

**PARENT-CHILD COMMUNICATION FOR EARLY PREVENTION OF
SUBSTANCE ABUSE IN KENYA: A CASE OF SOUTH C ESTATE, NAIROBI
COUNTY**

BY

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DECLARATION

DECLARATION BY THE STUDENT

This thesis is my original work and it has not been presented for the award of a degree in any other institution. No part of it may be produced without the prior written permission of the author and/or Moi University.

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ABSTRACT

Parent – Child communication is vital in the socialization and contribution in the child's future behavior. Deliberate and intentional communication about drugs by the parents helps model the choice of behavior in the family environment. However, there has been a rapid increase in Kenya of the number of adolescents facing several consequences of substance abuse such as academic challenges, health issues, poor relationships, and connection with the juvenile justice system. One possible reason for this is inaccurate and inadequate communication about drugs received during the formative years. The chief aim of this research was to discover the impact of parent-child open communication about drugs for the purposes of preventing substance abuse in future. The study was conducted at Mugoya phase 3 residential gated community within South C Estate, Nairobi County. It specifically aims at finding answers to the research questions: What are the Family Communications patterns used by the parents within the family environment for creation of awareness and early prevention of substance abuse among preteens in future? What challenges are parents facing communicating to the preteens about substance abuse with the intention to influence them to embrace a drug-free lifestyle? How is the parent's understanding on the importance of communication in relation to substance abuse and its impact on the child's future behavior? How will the findings of this study influence parents as the child's primary educators to impact positive future behavior of the child through family communication? The study was guided by Family communication patterns theory which is a social cognitive methodology that proposes that communication is both cognitive and interpersonal. The study employed a mixed method design that utilized the explanatory sequential approach. There were 11 residential gated communities within south C estate. The study purposely focused on the Mugoya phase 3 gated community. The targeted population for the study was 118 parents and preteens. Using simple random and purposive sampling techniques, a sample size of 81 was selected. Data collection instruments were questionnaires which were administered to 62 respondents and two focus group discussions held with 19 preteen children. Quantitative data was analyzed using excel data analysis tools and employed frequencies and percentages while qualitative data was analyzed by use of thematic analysis and reported in texts. Analyzed data was expressed in tables, pie charts and graphs. Statistically, respondents have communication patterns they currently use, Open discussions, honest answers, deliberate nonverbal exposure to real life negative impact of substance abuse, close monitoring of movement, and interactions. Importance of communication is fully understood with preteens feeling appreciated, responsible and enhanced decision-making ability. Several challenges are faced such as, limited family time, constant alcohol adverts in the media, peer pressure and age of the preteens was also a factor. In conclusion, intentional and deliberate open communication about drugs within the family has a greater impact on positive decision-making abilities and behavior on the preteens once they leave the family environment, continuous communication creates substance abuse awareness, room for future consultations and guidance between children and parents. Grounded on the outcomes the study commended that parents embrace free and open conversation within their families.

DEDICATION

To the All-Powerful God, who has been my source of power and divine motivation throughout my life.

To Charles, my devoted husband, who has served as my greatest source of courage and inspiration.

Blessing and Faith, my beloved children, bring so much joy into my life and give me every motivation to work hard.

Thank you to my devoted mother, Priscilla, and my siblings for always encouraging me to put my all into whatever I planned to do.

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TABLE OF CONTENTS

DECLARATION.....	ii
ABSTRACT	iii
DEDICATION.....	iv
ACKNOWLEDGMENT.....	v
TABLE OF CONTENTS.....	vi
ABBREVIATION AND ACRONYMS	xi
DEFINITION OF OPERATIONAL TERMS	xii
CHAPTER ONE: INTRODUCTION	1
1.0 Introduction	1
1.1 Background to the study	1
1.1.1 Interpersonal communication strategy for substance abuse prevention.....	2
1.1.2 Substance Abuse triggers in the family.....	5
1.2 Statement of the problem.....	7
1.3 Aim of the study	9
1.4 Research questions	9
1.5 Assumptions of the Study.....	9
1.6 Scope of the study	10
1.6.1 Content Scope	10
1.6.2. Methodological Scope	11
1.6.3. Geographical Scope	12
1.7 Limitations of the Study	14
1.8 Conclusion.....	15
CHAPTER TWO	17
LITERATURE REVIEW.....	17
2.1 Situating the study within communication studies.....	17
2.2 Theoretical framework	18
2.3.2 Family communication patterns (FCP).....	26
2.4 Family communication	31
2.4.1. Parenting styles	33
2.5 Parental influence of children within the family environment	37

2.6	Substance Abuse overview	38
2.6.1.	Globally	38
2.6.2.	Status of substance abuse situation in Kenya.	38
2.7	Conceptual framework	40
2.8	Rationale of the study based on the literature reviewed.....	41
2.9	Conclusion	43
CHAPTER THREE		45
RESEARCH METHODOLOGY		45
3:0	Introduction	45
3.1	Study area	45
3:2	Research philosophical paradigm.....	45
3.2.1.	Pragmatism	46
3.3	Research approach.....	46
3.4	Research Design	47
3.5	Target population, sampling techniques and sample procedure.....	49
3.5.1.	Target population	49
3.8.1	Reliability of the Instruments	55
3.8.2.	Validity of research instruments	56
3.9	Data analysis.....	56
3.9.1	Quantitative data analysis	57
3.9.2	Qualitative data analysis	57
3.10	Ethical considerations	58
3.11	Conclusion.....	60
CHAPTER FOUR.....		61
DATA ANALYSIS, PRESENTATION AND INTERPRETATION.....		61
4.0	Introduction	61
4.1	Demographic Information of the respondents	62
4.2.	Family Communication Patterns currently used by parents within the family environment for creation of awareness and early prevention of substance abuse among preteens in future.	67
4.2.1.	Conformity and conversation within the family	67
4.2.3.	Deliberate non – verbal exposure to real life negative of substance abuse	71
4.2.4.	Interpersonal communication within the family, from children to parents	73

4.2.5. Parental knowledge of children’s peers with an influence on Substance abuse ...	74
4.4. Parent’s understanding on the importance of communication in relation to substance abuse and its impact on the child’s future behavior.....	78
4.5. Importance of family communication in children’s decision-making capability.....	80
4.6 Conclusion.....	82
CHAPTER FIVE.....	84
SUMMARY OF FINDINGS, DISCUSSION, CONCLUSIONS, CONTRIBUTION AND RECOMMENDATIONS	84
5.0 Introduction	84
5.1 Summary of key findings	84
5.1.1. Family Communications patterns used by the parents within the family environment for creation of awareness and early prevention of substance abuse among preteens in future	85
5.1.2. Challenges faced by parents while communicating to preteens about substance abuse with the intention to influence them to embrace a drug-free lifestyle	86
5.1.3. Parent’s understanding on the importance of communication in relation to substance abuse and its impact on the child’s future behavior	87
5.2 Discussion.....	89
5.3 Conclusion.....	90
5.4 Contribution of the study.....	92
5.5 Recommendations	93
5.6 Suggestion for further research	94
REFERENCES.....	95
APPENDIX I: RESEARCHER’S INTRODUCTION LETTER.....	107
APPENDIX II: QUESTIONNAIRES FOR PARENTS AND GUARDIANS	108
APPENDIX III: PARENT AND GUARDIAN CONSENT FORM	113
APPENDIX IV: FOCUS GROUP DISCUSSION FOR PRETEENS	114
APPENDIX V: MOI UNIVERSITY LETTER.....	115
APPENDIX VI: RESEARCH AUTHORIZATION	116
APPENDIX VII: RESEARCH PERMIT.....	117

LIST OF TABLES

Table 3.1: Sample size.....	51
Table 4.1: Questionnaire response rate.....	62
Table 4.2: Demographic information of respondents	63
Table 4.3: FCP in relation to conformity and conversation within the family.....	68
Table 4.4: Challenges faced by parents while communicating with preteens about S.A.....	75
Table 4.5: Parent's understanding the importance of communication in relation to S.A.....	78

LIST OF FIGURES

Figure 2.1: Family communication patterns model.....	31
Figure 2.2: Conceptual framework.....	40
Figure 4.1: Gender of questionnaire respondents.....	64
Figure 4.2: Age of questionnaire respondents.....	64
Figure 4.3: Education level.....	65
Figure 4.4: Gender of FGD participants.....	65
Figure 4.5: Open discussions.....	70
Figure 4.6: Deliberate non-verbal communication exposure.....	71
Figure 4.7: Children’s approach to parents with questions regarding drugs.....	73
Figure 4.8: Parental knowledge of children’s peers with influence on Substance Abuse.....	74
Figure 4.9: Challenges faced by parents in communication with preteens.....	76
Figure 4.10: Accessibility of alcohol and drugs in the environment.....	77
Figure 4.11: Parents awareness on communication in relation to S.A.....	79

ABBREVIATION AND ACRONYMS

FCP	Family Communication Patterns
IC	Interpersonal Communication
S.A	Substance Abuse
NACADA	National Campaign Against Drug Abuse Authority
WHO	World Health Organization
UNODC	United Nations Office on Drugs and Crime
FCPT	Family Communication Patterns Theory
GPA	Goals-Plans-Actions Theory
ADA	Alcohol and Drug Abuse
AIDS	Acquired Immune Deficiency Syndrome
HIV	Human Immunodeficiency Virus
FGD	Focus Group Discussion
KEMRI	Kenya Medical Research Institute
SUD	Substance Use Disorder

DEFINITION OF OPERATIONAL TERMS

Communication: The act of communicating information from one person to another using signs, symbols, or norms that both parties can understand. Verbal, nonverbal, and visual forms of communication are all possible.

Interpersonal Communication: The exchange of messages between parents and children that might take place verbally, nonverbally, or virtually with the goal of establishing and maintaining shared meaning.

Parent-Child communication: The process of reassuring and supporting a child's physical, intellectual, social, and emotional growth through the transmission and reception of information between parents and children with the aim of fostering the child's future behavior.

Pre-teen: Sometimes referred to as Preadolescence aged between 9 to 12 years, this period of human development follows early childhood and comes before adolescence.

Substance abuse: The detrimental use of psychoactive constituents, such as alcohol and illegal narcotics, is also known as drug abuse.

CHAPTER ONE: INTRODUCTION

1.0 Introduction

This chapter commences with a synopsis of interpersonal communication in the family system and the influence parents have over the children for future behavior not to abuse substances. It outlines the background of the study, the statement of the problem, the aim of the study, the research questions, the assumptions of the study, the scope of the study, the limitations of the study. These are generated in order to form the foundation for the study and to ensure coherency.

1.1 Background to the study

Parent-child communication also known as interpersonal communication is the verbal and nonverbal interaction between a child and his/ her parent within the family system. Parents could either be biological or non-biological caregivers (e.g., stepparents or adoptive parents) and parent-child communication takes place throughout the child's ages and developmental stages, Elizabeth (2015). Parent - child communication is an important interpersonal construct that is reflective of their relationship within the family. It serves as a protective factor for future behavior not to abuse substances. Choquet et al., (2008). Positive parent-child communication is important for optimal family functioning and acts as a prevention method for current and future delinquent behavior among the children Clark et al., (1997). Parent-child communication is key to the success of any family, this is due to the fact that family functions cannot be operationalized in the absence of communication, communication establishes and maintains relationships between parents and children. Runcan et al., (2012).

1.1.1 Interpersonal communication strategy for substance abuse prevention

Interpersonal communication in the family plays a vital role in substance abuse prevention during the early stages of growth. Through interpersonal communication, parents provide unconditional love, strengthen their children's self-esteem and create a positive attitude in them. Several strategies of interpersonal communication help parents watch for possible signs of substance abuse while identifying triggers of substance abuse within the family, they include, deteriorating relationships within the family and others, monitoring the company that the child keeps, setting rules within the family, maintaining moderate but consistent discipline while acknowledging positive behavior. Be friends with the child, this goes beyond modeling good behavior and creating a positive environment but parents need to take time to know and spend time with the child communicating and creating shared experiences, and talk about drugs.

Parent-child communication is a potentially modifiable protective factor of adolescent substance use. DeVore & Ginsburg (2005). According to Cohen et al., (1994), the amount of time parents spend with their children and the frequency of parent-child communication are both associated with reduced risks for alcohol and drug use. It is therefore considered that enhancing parent-child communication is a common target in substance use interventions for adolescents Beatty, Cross, & Shaw (2008). Parent-child communication is an important interpersonal construct that is reflective of the parent-child relationship, it may serve as a protective factor in prevention of substance abuse in future. According to Choquet et al., (2008), parental control and parental emotional support were more strongly related to substance use outcomes in girls than in boys.

According to, Ackard et al., (2006). Adolescents' perceptions of low parental caring, difficulty in communicating to their parents about problems, and valuing their friends' opinions for serious decisions were significantly associated with compromised behavioral and emotional health. This included substance abuse behavior. Recommendation for improving parent- child communication is likely to prevent risk behavior of substance abuse among the youth.

Interpersonal communication (I.C) is a characteristic form of human communication identified not just by the number of people who communicate, but also by the quality of the communication. Beebe & Redmond (2002, p. 6). There are seven dimensions meaningfully interconnected with interpersonal communication: emotionality, preciseness, reflectiveness, supportiveness, niceness, threateningly and expressiveness. de Vries, R. E., Bakker-Pieper (2009). Interpersonal communication occurs not only when one simply interacts with someone else, but when they treat the other as a unique human being. This study focused on the parent intentional communication to the pre-teen within the family system for early prevention of substance abuse. Pre-teen, also known as preadolescence, is a developmental stage that comes after early childhood and comes before adolescence. The pre-teens are believed to still be living with their parents aged 9 to 12 years and in primary school classes 4 to 6. Atwood (2006).

Substance abuse is a delinquent behavior characterized by continuous use of any chemicals, narcotics, or industrial solvents that frequently results in psychological and physical dependence in the users. According to NACADA (2012). Alcohol, marijuana,

cigarettes, khat/Miraa, heroin, cocaine, glue, prescription medications, and bhang are among the substances likely to be abused.

Effective parental communication within the family context serves as a model for the child in later years. There are three sorts of communication: verbal, nonverbal, and visual. Parents can address the requirements of their pre-teens and raise the level of positive influence by purposefully combining all the patterns. Manning (2014).

Verbal communication occurs when two or more people speak, Verbal communication is the passing of messages face-to-face. Components of verbal communication include, sound, speech, language, conversation, voice tone, voice speed, voice volume and active listening. Ben-Nun (2014).

Non-verbal communication is the transfer of information from one person to another without involving words of speech. There are several components of non-verbal communication consisting of facial expressions, eye contact, spatial and interpersonal proxemics, non-verbal cues, non-verbal sounds gestures, posture, interpersonal and intrapersonal touch, Ben-Nun (2014). While the true impact of substance abuse's effects is communicated visually. Knapp et al., (2011).

Even when communication is unintended or subtle, parents and children are aware of each other's presence in the family structure. Without speech, children might pick up on behavioral clues, parent(s)' posture and facial expressions, emotional state, and personality traits such as inclinations to abuse alcohol and other drugs. Parents could also consciously

arrange a trip for their family to a treatment facility to experience firsthand the damaging effects of alcohol and drug abuse. NACADA (2012).

1.1.2 Substance Abuse triggers in the family

The family remains the primary source of socialization for human development, Therefore, the impact of substance use disorders (SUDs) on the family and individual family members requires attention. Among the children, there is an increased risk of developing a SUD due to the effects of early exposure. Parents with SUD subject the children to unfavorable situations, including but not limited to, having unmet developmental needs, impaired attachment, economic hardship, legal problems, emotional distress, and sometimes violence being perpetrated against him or her. Zimic & Jakic (2012).

According to the report by, Substance Abuse and Mental Health Services Administration (SAMHSA) (2003), revealed that families with SUDs show patterns that significantly influence child development and the likelihood that a child will struggle with emotional, behavioral, or substance use problems. The negative impacts of parental SUDs on the family include disruption of attachment, communication, roles, routines, social life, and finances. Families in which there is a parental SUD are most instances characterized by an environment of secrecy, loss, conflict, violence or abuse, emotional chaos, role reversal, and fear. A parent with a SUD, who is mood altered, preoccupied with getting high or spending significant amounts of time recovering from the effects of substances, may miss the opportunities to foster healthy attachment. Lander et al., (2013). Pre-teens are likely to follow the model of parents with SUD. Children have difficulty forming healthy peer

relationships due to impaired early attachment. School/legal problems and family conflict. Anxiety, depression, or oppositional disorders. Carter & McGoldrick (1989).

Many children living in a home where there is an addiction develop into a condition known as “parentified children.” This occurs when the caretaker is unable to meet the developmental needs of the child, and the child begins to parent themselves and perhaps younger siblings earlier than it is appropriate. Also, referred to as, “reversal of dependence needs” the child actually begins to parent the parent. Lander et al., (2013). In reversal of dependence needs, the parent's needs are placed before the children. Zucker et al., (2009).

Repeated non-medical use of potentially additive chemical and organic compounds is another name for substance abuse. According to Monteiro (2001) the use of drugs beyond the amount and frequency typically advised for treatment, even when one is aware that doing so could result in major issues and eventually lead to addiction.

Alcohol or addiction-related daily intoxication, an unwillingness to cut back on usage, and general impairment in social or vocational functioning are characteristics of substance abuse. In many facets of life, including the lifestyle behaviors that adolescents adopt through socialization within the family setting, parents are acknowledged to be their children's primary educators. Grusec (2002). In order to boost protective variables and decrease risk factors for substance misuse after the child is out of the family context, the study's general focus was on the family communication patterns that parent(s) developed and employed when speaking with their pre-teen child. Catalano et al. (1985). Risk factors are characteristics of a family that increase a child's likelihood of developing later behavioral issues, such as substance misuse, while mitigating factors are those traits that

encourage effective coping and adaptability, lowering those dangers. Osofsky & Thompson (2000). Studies done on the relationship of parent - child communication about substance abuse among the adolescents reviewed that, individuals often identified as having talked to a child about drugs are parents during the early years, youth consider parents to be credible source of information about drugs, it is perceived family sanctions go up while drug involvement goes down, youth with the highest levels of drug involvement are those most likely who had no one talk to them about drugs, both to have no one talk to them and to have the largest member of people talk to them about drugs and that family sanctions increase dramatically for highly drug - involved youth once they have been talked to by one person. Choi et al., (2017). There has been scant literature on the role of family communication patterns influence on positive behavior not to abuse substances, which is currently considered to be a social problem in Kenya. This study therefore, will go far in adding literature in the field of communication studies.

