

EXPLORING THE PSYCHO-SOCIAL DETERMINANTS OF HEAVY ALCOHOL DRINKING AMONGST WOMEN IN OSHANA, NAMIBIA

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DECLARATION

I hereby declare that the dissertation,” *Exploring the psycho-social determinants of heavy drinking amongst women in Oshana, Namibia*” is my own work and that all resources that were used or during the research study, are indicated by means of a complete reference and acknowledgement.

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Date_____

Signature_____



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ABSTRACT

Heavy alcohol drinking is a serious health concern in many African countries such as Namibia and South Africa. The heavy use of alcohol is mainly due to avoid coping with the realities of life. There is however, a paucity of research on heavy alcohol use amongst women, particularly in Oshana region of Namibia, where problem drinking is threatening the well-being of women and society. This study explored the psycho-social determinants of women who are heavy alcohol users in the Oshana region. The study design was explorative and descriptive within a qualitative approach. The social constructionist theory underpinned this study. Four participants were randomly selected from the Developmental Social Services caseload which led the researcher to snowball the other four participants for a total of eight participants in the study. Data was collected by means of semi-structured face-to-face interview with the aid of an interview guide. Interviews were transcribed verbatim and field notes were taken. Thematic analysis was used to analyse and interpret the data. The participants identified with coping with realities among women heavy drinking. They reported psychological and social factors affected the well-being of women drinking. These factors included poverty, unemployment, family pressure or influence, availability and accessibility of alcohol, expression, stress, low self-esteem, fear of loneliness and many others. Based on these results, some of the suggestions put forward by all the participants and the researcher concluded the study with a recommendation that an awareness can be created by service providers such as social workers working with women who are heavy drinkers to establish and improve alcohol programmes in Oshana Region and Namibia as a whole.

KEYWORDS

Social Constructionist Theory

Alcohol use disorder

Psycho-social determinants

Alcohol abuse

Alcoholism

Alcohol dependency

Binge drinking

Gender equality

Coping strategies



ABBREVIATIONS

MoHSS: Ministry of Health and Social Services

CDC: Centers for Disease Control and Prevention

WHO: World Health Organization

AIDS: Acquired Immune Deficiency Syndrome

APA: American Psychological Association

WHO: World Health Organisation

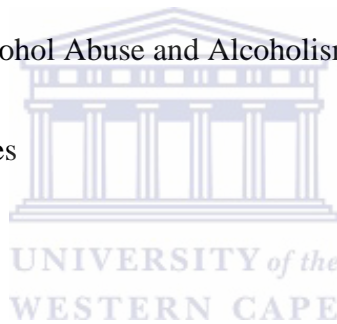
NIAAA: National Institute on Alcohol Abuse and Alcoholism

DSS: Department of Social Services

QDA: Qualitative Data Analysis

TA: Thematic Analysis

SES: Socio-Economic Status



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CHAPTER ONE

INTRODUCTION

1.1 Background and Rationale of the study

High-risk alcohol consumption is a challenging globalized health and social problem. Alcohol use and abuse are common among people living in sub-Saharan Africa and are characterized by patterns of misuse across many contexts and populations, including social strata, rural and urban environments (Hahn, 2011). Heavy alcohol drinking is a condition characterized by the harmful consequences of repeated alcohol use, a pattern of compulsive alcohol use, and (sometimes) physiological dependence on alcohol (i.e. tolerance and/or symptoms of (Sher & Trull , 2014). This disorder is only diagnosed when these behaviors become persistent and very disabling or distressing. There is often craving for alcohol that makes it difficult to think of anything else until drinking resumes (Morgan, Marsha, Ritson & Bruce, 2010). Heavy alcohol drinking ("alcohol abuse" or "alcohol dependence") is a pattern of alcohol use that involves problems of controlling drinking, being preoccupied with alcohol, continuing to use alcohol even when it causes problems, having to drink more to get the same effect, or having withdrawal symptoms when one rapidly decreases or stops drinking (Ader, 2015).

