically competitive. A quality product or service conforms to the customer requirement by design, purpose and the manner in which it is presented (Wilcox, 2004).

Improved service quality may increase economic competitiveness. From the viewpoint of business administration, service quality is an achievement in customer service. It reflects at each service encounter. Customers form service expectations from past experiences, word of mouth and advertisement. In general, customers compare the perceived service with expected service in which if the former falls short of the latter the customers are disappointed. A customer's expectation of a particular service is determined by factors such as recommendations, personal needs and past experiences. The expected service and the perceived service sometimes may not be equal, thus leaving a gap. Ten determinants that may influence the appearance of a gap were described by Zeithaml and Bitner (2003) in the SERVQUAL model: reliability, responsiveness, competence, access, courtesy, communication, credibility, security, understanding the customer and tangibles. Reliability is the ability to perform a promised service dependably and accurately.

Responsiveness refers to the willingness/readiness to provide prompt service. To be competent is to possess knowledge and skill to perform the service. Accessibility is the approachability and ease of contact of service personnel.

Courtesy is the politeness, consideration, and friendliness of service personnel.

Communication is keeping customers informed and listening to customers. To be credible is to be trustworthy, believable and honest. Security is freedom from danger, risk, or doubt. Understanding/knowing customer entails knowing customer's needs. Tangibles refer to the physical evidence of service.

2.6 Conceptual Framework

Figure 1.1 below presents the conceptual framework for the study.

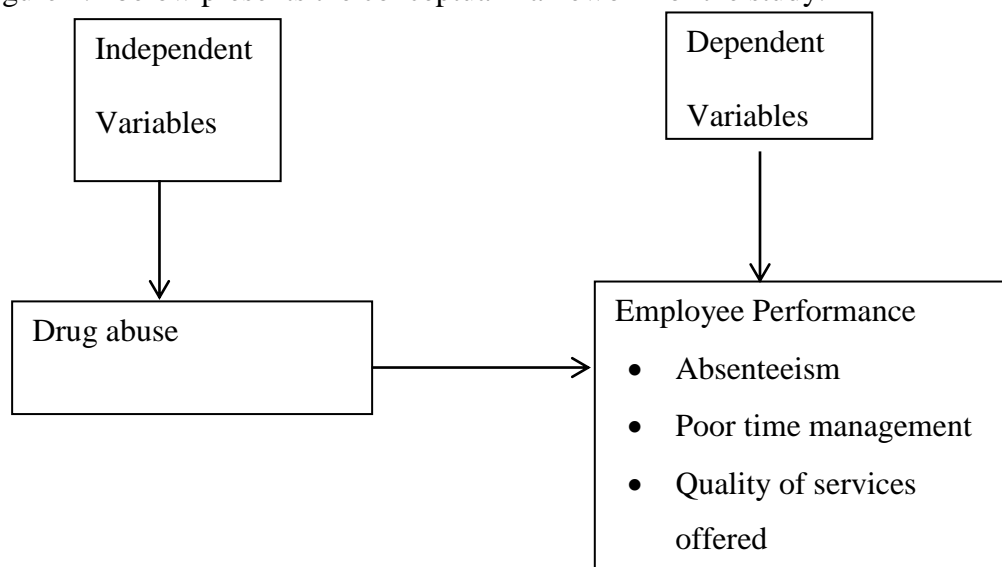


Figure 1.1: Conceptual Framework

Source: Researcher 2019

The above conceptual framework depicts the expected relationship between drug abuse and employee performance. In the conceptual framework employee performance is operationalized as Absenteeism, Poor time management and Quality of services offered.

The conceptual framework presupposes that drug abuse affects employee performance.

2.7 Research Gap

This chapter has reviewed literature related to the effects of drug abuse on employee performance. The review has shown that drug abuse can affect employee performance. The literature gaps have been identified which this study seeks to fill. The literature revealed that some of the studies were conducted before NACADA came up with serious guidelines in dealing with drug abuse in Kenya. Others were done outside Kenya where the conceptual setup and culture are not similar to those prevailing in Kenya. Other studies did not directly relate to effects of drug abuse on employee performance. Hence these are the gaps which the results of this study will help in bridging.

CHAPTER THREE

RESEARCH DESIGN AND METHODOLOGY

3.1 Overview

This chapter presents the research design, study area, target population, sampling procedures and sample size, data collection procedures, data collection instruments, validity, reliability, data analysis and presentation and summary.

3.2 Research Design

Research design refers to the way in which a research project or plan can be carried out in practice by a researcher (Cheek, 2008). This study adopted a survey research design using mixed methods approach whereby quantitative data was collected and analyzed first followed by collection and analysis of qualitative data. The purpose of qualitative data was to supplement the quantitative data. In the quantitative portion, the study used descriptive survey design. In the qualitative portion of the study, the researcher used the case study design.

3.3 Study Area

The study was carried out in Maasai Mara University which is situated in Narok County. The University was chosen because the researcher is familiar with it. The University is easily accessible as it is located not far from the Bomet -Narok highway.

3.4 Target Population

The study targeted the entire population of employees of Maasai Mara University. The research population of the study comprised of employees from different departments/ sections in the University. There were a total of 540 employees working in the University.

3.5 Sampling Procedure and Sample Size

Sampling is the process of selecting a sub-set of cases in order to draw conclusions about the entire set. A sample is a small part of large population, which is thought to be representative of the larger population (Orodho, 2004). Any statements made about the sample should be true for the entire population. As noted by Cohen (2003), factors such as expenses, time and accessibility frequently prevent researchers from gaining information from the whole population. Therefore, there is need to obtain data from a smaller group or subset of the total population in such a way that the knowledge gained is representative of the total population under study. The sample size for this study was determined using sample size determination formula advanced by Krejcie and Morgan (1970) as cited by Kasomo, (2006). The formula is given as:

$$n = \frac{X^2 * N * P(1 - P)}{(ME^2 * (N - 1)) + (X^2 * P * (1 - P))}$$

Where:

n= Sample size

X^2 = Chi-square for the specified confidence level at 1 degree of freedom

N= population size

P = population proportion

ME = Desired Margin of Error (expressed as a proportion)

$$n = \frac{3.841 * 540 * 0.5(1 - 0.5)}{(.05 * .05) * (540 - 1) + (3.841 * .5(1 - 0.5))} = 217$$

Using the formula, the sample size for a target of 540 respondents was 217. Therefore, a sample of 217 employees comprising of administrators, lecturers and support staff were selected for the study using sample size determination formula and sample size table by Krejcie and Morgan (1970) as cited by Kasomo, (2006).

From a target population of 281 lecturers, sixty percent (40%) were selected by simple random sampling technique to get a sample size of 113 lecturers, 13 administrators and 91 support staff. The choice of 40% is based on the recommendation by Kathuri and Pals (1993). The recommendation is used to determine the size of a randomly chosen sample from a given finite population such that the sample was within ± 0.05 of the population with a 95% level of confidence. Sample size and the distribution of respondents is as shown on table 3.1

Table 3.1: Sample size

Quota	Target Population	Sample size
Lecturers	281	113
Administrators	32	13
Support staff	227	91
Total	540	217

Source: Author, 2019

3.6 Data Collection Procedures

This is the gathering of information in order to prove some facts. The researcher obtained permission from Moi University and from the Ministry of Education before going to the field. The researcher then looked for a research assistant who was not only given an orientation about the research but was also trained on how to use the instruments and how to source for data. She visited Maasai Mara University where the research was conducted, a week before the actual collection of data in order to seek permission and build a rapport with the relevant authorities. She then made an appointment on the date and time to visit in order to collect the data. Since the researcher's study was mixed

approach, data was collected in two phases and the first phase, which is the quantitative portion data, was collected by use of questionnaires. The second phase which is the qualitative portion, data was collected in the forms of key informant interviews and focus group discussion.

3.7 Data Collection Instruments

Research instruments which were used for this study include self-administered questionnaire, unstructured interviews, and focus group discussions.

3.7.1 Questionnaire

A questionnaire is a list of questions to be asked by the researcher and is prepared in such a manner that the questions are asked in exactly the same way to every respondent (McNeill and Chapman, 2005). The study utilized the questionnaires which were a set of questions. The participants were selected from the entire population of 540 employees of Maasai Mara University. The advantages of using these instruments are that information is collected from a large sample and diverse regions, confidentiality is upheld, saves time, it is cheap and can easily be anonymous. There was no opportunity to ask for further information related to the answers given, no assurance that the questions were understood, suspicious respondents may give wrong answers. The researcher clarified all the areas which were not clear to the respondents and assured them of confidentiality. The questionnaire consisted of demographic section which is very important because it helped in gathering data on gender, background details and the age of the participants. Most of the questions were closed – ended but some were open – ended. The researcher administered structured questionnaire which were issued to sampled employees of Maasai Mara University. The respondents filled in the questionnaires in written form and the researcher collected the completed questionnaires.

3.7.2 Focus Group Discussions

Focus Group Discussions are used to assess needs, develop intervention, test new ideas or programs or improve existing programs. FGDs were composed of 6 individual participants per session. The employees who didn't have a chance to participate in filling the questionnaire were allowed to participate. In the study, the participants who shared similar perspectives towards the topic were selected so as to produce the kind of group composition that generates active exchanges. To achieve this, the participants were divided into two distinct categories, whereby the first group was composed of female employees and the second FGD comprised male employees. The purpose of FGD for these two groups was to explore if male and female employees had different opinions on the effects of drug abuse on employees' performance. FGD guide was developed by the researcher which included open – ended questions because the FGDs relied on discussions, explorations and debate on the issues under investigation. All the proceedings of each session were recorded by note taking during discussion. It was courteous to thank the participants after every session. The researcher used structured version of focus groups whereby the researcher took an active role in controlling the issues to be discussed. The researcher took a more directive approach while moderating the discussions and played a relatively directive role by assuring that the conversation stayed focused on the research topic.

3.7.3 Interview Schedule

These are open ended or semi – structured interview method which relies on opinions of individual subject respondents. There was a set of prepared guiding questions and prompts, the format was open ended and the interviewee was encouraged to elaborate or give further explanations on the issues raised in an exploratory manner. The researcher

identified these key individual informants because they had the required information. Administrative staff and heads of departments/ sections were selected as they had experience in supervision of staff under them some of whom might have been drug abusers.