1.2 Statement of the problem

Parent – Child communication is vital in the socialization and contribution in the child's future behavior. Deliberate and intentional communication about drugs by the parents helps model the choice of behavior in the family environment. However, there has been a rapid increase in Kenya of the number of adolescents facing several consequences of substance abuse such as academic challenges, health issues, poor relationships, and connection with the juvenile justice system. Several studies have revealed that family of origin is an agent of socialization of preteen children during this formative stage, through various forms of communication channels, triggers of substance abuse within the family environment and strategies through communication appropriate for early prevention of substance abuse.

Interpersonal communication strategies are used by parents to the children within the family context for drug abuse prevention, this is appropriate to persuade them to follow up drug – free lifestyles in future. Substance abuse assessment report done by NACADA (2020) revealed that in Nairobi County, alcohol and drugs are readily available in middle class residential areas as opposed to slums. South C is a middle-class residential community.

Family communication pattern through continuous interactions of open communication about drugs between parents – preteen acts as protective factor for future behavior as opposed to one short “drug talk” in other forums, Miller-Day (2008), Greenberger & Goldberg (1989). According to NACADA (2012), there is a rapid increase of the number of adolescents abusing substances in Kenya. This has resulted in detrimental consequences on them (Adolescents), families and communities at large. Most researchers have focused on alcohol and substance abuse by adolescents, the role of the parents and rehabilitation methods available. Feinberg et al, (2008), Kramer & Conger (2009). Urbanization has altered social cultural structures of traditional families where fathers communicated to and modeled the appropriate behavior to the boys and mothers did the same to the girls. Urban parents' working schedules more often than not keeps parents away from home, limiting interaction time for parents and children. Instead, mass media, peers and environmental factors are exposing pre-teen children to substance abuse. Greenberger & Goldberg (1989).

It is against this background that the present study sought to find out the effective family communication patterns, deliberately and purposively used by parents within the family environment, challenges faced by parents while communicating with the pre-teens, and parent’s understanding of communication importance in relation to substance abuse with

the intention of early intervention and prevention of substance abuse among the preteens when outside the family environment. Leading to reduction of the number of adolescents abusing substances in Kenya.

1.3 Aim of the study

The purpose of this study was to evaluate the effects of Family communication patterns in raising awareness and early prevention of substance abuse amongst the preteens and propose suitable interpersonal communication strategies that can be adopted by the parents to enhance an effective family communication environment.

1.4 Research questions

1. What are the Family Communications patterns used by the parents within the family environment for creation of awareness and early prevention of substance abuse among preteens in future?
2. What challenges are parents facing communicating to the preteens about substance abuse with the intention to influence them to embrace a drug-free lifestyle?
3. How is the parent's understanding on the importance of communication in relation to substance abuse and its impact on the child's future behavior?

1.5 Assumptions of the Study

In relation to the process of collecting and analyzing data as well as formulating research questions, several assumptions were made in this study. Based on the first research question, there was an assumption that for effective family communications patterns

currently in use, there is a deliberate intention to pass a particular message for the purposes of achieving an objective. Secondly, from the research question on what challenges parents are facing while communicating with the preteens about substance abuse, there was an assumption that the various communication methods, environment and channels may hinder effectiveness of message delivery and impact. Also, from the research question that focused on parent's understanding on the importance of communication in relation to substance abuse and its impact on the child's future behavior. The assumption made by the researcher was that the perceptions of the respondents would reflect a common pattern that would point to a conclusion on the general perception of a parent's understanding of communication importance in relation to the child's positive behavior not to abuse substances later in age.

1.6 Scope of the study

As postulated by Mugenda and Mugenda (2003), the scope of the study put into consideration some of the factors such as content scope, geographical scope, contextual scope and methodological scope.

1.6.1 Content Scope

In respect to content, this study was located in the discipline of communication studies, within the genre of interpersonal communication. The study focused on parent - child communication within the family environment. Specifically, interpersonal communication. It covered the communication patterns between parents and their pre-teen children for early childhood prevention of alcohol and substance abuse. In the first question, 'What are the Family Communications patterns used by the parents within the family environment for

creation of awareness and early prevention of substance abuse among preteens in future? I sought to find out how the various forms of communication patterns are used and the frequency. In this context, the study focused only on the communication patterns between parents and preteens with the intention of early creation of substance abuse and prevention. The study focused on general communication patterns within the family and specific communication patterns for early intervention and prevention of substance abuse in future, between parent(s) and their pre-teen(s). It looked at the nature of verbal communication in terms of frequency, time spent discussing, and who initiates discussions including preferred methods of discussions. In the second question, ‘What challenges are parents facing communicating to the preteens about substance abuse with the intention to influence them to embrace a drug-free lifestyle? I sought to investigate the availability for parties concerned, and any destructiveness during the interactions that is likely to create hindrance, either in provision or understanding of the content within the interpersonal communication between parents and pre-teens.

In the third question, ‘How is the parent’s understanding of the importance of communication in relation to substance abuse and its impact on the child’s future behavior? I sought to investigate parents' own understanding of interrelation between early family communication and positive future behavior among the children once out of the family environment.

1.6.2. Methodological Scope

The study was directed by explanatory sequential mixed methods design, this involved a two-phase project in which I gathered QUANTITATIVE data in the first phase, assessed the results, and then identified the results to build on in the second, qualitative phase. The

study was philosophically anchored on the pragmatism worldview. Phase one was quantitative data collected statistically through questionnaires and was analyzed using excel data analysis tool to emerge with the findings. Phase two data was collected through focus group discussions building on the results of phase one and analyzed thematically to emerge with findings. Both instruments of data collection provided a platform for the participants to express how they perceive parent - child interpersonal communication for early prevention of substance abuse. The respondents in phase one were simply randomly sampled, they included parents (biological, stepparents) and guardians of preteens, while phase two respondents were preteens 9 to 12 years purposively sampled. For more details on methodology, please see chapter three of this thesis.

1.6.3. Geographical Scope

I carried out my study in south C Mugoya phase three residential gated community. Mugoya phase 3 has 65 households among them 35 have preteen. South C is a middle-class urban estate in Langata constituency, Nairobi County. South C was purposely selected for the study after reports submitted during the national conference held June 2013 by the government dubbed, "The Youth and Drugs: A Call for Action.", showed that substances likely to be abused are more easily accessible in middle class residential within urban areas than the slums.

The estate lies next to Wilson Airport and Nairobi National Park to the south. Several mixed day primary schools and institutions such as Red Cross society headquarters, National Environmental Management Authority (NEMA), Training School of the Kenya Police, Criminal Investigations Department (CID) and Toyota Training Academy. According to empirical data, 10% of teenagers (aged 14 to 19) who have ever used drugs or

engaged in substance misuse have family members who drink alcohol, compared to only 5% of those whose friends or parents did not consume alcohol. (NACADA, 2012). This demonstrates that a child's social environment has a significant impact on substance abuse. The primary means of information transfer between individuals is through communication. Social interactions within the family and external factors have an impact on preteens. Mahalihaliri (2004).

Nairobi is a large city with a population of 4,397,073 people (National Bureau of Statistics 2019), Due to their hectic schedules, many parents leave their kids to learn from their peers, the media, and other environmental variables. Nairobi is a multicultural and cosmopolitan city, per KEMRI research. Korir et al., (2015).

Statistics indicating high rates of alcohol and drug abuse (ADA) among young people have compelled the government to take harsh action against drug dealers, according to the Standard Newspaper of June 16, 2016. President Uhuru Kenyatta ordered police to arrest drug traffickers and deport foreigners engaging in the illegal trade on Monday, June 10, 2013, at the start of the second national conference on alcohol and drug misuse at the Moi International Sports Centre in Kasarani, Nairobi. The National Authority for Campaign against Alcohol and Drug Abuse (NACADA) was also tasked by the President with developing policies to reduce drug abuse. He gave the National Treasury the order to increase funds for alcohol and drug addiction prevention and control and to look for creative ways to raise money to broaden NACADA's funding base in the battle against substance misuse. NACADA intended to involve more parties, particularly faith-based and youth organizations, in the fight against drugs during the conference with the theme "The Youth and Drugs: A Call for Action." George Achola, director of NACADA, noted that

more than 700,000 persons misused drugs, compared to 4 million who drank alcohol and 2.7 million who smoked. If nothing is done quickly, he claimed, all the improvements in socioeconomic status, politics, and health might be undone. Availability Numerous secondary schools were found to have high rates of alcohol and drug misuse, according to research presented at the conference. Bhang was at 68%, closely followed by cigarettes at 77%. According to the report, alcohol came in fourth with 58 percent, followed by khat (Miraa) in third place with 61%. According to a survey conducted on secondary schools in Nairobi County and presented by a University of Nairobi student representative, drug availability accounted for 87 percent of all cases of alcohol and drug addiction.

President Uhuru stated that parental neglect, as well as socioeconomic and peer pressure, were major contributors to the rise in drug-related cases. The Jubilee government has launched an initiative to promote and urge for action against alcohol and substance abuse. He highlighted that everyone must actively participate in the fight against illegal substances since it is a collaborative effort. At the same time, President Kenyatta urged county administrations to take the lead in enforcing constitutional prohibitions on drugs and alcohol. He suggested that county governments work more closely with NACADA to better serve their constituents (Daily Nation 10th June 2013).

By examining family communication patterns, this study aims to identify the parental involvement in raising awareness and preventing early childhood substance abuse.

1.7 Limitations of the Study

The researcher acknowledges that just like any other study, there are a few limitations in the current one.

Firstly, Security and trust, being a gated community access for non-resident required clearance with clear identifications and purpose of the visit. This was cleared through an official visit by the researcher to the Chief in South C who in turn organized for introduction to the community leadership.

In view of the sensitivity of the topic, most participants were not willing to participate in the study, they felt giving such details is exposing themselves by giving family 'secrets. I held a meeting with the estate committee leadership and explained in-depth the purpose for the study, that it is purely academic and confidentiality will be maintained. Considering I had official authorization which included, Moi University, research permit and clearance from the county education office helped ease the concern.

In view of most parents being working class and others manning personal businesses, time constraint for the participants was a challenge. I had to make arrangements to meet each individually at a day and time convenient within the community. This resulted in many trips and days in and out of the gated community. Despite those limitations of the study, the researcher was cautious to ensure that the findings remained trustworthy and credible.

1.8 Conclusion

This chapter demonstrated that effective family communication pattern is an integral part of human development ability to make positive decisions and behavior of not to abuse substances. The need to foster the effectiveness of interpersonal interaction between parent - preteen communication within the family environment is crucial in early prevention of substance abuse.

This necessitated a deeper understanding of how a family communication environment is key in a child's socialization that determines future behavior, more so in avoidance of substance abuse at the adolescent's age. The chapter has highlighted the reasons as to why this research is important at this point in time, in view of the rapid increase in the number of adolescents abusing substances including the negative effects on them and the communities at large. The chapter outlines research questions, the assumption of the study, the scope, limitations of the study. The findings of this research will help add literature of Family Communication patterns in the area of Interpersonal Communication within communication studies.

CHAPTER TWO

LITERATURE REVIEW

2.0 Introduction

This chapter reviews relevant literature in line with the research questions of the study. It focuses on previously scholarly work, related to the contribution of parent - child communication for socialization within the family to influence future behavior of the children. The review was based on the scholarly work contextualizing parent - child communication, related interpersonal communication in the family context, substance abuse as a social problem among the youth globally and in Kenya. Review relevant theories that relate to the study, review recent literature on family communication patterns, bring out the rationale of the study and gave a summary of the chapter in the quest to bring out the perceptions of communication within the family has greater impact in positive behavior influence among the preteens, not to abuse substance once outside the family environment.

2.1 Situating the study within communication studies

An academic field called communication studies examines how people communicate. Four main categories, intrapersonal communication, interpersonal communication, group communication, and mass communication are used to describe communication studies. Littlejohn & Foss (2009). According to Manning (2014), face-to-face communication, also known as interpersonal communication, is the exchange of messages between two or more individuals whose lives are mutually influenced by social and cultural conventions in certain ways.

There are different types of communication, such as written communication, which requires reading a message, nonverbal communication, which involves studying a person and analyzing their body language. Calhoun & Craig (2011). As it occurs in different settings, from interpersonal interaction to global media, communication studies examine the social, political, and cultural functions of communication. This includes analyses of a variety of topics, from face-to-face conversation to mass media outlets like television broadcasting. Communication studies also examine how messages are understood in light of social background factors. Fiske, J. (2010). Human communication often involves face-to-face interaction. Human communication can take many different forms, including interpersonal (communication among people or groups), intrapersonal (communication with oneself), and organizational (communication within organizations). Papacharissi et al., (2009).

The dialogue between parents and their pre-teen children is the main subject of this study, which is based on interpersonal dynamics. Koerner & Fitzpatrick (2002). Within the discipline of communication studies, interpersonal communication is a form of human communication. In a family, vocal communication involves parental direction, reprimand, and monitoring whereas nonverbal communication includes parental modeling behavior.

2.2 Theoretical framework

A theoretical framework is defined as any quasi-empirical or empirical theory of social and/or psychological processes that can be applied to the understanding of phenomena.

Given (2008). In this study, family communications theory and Goals-Plans-Actions Theory guided the study by providing the researcher with lenses with which to view,

understand and guide through the research process. The two theories provided a framework for interpreting and reporting findings and conclusions.

2.2.1. Family communication patterns theory

Family Communication Patterns Theory (FCPT) is a general theory of family communication that focuses on parent-child communication, its main concern is establishing a shared social reality. The theory identifies basic processes of coming to a shared agreement that impact not only concurrent communication behaviors, but long-term information processing, psychosocial, and behavioral outcomes as well. Koerner et al., (2017). Communication skills learned in the family of origin, a person's initial socialization unit, play a significant role in how people learn to make decisions and behave, Koerner & Fitzpatrick, (1997). Additionally, the influence of the home environment on communication-based socialization has been extended to how people act and choices they make outside the family, such as whether or not to take drugs. Fowler et al., (2010). FCPT is a social cognitive method that has a dual perspective on interpersonal and cognitive communication. Therefore, it is best suited to help the researcher understand how family communication environment links to individual decision-making ability, and behavior since it can explain how communication in the family of origin influences conduct.

The main characteristic of this theory that informs this study is parent-child communication with the view of shared social reality. Based on social cognition, the theory highlights aspects of family processes that are essential, such as communication awareness. Elwood & Schrader, (1998), Based on cognitive orientations in familial interactions, this theory seeks to explain why people behave and communicate in certain ways.

According to the Family Communication Patterns Theory (FCPT), healthy families frequently display a variety of behaviors that set them apart. According to Koerner and Fitzpatrick (2006), FCPT, there is no one universally ideal way for families to communicate; rather, each family creates its own family communication environments and behavior, which must be understood and evaluated based on the particular setting that is important to each family group.

Family groups are founded on a strong theoretical model that explains how varied methods create shared social reality in variations in the communication behavior of families, according to FCPT. Family groups are not merely a practical technique to describe various forms of recognizable behaviors. FCPT acknowledges that different families function successfully by engaging in various sorts of behavior rather than operating on the presumption that there is only one functional method of communication. Koerner (2006).

Instead of attempting to identify behaviors that are useful for all families, FCPT instructs researchers to concentrate on how behavior interacts with specific communication contexts to understand the effects they have on family functioning. Koerner (2006). This idea unequivocally demonstrates the significant influence that parents and the child's family of origin have on a preteen child's decisions and conduct going forward, based on the socialization through the family communication patterns employed within the family environment. According to FCP theory, family socialization builds schema, or cognitive scripts, that influence cognition and behaviors. Koerner & Fitzpatrick, (2002). The study found the theory resourceful because it confirms that family socialization through interpersonal communication builds schema, or cognitive scripts, that influence cognition and behaviors of the children when they leave the family environment.

2.2.2 Goals-Plans-Actions Theory

The Goals, Plans, Action theory is prominent in the field of interpersonal communication, it explains how people use influence over others to accomplish their goals. The theory is a model for how individuals gain compliance from others. Littlejohn & Foss (2011). There can be multiple goals related to the need for compliance. These goals are separated into primary and secondary categories. These goals are then translated into plans, both strategic and tactical, and finally carried out in actions. Goals motivate plans, and actions deliver the effort to accomplish goals. Littlejohn & Foss (2011). The model is rooted in the scientific tradition, with scientific realism, the assumption that “much of the world is patterned, knowable, and objective, Leslie et al., (2008). The main characteristics of this theory are that people use influence over others to accomplish their goals informed by this study. Parents are the first educators of the children and through communication within the family environment they intentionally and deliberately influence positive behavior over the preteens not to abuse substances when out of the family environment.

Social interaction is often a goal-driven process of interpersonal communication, and within the family social unit, parents purposely engage in conversation with their pre-teen to explain and clarify various negative consequences of engaging in substance abuse. Goals-Plans-Action Theory (GPA), conceptualizes this process, explaining the process behind messages intended to influence others. GPA focuses on three elements: *goals*, or anticipated outcomes; *plans*, which map separate routes to reach the goals; and *action*, the implementation of the plans. Baxter & Braithwaite (2008).

Goals-Plans-Actions (GPA) Theory, is an individually centered theory of interpersonal communication, which shows a cognitive activity of an understanding how individuals

plan, produce and process interpersonal communication messages which shape their interactions with others, and concentrate on “mental representations that influence how people understand messages and how they behave” s, Baxter & Braithwaite (2008). The theory was developed to explain interpersonal influence through the messages produced with the intention to change or maintain the attitudes and/or behaviors of others. Dillard (2008).

The theory was developed in 1990 by Dillard James Price, a communication professor and he revised it in 2008. It gives a viewpoint of how interpersonal communication brings mental representations that influence people’s interpretation of information and behave thereafter. Berger (2005), Knapp et al., (2011).

The theory has a scientific realism of assumption that the world is patterned, knowable and objective, with the features of social interaction and cognitive processes which are objectively real, Pavitt (2015). In this study, parent’s purposive knowledge of influence strategies to their pre-teen(s) which are likely to have a long-term effect. It has a three-step sequence of, Goals – which an individual is committed to achieve, for this study the goal(s) will be parent(s) helping their pre-teen(s) to abstain from substance abuse at the adolescent age. Plans- these are motivated by the goals, they form the mental representations of messages for the purposes of attaining the goals and the final step, Actions—the actual actions including messages which parents actually utter or take in their effort to realize the goal of their pre-teen’s abstinence from substance abuse when they reach adolescent age. Dillard (2008).

Influence goals of the theory are at the beginning of the goals-plans-actions sequence which motivates the processes that result in message production. Dillard et al., (2002).

Human behavior is a stream, and the social meaning function is the primary goal that gives parent(s) an opportunity to segment the stream of their pre-teen(s) progressive behavior into meaningful units of planned messages, and well executed actions through verbal, nonverbal and visual communication to achieve the desired behavior. Secondly, primary goals in GPA theory, direct mental operations of creating an understanding of the purpose of interaction.