Alcohol dependence is a cluster of behavioral, cognitive, and physiological phenomena that may develop after repeated alcohol use. Typically, these phenomena include a strong desire to consume alcohol, impaired control over its use, persistent drinking despite harmful consequences, a higher priority given to drinking than to other activities and obligations,

increased alcohol tolerance, and a physical withdrawal reaction when alcohol use is discontinued (WHO, 2014). Furthermore, alcohol dependence is a complex disorder that includes the social and interpersonal issues as well as biological elements. These elements are related to tolerance and withdrawal, cognitive (thinking) problems that include craving, and behavioural abnormalities including the impaired ability to stop drinking (Plant, 2009). World Health Organization (WHO, 2012) also recognises another alcohol use disorder called alcohol abuse. Alcohol abuse is similar to dependence in that the use of alcohol impairs the affected person's ability to achieve goals and fulfil responsibilities, and his or her interpersonal relationships are affected by the alcohol abuse (Morgan, et al., 2010). However, unlike a person with dependence, a person diagnosed with alcohol abuse does not experience tolerance or, when not drinking, withdrawal symptoms. People who abuse alcohol can become dependent on the substance over time (Plant, 2009). Abuse and dependence differ in the specific types of problems they set as criteria: abuse is characterized directly by adverse consequences, whereas criteria for dependence include not just consequences, but also behavioral factors that suggest a compulsive pattern of use, loss of control, and physiological tolerance (WHO, 2014).

According to the Centers for Disease Control and Prevention (CDC), excessive alcohol use causes 88,000 deaths a year (World Health Organisation (WHO), 2015). The harmful use of alcohol results in approximately 2.5 million deaths each year, with a net loss of life of 2.25 million, taking into account the estimated beneficial impact of low levels of alcohol use on some diseases in some population groups (Ader, 2015). Harmful drinking can also be very costly to communities and societies. In most societies, women have been less likely than men to drink alcohol, to consume it heavily, and to experience adverse effects. In recent years, however, there

has been an increase in the number of women who drink, as well as in the quantities of alcohol they consume. A rise in heavy drinking particularly among young women has been reported from a number of countries (Sher & Trull, 2014).

In Namibia, heavy drinking has reached a staggering height as Namibia ranks fifth in Africa on its consumption rate, which consequently has caused a major burden of disease fueled by violence and injury (Chirimbana, 2012). In the 2014 Global Status Report on Alcohol and Health, Namibia was among countries with the highest level of per capita alcohol consumption, particularly on the African continent. When examining women, Namibia also had a higher percentage of persons with alcohol heavy drinking and alcohol dependence in comparison with the WHO African Region (WHO, 2014). Out of a population of about two million people, more than half of Namibian adults consume an average of 10 litres of alcohol per day, with a large proportion of adult consumers of alcoholic beverages being women (Tjatindi, 2012). The risk of alcohol heavy drinking appears to be increasing in the last decade and not only is problem drinking becoming more widespread, but the intensity of drinking is also going up amongst women (WHO, 2014). Given the estimated high rates of drinking in Namibia, a better understanding of psycho-social determinants of heavy alcohol drinking among women drinking patterns is important to help mitigate the substantial social and health effects associated with heavy drinking.

Alcohol consumption and problems related to alcohol vary widely around the world, but the burden of disease and death remains significant in most countries. Alcohol consumption is the world's third largest risk factor for disease and disability; in middle-income countries, it is the