3.8 Pilot Study

Piloting was done on 20 employees of University of Kabianga before the actual collection of data. The purpose of the study was to enable the researcher discover the weakness of the research instruments which were used during the actual study, check the clarity of the questions or items and also elicit comments that could assist the researcher reconstruct the questionnaire for the purpose of improvement and modifications of the instruments. Immediately after the pilot study the researcher made improvements on areas where there were weaknesses in the research instruments.

3.9 Validity

Validity of an instrument refers to the extent to which an instrument measures what it is supposed to measure (Kerlinger, 2015, Kombo and Tromp, 2006). According to Mugenda and Mugenda (2003) validity is the degree to which results obtained from analysis of data actually represents the phenomenon under study. Validity in research has to do with whether the methods, approaches and techniques actually relate to, or measure the issues the researcher wishes to explore (Daymon and Holloway, 2002). Expert opinions, literature searches and pre-testing of open-ended questions were used to examine content validity and faced validity. To establish validity, the instruments were given to two experts to evaluate the relevance of each item in the instrument. Their views were subsequently incorporated in the questionnaire to improve its validity.

3.9.1 Triangulation

The data was triangulated with the combination of various data generation techniques (in-depth interviews and focus group discussions) and in different groups so as to collect data about the research phenomena from multiple perspectives and in different contexts. Triangulation in this study was achieved at the interpretation stage where the quantitative and qualitative data were brought together in chapter four.

3.10 Reliability

Reliability is the degree of consistency that an instrument or procedure demonstrates. The reliability was tested by piloting the instruments to 20 employees of University of Kabianga who were not included in the actual study and the instruments were modified if necessary to improve their reliability. Reliability co-efficient of 0.5 or above leads to acceptance of questionnaire as reliable while co-efficient below 0.5 leads to disregarding the test items. Questionnaires were administered to the administrative staff and the heads of departments/sections of the selected university and after two weeks, the same questionnaires were administered to the same group. The results were computed and correlated using Cronbach's Alpha Coefficient which gave a reliability coefficient of 0.81. This showed that the instruments were reliable.

3.11 Data Analysis and Presentation

According to Kothari (2003) the term analysis refers to computation of certain measures along with searching for patterns that exist among data groups. Data collected from the field was recorded on a scale of 1 to 5 as strongly disagree = 1, Disagree=2, Neutral = 3, Agree = 4 and strongly agree=5. Data was then transferred to Statistical Package for Social Science (SPSS) version 21. Data was analyzed by the use of descriptive statistics using SPSS to generate percentages, means and standard deviations. Inferential statistics

used multiple linear regression model to estimate the parameters of the variable so as to estimate the significance of the difference. Regression analysis was employed to test the relationships in the study.

The regression equation was given as;

$$y = \alpha + \beta_1 X_1 + \beta_2 X_2 + \beta_3 X_3 + e$$

Where,

y= Dependent variable

α = regression constant,

$\beta_1 - \beta_3$ = Regression coefficients (change in y for every unit change in X)

X_1 = work attendance

X_2 = time management

X_3 = quality of service

e = Error term

The regression coefficient ' α ' is the Y intercept: while β_1 , β_2 , and β_3 are the net change in y for each change of either of the variables (factors), x_1 , x_2 , and x_3 .

3.12 Ethical Consideration

Permission was obtained from the management of the university before questioning and interviewing occurred. Respondents were given an assurance of confidentiality and they were free to participate in the study or withdraw at any time. The respondents were also assured that the information they gave would be treated confidentially and it will be used for academic research only. An authorization letter was obtained from the National Council for Science, Technology and Innovation (NACOSTI) to conduct the research.

CHAPTER FOUR

DATA ANALYSIS, INTERPRETATION AND DISCUSSION

4.1 Overview

This chapter presents the data obtained and analyzed from the study using selected techniques and the recording of findings.

4.2 Demographic Data

This section gives the general information of the respondents in terms of age, gender, level of education and the length of time the respondent has worked in the University.

4.2.1 Gender and Age of the Respondents

The study sought to find out gender and the age of the respondents, the findings are summarized in table 4.1.

Table 4.1 Gender of the Respondents

	Frequency	Percentage
Male	116	53.3
Female	101	46.5
Total	217	100

Source: Survey Data 2019

As shown in 4.1 out of the 217 respondents sampled, 116(53.5%) were males while 101(46.5%) were females which means majority of the total sample population are males. This implies that all age brackets of the working group were represented and both gender were also represented.

Table 4.2 Age of the Respondents

Age (years)	Frequency	Percentage
20-30	75	34.6
30-40	33	15.2
40-50	49	22.6
Above 50	60	27.6
Total	217	100

Source: Survey Data 2019

Table 4.2 shows the age range of the respondents. Majority 75(34.6%) of the respondents sampled belonged to the 20-30 age range. Those who were aged above 50 years came next which comprised 60(27.6%) of the total respondents. The respondents aged 40-50 followed which comprised 49(22.6%). The lowest percentage goes to age bracket between 30-40 years which only comprised 33(15.2%) of the total sampled respondents.

4.2.2 Level of Education

The study sought to find out Level of Education of the respondents, the findings are summarized in table 4.3.

Table 4.3: Level of Education

	Frequency	Percent
Primary	33	15.2
Secondary	72	33.2
University/college	112	51.6
Total	217	100.0

Source: Survey Data 2019

Table 4.3 shows that 112(51.6%) respondents had attained a university or college qualification, 72(33.2%) were form four leavers; while the rest 33(15.2%) were class

eight leavers. These findings show that a majority of the respondents had attained a university/college level and therefore were knowledgeable and gave relevant information concerning drug and substance abuse.

4.2.3 Length of Time Working in the University

It was important that the study investigates the length of time working in the university in order to ascertain the level of accuracy and knowledge on the questions asked. The findings are shown in table 4.4.

Table 4.4 Length of Time Working in the University

	Frequency	Percentage
0-2 years	35	16.13
2-4 years	40	18.43
Above 6 years	142	65.44
Total	217	100.0

Source: Survey Data 2019

Table 4.4 shows the frequency and percentage distribution of the respondents according to their length of service in the university. Out of the 217 total sample target, 35(16.13%) have served for zero to two (0-2) years in the University, 40(18.43%) have served for two to four (2 – 4) years in the university; while 142(65.44%) have served above 6 years. These findings show that most of the respondents have been working for over 6 years and know the activities which have been going on in the university concerning drug abuse and therefore gave relevant information for the study.

4.3 The term Drug Abuse

The study sought to find out if the respondents had ever heard of the term drug abuse, the findings are summarized in table 4.5.

Table 4.5: The Term Drug Abuse

	Frequency	Percent
Yes	189	87.1
No	28	12.9
Total	217	100.0

Source: Survey Data 2019

The findings as shown in table 4.5 show that 189(87.1%) of the respondents said that they were familiar with the term drug abuse while the rest 28(12.9%) said that they were not familiar, a clear indication that most of them were aware of what drug abuse is. This implies that most of the respondents were able to give relevant information for the study.

4.4 Types of Drugs Abused and Reasons for the Abuse

The first objective of the study was to find out the types of drugs abused and the reasons for the abuse. Section 4.4.1 presents the awareness on existence of drug abuse; section 4.4.2 deals with the types of drugs abused and section 4.4.3 presents the reasons for abuse of drugs.

4.4.1 Awareness on existence of drug abuse

The study sought to find out the presence of abused drugs and the findings are summarized in table 4.6.

Table 4.6: Awareness on existence of drug abuse

	Frequency	Percent
Yes	192	88.5
No	25	11.5
Total	217	100.0

Source: Survey Data 2019

The study findings indicate that 192(88.5%) said that there was abuse of drugs in the university while the rest 25(11.5%) said that they were not aware of any abused drugs in the university. This shows that there was abuse of drugs in the university. This therefore implies that the study was able to get relevant information on drug abuse. The study also sought to find out the most abused drug in the university and the findings are summarized in table 4.7.

4.4.2 Types of Drugs Abused

Table 4.7 The Most Abused Drugs

	Frequency	Percent
Alcohol	189	87.1
Tobacco	28	12.9
total	217	100.0

Source: Survey Data 2019

The study findings show that 189(87.1%) of the respondents said that the most abused drug is alcohol; while the rest 28(12.9%) said that it was tobacco/cigarettes. This suggests that the most abused drug in the university is alcohol- mostly spirits and beer.

4.4.3 Reasons for the Abuse of Drugs

The study sought to find out the reasons for the abuse of drugs and the findings are summarized in Table 4.8.

Table 4.8: Reasons for the Abuse

	Frequency	Percent
To have leisure, relax and pass time	55	25.3
To reduce/relieve stress	50	23.0
Peer pressure	48	22.1
Addiction	40	18.5
Others	24	11.1
Total	217	100.0

Source: Survey Data 2019

Majority of the employees (25.3%) used drugs as a means of relaxing so as to pass time during their leisure time after a very busy day or week being on duty. Others 50(23.0%) used drugs to overcome or reduce stress and believed that it was the only way to respond to the heavy demand at the work place. The study findings revealed that 48 (22.1%) of the respondents gave peer pressure as a reason for abuse of drugs; 40 (18.5%) indicated that some employees continued to use drugs because they are addicted to those drugs; while the remaining 24(11.1%) gave various other reasons for drug abuse. It was observed that slightly over forty percent pointed out that they used drugs for relaxation, socialization and to relieve stress. Further discussion with the staff in the department of Human Resource revealed that most of the staff abused alcohol and tobacco because the two drugs were easily accessible and available. According to the Human Resource staff,

most of the employees associated drug abuse with the high poverty levels and lack of adequate and reliable information about the consequences. Contrary to this, whereas some of the employees abused drugs due to inadequate fund, others abused alcohol and other drugs due to the excess money that they have. Others related drug abuse to genetic inheritance.

4.5 Effect of Drug Abuse on the Rate of Employee Absenteeism

The second objective of the study was to establish the effect of drug abuse on employee rate of absenteeism in Maasai Mara University.