GPA theory suggests that influence plans exist in two levels, Strategy –level plans, and they include action by the parents and the sequence of behavior of both parent and pre-teen towards substance abuse. Tactic plans are the parent(s) positive continuous instruction to the pre-teen(s) for purposes of producing smaller units of desired behavior. Baxter & Braithwaite, (2008).

Action behavior messages, starts with explicitness of parent(s) making his/her intentions transparent in the message through the nonverbal communications. Dominance shows the power of the parent to influence in comparison to the pre-teen. The final dimension includes control over the outcome, in characterization of influence plans. This refers to the extent to which a parent who is the source has control over reasons for compliance by the pre-teen. Braithwaite (2008).

Parents are the first educators of their children, through a deliberate strategy plan, a parent(s) is able to set a goal of helping his or her pre-teen(s) abstain and avoid the consequences of substance abuse at the adolescent age. This is possible through well thought out continuous plans and actions messages of verbal, nonverbal and symbolic communication on the dangers of substance abuse.

In conclusion, this study is conceptually driven by a framework of theories which relate to interpersonal communication. By integrating family communication patterns theory and goal plans action theory, the researcher applied the theories and increased understanding of parent - child communication within the family system with a view of early prevention of substance abuse.

2.3 Review of related literature

2.3.1. Interpersonal communication

Face-to-face communication, or interpersonal communication (I.C.), is the process of conveying messages between two or more individuals whose lives are mutually influenced by social and cultural conventions in certain ways. Manning (2014). Interpersonal communication is impacted by various factors including, the situation, environment, and people involved. There are different types of interpersonal communication, which include, Content meaning, relationship meaning, ambiguous, Purposeful, transactional process. Interpersonal communication occurs between two or more people whose lives are interdependent and mutually influence one another. These relationships occur in personal, academic, civic context, professional. Interpersonal communication competence is able to improve all those involved in physical and psychological health while enhancing relationships. Miller (2020). According to Wood (2014). Interpersonal communication principles determine the effectiveness of the interpersonal communication that occurs between people. The principles are: we cannot NOT Communicate, interpersonal communication is irreversible, interpersonal communication develops and sustains relationships, interpersonal communication effectiveness can be learned, interpersonal communication involves ethical choices, people construct meanings in

interpersonal communication, metacommunication effects meanings, interpersonal communication is not a panacea.

Interpersonal communication is the process of exchanging messages with others in order to establish and maintain shared meaning. The crucial elements are Process, an ongoing activity that is constantly changing, and Message Exchange, the exchange of verbal and nonverbal cues between participants in interpersonal communication. West Turner (2010). Since successful interpersonal contact between parents and their pre-teens makes both parties feel better physically, psychologically, and emotionally, research has demonstrated that people cannot function without communication. West & Turner (2010). Interpersonal communication is a learning process involving symbol interchange that contains both relationship information and content information that a parent wants his or her pre-teen(s) to perceive. Interpersonal communication is a social process in which parents and preteens who have a communication relationship exchange messages in an effort to create shared meanings and achieve social objectives. Bodie & Burleson (2008).

A unique framework of reciprocal expressive and interpretive intentions between interactants defines the interaction in Interpersonal communication. When the parent, acting as the source, intends to communicate with the pre-teen, acting as the recipient, and the pre-teen, recognizing the parent(s)' expressive intention, signals the complementary intention to pay attention to the parent(s) expressions, the parent(s) realizes that his or her expressive intention has been recognized and accepted by the pre-teen, then the parent(s) realizes that his or her expressive intention has been recognized and accepted by the pre-teen. Greene (2007).

In the social unit of the family, interpersonal communication involves interconnected processes of message generation that result in verbal and nonverbal behaviors intended to communicate an internal state to another and achieve social objectives. The purpose of this message is to interpret the communicative actions of parents and preteens in an effort to comprehend the significance and effects of their actions. While, interaction coordination synchronizes the actions involved in producing and processing messages (along with other behaviors) in order to produce accurate interchanges. Finally, parents' perceptions of substance addiction are shaped by their experiences, those around them, their social connections, and societal institutions. Bodie & Burlison (2008), Berger (2005), Dillard (2008). Interpersonal contact between parents and children must take place in the family setting.

2.3.2 Family communication patterns (FCP)

Family communication patterns are made of two orientations of conformity and conversation, throughout a preteen's formative years, adolescence, and adulthood, the family of origin continues to have a significant part in that development. Scholars have studied the effects of family communication patterns on psychological and behavioral outcomes of substance use because of this intrinsic influence, Schrodt et al., (2008).

FCP is the method by which family members interact with one another; it depends on the kind of family and who is communicating with whom. It is in the context of interpersonal communication inside the family. Family communication patterns show how families build social conditions that foster shared understanding based on a psychological need for ongoing understanding between family members and a logical need to predict other family members' behavior, Koerner & Fitzpatrick, (2002). This is very important because it makes

it easier for parents to watch over their preteen children and to provide an example of appropriate behavior through communication, which aids in the avoidance of alcohol use and substance abuse in their preteen children as they enter the adolescent era. The way in which a family communicates has an impact on substance use both directly and indirectly through influencing behaviors that are known to cause problems, such as aggression. Particularly harsh disciplinary methods, poor parental supervision, a lack of family ties, and family strife all contribute to both internalizing and externalizing behaviors, such as substance abuse and abuse of other drugs. Of course, variables related to the family and parenting can also be very helpful or protective in reducing teenage substance use. Examples of protective parenting techniques include strict boundaries, clear lines of communication, caring, and close kid supervision, Lochman (2002).

Family interactions involve conformance and conversation orientations, according to the Family Communication Pattern. Conformity orientation refers to how much a family culture emphasizes consistency in attitudes, values, and beliefs. According to Koerner & Fitzpatrick (2006), families with high conformance orientation emphasize harmony, interdependence, and total obedience to the parents. In contrast, families with low conformance orientation place a strong emphasis on family diversity, Fitzpatrick (2006).

According to Fitzpatrick (2006), conversation orientation refers to "the extent to which families create an environment, where all family members are inspired to participate freely in discussion about various themes." "Activities or actions that the family wishes to engage in together are discussed freely inside the family, just like other family decisions," according to research on high conversation orientation families, Koerner & Fitzpatrick (2006). Families with low conversation orientation contact significantly less frequently,

only freely discuss a small number of topics, and speak less about their individual ideas and feelings because they feel that these types of interactions are not important for a happy, functional family, Koerner & Fitzpatrick (2006).

Conversation and conformance orientation are associated in a number of relational behaviors, cognitive activities, and individual well-being results, according to study on Family Communication Patterns. Schrodt et al., (2008). The following is an evaluation of the impact of family communication patterns on the behavior development of kids in four different types of families according to Koerner & Fitzpatrick (2006).

2.3.2.1 Consensual

According to Ascan Koerner (2002), families with a consensual style of communication emphasize candid dialogue yet promote family conformity. Family members are allowed to express their emotions, ideas, and activities, but parents make the final decisions regarding crucial matters. Unfortunately, the desire to be open and in control causes tensions between the two opposing orientations. In these homes, the parents frequently take the time to explain their choices, values, and views to their children. As a result, the kids learn to value communication and frequently accept the family's set of values. As conflict undermines the hierarchical structure in which parents make decisions for the family, these families work to prevent it. In addition to expecting obedience from their children, parents encourage them to explore the world around them while taking care to preserve the family's generally accepted internal social harmony. They also take an interest in what their kids have to say. Koerner & Fitzpatrick, (2002).

2.3.2.2 Pluralistic

Families that value diversity tend to be more conversational and less conformist. Parents in this country expect their children to grow through their interactions with people outside the family and value "life lessons" for what they are. Collectively, decisions are made with equal input from all parties. Additionally, these families support amicable dispute resolution. They have learned effective methods for resolving conflicts and are not afraid of disagreements. Children from pluralistic families develop independence and self-assurance in their decision-making. These are the families that are conceptually oriented but not very socio-oriented. Children are encouraged to explore new ideas, express them more freely without fear of retaliation, and make their own decisions without worrying about how those decisions might affect their relationships with their parents. These families support open communication and discussion of ideas without placing a premium on deference to authority. Respect and interest for one another are valued in this type of communication. Children and parents thus share equal rights in family decision-making in pluralistic families. Koerner & Fitzpatrick, (2002).

2.3.2.3 Protective

Protective households are geared toward conformity and do not appreciate free speech. According to Koerner & Fitzpatrick (2002), a parent is likely to be heard telling their child, "Because I said so," in this situation, Parents want children to obey them without inquiry, and they rarely explain the thinking behind their choices. Due to the children's focus on adhering to family rules, conflict is typically low in these families. Unfortunately, members are ill-equipped to address conflicts when they occur. In other words, kids from protective households don't learn to believe in their own judgment. They are renowned for having

high Socio-orientation but low Concept-orientation. When speaking with youngsters, they place a strong emphasis on respect, social harmony, and obedience. Parents from these kinds of families engage in male power, supremacy, and authority and feel that men should be competitive, competent, and prudent. Children are expected to be subservient and to blindly follow their parents' instructions. Children are discouraged from voicing opposing views and urged to maintain peaceful relationships. These parents, according to Koerner & Fitzpatrick (1997), expect girls to be both self-restrained and socially adept while expecting boys to be less self-restrained. Unfortunately, due to parental authority, kids are more susceptible to being convinced and affected by others outside the home than they are to influencing others on their own, Fitzpatrick (2002).

2.3.2.4 Laissez-Faire

Families that practice laissez-faire have low levels of concept orientation and social orientation, and they place little significance on dialogue or conformity. They are really different from one another emotionally. Family members rarely discuss important issues, and parents frequently have little stake in the choices their kids make. Since everyone is allowed to do as they please, conflicts are uncommon in these households. Unfortunately, children are not given the chance to experience the benefits of communication, Fitzpatrick (2002). In addition, they can doubt their abilities to make decisions because their parents don't offer much support. One parent of the family might seek out or start an open argument, while the other would avoid it. Children are consequently exposed to inconsistent gender role models and dispute resolution techniques, Koerner & Fitzpatrick (1997). Little contact exists between parents, and children are not involved in family decisions, which are instead solely made by the parents. Children are typically impacted by

social groups outside of the home because they don't engage with their parents enough, Koerner & Fitzpatrick (2002).

Figure 2:1. Family Communication Patterns model

Conformity orientation Low High	Protective family (High in conformity and low in conversation)	Consensual family (Both high in conformity and conversation)
	Laissez-faire family (Both low in conformity and conversation)	Pluralistic family (Low in conformity and high in conversation)
Low High		Conversation orientation

Source: Koerner and Fitzpatrick (2002)

2.4 Family communication

Through inducing risk and/or encouraging and promoting protection and resilience, the family can play a significant role in both preventing and intervening with substance use and misuse, involvement of families in their children's use and abuse of substances. Researchers and professionals have long believed that the family plays a crucial role in the formation or prevention of all negative behaviors. Repetti et al., (2002). The effectiveness of parenting has been linked to factors like psychological health, life stress, and social support in predicting antisocial behavior in general as well as substance use and abuse. Numerous interventions have been developed around the notion that families play a crucial

role in helping kids become accustomed to the opportunities and appeals of the social environment. It is believed that children may develop a number of delinquent behaviors if inappropriate family socialization occurs, Racz & McMahon (2011). According to studies, substance abuse in later years is strongly predicted by early antisocial behavior, Cleveland et al., (2008). Lack of clear expectations between parents and children, as well as poor communication. Extremely strict and inconsistent discipline, high levels of negative interaction or family conflict, and the family's role in preventing and intervening with substance use and misuse of a child's behavior have all been found to be indicators of an increased risk of substance misuse, delinquency, and conduct disorders, Brook et al., (1990). Similar to this, mothers' negative consequences (such as reprimands or criticism) have a negative impact on their 11–15-year-old offspring. The more negative consequences adolescents experienced, the more likely they were to start or continue using drugs. Andrews (1993). A protective factor against substance abuse is consistent and moderate parental discipline, monitoring of children, support for child competencies, and regular expressions of parental warmth and affection. Valdmann (2005). Lower levels of drug use have been linked to parents who kindly encourage their adolescent children's independence, Garcia (2013).

A lower risk of teen substance abuse has been associated with the quality of the parent-child relationship. Children's behavior when they are young is still predicted by how well they get along with their parents. Strong parent-child relationships are associated with greater disclosure and greater reliance on parents for guidance and information. Although having a good relationship with both parents is crucial, studies show that the maternal influence is slightly stronger than the paternal influence. As a result, adolescents are more

negatively impacted by negligent mothers than by negligent fathers. Moreno & Garcia, (2013).

Good parent-child relationships are protective factors against substance use, claim Ramos et al. (2011). This demonstrates that poor parent-child communication, vague and inconsistent expectations, excessively harsh and inconsistent punishment, and high levels of negative interaction or family conflict have all been found to be associated with an increased risk of substance use. In contrast, excessive reprimanding and criticism has also been linked to substance use. Schlosser R et al., (2007).

2.4.1. Parenting styles

A psychology concept known as parenting style represents the typical methods parents employ to raise their children. Parenting philosophies are a depiction of how parents interact with and discipline their kids. Christopher (2005). The family setting should offer protection and direction in light of the complexity of the emotions experienced because during the preteen stage, various adjustments and changes in interpersonal skills take place. Schenker & Minayo (2003).

The effective management of this phase may be hampered by excessive disciplinary practices in family relationships or issues in establishing boundaries for children's behavior, which might result in risk behaviors like substance misuse. Parenting styles are the attitudes parents adopt when parenting kids and are used to explain how parents handle emotional support and discipline in connection to their kids' behavior. Steinberg (1993).

Demandingness and responsiveness are two crucial aspects of parenting techniques, according to Garcia (2009). Parental demandingness is the tendency for parents to watch

and regulate their kids' behavior by placing restrictions and establishing regulations. Parental responsiveness is a collection of understanding attitudes held by parents with the aim of promoting the growth of their children's autonomy and self-concept through emotional support and two-way communication. These aspects identify four parenting philosophies: authoritative, neglectful, indulgent, and authoritarian. Warm and communicative, but yet exercising proper control, are the characteristics of authoritative parents. Neglectful Parents are individuals that show little affection, little control, and little to no interest in the friends, partners, or worries of their children. Parents that are affectionate but not overly strict are considered indulgent. Norm-imposition is prevalent, authoritarian parents are very demanding, and they do not value their children's viewpoints. Montgomery et al., (2008).

According to studies, there is a twofold increased risk of substance abuse in kids who see their fathers' parenting as less authoritative. Paternal authoritative styles appear to be linked to not misusing drugs, while maternal authoritative methods help to prevent substance usage. The link between parenting practices and substance abuse has been discovered as a means of preventing substance usage and fostering stronger family ties. Laible & Carlo (2004).

Teenage drug use is three times more likely when moms have authoritarian, indulgent, or negligent parenting styles, which emphasizes the value of the relationships formed with mothers. Fathers' responsibilities don't seem to be as important. Mothers frequently offer their children psychological and emotional support, Bhushan (1994). According to the adolescents' perceptions, the mother's demandingness and responsiveness dimensions had higher mean values than those discovered for the paternal aspects. Another study by Garcia

(2009) found that mothers are more demanding than fathers, who are seen as being less sensitive and less involved in family interactions, despite the fact that mothers are more affectionate and convey a greater level of support and interest in their activities.

Adolescents who believed both parents had non-authoritative parenting methods have a higher likelihood of using any drug, according to a study by Benchaya et al. (2011). Teenagers were more likely to use cigarettes when they believed their mothers to be permissive, indulgent, or dictatorial, and this risk increased when they believed their parents to be non-authoritative. According to Benchaya et al. (2011) adolescents who felt their parents were uncaring, indulgent, or dictatorial had a 3.9 times higher likelihood of using cocaine. Substance addiction is significantly correlated with non-authoritative parenting approaches in parents.

2.4.2. Parental supervision

Parental supervision is a protective feature for children. Studies by Stattin & Burk (2010), have revealed that youngsters who are continually watched by their parents indulge less in crime and are not as likely to abuse drugs. According to Arria et al., (2008), there are several techniques to assess supervision. One of them is parental know-how, which is the level to which parents know what their kids are doing during their leisure time. Kerr & Stattin, (2010). Parental know-how depends on numerous elements such as the age and sex of the children. As children develop, they have more freedom and parents begin to have less awareness about their whereabouts and activities Gryczkowski, Jordan, & Mercer, (2010). Parental understanding is an effective element of safeguarding children from substance use Piko & Kovács (2010). Knowledge on its own is not a totally protective factor but parents must purposely and purposefully employ the knowledge to protect their

children, Stattin et al. (2010). Parents must employ effective knowledge since it is related to decreased substance use, including family aspects (parent–child interactions that are caring, intimate, and communicative) that foster parental knowledge, favor the efficacy of knowledge. *Fam Stud* (2013).

Studies by Dishion et al., (2002), established that parental supervision or monitoring of children (i.e., knowing where children are and what they are doing) can prevent or postpone initiation of juvenile drug use. Delay in onset may lower likelihood of more serious participation, substantial connections have been observed between early initiation and later problems misuse of alcohol and other drugs. This highlights the need for interventions which are successful in preventing early beginning. The influence of parental supervision may be direct, in that it keeps children away from drugs, or indirect in that it lowers a child's interaction with drug-taking classmates. A lack of parental surveillance may allow the process of substance use to begin, and contact with peers may encourage the behavior, Steinberg (1994). The combined variables of low-level parental surveillance and substance using friends is likely to exacerbate susceptibility in pre-teen children. Miller & Plant (2010), validated with three-year longitudinal research of 926 children, commencing at age 8 – 10 years, finding that higher levels of monitoring were associated with a two-year delay in onset of drug usage. It was estimated that nearly to 20 percent of the occurrence of marijuana, cocaine, and inhalant use could be hindered if the lowest quartile of parental supervision increased to that of the second quartile, and a 56 percent decrease could be accomplished with an increase to the highest quartile level of monitoring. Higher levels of monitoring were demonstrated to protect youngsters against misuse even when exposed to classmates who used a variety of substances.

Low or no parental monitoring offers leeway for youngsters to get away with any form of behavior including substance misuse.

2.5 Parental influence of children within the family environment

According to Russell & Russell (1989), various variables within the family communication environments determine and influence the children's social outcome. Communication is dependent on the type of family, where members may manifest such behavior of either warmth or coercion through non-verbal communication of hugging or slapping, verbal communication of compliments or verbal abuse.

Family communication environments have been associated with different child social outcomes such as peer rejection that is characterized by aggressive or disruptive behavior. To counter this the child may give in to peer pressure and engage in substance abuse behavior. Stressberg et al., (1992).

Parenting styles derived from either parental control or parental warmth is likely to influence a greater impact of the child's behavior once out of the family environment. Research has shown that authoritative parenting style has several behavioral benefits on children including positive peer relations, risk avoidance and academic success, Driscall et al., (2008).