greatest risk (Sher & Trull, 2014). Alcohol is a causal factor in 60 types of diseases and injuries and is also associated with serious social issues, including violence, child neglect and abuse, and absenteeism in the workplace (WHO, 2014). Yet, despite all these problems, the harmful use of alcohol remains a low priority in public policy, including the health policy (Agoabasa, 2012). Heavy alcohol drinking is associated with detrimental consequences even if the average level of alcohol consumption of the person concerned is relatively low (Plant, 2009). Heavy drinking has always constituted a major problem in families, such as individuals neglecting their families, overspending of money on alcohol, health problems such as liver cirrhosis, losing jobs. Among individuals who consume large amounts of alcohol, there is an increase in negative social and personal consequences, including risky behavior, negative health outcomes, disinhibition, sensation seeking, and aggressive/violent behavior (LeBeau, Pendleton, & Tapscott, 2010). The exchange of alcohol for sex is a well-known reciprocal relationship in Namibia (Debie, 2009). There is no doubt that significant health problems occur when people abuse alcohol to the point that alcohol industries willingly inform consumers about the danger of alcohol abuse. Drinking alcohol to excess levels endangers the life of women and others. The purpose of this study is thus to explore the psycho-social determinants of heavy alcohol drinking amongst women.

1.2 Theoretical Framework

In order to make sense of why women become dependent on alcohol, the social constructionist framework was used as a theoretical lens in which to understand their dynamics (Armstrong & Abel, 2009). Gergen (1985), the founder of the social constructionist theory, define it as a perspective, which believes that humanity exists as it does because of social and interpersonal influences (Given, 2015). Although hereditarily biological elements and social factors are at

work at the same time, “social constructionism does not deny the influence of genetic inheritance, but decides to concentrate on investigating the social influences on communal and individual life” (Polit, 2014:90). Social constructionism is useful to understand culture and society: “the shared social aspects of all that is psychological (Grittner, Kuntsche, Graham, & Bloomfield, 2012:47). Social constructionism is useful in that it focuses on an individual which is the psycho element and on society which reflects the social elements, thus to say psycho and social elements are both embedded inside.

The social constructionist theory views individual behavior as being determined and sustained by the dynamics and demands of the key people with whom they socialize (Brickman, Leonard, & Debra, 2016). Alcohol abuse frequently occurs within a social context characterized by social and economic disadvantage (Baker, 2015). People often drink heavily during problematic periods in their lives, such as in situations of poverty and unemployment, unstable social environments and when there is a lack of resources and support (Glaserfeld, 2011). Social constructionist theory, therefore illustrates that individuals who lack secure rootedness in family and society besides not having a sense of direction for a positive future, may learn to use alcohol as a coping strategy (Gergen, 1985). The social constructionist theory was found appropriate to understand women’s drinking because it creates an avenue to explore drinking behaviour as influenced by the social and interpersonal relations of women and may help to explain women’s problem drinking in the Oshana region.

1.3 Problem statement

Alcohol abuse is often characterized by harmful consequences of repeated alcohol use; users develop an everlasting craving for alcohol, hence go into a period of alcohol dependency (Chirimbana, 2012). Oshana region has experienced dramatic urban growth in recent years and forms an important commercial and potential industrial focus. Excessive alcohol use by women in Oshana region was being reported and observed; women were spending the better part of the day drinking in shebeens, bars and open markets (John, 2011). Women in Oshana region are largely observed to be the most affected by alcohol abuse, and a worrying development in this regard is the manner in which their health and social life is affected (Grittner, Kuntsche, Graham, & Bloomfield, 2012). Women have become vulnerable members of the community and are constantly subjected to violence, gender disparity, and challenges of meeting family needs such as food security, education and clothing (Carey, 2014) as they succumb to the pressure, a majority of the women seek solace in alcohol use (Agoabasa, 2012). Debie (2009) states that heavy drinking can lead to short or long term social and health problems such as domestic violence, crime, suicide, passion killing, unemployment, HIV/AIDS as well as death.