4.5.1 Drug Abuse and Employee Rate of Absenteeism

The study sought to find out the effect of drug abuse on the rate of employee absenteeism in the university and the findings are summarized in table 4.9.

Table 4.9 Effect of Drug Abuse on the Rate of Employee Absenteeism

	Frequency	Percent
Strongly agree	191	83.4
Agree	26	16.6
Total	217	100.0

Source: Survey Data 2019

The findings show that when asked to state their rating on whether drug abuse affect the rate of employee absenteeism, 181(83.4%) strongly agreed; while the rest 26(16.6%) agreed. The findings show that the respondents had a strong view on the fact that drug abuse increases the rate of absenteeism by employees in the university.

4.5.2 Disciplinary Action recommended for Absent Employee

The study sought to find out the Disciplinary Action recommended for Absent Employee and the findings are summarized in table 4.10 below.

Table 4.10 Disciplinary Action recommended for Absent Employee

	Frequency	Percent
Dismiss	55	25.3
Warn	50	23.0
Suspend	48	22.1
Demote	40	18.5
Transfer	24	11.1
Total	217	100.0

Source: Survey Data 2019

The findings indicate that (25.3%) of the respondents recommended that an employee who absents himself/herself many times in a month should be dismissed; (23.0%) recommended that the frequently absent employees should be warned. The study findings revealed that 48 (22.1%) of the respondents gave suspension as a disciplinary action for the absent employee; 40 (18.5%) mentioned that an employee who is frequently absent should be demoted; while the remaining 24(11.1%) gave transfer as a disciplinary action for the absent employee.

4.5.3 Employees' High Rates of Absenteeism and their Performance at Work

The study sought to find out the views of the respondents on whether the employees' high rates of absenteeism resulting from drug abuse affect their performance at work and the findings are summarized in table 4.11.

Table 4.11 Employees' High Rates of Absenteeism and their Performance at Work

	Frequency	Percent
Yes	192	88.5
No	25	11.5
Total	217	100.0

Source: Survey Data 2019

The study findings indicate that 192(88.5%) said that the employees' high rates of absenteeism resulting from drug abuse affect their performance at work while the rest 25(11.5%) said that absenteeism does not affect employees' performance at work. This implies that there is likelihood of employees not completing their allocated tasks; not meeting deadlines or hurrying through work thus affecting quality. The study also sought to find out how absenteeism affect employees performance and the findings are summarized in table 4.12.

Table 4.12 Effect of Absenteeism on Employee's Performance

	Frequency	Percent
Not completing allocated task	82	52.23
Not meeting deadlines	40	25.48
Hurrying through work thus affecting quality	35	22.29
Total	157	100.0

Source: Survey Data 2019

Table 4.12 shows that out of the 157 of those who said that employees' high rates of absenteeism resulting from drug abuse affect their performance at work, 82(52.23%) of them said that not completing allocated tasks was a major result of absenteeism;

40(25.48%) said that absent employees do not meet work deadlines while the rest 35(22.29%) said that employees who have been absent may hurry through work thus affecting quality. The finding shows that most of the respondents were of the views that absent employees do not complete allocated tasks. The study also wanted to look into the view that absenteeism of employees due to drug abuse affects the other employees who do not use any drugs. The findings are summarized in table 4.13.

Table 4.13 Increased Rates of Absenteeism and the Other Employees

	Frequency	Percent
Yes	113	52.1
No	104	47.9
Total	217	100.0

Source: Survey Data 2019

Table 4.13 shows that 113(52.1%) respondents said that absenteeism affects the other employees; while 104(47.9%) said that absenteeism does not affect the other employees allocated the same task in a department. The findings show that absenteeism affects the other employees because the work that could have been done by the absent employees would be distributed to those who are present thus making the work of the present employees to be too much.

4.5.4 Hypothesis testing on the Relationship between drug abuse and employee absenteeism

The first hypothesis of this study stated that:

H0₁: There is no statistically significant relationship between drug abuse and employee absenteeism in Maasai Mara University.

This hypothesis was tested by use of Pearson Correlation Analysis. The results were presented in Table 4.14.

Table 4.14: Correlation on drug abuse and employee absenteeism

	Drug abuse
Employees absenteeism	$r = .681$
	$p = .000$
	$n = 217$

Source: Field data, 2019

Table 4.14 shows a significant positive correlation ($r = .681$; $p = .000$) between drug abuse and employee absenteeism in Maasai Mara University. Therefore, the hypothesis that “There is no statistically significant relationship between drug abuse and employee absenteeism” was rejected and the alternative accepted. This therefore shows that there is statistically significant relationship between drug abuse and employee absenteeism. This implied that drug abuse in the university leads to severe employee absenteeism.

This finding concurred with the findings by Bacharach et al., (2010) who asserted that high alcohol consumption levels also relate to increased number of sick days taken by employees. Studies conducted in Sweden and Norway by Nordstrom (2006) and Nordstrom and Moan (2009) revealed that a single liter increase in cumulative consumed

alcohol results to 13% increase in absenteeism from work due to sickness in men but with no statistical significance with women. The organization as a whole feels the whole impact including the employees with increased work load due to absent colleagues as a result of alcoholism (Dale & Livingston, 2010).

During a focus group discussion one of the respondents said;

Because of drug abuse, I made frequent use of unplanned vacation time I was regularly required to give explanations for absenteeism; I left the work area, during working hours, more times than necessary; I had regular unreported absence at work and that they took/sought unnecessary leaves.

From this statement, it implies that drug abuse among the employees of in the university did contribute to the employees' workplace absenteeism behaviors.

Interview with one of the administrators said;

"I can attest that cases of drugs and substance abuse are common among some employees at the university although the statistics have declined over the past years after the introduction of performance contracts."

Further one of the administrators added that;

"Some employees who abuse drugs end up absenting themselves two or three times a week while others usually report to work late because of the influence of alcohol. We've also noted that majority of those who abuse drugs and alcohol tend to perform poorly in their duties as opposed to those who do not abuse them. These affect service delivery standards as students keep complaining of poor services being rendered to them."

This shows that employees who abuse drugs are unable to report to their workstations and thereby fail to turn up for work which not only affects their individual performance but also the achievement of organizational targets

4.6 Effect of Drug abuse on Time Management

The third objective of the study was to investigate the effect of drug abuse on employee time management in Maasai Mara University. The study sought to find out if drug abuse has any effect on time management by employees who are abusers. The findings are shown in table 4.15.

Table 4.15 Effect of Drug Abuse on Time Management

	Frequency	Percent
Yes	189	87.1
No	28	12.9
Total	217	100.0

Source: Survey Data 2019

The findings show that 189(87.1%) respondents agreed that drug abuse affects time management by employees who are abusers; while the rest 28(12.9%) said it does not affect time management. The findings show that drug abuse affects time management especially to those who are addicts because they spend most of their time drinking. The study further sought to find out Ways in which Employee's Time Management is affected by Drug Abuse. The findings are shown in table 4.16.

Table 4.16 Ways in which Employee's Time Management is affected by Drug Abuse

	Frequency	Percent
Lateness in reporting to work	76	35.0
Absenteeism	117	53.9
Little concentration in work	22	10.1
Frequent breaks	2	0.9
Total	217	100.0

Source: Survey Data 2019

The findings in table 4.16 show that 76(35%) of the respondents indicated that lateness in reporting to work was due to drug abuse, 117(53.9%) said that drug abuse causes absenteeism, 22(10.1%) said that drug abuse causes little concentration in work while the rest 2(0.9%) said that drug abuse causes frequent breaks. This implies that drug abuse affects employee's time management.

4.6.1 Ways of Helping an Employee who is a Victim of Poor Time Management due to Drug Abuse

The study sought to find out ways of helping an employee who is a victim of poor time management due to drug abuse. The findings are shown in table 4.17.

Table 4.17 Ways of Helping an Employee who is a victim of Poor Time Management due to Drug Abuse

	Frequency	Percent
Educate on dangers of drugs	117	53.9
Cover for him his work	76	35.0
Report him to the head of department	22	10.1
Leave his work undone so that it is known	2	0.9
Total	217	100.0

Source: Survey Data 2019

The findings in table 4.17 show that 117(53.9%) of the respondents indicated that an employee who falls victim of poor time management due to drug abuse should be educated on dangers of drugs; 76(35%) said that they would cover the work an employee who falls victim of poor time management due to drug abuse; 22(10.1%) said that an employee who falls victim of poor time management due to drug abuse should be reported to the head of department; and 2(0.9%) said that the work of an employee who falls victim of poor time management due to drug abuse should be left undone so that it is known. This implies that education on dangers of drugs is very necessary for improvement of employee time management.

4.6.2 Training on Time Management is Essential for All Employees

The study sought to find out if training on time management was essential for all employees and the findings are shown in table 4.18.

Table 4.18 Training on Time Management is Essential for all employees

	Frequency	Percent
Strongly agree	181	83.4
Agree	26	16.6
Total	217	100.0

Source: Survey Data 2019

The findings show that when asked to state their rating on whether training on time management was essential for all employees, 181(83.4%) strongly agreed; while the rest 26(16.6%) agreed. The findings show that the respondents had a strong view on the fact that training on time management is essential for all employees. This implies that time management is essential for all employees.

4.6.3 Poor Time Management due to Drug Abuse and Employees' Performance at Work

The study sought to find out if poor time management due to drug abuse by employees affects their performance at work and the findings are shown in table 4.19.

Table 4.19 Poor Time Management due to Drug Abuse by Employees affects their Performance at Work

	Frequency	Percent
Strongly agree	181	83.4
Agree	26	16.6
Total	217	100.0

Source: Survey Data 2019

The findings show that when asked to state their rating on whether poor time management due to drug abuse by employees affects their performance at work, 181(83.4%) strongly agreed; while the rest 26(16.6%) agreed. The findings show that the respondents had a strong view on the fact that poor time management due to drug abuse by employees affects their performance at work. This implies that poor time management due to drug abuse by employees affects their performance at work.