2.6 Substance Abuse overview

2.6.1. Globally

Around the world, it is estimated that in 2012, 243 million people (between 162 million and 324 million), or 5.2% (between 3.5% and 7.0%) of the population aged 15 to 64, used an illicit substance. World Drug Report (2014).

The most serious harm that drug use can bring about is death, according to United Nations Office on Drugs and Crime (UNODC) 2014 data. According to UNODC estimates, drug-related deaths ranged from 95,000 to 226,000 in 2012, with a mortality rate of 40.0 (range: 20.8-49.3) deaths per million people aged 15 to 64. 4. World Drug Report (2014).

2.6.2. Status of substance abuse situation in Kenya.

Rapid assessments of substance misuse revealed that it was a bigger social issue in Kenya, according to NACADA (2007). The study supported the complex cause and effect link between drug and substance misuse in Kenya. Nearly half of the children contacted for the survey had never heard of drugs being used at home NACADA (2007).

2.6.2.1. Influence of social environment in substance abuse:

Approximately 10% of children who have ever used alcohol had family members or close friends who also use alcohol, compared to only 5% of those whose family does not use drugs or alcohol. This finding highlights the important role that the social environment plays in substance usage. NACADA (2007).

2.6.2.2. Health challenges as a result of substance abuse:

Thirteen percent of those who admitted to using alcohol or drugs in the previous year and were interviewed between the ages of 15 and 65 reported having intercourse with someone other than their usual partner while under the influence of alcohol or drugs. In total, 632 children were studied, and 6 percent of them had ever engaged in casual sex (7.3 percent for boys and 4.4 percent for girls). The average age for first sexual encounter was thought to be 11 years old. An analysis of the first sexual encounter revealed that 30% of people engaged in sex either voluntarily or uninformed of their behavior. Additionally, roughly 20% of those who engaged in sexual activity reported receiving incentives, and another 8% admitted to using drugs before their initial sexual encounter. While 5.1% of people had their partner use drugs, NACADA (2007, 2012).

2.6.2.3. Consequences of drug misuse

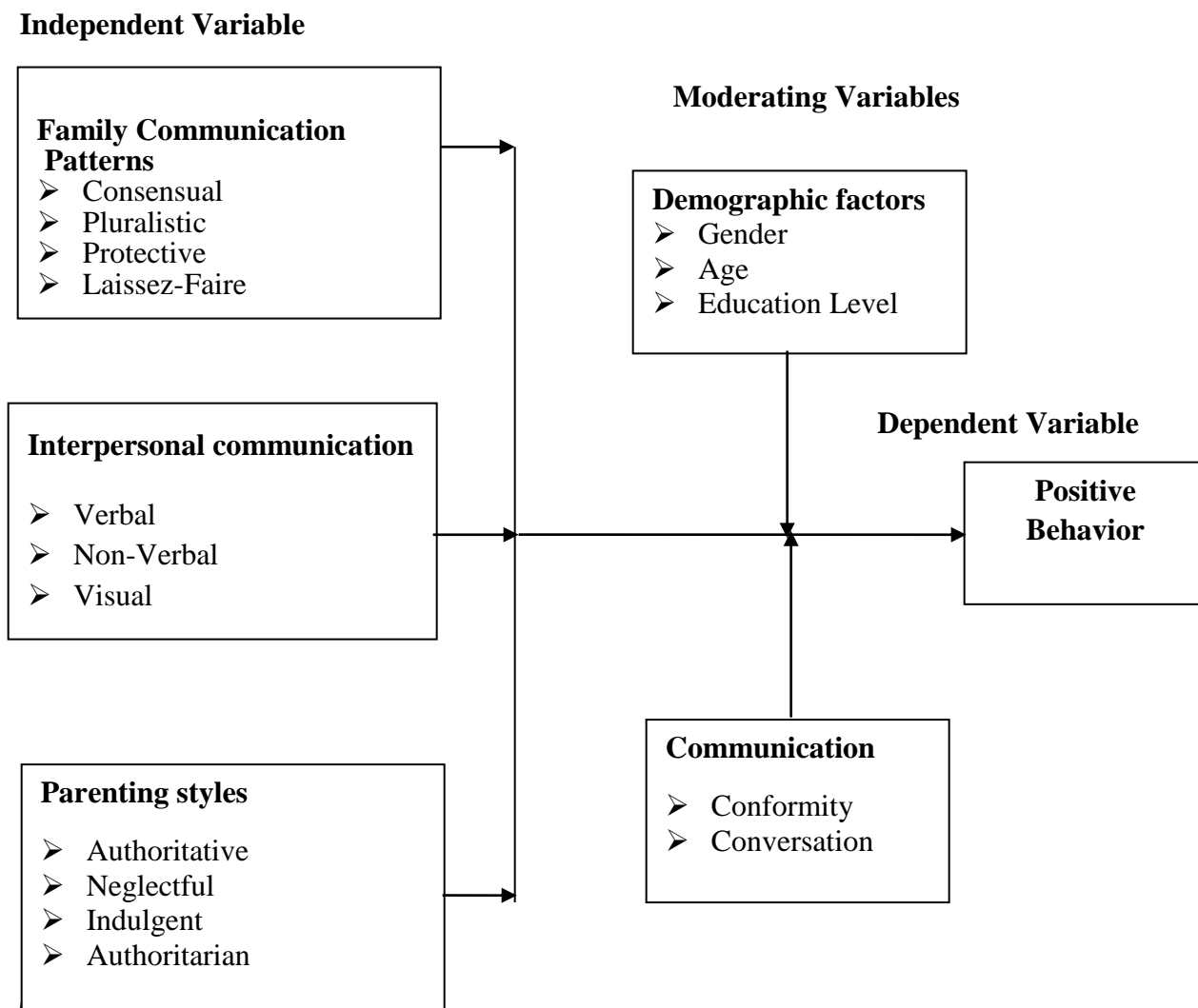
Abuse-related substance consumption has a number of detrimental impacts. To perpetuate the addiction, many have first sold their possessions and wasted their income. These people are now poor and homeless due to their lack of hope. (i) Promiscuity, which spreads HIV/AIDS, and (ii) children from such homes dropping out of school owing to parental neglect and poverty are further repercussions that have been reported. (iii) Children's lack of suitable direction contributes to juvenile crime in neighborhoods and kids loitering on the streets due to poor parenting and care. (iv) elevated prostitution and promiscuity. NACADA (2007, 2012).

2.7 Conceptual framework

Conceptual framework is a diagrammatic illustration showing the relationship between independent variables, moderating variables and dependent variables. The figure 2.2.

Below show how variables in this study will interrelate with each other

Figure 2.2.: Conceptual Framework



Source: Researcher (2020)

From the figure above, it is conceptualized that positive behavior of the children once out of the family environment of not abusing substances is the dependent variable that is influenced by family communication patterns, interpersonal communication and parenting styles which are the independent variables.

In this study family communication patterns are about the type of family and how the parents encourage communication with their children such as, Consensual, protective, Pluralistic and Laissez-faire; Interpersonal communication will entail the how communication is done between the parents and children it could either be verbal non-verbal or visual communication, and Parenting styles which includes authoritative, neglectful, indulgent and authoritarian.

Moderating variables in this study which influence family communication, parenting styles and interpersonal communication between parents and children were demographic factors such as: gender, age and level of education, and Communication levels including conformity and conversation.

2.8 Rationale of the study based on the literature reviewed

While these existing views in the literature appear useful and provide robust underpinnings of interpersonal communication exploring the subject in the family context on socialization of children during the formative age, they still warrant detailed research since there appears to need to explore further on the influence of parent-child communication for future behavior. there appears to be research gap identified in the review of the parents understanding of the importance of communication within the family for influence of positive future behavior not to abuse substance which is currently considered to be a social

problem, they still warrant detailed research attention since there appears to be sparse research on this issue of parent-child communication for early prevention of substance abuse.

Family communication patterns are “central beliefs” which determines family communication. Koerner & Fitzpatrick, (2002). It consists of two dimensions: conversation and conformity orientation. Socialization of preteens within the family environment influences their psychological development which in the long run determines how they make decisions and behave at adolescent stage. Intentional and deliberate continuous communication about drugs leads to positive behavior of not engaging in substance abuse. Several past studies, Hawkins et al, (1995), Feinberg et al, 2008, Kramer & Conger, (2009) covered areas such as, drug abuse among adolescents, role of parent in substance abuse among their children, prevention of alcohol abuse among the youth, Effects of Age of Alcohol Use Initiation and Psychosocial Risk Factors on Subsequent Alcohol Misuse. Therefore, the question of what are the current family communication patterns used by the parents in the family context to help mold and uphold positive behavior of the preteen not to abuse substances when outside the family of origin. Interpersonal communication among family members has the potential to enrich and positively influence future behavior if closely explored. However, literature review identified several gaps. Family relations within family communication patterns (FCP) that are either high or low in conformity and conversation orientations creates gaps and challenges for their pre-teens when they reach the adolescent stage and are away from their family of origin, such as,

- Not able to make decisions due to lack of training on the same at the family level as it is in Laissez-faire family type
- Poor social interactions for those from pluralistic types of family.
- Easily influenced by peers or any social group due to the training of total submissiveness and obedience to parent(s) without question as it is in protective families.

This leaves the research gap that few studies have been carried out regarding the perception of parent-child communication effectiveness for socialization with the intention to help reduce the number of youths abusing substances in future. This study therefore seeks to find the appropriate family communication patterns that parents need to adopt in communication with their preteen children, with the view of early childhood prevention of substance abuse.

2.9 Conclusion

This chapter I have has discussed literature review. It gives account of what other researchers came up with. I focused on the theoretical framework: Family Communication Patterns Theory due to its ability to explain the influence of communication within the family and Goals-Plans-Action Theory which looks into the messages intended to influence others.

Further, in this chapter I reviewed related literature such as, Interpersonal communication, Family Communication Patterns and Family Communication including Parenting styles and parental supervision. It included the overview substance abuse globally and in Kenya.

The chapter gave an insight understanding of parental - child communication and also identified the research gap and rationale for the study.

CHAPTER THREE

RESEARCH METHODOLOGY

3:0 Introduction

This chapter starts with a description of the research topic, then moves on to a discussion of the philosophical paradigm that served as the study's framework and the chosen research methodology. Target population, sampling methods, data generation techniques and data analysis I employed including key ethical considerations, reliability and validity of the tools.

3.1 Study area

Empirical data shows 35% of adolescents abusing substances are from Nairobi County, NACADA (2012). According to the research done by Korir et al., (2015), from KEMRI, Nairobi is a cosmopolitan and multicultural city where most parents are known to have busy schedules of work and businesses leaving their young children to learn many things on their own or either through peers, mass media and other factors within the family environment. Report NACADA. (2017), alcohol and drugs are more easily accessible in the middle-class residential areas more than slums. Mugoya phase 3 gated community in South C being a middle-class residential area was purposely selected for the study. 65 households, out of which 35 families have preteen(s).

3:2 Research philosophical paradigm

Antwi, S. K., & Hamza, K. (2015) states that, Research paradigm is a conceptual framework that provides an in-depth guideline to conduct research. According to Creswell

(2009), philosophical concepts impact the conduct of research and it is essential to identify the philosophical paradigm that will guide the study. There are four different world views as identified by Creswell (2003), they include, positivism, constructivism, participatory and pragmatism. This research adopted the pragmatism research paradigm which is associated with mixed methods approach.

3.2.1. Pragmatism

Creswell (2003) asserts that pragmatism is a worldview that develops from situations, actions, and results as opposed to incidental actions. It is more focused on practical applications and issues with solutions. The pragmatic research paradigm focuses on finding practical solutions in the "real world". The pragmatism paradigm is a philosophical construction for mixed research method studies, according to Tashakkori & Teddlie (2010). It focuses on the research question in social science research and then employs a variety of methods to learn more about the issue.

3.3 Research approach

The study employed a mixed research strategy. In order to answer their research questions, Creswell (2010) defines mixed method research as a technique to study that involves gathering, analyzing, and combining both quantitative and qualitative data into a single study.

The timing of the data collection (concurrent or sequential) and the emphasis (equal or unequal) for each database are also integrated into a unique mixed method design. Teddlie and Tashakkori (2010).

According to Creswell & Plano Clark (2011), mixed techniques are preferred because they have the advantage of combining quantitative and qualitative research and minimizing their respective weaknesses. Additionally, it is a helpful technique that provides a more thorough grasp of study difficulties or topics like the following: contrasting opposing viewpoints derived from quantitative and qualitative data, and translating quantitative findings into qualitative follow-up data collecting and analysis. Teddlie and Takakkori (2009).

This study focused on the family communication patterns utilized consciously and purposefully by parents to their pre-teen children for early intervention and substance misuse prevention.

3.4 Research Design

A two-part project involving the collection of quantitative data in the first phase, analysis of the findings, and identification of findings to build on in the second, qualitative phase is known as an explanatory sequential mixed design. Creswell et al. (2007). The primary goal of adopting the sequential explanatory research approach, according to Creswell (2003), was to have qualitative findings help in explaining and evaluating the results of a quantitative investigation. Data was gathered in stages, with quantitative data being collected and analyzed first. The quantitative findings then led to the development of qualitative questions, and it was established how many people would be involved in the qualitative phase's second and final stage. The results of the quantitative phase influenced the creation of the questions and the number of participants purposely sampled for the focus group discussions in the qualitative phase, which links the data from the two types of analysis. This was in reference to communication frequency, communication openness,

knowledge, and the effects of substance addiction. The ultimate goal of this strategy was to use the qualitative data to further explain the preliminary quantitative findings.

Sequential timing was employed in this design. Quantitative data was collected and analyzed in the first phase, while qualitative data was collected and analyzed in the second phase. The weighting was primarily quantitative (QUANT-qual). The connection between the data analysis of the first phase of the research (QUANT) and the data collecting of the second phase was made using a combination of quantitative and qualitative methodologies (qual). Creswell & Clark (2007). The two-phase structure, strong quantitative orientation, and connection to emergent techniques, where the second phase can be built in response to the results of the first phase, are all benefits of employing explanatory sequential design. Creswell & Clark (2011) as a result, the study included techniques including giving parents questionnaires and having focus groups with preteens.

I adopted the sequential explanatory approach of the mixed research method. The first phase of quantitative data collected concentrated on a broad overview of current, intentional, and aware family communication patterns among the parents and guardians with preteens currently, the respondents of the quantitative phase were the key informants of this study. The second phase of qualitative, data collected focused on gathering more information about family communication, such as how children perceive communication with their parents, understanding, experiences, and impact on their behavior and decisions about substance usage among the preteens. This was a follow-up further explanation from the quantitative results. This strategy was crucial in this study since it added information and insight that would have likely not have been available if only one method had been used. The goal of this study was to identify and clarify the efficient family communication

patterns that parents purposefully employ with their preteen children in order to deter substance usage in the future.

3.5 Target population, sampling techniques and sample procedure

3.5.1. Target population

The overall group in which the researcher is interested is referred to as the target population. The target population, according to Creswell (2013), is a group of people with a common attribute that the researcher can locate and examine. Through sampling, a representative group of respondents is chosen from the target population. Therefore, the 35 families in Mugoya phase 3 in south C estate, Nairobi County, were the target population for this study, as well as all the parents of the households with preteens and preteens themselves. For the first quantitative phase of the study, 83 parents, and for the second qualitative phase, 35 preteens, the target populations were.

3.5.2. Sampling Techniques

Mugenda and Mugenda (2003), defined a sample as a representative of the population since in most research it would be infeasible to carry out a comprehensive study based on the population due to the bulk data involved and the size of the population. The purpose of sample size is to focus on several participants in the research study area within a large population. A sample is the specific group that you will collect data from. The size of the sample is always less than the total size of the population. According to Creswell (2013) sample size helps one to understand the selection of participants in the research study area within a large group.

Simple random sampling and purposeful sampling were the sample methods employed in this study. Sampling is the process of choosing groups of individuals or organizations from a population of interest, according to Trochim (2006), the results are then extrapolated back to the population from which the sample was drawn. To create a sample to answer research questions is the goal of sampling. The strength of the inferences that are drawn from a mixed methods research study is what determines if it yields meaningful conclusions. This highlights the significance of sampling in this mixed method research study since it solely depends on the quality of the underlying sampling design. Onwuegbuzie & Collins (2017).

The researcher used sampling techniques which involved the selection of respondents for the study and used both Simple random sampling which increased external validity in QUANTITATIVE and purposive sampling in qualitative increasing transferability and answered the research questions. Teddlie & Yu (2007). Within the target area of the study, South C residential estate's Mugoya phase 3 gated community, parents, guardians, and preteens who lived there served as the study's unit of analysis.

3.5.2.1 Simple Random Sampling

The basic sampling technique is simple random sampling, in which the researcher chooses a sample from the target population for the study. Every person is randomly selected, and every member of the population has an equal chance of being represented in the sample.

The study adopted Simple random sampling to obtain responses through the questionnaire of the 62 participants sampled in the first phase of Quantitative data collection.

3.5.2.2 Purposive Sampling

In purposive sampling the researcher targeted respondents believed (from the researcher's judgment) to have key information the study wants or seems to be reliable for the study

The study utilized the purposive sampling method in the second qualitative to select key informants whom the researcher believed to be resourceful to the achievement of the study objectives.

This method was employed in the identification of preteens within the community who were willing to engage the researcher. 19 respondents were sampled and written consent was obtained from their parents/guardians and later on the researcher held two focus group discussions with 9 and 10 participants respectively for 35 minutes each in the open field within the community.

Table 3.1: Sample Size at Mugoya Phase 3 gated community

Households	Households with preteens	Parents/Guardians	Preteens	Percentage	Sample size
65	35	83	35	95.6%	81

Source: Researcher (2020)

In this study, 62 participants (Parents or guardians of preteens) were sampled in the first phase of the quantitative. They answered the closed-ended questions of the questionnaire, the respondents in this phase were the key informants of the study. While 19 preteens were purposively sampled for the qualitative phase and engaged in focus group discussions. All the participants provided sufficient information related to the study.

3.6. Data generation techniques

Data collection is the process of gathering and analyzing information on specific variables in a predetermined, systematic way. This helps the researcher address pertinent questions and assess the results. The two Mugenda and Mugenda, (2003). Sequential data collection methodologies ensure that the data obtained in one phase contribute to the data collected in the following by gathering data in an iterative process. Creswell & Clark 2007:121). The regions to be explained in the second qualitative phase of this sequential approach are determined by the quantitative data that was collected and processed first. Through surveys given to the sampled participants, the researcher gathered QUANT survey data in the initial stage. A focus group discussion with preteens who had been purposefully chosen as a sample for the QUANT phase analysis was held during the second qualitative phase.