Alcohol consumption is increasing particularly in the north of the country (Oshana region) (WHO, 2014) and alcohol abuse in communities in the Namibian north was cited as one of the main factors contributing to domestic violence (WHO, 2015). Heavy alcohol drinking is associated with detrimental consequences even if the average level of alcohol consumption of the person concerned is relatively low (Plant, 2009). The rise in heavy alcohol drinking among women in Oshana region resulted in a lot of health and social problems affecting their families

and the community at large. The rationale of this study was therefore to explore the reasons why women drink in excess in the Oshana region and to explore the psycho-social determinants of heavy alcohol use among women.

1.4 Research question

In order to investigate women's alcohol use in Oshana region, the study asks the following research question:

What are the psycho-social determinants of heavy alcohol drinking among women in Oshana, in Namibia?

1.5 Aim and Objectives of study

1.5.1 Aim of the research

The aim of this study was to explore the psychosocial determinants of heavy alcohol drinking among women in Oshana, Namibia.

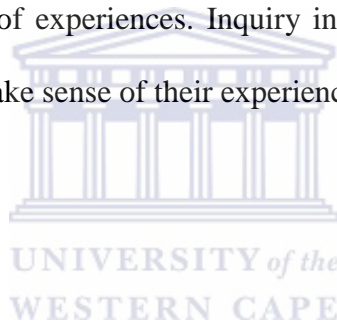
1.5.2 The objectives

The objectives of this study were to:

- explore and describe the reasons of women's alcohol use in the Oshana, Namibia
- explore and describe the psychological and social factors that affect women's drinking.

1.6 Research Methodology

A qualitative research methodology was utilized for this study. The qualitative approach was found appropriate because the study would take place in a natural setting, data would be gathered by directly talking to people in their areas where they were experiencing the problem (Baker, 2015). It is believed that people continuously interpret, create and give meaning to, define, justify and rationalize their actions (Brickman, Leonard, & Debra, 2016). (Braun, Clark, & Virginia, 2007:58) defined qualitative research as “a form of systematic empirical enquiry into meaning”. By systematic, he means” planned, ordered and public,” following rules, agreed upon by members of the qualitative research community. By empirical, he means that this type of inquiry is grounded in the world of experiences. Inquiry into meaning is about the researcher trying to understand how others make sense of their experiences.



1.7 Research Design.

The research design provides the plan for successfully carrying out the study, hence the research design is the “backbone” of the research protocol (Polit & Beck, 2014). The study adopted a descriptive and an explorative research design with descriptive design being a scientific method and involves observing and describing the behaviour of a subject without influencing it in any way (Brickman, Leonard, & Debra, 2016). A descriptive study is one in which information is collected without changing the environment (that is, nothing is manipulated) (Ader, 2015) . In human research, a descriptive study can provide information about the naturally occurring health status, behaviour, attitudes or other characteristics of a particular group (Trochim, 2015). A descriptive design was appropriate for the study because it required analysing and describing collected data inform of behaviours (Cohen, Manion, & Morrison, 2012). Attitudes and

characters underlying in the psychosocial aspects influencing heavy alcohol drinking amongst women in Oshana Region, Namibia. Exploratory research is defined as the initial research into a hypothetical or theoretical idea (Ader, 2015). This is where a researcher has an idea or has observed something and seeks to understand more about it (Valliants, 2010). An exploratory research project is an attempt to lay the groundwork that will lead to future studies or to determine if what is being observed might be explained by a currently existing theory. Most often, exploratory research lays the initial groundwork for future research (Kothari, 2014).

1.7.1 Population and Sampling

Population is a term that sets boundaries on the study units. It refers to individuals in the universe who possess specific characteristics” (Baker, 2015). Population is defined “the aggregate or totality of those conforming to a set of specification“ (Polit & Beck, 2014). It is also further defined by (Braun, Virginia, & Clarke (2007:56) as” the group of people about who we want to draw conclusion. A sample can be described as a portion, or part of the study population, composed of members, elements or subjects from which the information is collected (Ader, 2015). Two sampling techniques, i.e. by simple random sampling followed by snowball sampling, were used to select the sample. Simple random sampling is the basic sampling technique where a group of subjects (a sample) are selected for study from a larger group (a population). Each individual is chosen randomly and entirely by chance, such that each individual has the same probability of being chosen at any stage during the sampling process (Soeters, Shields, & Rietjens, 2014). The snowball sampling technique was used and it is the technique that is recommended when there is limited access to appropriate participants for the