4.6.4 Correlation Coefficient Between drug abuse and employee time management

The second hypothesis of this study stated that:

H0₂: There is no statistically significant relationship between drug abuse and employee time management in Maasai Mara University.

This hypothesis was tested by use of Pearson Correlation coefficient. The results were presented in Table 4.20.

Table 4.20: Correlation Coefficient Between drug abuse and employee time management

	Drug abuse
Time management	$r = .864^{**}$
	$p = .000$
	$n = 217$

$p \leq 0.01$

Source: Field data, 2019

Table 4.20 shows a significant strong positive correlation ($r = .864$; $p = .000$) between drug abuse and employee time management in Maasai Mara University. Comparing this value (.000) with alpha, in this case .01; since the "sig." level is less than alpha, the results were significant. Therefore, the hypothesis that “There is no statistically significant relationship between drug abuse and employee time management in Maasai Mara University” was rejected and the alternate accepted. For this reason, there exist a statistically significant relationship between drug abuse and employee time management.

This finding agrees with the finding by Belhassen and Shani (2012), who pointed out that workers that use alcohol and other drugs are likely to report late to their workplaces and therefore waste valuable time. Further, they noted that drug abusers leave earlier than stipulated time from their workplaces. A well-known fact is that alcohol and drug abuse increases the rate of workers’ lateness and employee’s turnover rates especially in the higher learning institution (Bacharach, Biron; Bamberger, 2010).

This was also confirmed by the focus group discussion where one of the participant said that;

“Majority of employees who abuse drugs and other substances come to job late and leave the institution early and therefore time left for serious engagement with duties is very limited and therefore resulting to poor work performance”.

4.7.1 Effect of Drug Abuse on the Quality of Services offered by the Employees

The study sought to find out if drug abuse has any effect on the quality of services offered by employees who are abusers. The findings are shown in table 4.21.

Table 4.21 Effects of Drug Abuse on the Quality of Services offered by the Employees

	Frequency	Percent
Yes	187	86.2
No	30	13.8
Total	217	100.0

Source: Survey Data 2019

The findings show that 187(86.2%) of the respondents agreed that drug abuse affects the quality of services offered by employees who are abusers; while the rest 30(13.8%) said it does not affect the quality of services offered by the employees. This implies that drug abuse affects the quality of services offered by employees who abuse drugs.

4.7.2 Where to find Information about Drug Abuse

The study sought to find out where one can find information about drug abuse and the findings are shown in table 4.22.

Table 4.22 Where to find Information about Drug Abuse

	Frequency	Percent
NACADA	55	25.3
NGOs	25	11.5
CBOs	48	22.1
Hospitals	40	18.5
Media	24	11.1
Churches	25	11.5
Total	217	100.0

Source: Survey Data 2019

The study findings revealed that majority of the respondents 55(25.3%) were of the view that information about drug abuse can be obtained from NGOs; 48(22.1%) of the

respondents gave CBOs as the source of information about drug abuse; 40(18.5%) mentioned that information about drug abuse can be obtained from hospitals; 24(11.1%) said that information about drug abuse can be obtained from the media while the remaining 25(11.5%) gave churches as the source of information about drug abuse. This implies that most of the employees have some information about drug abuse.

4.7.3 Drug Abuse as a Threat to the Performance of the University

The study sought to find out the views of the respondents on whether drug abuse was a threat to the Performance of the University and the findings are as shown in table 4.23.

Table 4.23 Drug Abuse as a Threat to the Performance of the University

	Frequency	Percent
Yes	189	87.1
No	28	12.9
Total	217	100.0

Source: Survey Data 2019

The findings show that 189(87.1%) of the respondents agreed that drug abuse was a threat to the performance of the University; while the rest 28(12.9%) said that drug abuse was not a threat to the performance of the University. This indicates that the highest number of the respondents agreed that drug abuse was a threat to the performance of the University. This therefore implies that drug abuse affects the overall performance of the University.

4.7.4 Problems faced by Drug Addicted Employees while carrying out their duties

The study further sought to examine problems faced by drug addicted employees while carrying out their duties and the findings are as summarized in table 4.24.

Table 4.24 Problems faced by Drug Addicted Employees while carrying out their duties

	Frequency	Percent
Lack of concentration	160	73.7
Hangovers	23	10.6
Poor sight	2	0.9
Frequent conflict with colleagues	32	14.7
Total	217	100.0

Source: Survey Data 2019

The findings show that 160(73.7%) of the respondents indicated that lack of concentration was among the major problems caused by the drug abuse, 23(10.6%) said that drug addicted employees experience hangover after drinking a lot, 2(0.9%) said that drug addicted employees experience poor eyesight while the rest 32(14.7%) said that drug addicted employees do frequently have conflict with colleagues. This implies that the performance of drug addicted employees may be affected by their lack of concentration at work, hangovers, poor sight and frequent conflict with colleagues for some. The study further sought to find out if the problems faced by drug addicted employees while carrying out their duties given above affect the performance of the employees and the findings are as indicated in table 4.25.

Table 4.25 Problems faced by Drug Addicted Employees affect their Performance

	Frequency	Percent
Yes	192	88.5
No	25	11.5
Total	217	100.0

Source: Survey Data 2019

The study findings indicate that 192(88.5%) said that the problems faced by drug addicted employees while carrying out their duties affect the performance of the employee while the rest 25(11.5%) said that those problems may not necessarily affect their performance. This shows that the highest number of the respondents actually indicated that the performance of the employees may be affected by the problems arising as a result of drug abuse. This therefore implies that the problems faced by drug addicted employees while carrying out their duties affect their performance at work.

4.7.5 How Drug Abuse affect the Quality of Services Offered by the Employees

The study sought to find out how drug abuse affect the quality of services offered by the employees and the findings are summarized in table 4.26.

Table 4.26 How drug abuse affects the quality of services offered by the employees

	Frequency	Percent
Employees while drunk may abuse customers	55	25.3
Employees who abuse drugs may not serve customers at the right time	50	23.0
Employees may disappear from work to look for drugs	48	22.1
Employees while drunk may not provide all the information required by their customers	40	18.5
All of the above	24	11.1
Total	217	100.0

Source: Survey Data 2019

The findings indicate that 55 (25.3%) of the respondents mentioned that employees while drunk may abuse customers; 50(23.0%) said that employees who abuse drugs may not serve customers at the right time. The study findings revealed that 48(22.1%) of the respondents were of the view that employees may disappear from work to look for drugs; 40(18.5%) said that employees while drunk may not provide all the information required by their customers; while the remaining 24(11.1%) mentioned all the above as ways in which drug abuse can affect the quality of services offered by the employees. This implies that drug abuse can affect the quality of services offered by the employees through various ways.

4.7.6 Relationship Between drug abuse and the quality of services

The third hypothesis of this study stated that:

H0₃: There is no statistically significant relationship between drug abuse and quality of services offered by employees of Maasai Mara University.

Pearson Correlation Coefficient (simply r) was used to establish the potential relationship between drug abuse and quality of services provided by employees. Where when $r = (+) 1$, it indicated perfect positive correlation and when it is $(-) 1$, it indicated perfect negative correlation, meaning thereby that variations in independent variable (x) explain 100% of the variations in the dependent variable (y). This implied that for a unit change in independent variable (drug abuse) and there happens to be a constant change in the dependent variables (quality of service) in the same direction, then correlation is termed as perfect positive. But if such change occurs in opposite direction, the correlation is termed as perfect negative. The value of ' r ' nearer +1 or -1 indicates high degree of correlation between the two variables. The results of the analyzed information are presented in Table 4.27.

Table 4.27: The Correlation Coefficient Between drug abuse and quality of services

Variables	Pearson Correlation Coefficient
Drug abuse	$r = 0.759^{**}$
Quality of services	

$P \leq 0.01$; N=217

Source: Field data, 2019

The results of Pearson Correlation Coefficient used for data analysis as shown in Table 4.26 suggested that there is a significant positive relationship between drug abuse and quality of services offered at the university at $p \leq 0.01$ significance level ($r = 0.759$). This finding agrees with results of the study by Zhu, Tews, Stafford; George, 2010, Frone, 2013; SAMHSA, 2015 which showed that illicit drug abuse negatively influences the quality of services provided by the employees. A similar study by also found out

One interviewing the administrators, one of the participant said;

“We handled several cases whereby fighting has occurred between employees after disagreeing on petty issues. This has forced us to foot medical costs for both the employees and the clients injured. Other scenarios occur whereby an employee makes a poor judgment decision.”

The comments made by the key informants suggest that alcohol and drugs abuse has negative effect on employee quality of services at the university. The result is consistent with Frone (2013) survey in United States of America that showed that drug abuse in the workplace costs American businesses nearly \$100 billion a year in lost productivity, high absenteeism and turnover rates, on and off-the job accidents, excessive use of medical benefits, theft and property damage.

4.7.6 Some of the Ways the University can adopt in order to Improve the Quality of Services Offered by Employees who Abuse Drugs

The study sought to find out some of the ways the University can adopt in order to improve the quality of services offered by employees who abuse drugs and the findings are summarized in table 4.28.

Table 4.28 Some of the Ways the University can adopt in order to improve the quality of services offered by employees who abuse drugs

	Frequency	Percent
Rehabilitate the drug addicted employees	55	25.3
Counsel the drug addicted employees	50	23.0
Warn the drug addicted employees	48	22.1
Dismiss the drug addicted employees	40	18.5
Let other employees do the work of the drug addicted employees	24	11.1
Total	217	100.0

Source: Survey Data 2019

The findings indicate that 55 (25.3%) of the respondents mentioned that the University can rehabilitate the drug addicted employees; 50 (23.0%) said that the University can counsel the drug addicted employees; 48 (22.1%) were of the view that the University can warn the drug addicted employees; 40 (18.5%) said that the University can dismiss the drug addicted employees; while the remaining 24 (11.1%) mentioned that the University can let the other employees do the work of the drug addicted employees. This implies that the University has to incur some cost when trying to improve the quality of services offered by employees who abuse drugs. This cost may be in terms of man power who instead of concentrating in their work are called to do the work of the drug addicted employees or the cost incurred in rehabilitating the drug addicted employees.