Data was gathered through a questionnaire and conversations in focus groups. The goals of the study served as a guide for choosing these instruments. These various methods of information collection complemented one another, increasing the reliability and validity of the data.

3.6.1. Questionnaires for QUANTITATIVE data

The quantitative data was obtained through a closed-ended questionnaire. The researcher developed her own questions. The questionnaire consisted of two section as follows: Section A: Demographic Information; Section B: Communication information comprising of six questions as follows; Extent of parent – child communication influence, Family conversation and conformity, Challenges facing parents in communication with the children, parental belief and knowledge on their influence to the children, levels of

communication in the family and emphasis family communication has placed on each component towards preteen behavior at adolescent stage. Each question contained sub questions items which were Likert type such as: 1-Strongly agree, 2-Agree, 3- Neutral, 4-Disagree, 5-Strongly disagree and 1-Very large extent, 2- Large extent, 3- Moderate, 4- Lesser extent, 5- No extent.

3.6.2. Focus Group Discussion qualitative data

A Focus Group Discussion (FGD) is a data collection technique in qualitative research, which involves group discussion guided by the researcher around a specific common issue or experience among the participants. Kitzinger (2013). Participants of FCG are recruited on the basis of similar demographics, for the purposes of this study, participants are pre-teens aged between 9-12 within Mugoya Phase 3 gated community in South C. Greenbaum & Thomas (2000). I confirmed the age of the preteens through the consent form that was signed by the parents or guardian of each participant, Appendix III.

The researcher used focus group discussion to collect the qualitative data for the second phase of the study. This enabled a deeper understanding of the research objectives. The researcher was the facilitator with the preteens purposely selected from the target population and took notes during the discussions. Two focus group discussions were held separately for 35 minutes in the open field within Mugoya phase 3 gated community. The first group comprised 9 preteens (6 girls and 3 boys) and the second group had 10 preteens (3 boys and 7 girls). The researcher ensured that the consent forms for focus group participants were completed and approved from parents or guardians in advance.

Focus Group Discussion was used so as to give deeper insight on the findings of the QUANT analysis. FGDs was a predetermined semi-structured interview that was led by the

researcher. The researcher used three different types of questions; Probe questions, Follow-up questions and exit questions. These questions elicited responses and generated discussions among the participants.

3.7 Pilot study

The quality of study under research to a large extent is dependent on the data collection procedures accuracy, Kothari (2012). A pilot study also known as pre-testing done in readiness to the main study runs tests on various research instruments, and it has the benefit of giving advance warning of challenges likely to be encountered in the main study. Van Teijlingen (2002). Therefore, a pilot test is a trial done on a small-scale version before the main study, this is done on a limited number of subjects for the same intended population for the main study. This test study is done to investigate the feasibility of the proposed study and to detect any possible shortcomings in the data collecting instruments, such as length of the questionnaire, inadequate time limits and ambiguous wording or instructions.

According to Mugenda & Mugenda, (2003), pilot tests must meet the tests of reliability, validity and practicality. Reliability is a measure of the degree to which a research instrument provides consistent results.

Reliability in research is influenced by random error, as random error increases it causes reliability to increase. Errors in research are likely to arise from ambiguous questions or instructions to the subject, interviewer's bias, interviewee or interviewer's fatigue, inaccurate coding, Grove et al. (2009). At the time of data collection three types of errors are likely to occur, these are, error due to the inaccuracy of the instrument; due to the inaccuracy of scoring by the researcher and unexplained error. When all the three types of

errors combine, they produce inconsistencies in the measurement, which ultimately affect the reliability of the data collected. Mugenda & Mugenda (2003).

The researcher, therefore, conducted a pilot study in a five-star gated community within South C estate, Nairobi, County. The sample size for the pilot study was 15 parents and guardians of preteens, and they were not included in the final respondents for the study. Few problems were encountered during the data collection. The respondents were invited to give suggestions and comments. The entire process of pilot study helped in developing insightful modification of the questionnaire by incorporating some of the observations and suggestions. It also helped improve the pattern and quality of the questionnaire which ensured smooth data collection in the main study.

3.8. Reliability and validity of research instruments

According to Kothari (2004), validity is the degree to which results from the analysis of the data genuinely reflect the phenomenon being studied, while reliability is the measure of how well a research instrument produces consistent results after multiple trials. Validity and reliability aim to assess the suitability and accuracy of the research tools.

3.8.1 Reliability of the Instruments

Test-retest reliability was carried out in one week. The pilot study was carried out within the target population. Ten parents participated and they were excluded from the actual data. Data acquired from the pre-test was used to review the instruments based on the spelling errors, clarity or structure. The researcher was able to familiarize with the research situation through the piloting.

3.8.2. Validity of research instruments

Validity determines whether or not the data instrument measures what it is supposed to measure, according to Creswell (2009). The establishment of questionnaires addressing research aims and providing insights into research topics improved the validity of the research instruments. Through conversation with the research supervisors, who help determine if the instruments are appropriate for gathering the needed data, the validity of the research instruments is also established. Before the questionnaires were finally distributed to the study participants, their feedback was integrated.

3.9 Data analysis

According to Kritzer (1996), Data is the information that was collected in a systematic way in response to some queries that the researcher intended to answer. Data analysis is a process of conveying order, structure and significance to the mass of the collected data, this is as described by Marshall and Rossman (2006). Data analysis refers to a technique used to make inferences from data collected by means of a systematic and objective identification of specific characteristics. Bryman and Bell (2003). Ader, (2008), posits that Data analysis is the process that follows data collection, it involves inspecting, cleaning, coding and transforming the raw data from the field with the intention of interpreting and suggesting conclusion while supporting the decision making. In this study, data was organized, analyzed, presented and interpreted using descriptive statistical techniques.

Yin (2003). Defines data analyses as a process that involves looking into collected data in its raw form, clustering them into categories and placing together emerging issues into themes in an attempt to answer the research questions.

3.9.1 Quantitative data analysis

Through the use of a closed-ended structured questionnaire, quantitative data was gathered. According to the questionnaire's many sections and subsections, the data was evaluated and presented. Each data presentation included a summary of the specific grouping along with a representation of numerical scores and percentages in relation to related categories. Second, the researcher was able to provide an analytical description and interpretation of the data of descriptive statistical processes through the use of tables, charts, and graphics in numbers and percentages, Bryman & Cramer (2009).

Using an excel data analysis tool, quantitative data from the survey was examined to produce descriptive statistics of frequencies and percentages. Data were shown using tables, charts, and graphs.

3.9.2 Qualitative data analysis

Braun and Clarke (2006) define thematic analysis as a method for identifying, analyzing and reporting themes within data. Qualitative data was collected in a narrative form with the researcher guiding the focus group discussion. Two FGD were held 35 minutes each same day but at different times in the open area within the Mugoya phase 3 community comprising 9 and 10 participants respectively. Hermeneutic method of qualitative data analysis was used, it helped identify meanings, patterns and themes. This is an iterative process between data collection and analysis. Delwyn et al., (2010). According to Seidman (2005), Michael Patton (2014), thematic analysis is associated with hermeneutic methods.

The researcher used open coding to identify segments of meaning in the data collected through focus group discussions, and labeled the segments with a code. Linneberg & Korsgaard (2019). This is the inductive approach that worked systematically and helped the researcher to observe transparency while offering credible interpretations of the empirical data. Gioia, Corley, and Hamilton, (2013).

The first cycle of coding used participants centric words, while the second coding cycle researcher-centric where the researcher developed concepts, themes and dimensions from the data, Gioia et al., (2013).

The second coding cycle helped the researcher identify similarities and differences hence creating code clusters in the data and from the cluster's themes were developed. The researcher was keen on the repetitive answers that formed themes of the study. The data was analyzed to attach significance to solving the problem at hand, the researcher keenly and critically looked into the results and created meaning out of it. Driscoll et al., (2007). I employed thematic data analysis to analyze the data collected through the focus group discussions, I also matched themes emerging from the data with the research objectives.

3.10 Ethical considerations

Ethical considerations have become a focal point of attention in research. Research ethics refers to the appropriateness of a researcher's behavior in relation to the rights of those who become the subjects of the research work, or are affected by it. According to Hammersley & Atkinson (2007). It is imperative for researchers to respect truth, democracy and the persons involved in the research process. This does not only guarantee respondents the

freedom to give solicited information, but also ensures the research is not deceptive and also does not infringe upon the dignity and privacy of the participants, Gay et al., (2009).

The researcher put into consideration some of research ethics, they include:

- a) **Official authority:** Permission to carry out the study was sought from the school of information sciences, authorization and research permit from National Commission for Science, Technology and Innovation (NACOSTI), and county director of education, Nairobi County was obtained. Appendix V, VI and VII
- b) **Respondents and not 'subjects':** populations who served as data sources for research were referred as 'participants' and not 'subjects' in the research.
- c) **Informed consent:** The researcher created awareness and purpose of the research and type of the data to be collected verbally to the parents and guardians, for the preteens a written consent was sought from the parents. The respondents were expected to react either positively or negatively. Those who agreed to take part in the research did so voluntarily.
- d) **The confidentiality of information:** Data collected from the research respondents was kept in confidentiality, Mugenda and Mugenda (1999).
- e) **Respondent identity protection:** identities of respondents were kept anonymous. The reasons for protection are that the information was sensitive. The researcher ensured that the instrument had no place for respondents to write their names or other personal details, and numbering of the data collected.

- f) Truthfulness with the findings: the researcher Honesty with data findings: The researcher applied honesty while collecting, analyzing and presentation of the findings. All that is written in this research is honest and truthful.

3.11 Conclusion

The study's methodology and philosophical framework were covered in this chapter. The target population of the study included the parents and guardians of preteens, and preteens. The study collected data through the questionnaires in the first quantitative phase, and conducted two focus group discussions which constituted nine and ten participants purposely selected. The study followed ethical guidelines, as specified by Moi University. I made sure that all the rules as per the thesis guidelines were followed. Plagiarism was avoided and I sought permission from NACOSTI to conduct the research. Given the sensitivity of the responses from the participants, all the information that I received during the period of this study was treated with confidence and purely for academic purposes. A detailed analysis of the research data is analyzed chronologically as per the research objectives in the next chapter.

CHAPTER FOUR

DATA ANALYSIS, PRESENTATION AND INTERPRETATION

4.0 Introduction

In this chapter, I present the findings of the study based on the following research objectives: To investigate the current Family Communication Patterns used by parents within the family environment for creation of awareness and early prevention of substance abuse among preteens in future. To assess the challenges faced by parents as they communicate with pre-teens, with the intention to influence them to embrace a drug-free lifestyle. Examine parent's understanding on the importance of communication with regard to substance abuse and its influence on the child's positive future behavior.

The findings are based on descriptive statistics of quantitative data derived from questionnaires received from 41 respondents, and thematic analysis of qualitative data derived from two focus group discussions with ten and nine participants respectively. The data analysis, presentation and interpretation of the research findings are the topics covered in this chapter.

The information gathered through surveys and focus group discussions was combined. Three sections made up the questionnaire: the first dealt with the respondents' demographic information; the second, with the respondents' factual information; and the third, with the respondents' commitment. Tables, bar charts, and pie charts were used to illustrate the findings after the data analysis tool in Excel was used to analyze them. The demographic was diversified and included pre-teens, parents and guardians of all age groups.

Table 4.1: Questionnaire Response rate

Sample size Parents/Guardians	Questionnaires given out	Questionnaires Returned	Return Rate Percentage
62	62	41	66.1%

Source: Researcher 2020

Table 4.1 shows that: a total of 62 questionnaires were given out to respondents, 41 questionnaires were returned, this constitutes 66.1%. The focus group discussion, all 19 preteens participants joined in the discussions. The participants were 12 girls and 7 boys all aged between 9 years to 12 years. The response rate was very high therefore it makes the findings of this research reliable and valid.

4.1 Demographic Information of the respondents

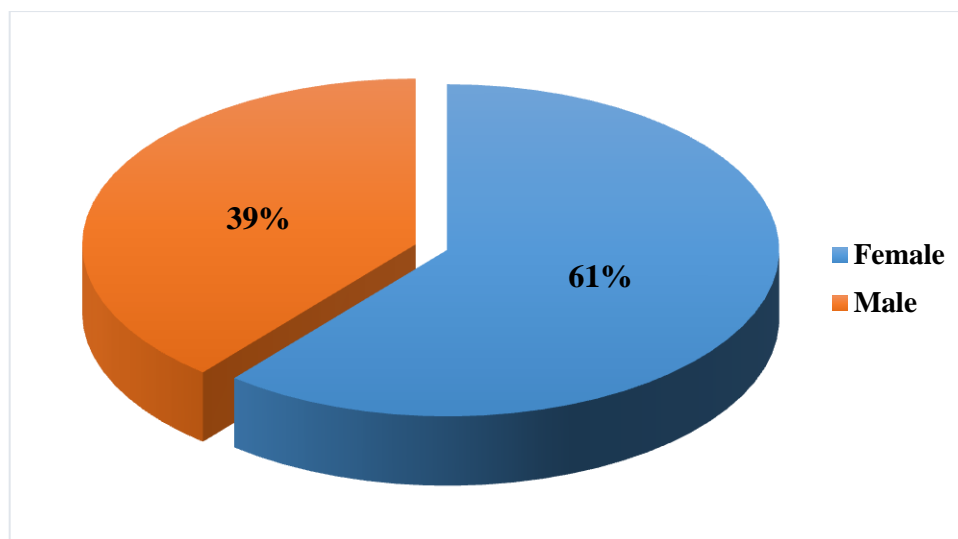
This section presents demographic information of respondents.

Table 4.2: Frequency and Percentages of Demographic information of questionnaire respondents

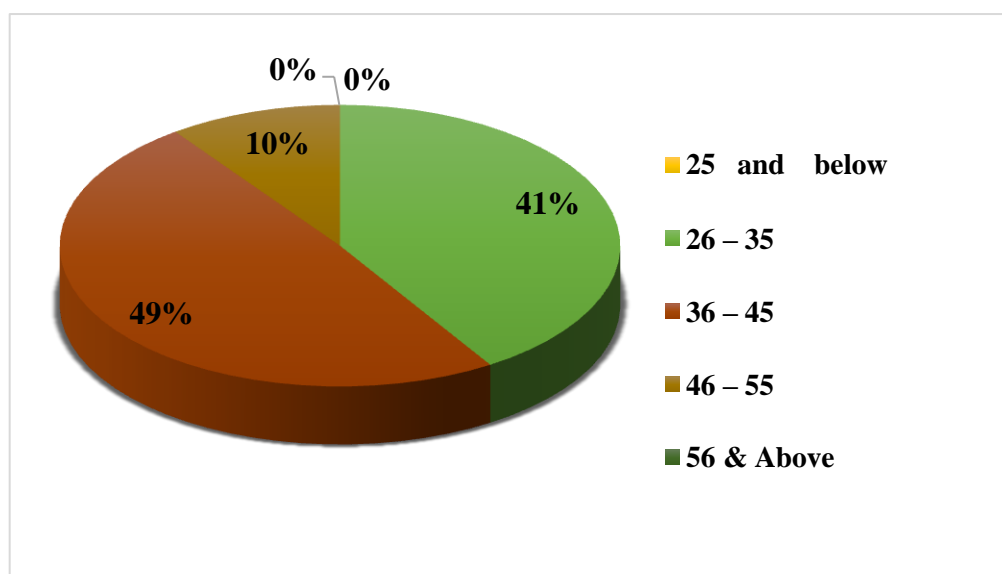
	Frequency (N=41)	Percentage
Gender		
Female	25	61
Male	16	39
Age (Years)		
25 and below	0	0
26 – 35	17	41
36 – 45	20	49
46 – 55	4	10
56 & above		0
Education Level		
Primary	0	0
Secondary	7	17
College	9	22
University	25	61

Source: Field data, 2019

Figure 4.1, 4.2, and 4.3 shows the gender, age and education level of the questionnaire respondents, while figure 4.4 shows the gender of the Focus group discussion participants. The demographic information of the respondents is important to reflect the representation of the study informants.

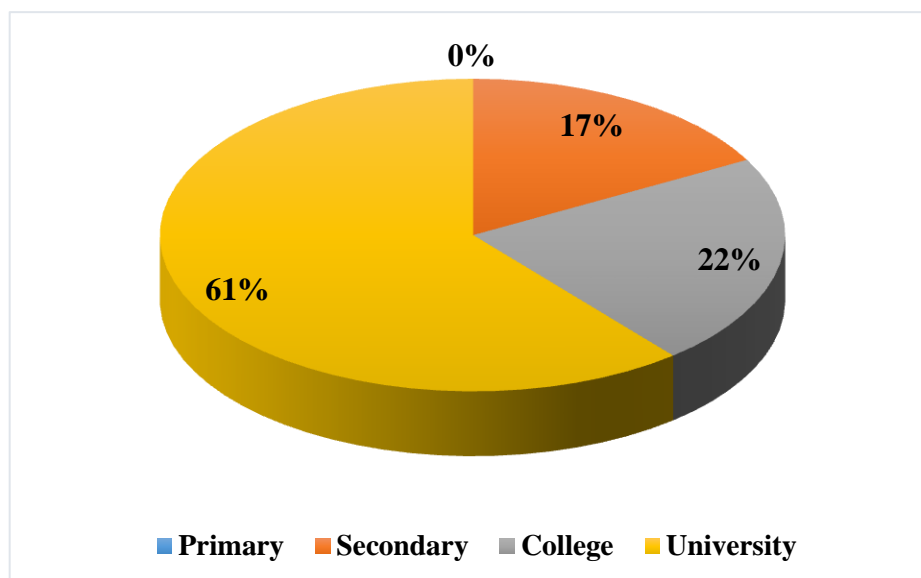
Figure 4.1: Gender of questionnaire respondents

Source: Field data, 2019

Figure 4.2: Age of the questionnaire respondents

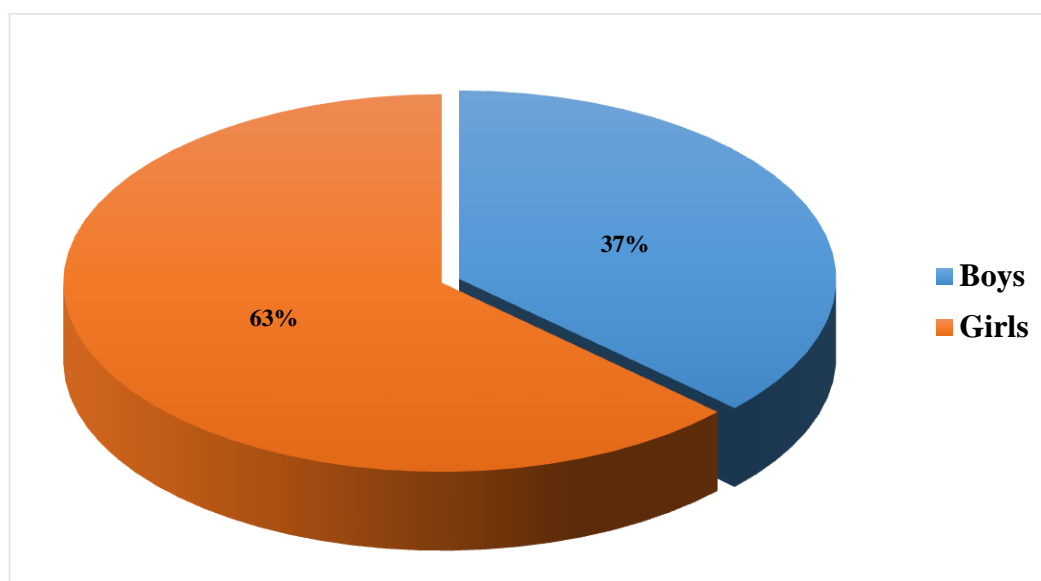
Source: Field data, 2019

Figure 4.3: Education level of the questionnaire respondents



Source: Field data, 2019

Figure 4.4: Gender of the Focus Group Discussion participants



Source: Field data, 2019

From Table 4.1, a total of 41 (60%) of parents responded to the questionnaires administered. With 25 (61%) female parents and 16 (39%) Male parents responded. On the other hand, 19 pre-teens, 7 boys and 12 girls successfully attended the focus group discussion held within the estate.