intended study (Kothari, 2014). In snowball sampling, individuals act as information in order to identify other members (act as recruiters) (e.g. friends) from the same population who may be willing to participate in a study, until data saturation has taken place (McNamara, 2005). In this study the sample was women who are heavy users of alcohol. The study sample consisted of eight participants who were drawn using two different sampling techniques. The researcher selected one participant from using convenient sampling and then the selected participant had to select the other participants using snowball sampling. The study only involved women who drank heavily within the age group of 18 -35 years.

1.7.2 Data collection

Data collection took place through semi-structured face- to- face interviews with the aid of an interview guide. Interviews involve the asking of questions that elicit information about attitudes and opinions, perspectives and meanings that help to produce rich descriptive data (Trochim, 2015). Kemmis and Wilkinson (2014) recommends semi-structured interviews and qualitative analysis as the most suitable combination when the goal is to explore personal and controversial issues. Semi- structured interviews are also particularly useful when the ideal is to gain a detailed account of the individual's subjective experiences. One on one semi-structured interviews are more private and minimize the chances of conflict, which are inevitable within group interview (Pope & Mays, 2008)

1.7.3 Data Analysis

Qualitative Data Analysis (QDA) is the range of processes and procedures whereby we move from the qualitative data that has been collected into some form of explanation, understanding or

interpretation of the people and situations we are investigating (Kothari, 2014). The idea is to examine the meaningful and symbolic content of qualitative data. Thematic Analysis (TA), which is a method for identifying, analysing, and reporting patterns (themes) within data, was used to analyse data. It minimally organises and describes your data set in (rich) detail. However, it also often goes further than this, and interprets various aspects of the research topic (May, 2015)

The deductive approach in analysing the data was executed. In a deductive way, coding and theme development are directed by existing concepts or ideas. It is driven by the researcher's theoretical or analytic interest in the area and therefore is more explicitly analyst-driven with a more detailed analysis of some aspect of the data (Silverman, 2015). The deductive approach was chosen as the study examined underlying ideas, assumptions, and conceptualizations that were theorized. The six steps as outlined by (Braun, Clark, & Virginia, 2007)) were followed. The *first* step was to read through all the transcription carefully followed by selecting the interview and underlining the meaning of the information. The *second* step was to read through and re-read text followed by the *third* step where margin notes were made to form initial codes. Coding entails reviewing transcription and field notes and giving labels (names) to component parts. The *fourth* step was to generate a description and a theme. Description involves a detailed rendering of information. The *fifth* step was to inter-relate themes followed by the *sixth* step which was to interpret.

1.7.4 Trustworthiness

A research definition of trustworthiness is: “Demonstration that the evidence for the results reported is sound and when the argument made based on the results is strong.” (Strauss & Corbin, 2014: p78). In qualitative research, trustworthiness has become an important concept because it allows researchers to describe the virtues of qualitative terms outside of the parameters that are typically applied in quantitative research. In essence, trustworthiness can be thought of as the ways in which qualitative researchers ensure that transferability, credibility, dependability, and confirmability are evident in their research.

Trustworthiness was ensured by the application of the following principles.

Transferability involves evidences of external validity achieved through the presentation of ‘thick descriptions’ which allow the reader to determine whether the conclusions of the research are in fact relevant to their own circumstances and therefore to them (Gay, Mills, & Airaian, 2016). Participants own responses and words were used to illustrate the various real –life contexts and view across the range of answers given. Transferability also refers to the extent to which the finding can be applied in other context or control was done to refer to similar finding from other studies when possible.