4.7.7 Some of the Possible Challenges faced by Public Universities as a result of Low Quality of services offered by employees who abuse drugs

The study sought to find out some of the possible challenges faced by Public Universities as a result of low quality of services offered by employees who abuse drugs and the findings are summarized in table 4.29.

Table 4.29 Some of the Possible Challenges faced by Public Universities as a result of Low Quality of services offered by employees who abuse drugs

	Frequency	Percent
Reduced customers	55	25.3
Too many complaints from the customers	50	23.0
Demotivation of employees who work with the drug addicts	48	22.1
Students of the affected public universities may end up rioting	40	18.5
All of the above	24	11.1
Total	217	100.0

Source: Survey Data 2019

The findings indicate that 55(25.3%) of the respondents mentioned that Public Universities would have reduced customers as a result of low quality of services offered by employees who abuse drugs; 50(23.0%) said that Public Universities may experience a situation whereby there are too many complaints from the customers. The study findings revealed that 48(22.1%) of the respondents were of the view that low quality of services offered by employees who abuse drugs may result in demotivation of employees who work with the drug addicts; 40(18.5%) said that students of the affected public universities may end up rioting; while the remaining 24(11.1%) mentioned all the above as resulting from low quality of services offered by employees who abuse drugs. This implies that Public Universities do experience various challenges as a result of low quality of services offered by employees who abuse drugs.

During a focus group discussion, one of the participants said;

“The impact that alcohol abusing employees cause at the university is not only socially limited but also financially impacts the institution as it results to additional expenses including frequent drug abuse wellness programmes.”

This information suggests that alcoholism is a great challenge at the university that requires interventions where some of the intervention measures require huge finances which is an additional cost to the university.

4.8 Effective Ways of Managing Drug Abuse in the University

The fifth objective of the study was to examine the effective ways of managing drug abuse in the university. This section gives the effective ways of managing drug abuse in the University which include the following: Disciplining the affected employees; Counseling the affected employees and training employees on time management.

4.8.1 Some of the Contributing Factors to Drug Abuse

The study sought to find out some of the contributing factors to drug abuse. The following are some of the factors given by the administrators in a focus group discussion: Peer influence, stress, desire to fit in, Parental influence and availability of drugs. The findings indicated that out of the 120 respondents, 119 (12.9%) indicated alcohol as the most abused drug in the area; followed by Miraa (Khat) 118 (12.8%); Bhang and cigarette 116 (12.5%); tobacco 100 (10.2%); Heroin 83 (9.0%); cocaine 82 (8.9%); depressants 69 (7.5%); brown sugar 64 (6.9%); and inhalants 58 (6.3%). Apart from the drugs indicated in the questionnaire for selection there were no other types of drugs mentioned to be abused in the area. Alcohol, miraa, bhang and cigarette are the most abused drugs in the area.

4.8.2 Types of Drugs Known to the Administrators

The study sought to find out the types of drugs known to the administrators and the following were given by all the administrators: Alcohol, Tobacco/Cigarette, Khat/Miraa, Bhang/Marijuana, Heroin, Cocaine and Prescription drugs.

4.8.3 How Drug Abuse affect the Performance of Employees in Maasai Mara University

The study sought to find out how drug abuse affects the performance of employees in Maasai Mara University and the following were given: Absenteeism and loss of production, Hangover or withdrawal affecting job performance, drug - related illnesses and injuries, increased health care expenses, low employee morale, theft , premature deaths, substance abuse impairs the brain's proper functioning. it reduces the ability to make sound judgments and increases the likelihood of mistakes, loss of efficiency and poor decision making

4.8.4 How Drug Abusers are Recognized

Drug abusers are recognized through the following signs; problems at work like frequently missing work, a sudden disinterest in work, or a drop in work performance, physical health issues for instance lack of energy and motivation, weight loss or gain, or red eyes, neglected appearance which may be seen in lack of interest in clothing, grooming or looks, changes in behavior for example being secretive about where one goes with friends; or drastic changes in behavior and in relationships with family and friends, money issues like sudden requests for money without a reasonable explanation; or discovery that money is missing or has been stolen or that items have disappeared from offices, indicating maybe they're being sold to support drug use, other ways of recognizing drug abusers which vary from one drug to another were said to include the

following: Dry mouth, Decreased coordination, Difficulty concentrating or remembering, Slowed reaction time, Decreased mental sharpness, Poor performance at work,, Reduced number of friends and interests, Extreme anxiety or agitation, Hallucinations, Vomiting, Confusion, Drowsiness, Slurred speech, Irritability or changes in mood, Problems concentrating or thinking clearly, Memory problems, Falls or accidents, Dizziness, and Involuntary eye movements

4.8.5 Remedial measures that can be taken to eradicate the problems of drug abuse in Kenyan Public Universities

The study sought to find out the remedial measures that can be taken to eradicate the problems of drug abuse in Kenyan Public Universities and the responses were as follows: Social support to the drug users which consists of good relationship with colleagues, there should be law enforcements especially by the anti-narcotic unit to curb drug trafficking, advertisements on alcohol and cigarettes on the media should be banned and those found advertising against the law should be dealt with accordingly for instance through revoking their license and employees should be sensitized on the harmful effects of abusing drugs

4.9 Factors that can contribute to Poor Work Performance

The study sought to find out the factors that contribute to poor work performance and the findings were as indicated below:

4.9.1 Workplace stress

The findings indicated that workplace stress is a performance killer. According to the respondents, workplace stress can be caused by lack of job security, conflicting work roles and heavy workload. The respondents argued that an aggressive environment where the stress levels are high will be detrimental to employee performance.

4.9.2 Inadequate resources

According to the respondents, inadequate time and material resources may affect the performance of employees.

4.9.3 Poor leadership

The findings indicated that if a supervisor harasses his subordinates, it results in poor work performance.

4.9.4 Poor health

According to the respondents, poor health of an employee would greatly hamper the employee's ability to be productive. The respondents argued that poor health can be as result of drug abuse and may lead to absenteeism and low morale.

4.9.5 Lack of skills for an assigned job

The findings indicated that when an employee is allocated a new set of job duties without extra training or mentoring, employee performance may be affected.

4.10 Drug Abuse and Poor Work Performance

The study sought to find out if drug abuse contributes to poor work performance and majority of the respondents mentioned that drug abuse contributes to poor work performance. The following were given as ways in which drug abuse affects work performance: Absenteeism and loss of production, hangover or withdrawal affecting job performance, drug-related illnesses and injuries, theft, premature deaths, substance abuse affects the brain thus reducing the ability to make sound judgments and the abuser may quite often make mistakes, loss of efficiency and poor decision making

4.11 Reported Cases of Drug Abuse in Maasai Mara University

The study sought to find out if there had been reported cases of drug abuse in the University and the findings indicated that some cases of drug abuse had been reported in the University.

4.12 Avenues of Drug Abuse

The study further sought to find out the avenues of drug abuse and the following were given: counseling, referral to support groups, mentoring and coaching the affected on life skills, rehabilitation, medically supervised detoxification and referrals for specialty treatment where the affected are treated and offered ongoing post-treatment care.

4.13 Disciplinary Action taken Against the Victim(s)

The study sought to find out the disciplinary action taken against the victim(s) and the finding was that disciplinary actions varied from one case to another and included the following: Warning the victim, reporting the individual to the head of department and suspension.

4.14 Professional Counseling Offered

The study sought to find out if there was any professional counseling offered to the victim(s) of drug abuse and the finding was that the victims were referred for professional counseling.

4.15 Rehabilitation of the Victim(s)

The study sought to find out if the victims were rehabilitated and the finding was that the victims had not been rehabilitated.

4.16 Measures to Curb or Address Drug Abuse in an Institution

The study sought to find out the measures to curb or address drug abuse in an institution and the responses included the following: sensitization of staff on alcohol and drug abuse, Law and rule enforcement and restrictions on bars.

During an interview with the administrators, one of the participant said;

“Majority of employees who abuse drugs and other substances do so because of marital problems being experienced by them. Some have even threatened to commit suicide due to pressure from their families while others are usually

dissatisfied with the amount of salaries and wages they receive from the council.

This makes them to indulge in alcohol and other substances.”

This statement suggest that drug abuse is a problem that needs further investigation on the conditions under which one is involved before making and judgement and therefore one of the measures is to determine the course of the problem and this will allow for appropriate intervention strategy.

4.17 Regression Analysis

Regression analysis was employed to test the relationships in the study. The regression method was used to test the relationship between drug abuse and employee performance in Maasai Mara University. The term "independent" variables and "dependent" variables are derived from the mathematical expression;

$$y = \alpha + \beta_1 X_1 + \beta_2 X_2 + \beta_3 X_3 + \epsilon$$

Where,

y= Dependent variable

α = regression constant,

$\beta_1 - \beta_3$ = Regression coefficients (change in y for every unit change in X)

X_1 = attendance to work

X_2 = time management

X_3 = quality of services

ϵ = Error term

The regression coefficient ' α ' is the Y intercept: while β_1 , β_2 , and β_3 are the net change in y for each change of either of the variables (factors), x_1 , x_2 , and x_3 .

The main aim of this research was to determine the relationship between drug abuse and employee performance in Maasai Mara University. Regression analysis combined selected dependent variables (attendance to work, time management and quality of services) with work performance being the dependent variable. This was to determine any significance for the assumed relationships based on the magnitude and direction of the relationship. The R^2 characterized the degree of inconsistencies in employee performance that is accounted for by the predictors (independent variables).

From the model, ($R^2 = .847$) shows that all the predictors account for 84.7% variation in the relationship between drug abuse and employee performance in Maasai Mara University. Therefore, the predictors used in the model have captured the variation of drug abuse.

The adjusted R^2 gave the idea of how well the model simplifies and ideally, its value would be the same or very close to R^2 . In our case the value of adjusted R^2 is .845, showing that if the data was derived from the population rather than the sample it accounts for approximately 84.5% variance in employee performance. The change statistics were used to test whether the change in R^2 is significant using the F ratio as indicated in Table 4.30.