The parents provided key information to the research while the pre-teens supplied additional information to the research as they received communication from the parents most of the time. All the data collected was carried out by the researcher. The respondents were asked to share their age for purposes of the study. As shown in figure 4.1, 17 (41%) of the respondents were aged between 26-35 years, 20 (49%) were 36 – 45 years, 4 (10%) were 46 -55 years with none 25 and below and 56 and above. The research targeted parents with child (ren) at pre-teen stage. This was significant in that their opinions are practical as at the time of research.

The study also analyzed responses regarding level of education for the respondents, Majority of the respondents were university graduates representing 25 (61%), followed closely by college level 9 (22%) while secondary had 7 (17%). Preteens who participated in the focus group discussions were aged between 9 to 12 years and had a percentage rate of 63% girls and 37% boys. This distribution, represented though uneven, was key to this research as it improved the reliability of the study because all are currently parenting pre-teen(s) and communication is key.

4.2. Family Communication Patterns currently used by parents within the family environment for creation of awareness and early prevention of substance abuse among preteens in future.

Parents are currently encouraging conformity to positive attitudes while encouraging conversation, open discussions about substance abuse and deliberate exposure of pre-teens to individuals affected by substance abuse use.

4.2.1. Conformity and conversation within the family

The findings summarized in table 4.2 show the opinion of the respondents. The respondents were asked to share their opinion based on the following criteria, Strongly Agree (SA), Agree (A), Neutral (N) Disagree (D) and Strongly Disagree (SD). The study sought to find out family communication patterns in relation to conversation and conformity within the family.

Table 4.3. FCP in relation to conformity and conversation within the family

Statement	Strongly agree		Agree		Neutral		Disagree		Strongly Disagree	
	F	%	F	%	F	%	F	%	F	%
My children talk to me freely	12	29	24	58.5	5	12.5	0	0	0	0
I answer their questions honestly	11	27	18	44	8	19	4	10	0	0
I prefer my children listen to me	10	24	6	15	18	44	7	17	0	0
I do not see any importance of communication.	1	2	2	5	5	12.5	10	24	23	56.5
I seek my children's opinion / views before engaging in any issue that concerns them or family	7	17	12	29	22	54	0	0	0	0
I have discussed substance abuse with my children.	2	5	12	29	21	51.5	5	12.5	1	2
My word is final, my children do as I say.	0	0	3	7	10	24.5	23	56	5	12.5

Source: Field data, 2019

The findings of the study showed parents responded differently in relation to conversations and conformity patterns with their families. Majority 36 (87.5%) agreed or strongly agreed that their children talk to them freely with only a few 5 (12.5%) remaining neutral. It was also noted that 29 (71%) agreed or strongly agreed to answering their children's questions honestly, with a minimal number 4 (10) disagreeing.

A high of respondents 33 (80.5%) disagreed or strongly disagreed with the question, 'I do not see any importance of communication', this is a clear indication that parents do not recognize the importance of communication within the family, while 5 (12%) remained neutral and 3 (8%) agreed or strongly agreed with the question. Most of the respondents 22 (54%) were neutral when it came to seeking their children's opinion/views before engaging with issues concerning them or the family, while 19(46%) agreed or strongly agreed with the question. A good number of respondents 28 (58.5%) disagreed or strongly disagreed with the statement, 'My word is final, my children do as I say', and only 3 (7%) agreed with the statement and 10 (24.5% remained neutral. From the FGD, on the understanding of communication in the family, frequency and who initiates the communication. Preteens who participated in FGD seemed aware of what communication is and its importance within the family,

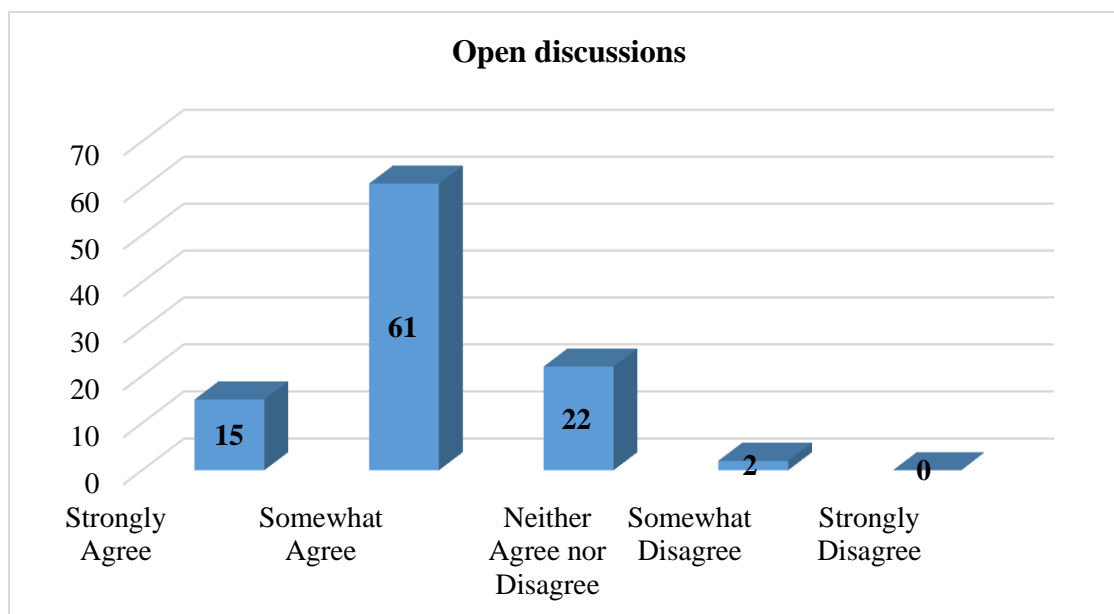
'passing information among people and that communication with our parents enables us to get corrected and make informed decisions'.

Others felt that communication creates a great understanding with their parents and are happy about it,

'the beautiful issue is parents are actually aware of our movements and interactions we have when out of the house during school holiday'. But few among them felt left out with minimal or no communication at all, 'I would love to talk to my parents but they are very busy people and takes several days before we meet or talk', while others felt suffocated with constant talking coupled with the need to monitor and control their movements and friends they keep, 'I don't appreciate close interactions with my parents because it leads to them asking questions of my movements and friends, who their parents are, where do they live and what do they do.'

4.2. 2. Open discussions

Figure 4.5: Open discussions



Source: field data 2019

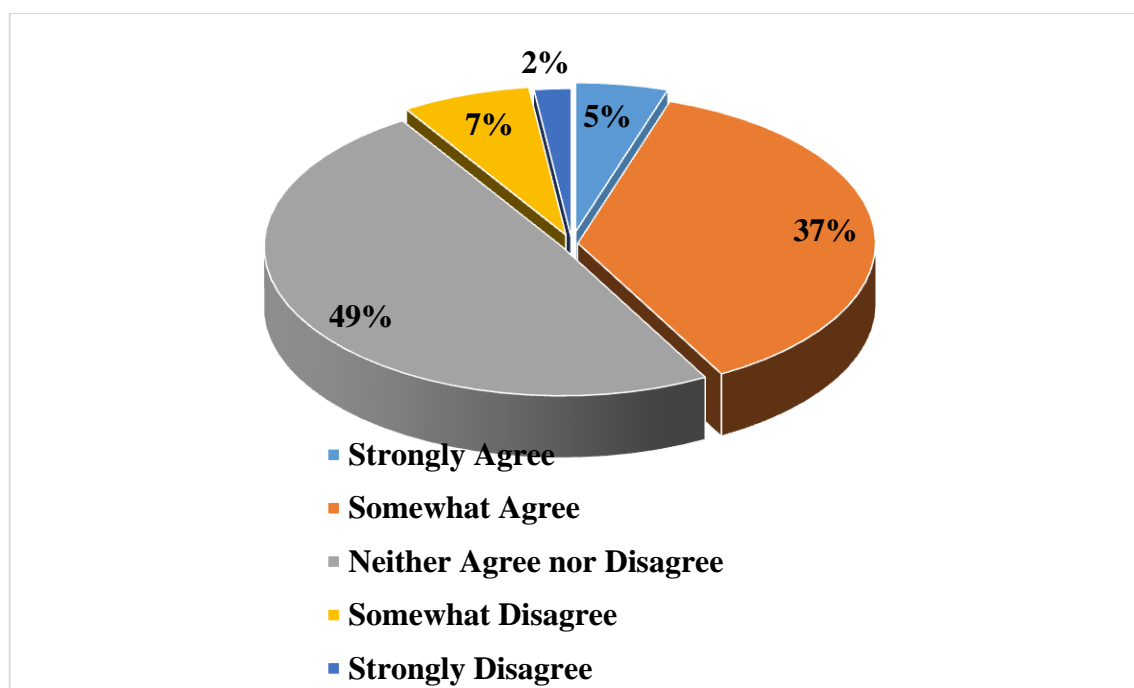
Majority of the respondents 31 (76%) strongly or somewhat agreed that they hold open discussions with their preteens, with 9 (22%) neither agreeing or disagreeing with the question and only 2% respondents somewhat disagreed that they do not hold open discussions regarding substance Abuse with their preteens. While conducting focus group discussions regarding substance Abuse with their preteens. While conducting focus group discussion, the researcher found out that preteens who have received information about substance abuse from their parents or within the family environments are very enthusiastic and hold the information in high regard,

From the FGD confirmation of participants' knowledge and understanding of substance abuse, Majority of them are aware of substance abuse, what they are and impact on someone using them.

‘Parents have taught us what substance abuse is, some of the substances that can be abused include, Khat/miraa, alcohol, marijuana and bhang among others. To those who use them they are harmful to them in that they have fights with their parents, health issues, they steal to buy them and poor performance in school. Few others expressed their views in that there is nothing wrong using them moderately, ‘chewing miraa and drinking alcohol is the in thing, so one takes them to be part of the crowd otherwise you are left out’.

4.2.3. Deliberate non – verbal exposure to real life negative of substance abuse

**Figure 4.6: Deliberate non – verbal exposure to real life negative of substance abuse
(visit to a rehabilitation center)**



Source: field data 2019

20 (49%) of the respondents neither agree nor disagree when asked if they have deliberately given their preteen non-verbal exposure to real-life exposure to the negative effects of substance abuse. 17 (42%) agreed to having exposed their preteens with the deliberate intention of them learning the negative effects substance abuse has on people. 4

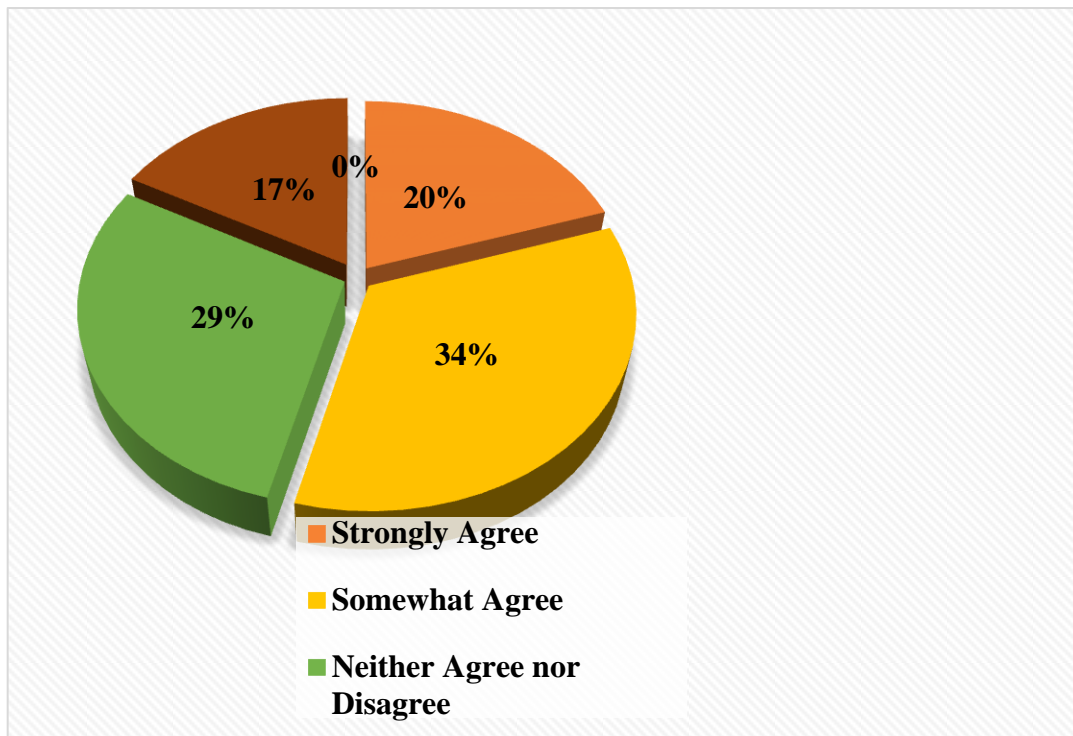
(9%) disagreed. From the preteens, the researcher sorts to know if they have seen a person who has been abusing substance, his or her admiration of the person and the preteen's perception of substance abuse. ‘

My uncle is in bad health because of consuming too much alcohol, lost his job and his children are supported by grandparents. Abusing substances is a bad thing'. Elder brother is in constant fights with my parents, performance in school is poor and we fear him, there is no admiration at all.

Others confirmed that indeed they have been taken for a visit in a rehabilitation center by their parents and had a real exposure of the negative impact of substance abuse to one's life, *'I saw two men who looked so thin and unfocused while talking to themselves'*. However, those who still felt the whole thing is exaggerated, *'bhang makes one feel high, happy and forget the life struggles, hence it's a temporary reliever to someone should be encouraged once in a while'*. The researcher also noted that teachers have played a crucial role in teaching about different types of substances abused, their negative impact on individual lives in the long run and encouraged their pupils not to consume any of them. *'Teachers have shown picture and, in some instances, brought samples to school to ensure we know how they look and smell to ensure we can identify them from other vegetables especially bhang and miraa, they have also shown us pictures of individuals currently receiving medical and psychological support to recover from the negative impact of the substances they consumed'*. One expressed dislike of alcohol due to the negative financial and domestic challenges in the family. *I hate alcohol, 'my father is always quarreling in the house when drunk and he stopped paying our school fees, and we had to be transferred to a public school to continue with our education'*.

4.2.4. Interpersonal communication within the family, from children to parents

Figure 4.7: Children’s approach to parents with questions regarding alcoholic beverages



Source: field data 2019

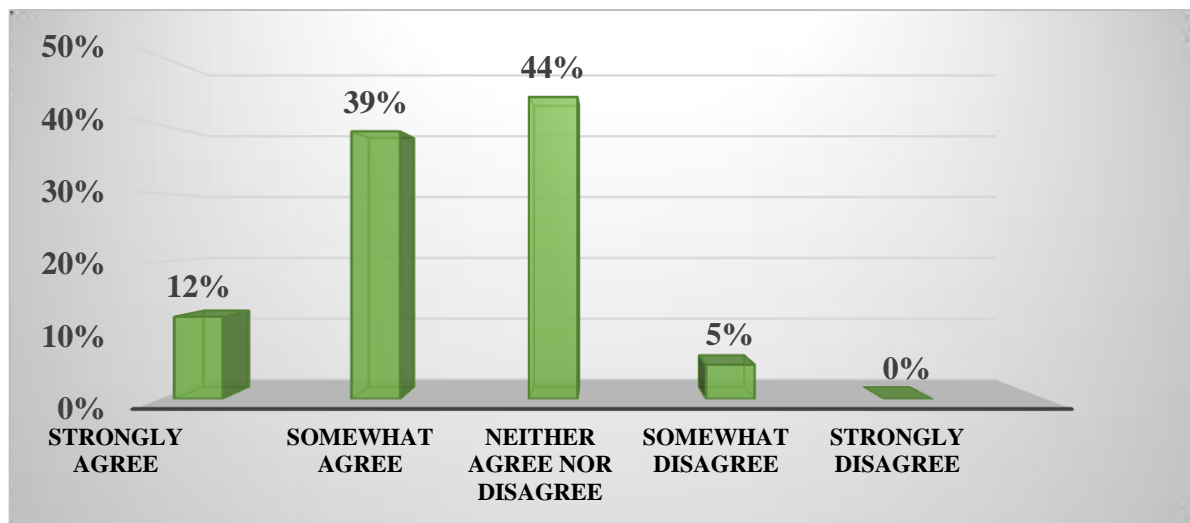
Majority of the parents 22 (54%) agreed that their children have approached them with questions regarding alcohol and beverages, 12 (29%) neither agree nor disagreed with the question with only 7 (17%) disagreeing with the question.

The researcher sought to know from the preteens their expectation when they approach their parents to communicate about drugs, ‘To confirm if what my friends said drugs are good is true, deeper understanding about drugs, need to know how drugs are available and who is at risk.

This confirmed that communication with the family is effective due to the trust children have with their parents, and or guardians.

4.2.5. Parental knowledge of children's peers with an influence on Substance abuse

Figure 4.8: Parental knowledge of children's peers with an influence on Substance abuse



Source: field data 2019

Most parents agreed 21 (51%) on their knowledge of children's peers with an influence of Substance abuse with 18 (44%) neither agreeing nor disagreeing about it, with only 2 (5%) disagreeing that they are not aware. The preteens confirmed that continuous communication with their parents helps them make decisions and behave in a way that is acceptable to their parents,

I don't just go playing with anyone I must first get my parents' consent'. During our talks my parents always encourages me to be open with them on everything without any fear, so I discuss my friends and schoolmate's behavior with them and they guide on whom to keep a distance from and those to hung out with' from our regular talks, I know what they want for me so I behave depending with that'. 'Though my parents are busy they care enough to know the things that I do and ensure I'm accountable for my actions always. We are also friends so I seek their advice before I do anything'. Through our constant talking I have learnt how to be a responsible person regardless of the situation or age'.