Credibility is the confidence in truth value and believability of the study’s findings (Poilt, Dave, & Huggent, 2014). Credibility was maintained by the interviewer using an accurate reflection of the information provided by the participants (Silverman, 2015). The researcher checked for inappropriate or irrelevant information by clarifying information with the participants. Strauss and Corbin (2014) talks about applicability and consistency and under this it was emphasized the degree to which the finding could be applied to other context and setting or with other groups.

Moreover, the participant's validations were the most critical in establishing credibility. This entails interpreting the information and then checking with the participants if the interpretation and thematic analysis were consistent, correct and congruent with the experiences (Valliants, 2010)

Consistency, which can also be known as dependability, is the extent to which repeated administration of a measure will provide the same data or the extent to which a measure administered once, but by different people, produces equivalent results (Kemmis & Wilkinson, 2014) inherent in the goal of reliability is the value of repeatability, that replication of the testing procedures does not alter the findings. To ensure dependability, the processes within the study were reported in detail, thus allowing future researchers to do the work, if not necessarily to gain the same results. The in depth coverage allows the reader to assess the extent to which proper research practices have been followed. This enables readers of the research report to develop a thorough understanding of the methods and their effectiveness, which include: a) the research design and its implementation, describing what was planned and executed on a strategic level; b) the operational detail of data gathering, addressing the minutiae of what was done in the field; c) reflective appraisal of the project, evaluating the effectiveness of the process of inquiry undertaken.

1.7.5 Ethic considerations

Ethics is defined as “conforming to the standards of conduct of a given professional group” (Braun, Clark, & Virginia, 2007:528). Ethics is regarded as crucial to a research study as the researcher negotiates entry to the field of research, coerces the participants to participate in the study, gathers personal and emotional data that reveals the details of the participants' lives and

requests that the participants give their time to participate in the study (Hulley, Cummings, & Browner, 2014).

In this study, the researcher applied for approval and was granted permission from the Department of Social Services and the Senate Research Committee of the University of the Western Cape. (Ader, 2015) explain that participants have the right to decline to participate if they choose to do such. Participants have the right to know what the research is about, how it will affect them, the risk and benefits of taking part in the study. The researcher explained to the participants the purpose, aims, and objectives of the study and ensured them that their information was to be kept confidential. Dyer (2015) indicated that information provided by participants, particularly sensitive and personal information should be protected and made unavailable to anyone else other than researcher. Before each data collection session, a written consent reinforced by verbal consent was sought from each participant for their permission to participate in the study. The confidentiality of the participants was protected throughout the study as the researcher ensured that no names or personal identifiers were recorded anywhere mainly on the data collection instruments and that all the information gathered and subsequent reports would not refer to individual participation. Instead, the researcher allocated pseudonyms to each of the participants, making their personal details remain anonymous. The researcher informed the participants that participation was completely voluntary, and that the participants were free to withdraw from the study at any time.

The participants were assured of no harm or being deceived anyhow through participating in the study. If a participant experienced any challenges regarding the interviews or during the research

process, they would be referred for appropriate counselling or support. Permission to use an audio recorder was requested from the participants and thereafter the tape would be kept safe on a file or CD and confidentiality was assured.

1.8 Significance of the study

Since the researcher was a senior social worker within the Ministry of Health and Social Services, the study findings would be relevant to social service providers in their service delivery, prevention programmers and policy planning. The study would also create new knowledge to social services providers about women's drinking habits, hence help improve service delivery by increasing awareness campaigns targeting women and young girls on social and psychological factors that affected them. The study would also go further to assist the service providers to understand the current situation in Oshana Region on women drinking alcohol. To the future researchers, this study would serve as a baseline study that opened more avenues and perspectives of inquiry into alcohol use disorder.

1.9 Definition of Terms

Social constructionist theory: a perspective, which believes that a great deal of human life exists as it does due to social and interpersonal influences (Gergen, 1985).