Table 4.30: Regression Model Summary

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate	R Change	F Change	df1	df2	Sig. F Change
	1	.920 ^a	.847	.845	.31358	.847	429.005	3	233

a. Predictors: (Constant), attendance to work, time management and quality of services

b. Dependent Variable: Work performance

Source: Field data, 2019

Table 4.31 shows the ANOVA results for the computed determinants of employee performance, and the table shows that independent variables (attendance to work, time management and quality of services) significantly predict the dependent variable (work performance) since the p value was <0.05.

Table 4.31: ANOVA for employee Performance

Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	126.557	3	42.186	429.005	.000 ^b
	Residual	22.912	233	.098		
	Total	149.469	236			

a. Dependent Variable: work performance

b. Predictors: (Constant), attendance to work, time management and quality of services

Source: Field data, 2019

The regression coefficients for the model in Table 4.30 predicts the relationship between the variables (attendance to work, time management and quality of services) and employee performance and it indicates that these variables had positive significant influence on employee performance. This is due to the fact that the precision level was

less than the threshold of $p < 0.05$. This concludes that all the variables had a positive influence on employee performance and they were significant.

This suggests that the higher the level of drug abuse, the lower was their level of performance, and vice versa.

4.18. Coefficients of Counseling Services and Academic Performance

Table 4.32 shows the estimates of β values and gives an individual contribution of each predictor to the regression model. The β value tells us about the relationship between employee performance with each predictor. Positive β values indicate a positive relationship between the predictors and the outcome whereas a negative coefficient represents a negative relationship. The β values for all the three components (attendance to work, time management and quality of services) were all positive indicating a positive relationship.

Table 4.32: Coefficients of drug abuse and work Performance

Model	Unstandardized Coefficients		Standardized Coefficients β	t	Sig.
	β	Std. Error			
(Constant)	.059	.143		.414	.680
Attendance to work	.234	.044	.163	5.337	.000
Time management	.654	.028	.741	23.241	.000
Quality of services	.149	.035	.143	4.274	.000

a. Dependent Variable: employee performance

Source: Field data, 2019

The coefficients for each of the variables indicates the amount of change one could expect in employee performance in university given a one-unit change in the value of that variable, given that all other variables in the regression model are held constant. The constant is .059, and this is the predicted value when all the independent variables equals zero. The standardized regression coefficients for the three variables are all positive indicating a positive relationship. The beta coefficients are the coefficients that would be found if the results and predictor variables were all transformed to standard scores, also called z-scores, before running the regression.

From the results in Table 4.32, this study model can then be specified as: -

$$\text{Employee work performance} = .059 + .234\text{-time management} + \text{attendance to work } .654 + .149 \text{ quality of services} + e$$

This equation shows that if all factors were held constant, then for every increase in time management there would be an increase of 23.4% in work performance, for every increase in work attendance there would be an increase of 65.4% in work performance and for every increase in quality of service there would be an increase of 14.9% in work performance. This implies that frequent reduction in drug abuse leads to improved work performance and vice versa.

CHAPTER FIVE

SUMMARY OF FINDINGS, CONCLUSIONS AND RECOMMENDATIONS

5.1 Overview

The main objective of this study was to investigate the effect of drug abuse on the performance of employees in Kenyan Public Universities: A case of Maasai Mara University. The specific objectives of the study were to: find out the types of drugs abused by employees and the reasons for the abuse; establish the effect of drug abuse on employee rate of absenteeism in Maasai Mara University; investigate the effect of drug abuse on employee time management in Maasai Mara University; determine the effect of drug abuse on the quality of services offered by employees of Maasai Mara University and examine the effective ways of managing drug abuse in the university. This chapter therefore presents a summary and discussion of the findings according to objectives, conclusions and recommendations as well as providing areas for further study.

5.2 Summary of the Findings

5.2.1 Demographic Information

The findings indicate that majority of the respondents (the university employees who were sampled) belong to the 20-30 age range and most of them were males. The findings also showed that majority of the respondents had attained a university/college level of education and therefore were knowledgeable and provided relevant information concerning drug and substance abuse. The findings further showed that most of the respondents had been working for over 6 years and knew the activities that had been going on in the university concerning drug abuse therefore provided relevant information for the study. Most of these respondents were aware of what drug abuse means and that

there were drugs of abuse in the university and therefore the study was able to get relevant information.

5.2.2 Types of Drugs Abused by Employees and the Reasons for the Abuse

The first objective of the study was to find out the types of drugs abused by employees and the reasons for the abuse. The study findings indicate that the most abused drug was alcohol and tobacco which included 'kuber' and cigarettes. The findings replicated those by Arthur (2009). Further discussion with the staff in the department of Human Resource revealed that most of the staff abused alcohol and tobacco because the two drugs were easily accessible and available. The findings as illustrated in chapter four shows that the employees abused drugs for the following reasons: To have leisure, relax and pass time; to reduce/relieve stress; peer pressure and addiction. These findings agree with Arthur (2009) as well as Jarvis (2004) who in separate studies extensively explored the types of drugs abused and reasons for the abuse. The results also conquer with NACADA (2009) who identified the various drugs abused in Kenya and the reasons thereof.

5.2.3 Effects of Drug Abuse on the Rate of Employee Absenteeism

The second objective of the study was to establish the effect of drug abuse on employee rate of absenteeism in Maasai Mara University. The findings as illustrated in chapter four shows that the respondents had a strong view on the fact that drug abuse increases the rate of absenteeism by employees in the university. Majority of them indicated that absent employees should be suspended from duty for a period of time during which they will not be paid, that drug abuse affects performance of employees. Furthermore most of the respondents were of the view that absent employees do not complete allocated tasks

although it was noted that most of the respondents did not believe that absenteeism affects other employees in the department. The findings from the hypothesis suggested that there was a significant positive correlation ($r = .681$; $p = .000$) between drug abuse and employee absenteeism in Maasai Mara University

The findings concur with the results of a study by Mcfarlin and Fals-Stewart, (2002) who found that employee absenteeism increases the day after alcohol consumption. The results are further supported by Ames, Grube and Moore (2007) who found out that upto 30% of workplace accidents and absenteeism were caused by alcohol dependency in Costa Rica.

5.2.4 Effects of Drug Abuse on Employee Time Management

The third objective of the study was to investigate the effect of drug abuse on employee time management in Maasai Mara University. The findings indicate that drug abuse affects time management especially on those who were addicts because they spend most of their time drinking and that due to drug abuse cases most of these employees are always absent. The respondents suggested that employees who were victims of time management due to drug abuse should be educated on the dangers of drug abuse and that most of the respondents strongly agreed on the view that training on time management is essential and in the long run these causes poor time management. The findings from the hypothesis indicated that there was a significant strong positive correlation ($r = .864$; $p = .000$) between drug abuse and employee time management in Maasai Mara University.

These findings are supported by Willcox (2004) whose study revealed that employees who abuse drugs end up wasting too much time that could be utilized in more productive

work. This time wastage occurs in form of tardiness, conflicts, arguments, late reporting among others.

5.2.5 Effects of Drug Abuse on the Quality of Services offered by the Employees

The fourth objective of the study was to determine the effect of drug abuse on the quality of services offered by employees of Maasai Mara University. The findings show that majority of the respondents said that drug abuse affects the quality of services and that they obtained most of the information on drug abuse from NACADA and from churches. The findings further shows that drug abuse in the long run has an effect on the performance of employees at the university a clear indication that drug abuse affects the university performance and that drug addicted employees lack concentration and do frequently have conflicts with colleagues and that these problems encountered by drug abusers in the university affects performance of the other employees. The findings from the hypothesis suggested that there is a significant positive relationship between drug abuse and quality of services offered at the university at $p \leq 0.01$ significance level ($r = 0.759$). The result concurs with Willcox (2004) who argues that employees who abuse drugs end up delivering poor service due to poor customer service or low quality of products.

5.2.6 Effective Ways of Managing Drugs in the University

The fifth objective of the study was to examine the effective ways of managing drug abuse in the university. The research findings reveal that effective ways of managing drugs in the University include the following: Disciplining the affected employees; Counseling the affected employees and training employees on time management. The

findings are supported by National Agency for the Campaign against Drug Abuse Authority (NACADAA) recommendations (2007) which mentions counseling and training as some of the ways of dealing with drug abuse.

5.2.7 Theoretical Contribution

The findings from this study supports addictive experiences theory which postulates that a person can begin to use or try a drug for any of the whole range of human motivations; indeed, the desire to alter consciousness through drug use seems to be nearly universal. The reasons for initial use can determine whether or not the user will ultimately become addicted. This was evident in this study that if a drug is used in order to eradicate consciousness of pain, problems, and anxieties, then its use will tend to be addictive and that the ability of users to derive pleasure from drug use is inevitable since they are relying on the drug primarily to avoid unpleasantness rather than for any positive effect. This study therefore concurs with the addictive experiences theory and affirms implications on the future studies.

5.2.8 Managerial Implication

Drug and substance has been a big challenge in our society for a very long period of time and it is something that will never be end in the near future. This study will have several implications for managers. The managers of the universities in Kenya may use the findings from this study to develop an organizational policy on substance abuse and this policy may contain clear provisions on what drug abuse is, disciplinary action for engagement in drug abuse, mechanisms for assisting affected staff, employee's rights to confidentiality on the subject and everything in between. The universities and other

institutions in Kenya may regularly organize for awareness programs and training workshops on the dangers of drug abuse that may also be integrated with staff-health counseling to promote wholesome health awareness among individual employees.

5.3 Conclusions

In conclusion, the study findings indicate that the most abused drugs are alcohol and tobacco. The study findings also concluded that the employees abuse drugs for the following reasons: To have leisure, relax and pass time; to reduce/relieve stress; peer pressure and addiction. The study findings concluded that drug abuse in the university is a notable problem that needs to be addressed because it is the major cause of absenteeism among the employees in the university and most of them do not complete their allocated tasks. The study also concluded that drug abuse affects employees' time management at work because most of them are absent during working days and that the university should educate their employees on drug abuse and its dangers on their body especially their mental health. The study also concluded that drug abuse affects the quality of services offered in the university and that it can cause conflicts between those who abuse these drugs and their fellow colleagues. The study also concluded that suspension was the major penalty for absenteeism in the university.