The responses from most of the participants shows that they enjoy communication and that parents are also willing to guide them accordingly, which in turn helps the preteens make the right decisions resulting in appropriate behavior.

But the few who felt constant communication and consultation with their parents hindered their freedom and, in some instances, admitted to lying to the parents about their whereabouts.

‘It’s so tiring talking all the time and worse is when permission is denied’. My parents don’t approve of some of my buddies, so whenever I’m with them I lie to my parents’. ‘I don’t like being monitored so I avoid too much communication with my parents unless it's necessary’.

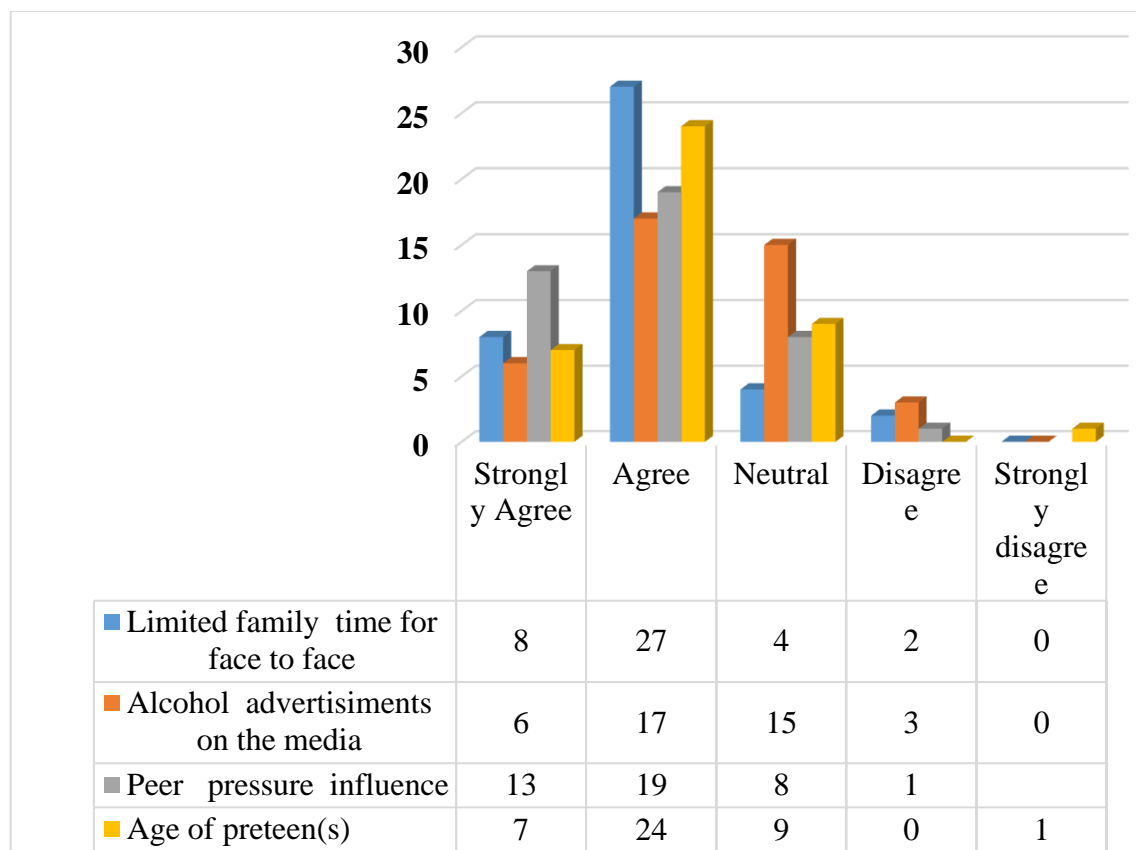
4.3. Challenges that parents are facing while communicating substance abuse to the preteen.

The findings of challenges faced by parents are explained in table 4.4 in numbers and frequencies, while figure 4.10 shows the percentages.

Table 4.4: Challenges faced by parents

	Strongly Agree		Agree		Neutral		Disagree		Strongly disagree	
	F	%	F	%	F	%	F	%	F	%
Limited family time for face to face	8	20	66		4	10	2	4	0	0
Alcohol advertisements on the media	6	15	41		15	37	3	7	0	0
Peer pressure influence	13	32	46		8	20	1	2	0	0
Age of preteen(s)	7	17	59		9	22	0	0	1	2

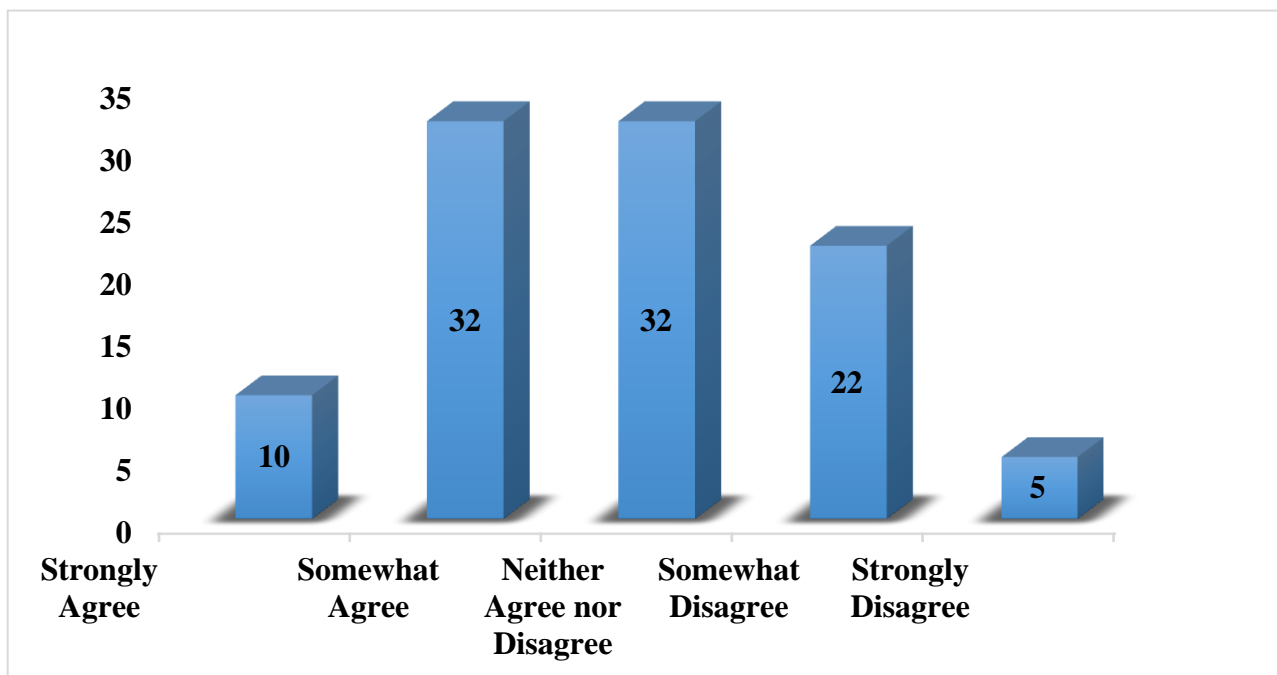
Source: field data 2019

Figure 4.9: Challenges faced by parents

Source: field data 2019

35 (86%) of the respondents agreed or strongly agreed that limited family time for face-to-face communication is one among the challenges parents are facing while communicating substance abuse to the preteen, 4 (10%) remained neutral and only 2 (4%) disagreed. 23 (56%) agreed that alcohol advertisements in the media is also a challenge, 15 (37%) remained neutral and 3 (7%) disagreed. Majority of the respondents 32 (78%) agreed that peer pressure influence is a challenge to communication with preteens about substance abuse.

Figure 4.10: Accessibility of Alcohol and drugs within the environment.



Source: field data 2019

It is clear from figure 4.10 that an equal number of respondents somewhat agreed 13 (32%) and neither agree nor disagree 13 (32%) with the extent of accessibility of alcohol and drugs within the environment in which they live. 4 (10%) of the respondents strongly agreed that there is accessibility of alcohol and drugs within the environment while 11 (27%) disagreed. From the findings, the extent of parent's awareness of availability and access of alcohol and drugs within their environment was moderate. Though the respondents are aware that the existence of alcohol and drugs within the environment is moderate, given that most parents are busy they may not fully notice it and others may not express it genuinely this remains a subject of speculation. From the FGD the researcher confirmed that some of the participants are exposed to substances such as alcohol, bhang and Miraa though they admitted that is their secret so their parents do not know about.

‘I always drink a bit of alcoholic drinks in our house, at first it was bitter but now I like it’. A classmate of mine comes to school with rolls of bhang hidden in his pants and goes to smoke in the school toilets, having taken a few puffs of the same on several occasions.

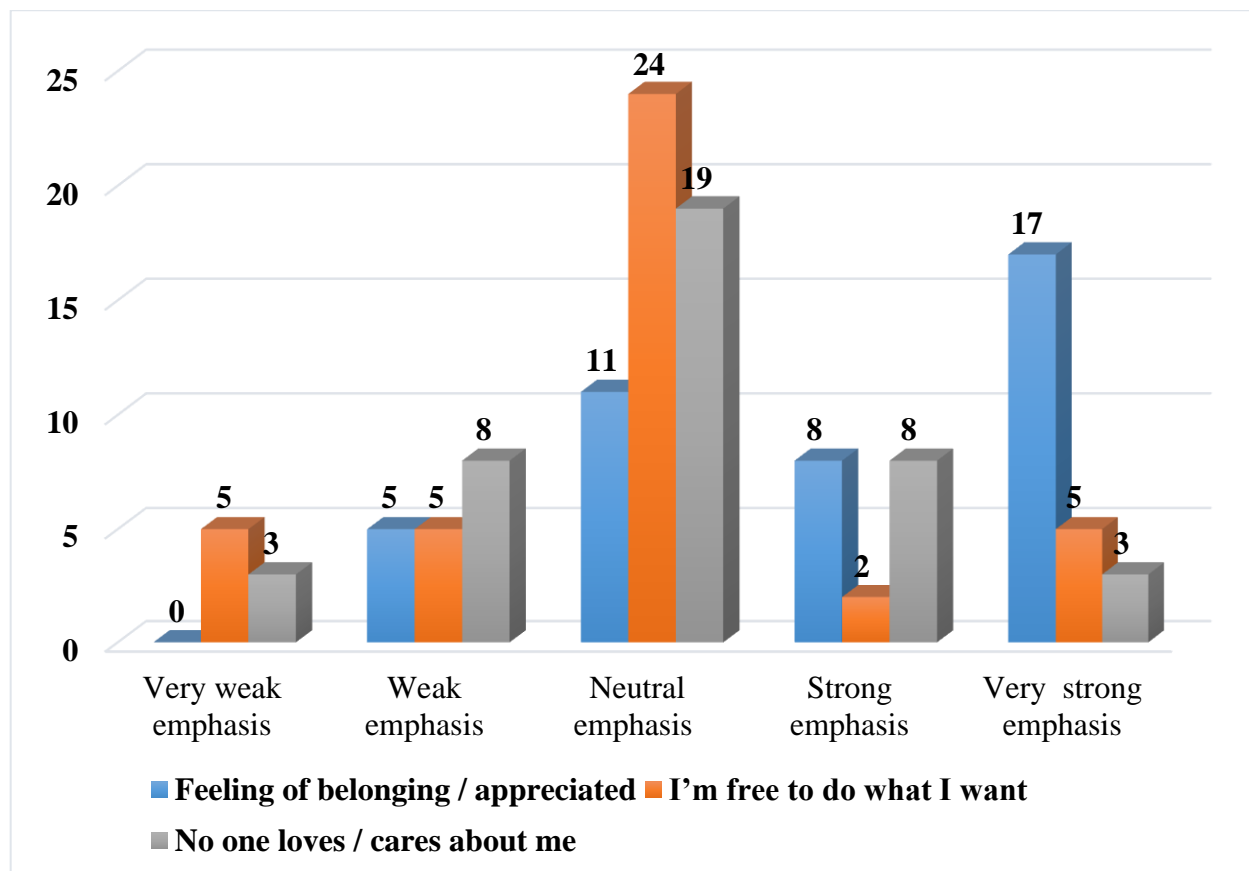
4.4. Parent’s understanding on the importance of communication in relation to substance abuse and its impact on the child’s future behavior.

Table 4.5: Parent’s understanding on the importance of communication in relation to substance abuse

	Very weak emphasis		Weak emphasis		Neutral emphasis		Strong emphasis		Very strong emphasis	
	F	%	F	%	F	%	F	%	F	%
Feeling of belonging / appreciated	0	0	5	12	11	27	8	20	17	41
No one loves / cares about me	5	12	5	12	24	59	2	5	5	12
	3	7	8	20	19	46	8	20	3	7

Source: field data 2019

Figure 4.11: Parent's understanding of communication in relation to substance abuse



Source: field data 2019

The study also analyzed responses regarding emphasis family communication has on various components of children attitude associated with behavior in relation to substance abuse. Feeling of belonging / appreciated, most respondents representing 25 (61%) felt it has either a very strong or strong emphasis, while 11 (27%) remained neutral and only 5 (12%) felt communication has a weak emphasis on the feeling of belonging. Majority of the respondents representing 24 (59%) remained neutral on the emphasis of family communication on the perception of, I'm free to do what I want while 10 (24%) felt it has a weak emphasis with only 7 (17%) believing it has a strong emphasis. 27% preferred

neutral emphasis and 5% felt it has strong emphasis. Higher number of the respondents representing 19 (46%) felt family communication has neutral emphasis in the attitude of, No one loves / cares about me while 11 (24%) felt it has a weak emphasis and 11(24%) believed it has a strong emphasis.

The researcher also noted some unique responses from some of the preteens while conducting focus group discussion, some of the respondents showed that communication with their parents greatly influences their decisions not to abuse substances.

‘Parents have greatly educated us about harmful substances and why it’s necessary to avoid use of them completely’, knowledge of what substances are has helped avoid being tricked by any of my friends, making an informed decision due the understanding of substance abuse as explained by parents’.

4.5. Importance of family communication in children’s decision-making capability

The findings of the focus group discussion showed some mixed feelings towards their respective family communication methods, approaches and responses that clearly have effects on individual reaction and behavior towards substance abuse.

Although communication is the model through which information is passed from one person to another, it was evident that most of the parents have not fully embraced family communication as a way of educating the children about substance abuse and the dangers associated with them, most of the preteens confirmed to have heard or learnt about substance abuse from teachers and peers within the community in which they live in and schools.

Most of those who had discussed substance abuse with their parents seemed enlightened in the subject and also had made up their minds not to abuse substances in future and described in detail the risks and impact of that behavior.

My mother discussed the same with me and my sister and she said use of them make one loose focus in life including getting sick, wastes money, stops schooling or one is always the last in class.

I was taken me to a place with many thin, frail and fearful people getting medical assistance because they had wasted themselves in taking drugs. They looked really bad I

I would not want to be like that. Yes, my parents love me so I cannot afford to misbehave and annoy them I always hang out with friends that my parents approve, they question about someone I stay away from him or her From our regular talks, I know what they want for me so I behave according to that.

The other view that gained outstanding support from the respondents was the importance of family communication and substance abuse. Most resolved to communicate freely with parents and ask them questions regarding substance abuse, others proposed to follow their parents' advice in relation to substance abuse and keep away from peers who are likely to lure them into it. However, the general feeling of the focus group discussion was that parents and close family members are very important in giving them information and guiding through various stages of life especially behavior when away from the protected family environments. Majority proposed to have frequent talks with parents and others said they will request to be taken to rehabilitation centers to have a real live experience of the dangers of substance abuse.

They gave their views on the consequences of substance abuse among the young people and how they think or believe parents have contributed to it

One runs away from school and is often sick or looking sickly, parents should talk to the youth and also ensure the children see a real-life person suffering from substance abuse

Physical and Mental illness and emotional torture for the family, Failure to complete school, parents have a role in educating children more about drugs.

Having listened to my neighbor here I now believe parents should endeavor to communicate with their children more about drugs and any dangers associated with it. Parents should constantly remind their children dangers of drugs this will ensure they don't end up being useless in life or become a thief to sustain the habit of substance abuse.

However, some of them felt there is no real negative impact since they see it on the mass media through marketing advertisements and also one belongs to a certain group of friends if only you participate in consuming that which is preferred amongst them.

There is no negative effect on consuming alcohol, after all the people who advertise Alcohol and Cigarettes look good to me, parents cannot do much about it. I also feel I'm a cool boy when I consume beer.

When asked if there is anything they would like to say in relation to communication with them and substance abuse, the majority agreed that communication is key in passing information within the family, and more so since parents are more like home teachers and they teach them a lot of things and issues of life. They agreed to go home and embrace more talks with their parents, and learn as much as possible about substance abuse. This will guide in making the rightful decisions in future and influence their behavior when out of home.

From now on, I will encourage and initiate communication with my parents about substances that are likely to be abused, availability and consequences of using them. Clearly, constant communication with my parents about drugs will help me make right decisions. I'm happy about it.

4.6 Conclusion.

This Chapter presented the findings based on my three research objectives, which were: To investigate the current Family Communication Patterns used by parents within the family

environment for creation of awareness and early prevention of substance abuse among preteens in future. To assess the challenges faced by parents as they communicate with preteens. with the intention to influence them to embrace a drug-free lifestyle. Examine parent's understanding on the importance of communication with regard to substance abuse and its influence on the child's positive future behavior. The findings are based on the responses from the study participants from Mugoya phase 3 gated community in South C middle-class residential area, Nairobi County. The summary of the findings, discussions, conclusions and recommendations are presented in chapter five.

CHAPTER FIVE
SUMMARY OF FINDINGS, DISCUSSION, CONCLUSIONS, CONTRIBUTION
AND RECOMMENDATIONS

5.0 Introduction

This chapter presents a summary of important issues emerging from the study in relation to the research questions and derives conclusions based on the findings from the data collected. Finally, I identified the contribution of my study to communication.

5.1 Summary of key findings

The research was seeking answers from three research questions first, it sought to find out the Family Communications patterns used by the parents within the family environment for creation of awareness and early prevention of substance abuse among preteens in future, secondly it sought to find out the challenge's parents are facing communicating to the preteens about substance abuse with the intention to influence them embrace drug-free lifestyle. Lastly, to find out the parent's understanding on the importance of communication in relation to substance abuse and its impact on the child's future behavior once out of the family environment.