Psycho-social determinants: There is no single definition of the social determinants of alcohol use, but there are social factors such as unemployment, poverty, family dysfunction, community and cultural factors that could classify the social determinants of alcohol use disorder (Tjatindi, 2012).

Alcohol abuse: is a pattern of drinking that is harmful to the drinker or others and which causes serious destruction to a person's life at work or home (National Institute on Alcohol Abuse and Alcoholism (WHO, 2014)).

Alcoholism: it is chronic, lifelong and can be both progressive and a life threatening disease, based in the brain. Alcohol's short-term effects on the brain is what causes someone to feel high, relaxed or sleepy after drinking. In some people, alcohol's long term effects change the way the brain reacts to alcohol, so that the urge to drink can be hunger for food (WHO, 2014).

Alcohol dependence: a cluster of behavioral, cognitive, and physiological phenomena that develop after repeated alcohol use and that typically include a strong desire to consume alcohol, difficulties in controlling its use, persisting in its use despite harmful consequences, a higher priority given to alcohol use than to other activities and obligation, increased tolerance, and sometimes a physiological withdrawal state (WHO, 2014).

Binge Drinking: the consumption of more than a certain number of drinks over a period of time on a single drinking session or at least a single day such as a woman consuming at least six standard units of alcohol. A much simple definition of binge drinking is drinking too much alcohol over a short period of time and is usually the type of drinking that leads to drunkenness (Burr, 2007).

Gender Equality: sex equality, gender egalitarianism, and sexual equality of the gender, refer to the view that men and women should receive equal treatment. In social science, the concept of gender usually has a more differentiated explanation. It refers to the social sex and concerns what is culturally attributed to being a man or woman in different societies (Hibberd, 2005).

Coping Strategy: Is an adaptation to environmental stress that is based on conscious or unconscious choice and that enhances control over behavior or gives psychological comfort (Agoabasa, 2012)

1.10 Structure of Thesis.

Chapter 1 identifies the problem that will be addressed in this study and also provides a rationale for the study. This Chapter also outlines the purpose, aims and objectives and also provides brief explanations of the methodology and theoretical framework used in the study.

Chapter 2 provides a critical review of the theoretical framework of the study and justifications of its relevance to the current study. This chapter presents through theories, an in-depth understanding of what leads to certain actions/behaviour of people (in this study the psychosocial determinants of heavy drinking amongst women in Namibia)

Chapter 3 presents a comprehensive review of literature on heavy drinking and a discussion of the psychosocial determinants of heavy drinking among women.

Chapter 4 provides details on the methodology applied within this study. This chapter includes information on the research process, the sampling procedures and techniques, data collection tools and methods used. This chapter also presents an outline of data analysis and the aspects of ethical considerations which are applied in this study.

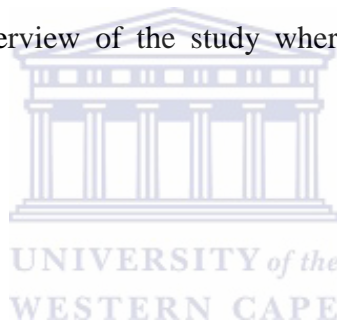
Chapter 5 deals with the presentation and discussion of the research findings with the purpose of answering the objectives posed in Chapter 1. This chapter furthermore interprets the research

findings and uses literature and the theoretical framework collectively to justify, compare and contrast the findings.

Chapter 6 contains the conclusions on the findings. Limitations of the study are provided. This chapter concludes by giving some recommendations for further studies.

1.11 Summary

This chapter presented a brief overview of the theoretical framework of the study, the statement of the problem and the researcher does questions. It is also elaborated on the aims and objectives of the study and general overview of the methodology which was used in the study .It is presented the significant of the study and the definition of the terms which were used in the study. Finally it presented an overview of the study where elaboration of what aspect each chapter would overview this study.