5.4 Recommendations

Based on the literature review and the above conclusions, this study makes the following recommendations about drug abuse at the workplace in Maasai Mara University and generally all the Kenyan Public Universities: Firstly, there is need for Public Universities to put in place stringent policy mechanisms to curb drug abuse among their employees.

That the policy will guide future decisions in dealing with drug abuse among employees at the university in order to make the university a drug free zone. Secondly, there is need for Public Universities to have capacity development programmes to sensitize their employees and increase their awareness of the adverse effects of drug abuse. This will go a long way in improving the health of the workers in order to make them more productive.

Thirdly, there is need for the government and the society at large to control the availability and accessibility of drugs. The sensitization process will enable the workers to realize the adverse effects of drugs and hence avoid them. Fourthly, the government also needs to consider establishing more preventive, treatment and rehabilitation centres. Preventative measures will ensure that employees do not easily access drugs. However, where employees somehow find themselves on drugs treatment and rehabilitation strategies will help in dealing with the situation. Lastly, there is need for Public Universities to provide counseling services to those employees who abuse drugs. Counselling services especially where they are provided by professional counsellors can help turn employees away from drugs. This has the potential to improve performance.

5.5 Suggestions for Further Research

The research did not cover the effect of drug abuse on employee interrelationship and the role of NACADA in providing information about drug and substance abuse. The study therefore suggests that further studies be done on the effect of drug abuse on employee inter-relationship and the role of NACADA in providing information about drug and substance abuse.

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APPENDICES

APPENDIX I: LETTER OF INTRODUCTION

Dear Respondent,

I am a student at Moi University pursuing a Master of Science Degree in Human Resource Development. I kindly request for your assistance by filling this questionnaire/Interview Schedule/Focus Group Discussion for my Research Thesis on the topic: Effects of Drug Abuse on the Performance of Employees in Kenyan Public Universities: A Case of Maasai Mara University. I hope that this will contribute in understanding and solving the problems of drug abuse in your institution. Be assured of confidentiality.

APPENDIX II: QUESTIONNAIRE FOR EMPLOYEES

Section A: General Information

1. Identify your gender.
 - Male
 - Female
2. Which age bracket do you fall in?
 - 20-30 years
 - 30-40 years
 - 40-50 years
 - Above 50 years
3. What is your level of education?
 - Primary
 - Secondary
 - University/college
4. For how long have you been working with Maasai Mara University?
 - 0-2 years
 - 2-4 years
 - 4-6 years
 - Above 6 years

Section B: Knowledge about Drugs

5. Are you familiar with the term drug abuse?
 - Yes
 - No
6. Are you aware of any abused drugs in Narok County?
 - Yes
 - No
7. Which are the most abused drugs by employees of Maasai Mara University?
 - Alcohol
 - Tobacco
 - Miraa
 - Inhalants
 - Prescription medicine
8. Which are some of the reasons for abuse of the drugs?
 - To have leisure, relax and pass time
 - To reduce/relieve stress
 - Peer pressure
 - Addiction
 - Others

Section C: Effects of Drug Abuse on the Rate of Employee Absenteeism

9. Drug abuse affects the rate of employee absenteeism in Maasai Mara University?

- Strongly agree
- Agree
- Strongly disagree
10. In case an employee absents himself/herself from work many times in a month due to drug abuse, what disciplinary action do you recommend for that employee?
- Dismiss
- Warn
- Suspend
- Demote
- Transfer
11. Do you think employees' high rates of absenteeism resulting from drug abuse affect their performance at work?
- Yes
- No
12. If yes in question 11 above, how does absenteeism affect an employee's performance at work?
- Not completing allocated task
- Not meeting deadlines
- Hurrying through work thus affecting quality
13. Do you think an employee's increased rate of absenteeism affect the other employees allocated the same task in a department?
- Yes
- No

Section D: Effects of Drug Abuse on Employee Time Management

14. Do you think drug abuse has any effect on time management by employees who are abusers?
- Yes
- No
15. If yes in question 13 above, which are some of the ways in which employee time management is affected by drug abuse?
- Lateness in reporting to work
- Absenteeism
- Little concentration in work
- Frequent breaks
- Early closing the day
16. In case an employee whom you are working with falls victim of poor time management due to drug abuse, how can you help him/her?
- Educate on dangers of drugs
- Cover for him his work

Report him to the head of department

Leave his work undone so that it is known

17. Training on time management is essential for all employees

Strongly agree

Agree

Strongly disagree

18. Poor time management due to drug abuse by employees affects their performance at work.

Strongly agree

Agree

Strongly disagree

Section E: Effect of Drug Abuse on the Quality of Services offered by the Employees

19. Do you think drug abuse can affect the quality of services offered by the employees?

Yes

No

20. Where can one find information about drug abuse?

NACADA

NGOs

CBOs

Hospitals

Media

Churches

21. Do you think drug abuse is a threat to the performance of your university?

Yes

No

22. Which are some of the problems faced by drug addicted employees while carrying out their duties?

Lack of concentration

Hangovers

Poor sight

Frequent conflict with colleagues

23. Do the problems given in question 21 above affect the performance of the employees?

Yes

No

24. How does drug abuse affect the quality of services offered by employees of Maasai Mara University?

Employees while drunk may abuse customers

Employees who abuse drugs may not serve customers at the right time

Employees may disappear from work to look for drugs

Employees while drunk may not provide all the information required by their customers

All of the above

25. Considering the effect of drug abuse on the quality of services offered by employees, which are some of the ways the University can adopt in order to improve the quality of services offered by employees who abuse drugs?

Rehabilitate the drug addicted employees

Counsel the drug addicted employees

Warn the drug addicted employees

Dismiss the drug addicted employees

Let other employees do the work of the drug addicted employees

26. Which are some of the possible challenges faced by public universities as a result of low quality of services offered by employees who abuse drugs?

Reduced customers

Too many complaints from the customers

Demotivation of employees who work with the drug addicts

Students of the affected public universities may end up rioting

All of the above

APPENDIX III: FOCUS GROUP DISCUSSION FOR ADMINISTRATORS

1. Which are some of the contributing factors to drug abuse?

.....
.....
.....
.....

2. Discuss the types of drugs known to you?

.....
.....
.....
.....

3. How does drug abuse affect the performance of employees in your institution?

.....
.....
.....
.....

4. How does one recognize drug abusers in your institution?

.....
.....
.....
.....

5. Discuss the remedial measures that can be taken to eradicate the problems of drug abuse in Kenyan Public universities?

.....
.....
.....
.....

APPENDIX IV: INTERVIEW SCHEDULE FOR HUMAN RESOURCE DEPARTMENT

1. Discuss the factors that contribute to poor work performance?

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.....
.....

2. Does drug abuse contribute to poor work performance? Yes/No

If yes, how?

.....
.....
.....
.....

3. Have there been reported cases of drug abuse among the employees in this institution?

.....
.....

If yes:

4. What could be the avenues of drug abuse?

.....
.....

5. Was disciplinary action taken against the victim(s)?

.....

6. Was there any professional counseling offered to the victim(s)?

.....

7. Were the victims rehabilitated?

.....

8. What are the measures to curb or address drug abuse in an institution?

.....
.....
.....
.....

APPENDIX V: RESEARCH PERMIT

PAGE 2

THIS IS TO CERTIFY THAT:
Prof./Dr./Mr./Mrs./Miss/Institution
Jane Chepkemel
of (Address) Moi University
P.O. Box 3900-30100, Eldoret,
has been permitted to conduct research in

Location
District
County
Narok

On the topic: Effects of drug abuse on the performance of employees in Kenyan Public Universities. A case of Maasai Mara University

for a period ending 30th September, 2014.

PAGE 3
Research Permit No. NACOSTI/RCD/14/013/164
Date of issue 24th September, 2013
Fee received KSH. 1000




Applicant's Signature _____
For Secretary _____
National Commission for Science, Technology & Innovation

CONDITIONS

- 1. You must report to the County Commissioner and the County Education Officer of the area before embarking on your research. Failure to do that may lead to the cancellation of your permit.**
- 2. Government Officers will not be interviewed without prior appointment.**
- 3. No questionnaire will be used unless it has been approved.**
- 4. Excavation, filming and collection of biological specimens are subject to further permission from the relevant Government Ministries.**
- 5. You are required to submit at least two (2) hard copies and an (1) soft copy of your final report.**
- 6. The Government of Kenya reserves the right to modify the conditions of this permit including its cancellation without notice.**

REPUBLIC OF KENYA



National Commission for Science, Technology and Innovation

RESEARCH CLEARANCE PERMIT

Serial No. A/14/013/164

CONDITIONS-see backpage

APPENDIX VI: RESEARCH AUTHORIZATION



NATIONAL COMMISSION FOR SCIENCE, TECHNOLOGY AND INNOVATION

Telephone: +254-20-2241349, 20-267 3550,
0713 788 787, 0735 404 245
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Email: secretary@nacosti.go.ke
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When replying please quote

Our Ref: NACOSTI/RCD/14/013/1645

Jane Chepkemoi
Moi University
P.O.Box 3900-30100
Eldoret.

9th Floor Utalii House
Uhuru Highway
P.O. Box 30623-00100
NAIROBI-KENYA

Date:

24th September, 2013

RE: RESEARCH AUTHORIZATION

Following your application dated 6th September, 2013 for authority to carry out research on "*Effects of drug abuse on the performance of employees in Kenyan Public Universities: A case of Maasai Mara University*," I am pleased to inform you that you have been authorized to undertake research in Narok County for a period ending 30th September, 2014.

You are advised to report to the Vice Chancellor, Maasai Mara University before embarking on the research project.

On completion of the research, you are expected to submit two hard copies and one soft copy in pdf of the research report/thesis to our office.

DR. M. K. RUGUTELI, PhD, HSC
DEPUTY COMMISSION SECRETARY
NATIONAL COMMISSION FOR SCIENCE, TECHNOLOGY & INNOVATION

Copy to:

The Vice-Chancellor
Maasai Mara University

APPENDIX VII: LETTER OF CONSENT



JANE CHEPKEMOI,
PO BOX 326,
BOMET.
21ST AUGUST, 2013.