5.1.1. Family Communications patterns used by the parents within the family environment for creation of awareness and early prevention of substance abuse among preteens in future

The study reviewed that parents and guardians have embraced several communication strategies for the purposes of early creation and prevention of substance abuse within the family system among the preteens, they include; open discussions between parents and their children, deliberate non-verbal communication exposures of children to the real-life negative impact of substance abuse, honest answers to children's questions, and monitoring children's movements, interactions through constant communication. Family communication patterns depend on conformity and conversation levels amongst the family members, communication in the family is either of the following: protective family, consensual family, pluralistic family or Laissez-faire family.

The study found out that most respondents value and hold open discussions with their preteens, regarding substance abuse with the intention of creating awareness. This is a clear indication that most parents value and recognize the importance of communication in developing and mentoring positive behavior for their pre-teens once out of the family environment. For the family communication patterns in relation to parenting style and parental supervision within the family contributes greatly to how the children are socialized within the family and society around.

From the study, preteens whose parents communicates frequently with them and tries to influence the friends they keep around them are happier in that they feel loved and

appreciated which in turn makes the preteens feel indebted to behave well even when away from home and raise questions and concerns with the parents when at home.

Further from the literature review, scholars concur that conversations and conformity patterns greatly affect children's behavior. Koerner & Fitzpatrick, (2002). However, this research found out that deliberate and intentional open communication between parents and children not only influences their behavior but also gives the children the confidence to openly inquire more about drugs from their parents, and that they positively embrace advice from the parents and guardians on negative effects of substance abuse.

The study also found out that parents are aware of the influence peers have and they deliberately monitor their children's movement and close friends through constant communication. Children too appreciate communication with their parents which also guides how they behave when they are not within the family environment. Interpersonal communication within the family ensures both parents and preteens are able to express themselves freely with each other, thus giving an opportunity to parents who desire to positively influence the capability of decision making and future behavior of the preteens.

5.1.2. Challenges faced by parents while communicating to preteens about substance abuse with the intention to influence them to embrace a drug-free lifestyle

The findings from the study revealed that parents are facing several challenges while communicating with the preteens, some of the challenges are, Limited family time for face-to-face communication due to the life demands, alcohol advertisements in the media, Peer

pressure influence, age of the preteens. Others include; parenting styles pose a challenge when parents are communicating with the preteens, they include. This family encourages high conformity and low conversation leaving no room for either party involved to freely express themselves but simply what is said is final. Koerner and Mary Anne Fitzpatrick (2002). Children from such a family are likely to be defiant resulting in behaving opposite what the parents have said. The other type of family is the Laissez-faire family. This type of family is low in both conformity and conversation, children in this are likely to be misled by either their peers or mass media since there is no guidance from the family since everyone is involved in his or her own affairs. The family plays a key part in both preventing and intervening with substance use and misuse, both through inducing risk, and/or encouraging and promoting protection and resilience. Parents agreed that consistency face to face communication within the family is becoming a challenge due the limited time. Children appreciate the provision of their parents but admit more often than not their parents are too busy working or doing business to meet the family needs.

Further the study revealed that Advertisements of alcohol in the media looks very enticing to the young children thus causing them to experience the thrill that is displayed on the adverts. The study found out that peer pressure is also greatly influencing the decisions and behavior of the children, also pre-teens are a bit young posing the challenge of not fully understanding or taking into consideration of communication about substance abuse.

5.1.3. Parent's understanding on the importance of communication in relation to substance abuse and its impact on the child's future behavior

Parental supervision is important for preteens who are growing and discovering things around them, from their physical body's changes, to discovery of enticing things and friends around them. Lots of guidance and monitoring is encouraged more so in ensuring they know of dangers involved in case of any negative behavior such as substance abuse. According to NACADA (2007), substance abuse is a greater social problem in Kenya. Almost half of the children interviewed had never received any information about drugs at home. This poses a great challenge since the social environment has a great role to play in substance abuse which has several health challenges. Other challenges experienced in Kenya due to substance abuse among the children are the promiscuity behavior which spreads HIV/AIDS, stealing and selling of properties to maintain the addiction.

This study reviewed that the majority of parents felt that they have a great role to play in their children's lives to prevent them from abusing substances in future. This is achieved through sharing information about substance abuse and the negative effects. Parents also agree that through communication children feel appreciated and that they truly belong to the family with caring and concerned parents. Constant and positive parental supervision encourages the preteens to be responsible as they grow. The children are fully aware that they are accountable for their actions and behavior and this encourages them to be responsible.

The study also showed that through communication between parents and preteens influence their individual awareness of substances that are abused and in turn they make the right and positive decision in relation to substance abuse and behavior in general even when out of the family environment.

5.2 Discussion

The problem statement of this research clearly outlined that there is a need to find out the positive impact of parent – child open communication and interpersonal communication strategies within the family system of alcohol and substance abuse during the formative age. This is to help reduce the number of adolescents abusing substances, following the assessment report from NACADA (2012, 2020), showing a rapid increase of substance abuse among the adolescents in Kenya.

Parent -child communication is an important interpersonal construct that is reflective of their relationship within the family. Which serves as a protective factor for future behavior not to abuse substances. Choquet et al., (2008). Interpersonal communication is a strategy for early substance abuse prevention within the family, this happens through identifying various triggers and signs within the family for substance abuse such as; deteriorating relationship within the family and others, monitoring the company that the child keeps, setting rules within the family, maintaining moderate but consistent discipline while acknowledging positive behavior. Through interpersonal communication within the family system, parents provide unconditional love, strengthen their children's self-esteem and create a positive attitude in them. Be friends with the child, this goes beyond modeling good behavior and creating a positive environment but parents need to take time to know and spend time with the child communicating and creating shared experiences, and talk about drugs. Parent-child communication is a potentially modifiable protective factor of adolescent substance use. The amount of time parents spend with their children and the frequency of parent-child communication are both associated with reduced risks for alcohol and drug use. It is therefore considered that enhancing parent-child communication is a

common target in substance use interventions for adolescents. Parent-child communication is an important interpersonal construct that is reflective of the parent-child relationship, it may serve as a protective factor in prevention of substance abuse in future. Parental control and parental emotional support were more strongly related to substance use outcomes in girls than in boys.

Adolescents' perceptions of low parental caring, difficulty in communicating to their parents about problems, and valuing their friends' opinions for serious decisions were significantly associated with compromised behavioral and emotional health. This included substance abuse behavior.

5.3 Conclusion

The aim of this study was to assess the effects of Family communication patterns in raising awareness and early prevention of substance abuse amongst the preteens. There were four research questions posed in the study.

What are the Family Communications patterns used by the parents within the family environment for creation of awareness and early prevention of substance abuse among preteens in future? What challenges are parents facing communicating to the preteens about substance abuse with the intention to influence them to embrace a drug-free lifestyle? How is the parent's understanding on the importance of communication in relation to substance abuse and its impact on the child's future behavior? How will the findings of this study influence parents as the child's primary educators to impact positive future behavior of the child through family communication? The questions are due to the fact that there has been

an alarming continuous increase of substance abuse among the adolescents in Kenya with severe detrimental effects to both the affected and community at large. NACADA, (2012).

The study concludes that parents are aware of the importance of open communication, creating awareness of substance abuse verbally and deliberate non-verbal exposure to negative effects of substance abuse. Created open opportunities for the children to openly approach them with any queries, and that parents are aware of the early risks posed by the accessibility of alcohol and drugs within the environment.

The study also concludes that parents face several challenges while communicating with the preteens about substance abuse including, limited family time for face-to-face communication, peer pressure influence and the enticing media advertisements on alcohol and cigarettes.

The study also concludes that, there are several attitudes associated with positive behavior developed through communication within the family environment that are key in early prevention of substance abuse such as, feeling appreciated and belonging to the family, parents open teaching on harmful substances, creating early awareness hence being able to avoid peer pressure and making informed decisions.

The main argument in this study was that intentional and deliberate communication within the family environment about negative effects of substance abuse during the formative age of a child (9- 12 years) is key in molding the child's capability in making positive decisions

and right behavior, including the decision not to engage in substance abuse, thus gradually decreasing the number of adolescents abusing substance in the years to come.

The main contribution of this thesis is the study of the impact of parent-child communication on early prevention of substance abuse, especially now that most researchers have concentrated on substance abuse by adolescents and rehabilitation methods.

5.4 Contribution of the study

The key contribution of this study is that it highlights interpersonal communication within the family environment between parent and children during the formative age as a positive strategy for substance abuse reduction among adolescents in future. It reveals several strategies of interpersonal communication which if positively embraced and implemented within the family environment will go a long way in developing a positive attitude among the children and capability to make right decisions once outside the family environment. This is due to the fact that parent- child communication is a protective factor for future behavior not to abuse substances, Falissard & Chau (2008). The study agreed with previous studies that despite the social problem of rapid increase in substance abuse among the youth in Kenya, continuous parent – child interpersonal communication within the family about alcohol and drugs including their detrimental effects goes a long way in helping the children embrace drug free lifestyle in future. Miller-Day (2008). The research adds to the discussion of the relevance of interpersonal communication in addressing social challenges while strengthening the importance of communication in all spheres of life. Beebe et al., (2002).

5.5 Recommendations

The aim of any study research often is to contribute to new knowledge or qualify the existing knowledge by adding more value to it. In view of the concluded study and results thereof, a number of insights came up from which recommendations have been drawn.

The study noted that most parents are aware of the importance of communication about drugs within the family environment, they know the current social challenge as a result of substance abuse among the youth. Including the detrimental effects. Most are willing and trying to have continuous open communication about alcohol and drugs with the preteens with the intention to influence them to embrace a drug free lifestyle.

This study concluded that interpersonal communication strategies if embraced between parents and children within the family system would enhance family communication effectiveness in creating awareness and preventing substance abuse among preteens. This is due to the fact that parents are the children's primary educators within the family communication environment, and they have the greatest influence in early prevention of substance abuse during the formative stage that impacts positively in future once out of the family environment. Interpersonal communication includes; displaying affection and complementation of good behavior by parents to the children while encouraging and motivating them to constantly strive to do their best. Continuously and actively monitoring of school related work while knowing the child's close friends, this will help the parent note areas of improvement and discourage friendships that are likely to influence negative behavior, children are bound to engage in various activities during their free time, therefore close monitoring is very essential in knowing the whereabouts and that which they do

during that time, having rules within the family are vital in setting boundaries which enhance acceptable behavior, non-verbal cues are constantly observed by the children therefore, the parents are expected to be positive role models to them, and parents working towards being friends with their children, this goes beyond modeling good behavior and creating positive environment but parents spending time with the children communicating and creating shared experiences, while talking or discussing about drugs.

5.6 Suggestion for further research

Although recommendations have been made in this study on the importance of family communication patterns in socialization of preteens within the family environment, and their effect on future behavior amongst preteens in reduction of substance abuse at the adolescence stage. Based on the findings of this research, further research should be conducted to investigate more of interpersonal communication effectiveness in socialization of children within the family of origin including the children in building capacity to make right decisions and embrace drug free lifestyle.

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APPENDICES

APPENDIX I: RESEARCHER'S INTRODUCTION LETTER

Dear Sir/Madam

I am seeking your assistance in the completion of the attached questionnaire. I am a Post graduate student at Moi University, Nairobi Campus. I am in the final stage of the Communication Studies and I'm required to submit a research Thesis on the topic, 'Parent – Child Communication for early prevention of substance abuse. The purpose of this letter is to request that you avail necessary information that will enable me to carry out the research successfully. The information collected for this study will be treated with utmost confidence and will be purely for academic purposes and will be treated with utmost confidentiality. Your assistance and cooperation will be highly appreciated.

Yours' sincerely,

Purity Muchiri

SHRD/PGC/013/16

APPENDIX II: QUESTIONNAIRES FOR PARENTS AND GUARDIANS

The questionnaire consists of items aimed at identifying, **Parent – Child communication patterns for early childhood prevention of substance abuse**. Your responses will be used strictly for the purposes of this research. You are requested to be honest when responding and do not indicate your name anywhere in the questionnaire.

Section A. Demographic data

1. Gender (tick where appropriate)

Male

Female

2. Age (Please indicate your age bracket)

Below 25 years

26-35 years

36-45 years

46-55 years

56 and Above

3. Your level of education (tick where appropriate)

Primary level

Secondary level

College

University level

Section B

4. To what extent do parent – preteen communication influences the children’s decisions and behavior in the following statements?

Statement	Very large extent (%)	Large extent (%)	Moderate extent (%)	Lesser extent (%)	No extent (%)
Parenting style					
Verbal Communication					
Frequency of communication.					

5. Please give your opinion on the following statements in relation to conversation and conformity by marking the appropriate check box

Statement	Strongly agree	Agree	Neutral	Disagree	Strongly Disagree
My children talk to me freely					
I answer their questions honestly					
I prefer my children listen to me					
I do not see any importance of communication.					

I seek my children's opinion / views before engaging in any issue that concerns them or family					
I have discussed substance abuse with my children.					
My word is final, my children do as I say.					

6. Give your opinion on the following statements in relation to the challenges parents are facing communicating to the preteens about substance abuse by marking the appropriate checkbox.

Statement	Strongly Agree	Agree	Neutral	Disagree	Strongly disagree
Limited family time for face-to-face communication					
Alcohol advertisements on the media					
Peer pressure influence					
Age of the Preteen(s)					

7. Please tick your answer to the following questions based on your belief and knowledge of their influence on your child (ren) behavior at a later age.

	Strongly Agree	Somewhat Agree	Neither Agree nor Disagree	Somewhat Disagree	Strongly Disagree
Do you hold open discussions regarding Substance Abuse?					
Have you deliberately given your child (ren) non-verbal exposure to the real-life negative effects of Substance abuse?					

Do your children approach you with questions about alcoholic beverages?					
Is the environment within which you live alcohol and drugs easily accessible to your child (ren)?					
Do you know your child (ren) close friends/peers who have an influence of either abusing or not abusing substances?					

8. Do you believe that various levels of communication within the family contributes positively towards the decision to use or not to use alcohol and substance abuse for the children at a later age?

Statement	Strongly agree	Agree	Neutral	Disagree	Strongly Disagree	Total
Low level of communication						
Moderate level of communication						
High level of communication						

9. On a scale of 1 to 5, please indicate how much emphasis family communication has placed on each component towards preteen behavior at adolescent stage.

1. Very weak emphasis

2. Weak emphasis
3. Neutral emphasis
4. Strong emphasis
5. Very strong emphasis

Types of commitment	Rating
Feeling of belonging / appreciated	[1] [2] [3] [4] [5]
I'm free to do what I want	[1] [2] [3] [4] [5]
No one loves / cares about me	[1] [2] [3] [4] [5]

Thank you for your cooperation

APPENDIX III: PARENT AND GUARDIAN CONSENT FORM

Name of Child**Age**.....

Parent / Guardian

I agree my child to participate in the research study conducted by Masters student Purity K. Muchiri, on **‘Parent-Child communication on substance abuse’**

I understand that the focus group discussion will entail free and honest answering of questions by my child.

Signed (Parent) Date:

APPENDIX IV: FOCUS GROUP DISCUSSION FOR PRETEENS

Probe Questions:

1. What is communication and how do you communicate with your parent(s)?
2. How often do you communicate and who initiates the communication?
3. Have you ever heard of substance abuse? Explain how you understand substance abuse?

Follow-Up Questions:

4. Does communication with your parent(s) influence your decision and behavior? If yes, please explain how?
5. How did you hear about substance abuse?
6. Do your parents communicate to you about substance abuse? If yes, how often do you communicate?
7. When you approach your parent(s) to communicate about drugs, what is your expectation?
8. Do you have a close relative using drugs? If yes, do you admire him/her? What is your perception of abusing substances?
9. What are some of the consequences of substance abuse among the young people and how do you think parents have contributed to it?

Exit Question:

10. Is there anything else you'd like to say about communication with our parents in relation to substance abuse?

APPENDIX V: MOI UNIVERSITY LETTER



**MOI UNIVERSITY
SCHOOL INFORMATION SCIENCES
NAIROBI CAMPUS**

Tel: (053) 43153
Fax: (053) 43153

P.O Box 63056-00200
NAIROBI
KENYA

MU/NRB/IS/SA/14

6th November, 2018

National Commission for Science, Technology and Innovation
Utalii House
NAIROBI

Dear Sir/Madam,

RE: MUCHIRI PURITY KARAMBU- SHRD/PGC/013/16

This is to confirm that the above named is a Postgraduate student of Moi University, School of Information Sciences, Department of Communication Studies. Ms.Karambu is pursuing a Master of Science in Communication Studies course offered at Nairobi campus.

The student successfully defended her proposal and is due to proceed for her research data collection. The research Title is – **“Parent-Pre-Teen communication on substance abuse: A study of one urban community in Nairobi Kenya.”**

The student is in the process of obtaining a research permit to enable her visit the identified research Centers. The University shall highly appreciate any assistance accorded to her.

Yours faithfully,


**DR. JARED OBUYA
COORDINATOR, COMMUNICATION STUDIES
NAIROBI CAMPUS.**

APPENDIX VI: RESEARCH AUTHORIZATION



NATIONAL COMMISSION FOR SCIENCE, TECHNOLOGY AND INNOVATION

Telephone: +254-20-2213471,
2241349, 3310571, 2219420
Fax: +254-20-318245, 318249
Email: dg@nacosti.go.ke
Website: www.nacosti.go.ke
When replying please quote

NACOSTI, Upper Kabete
Off Waiyaki Way
P.O. Box 30623-00100
NAIROBI-KENYA

Ref. No. **NACOSTI/P/19/27353/28769**

Date: **19th March, 2019**

Purity Karambu Muchiri
Moi University
P.O. Box 3900-30100
ELDORET.

RE: RESEARCH AUTHORIZATION

Following your application for authority to carry out research on ***“Parent-child communication on substance abuse: A study of one urban community in Nairobi Kenya”*** I am pleased to inform you that you have been authorized to undertake research in **Nairobi County** for the period ending **19th March, 2020**.

You are advised to report to **the County Commissioner and the County Director of Education, Nairobi County** before embarking on the research project.

Kindly note that, as an applicant who has been licensed under the Science, Technology and Innovation Act, 2013 to conduct research in Kenya, you shall deposit a **copy** of the final research report to the Commission within **one year** of completion. The soft copy of the same should be submitted through the Online Research Information System.

**GODFREY P. KALERWA MSc., MBA, MKIM
FOR: DIRECTOR-GENERAL/CEO**

Copy to:

The County Commissioner
Nairobi County.

The County Director of Education
Nairobi County.

**COUNTY COMMISSIONER
NAIROBI COUNTY
P. O. Box 30124-00100, NBI
TEL: 341666**

APPENDIX VII: RESEARCH PERMIT