THE ADMINISTRATIVE OFFICER,
HUMAN RESOURCE DEPARTMENT,
MAASAI MARA UNIVERSITY,
PO BOX 861- 20500,
NAROK.



Dear Sir,

RE: REQUEST FOR PERMISSION TO USE YOUR EMPLOYEES AS RESPONDENTS IN MY RESEARCH PROJECT

I am a student with registration number SHRD/ PGH/65/07. I have completed my course work and now working on my proposal. My research topic is: **Effects of Drug Abuse on the Performance of Employees in Kenyan Public Universities**. I humbly submit my request to use some of your employees as respondents in the study. The results of the study will be brought to this office if need be.

Your consideration to this request will be highly appreciated.

Yours faithfully,

Jane Chepkemoi,

Request approved

A circular stamp from Maasai Mara University HR Registry, identical to the one in the middle of the page, with the text "MAASAI MARA UNIVERSITY", "P.O. BOX 861 - 20500 NAROK", "HR REGISTRY", and "RECEIVED 1 AUG 2013".

APPENDIX VIII: TABLE FOR DETERMINING SAMPLE SIZE

Table for Determining Sample Size from a Given Population

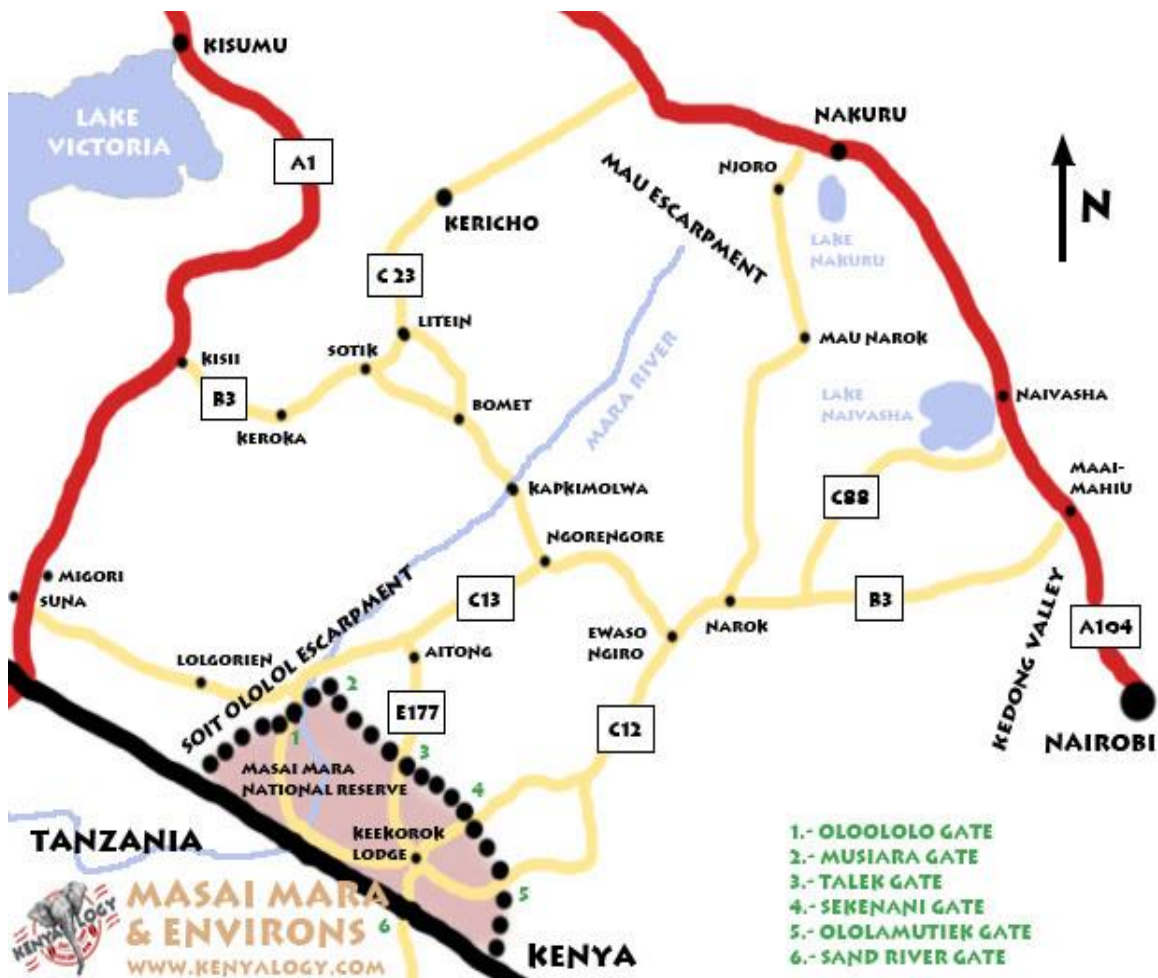
N	S	N	S	N	S
10	10	220	140	1200	291
15	14	230	144	1300	297
20	19	240	148	1400	302
25	24	250	152	1500	306
30	28	260	155	1600	310
35	32	270	159	1700	313
40	36	280	162	1800	317
45	40	290	165	1900	320
50	44	300	169	2000	322
55	48	320	175	2200	327
60	52	340	181	2400	331
65	56	360	186	2600	335
70	59	380	191	2800	338
75	63	400	198	3000	341
80	66	420	201	2500	346
85	70	440	205	4000	351
90	73	460	210	4500	354
95	76	480	214	5000	357
100	80	500	217	6000	361
110	86	550	226	7000	364
120	92	600	234	8000	367
130	97	650	242	9000	368
140	103	700	248	10000	370
150	108	750	254	15000	375
160	113	800	260	20000	377
170	118	850	265	30000	379
180	123	900	269	40000	380
190	127	950	274	50000	381
200	132	1000	278	75000	382
210	136	1100	285	100000	S384

Note: N = population size

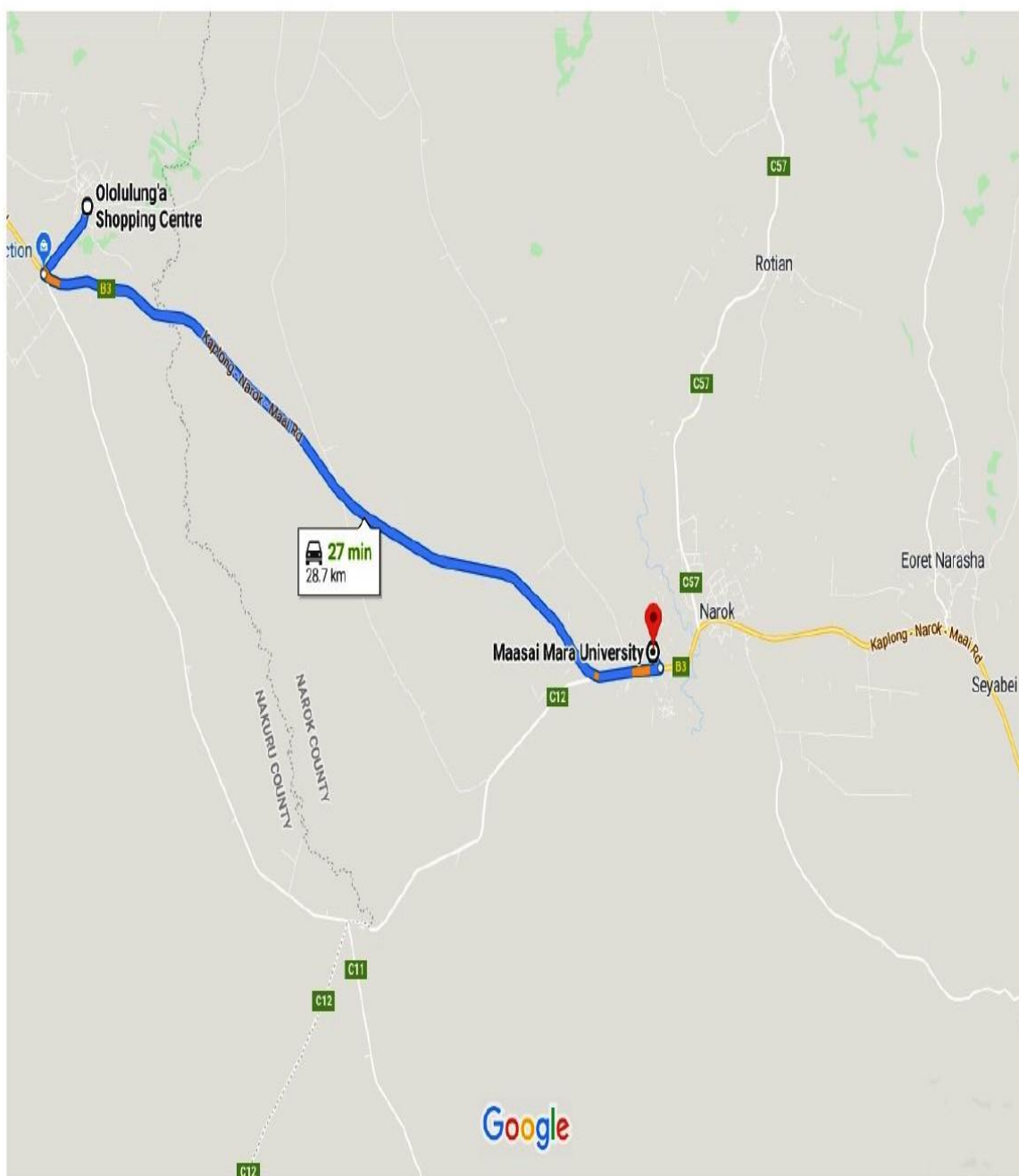
S = sample size

Source: *Educational and Psychological Measurement*, Krejcie & Morgan (1970)

APPENDIX IX: MAP SHOWING NAROK COUNTY



Source:www.filckriver.com

APPENDIX X: MAP SHOWING MAASAI MARA UNIVERSITY

Map data ©2019 2 km

Source: www.googlemaps.com