CHAPTER TWO

THEORETICAL FRAMEWORK

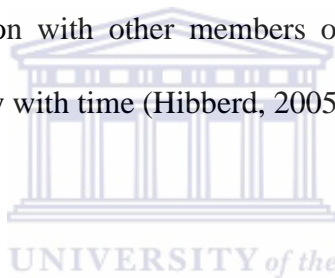
2.1 Introduction

The theoretical framework, the social constructionist theory, which underpins this study to explore the psycho-social determinants of heavy alcohol drinking among women in Oshana region is presented here. This chapter outlines and provides the origins, historical background and the development as well as the critiques of the theory. The chapter further justifies why the social constructionist theory is relevant to this study.

2.2 The social constructionist theory

Social constructionism refers to “a tradition of scholars tracing the origin of knowledge and the meaning and the nature of reality to a process generated with human relationship” (Burr, 2007:56). Gergen (1985), the founder of the social constructionist theory, defines it as a perspective which believes that humanity exists as it does because of social and interpersonal influences. Furthermore, it is concerned in clarifying the processes by which people come to describe, explain, or otherwise tell the story about the world around them (Gergen, 1985). Gergen (1985) and Burr (2003), define social constructionism in terms of various assumptions which include the rejection of assumptions about the nature of the trend and theories of causality and placing an emphasis on the complexity and interrelatedness of many facets of individuals within their communities. The other popular assumption is that social constructionism involves a challenge of our common sense knowledge of ourselves and the world we live in, the framework

itself is dynamic and moves with the way people understand their psychological and social life (Burr, 2007). Although hereditarily biological elements and social factors are at work at the same time, “Social constructionism does not deny the influence of genetic inheritance, but decides to concentrate on investigating the social influence on communal and individual (Ernest, 2009). Apart from the inherited and developmental aspects of humanity, social constructionism hypothesizes that all other aspects of humanity are created, maintained and destroyed in our interactions with others through time. This means the meaning, perspectives and solutions of individuals’ behavior are social constructs enshrined within the cultural, political and historical evolution. The creation of desired or undesirable behavior, its perpetual existence or extinction depends on the level of interaction with other members of the community or otherwise the behavior can be destroyed naturally with time (Hibberd, 2005).

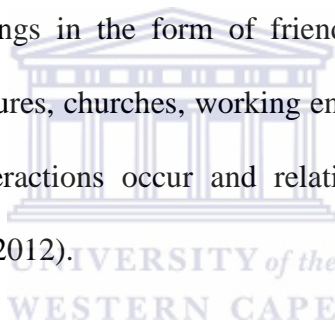


Franklin (2012) explains that social constructionism shows us the important ways in which socialization and enculturation, amongst the people we have known, plus the current influence of those whom we now know, are the most active in shaping our mutual existence with others. Every member of the society belongs and wants to be accepted by the society, hence their natural conformity that exist (Berger & Luckmann, 1996). Our behavior in a community is not independent. To understand questions regarding why, when and how, we need a theoretical framework to ground our arguments and help understand society. Meaning and understanding is derived from the community where the behavior is being manifested. (Grittner, Kuntsche, Graham, & Bloomfield, 2012) Constructionism is therefore based on relations and sustains the role of the individual in the social construction of realities (Cojocaru, 2013).

Social constructionism or the social construction of reality (also social concept) is a theory of knowledge in sociology and communication theory that examines the development of jointly constructed understandings of the world that form the basis for shared assumptions about reality (Franklin, 1995). Hibberd (2006) agree with Franklin (1995) by pointing out that knowledge is socially constructed depending on the society and addresses the reality of lived experiences by different people in their own environment. This idea is shared with Burr (2007) who argues that this theory centers on the notions that human beings rationalize their experiences by creating models of the social world and share and reify these models through language. Collins (2008) states that social constructionism is concerned with the meaning, notion, or connotation placed on an object or event by a society, and adopted by the inhabitants of that society with respect to how they view or deal with the object or event. In that respect, a social construct as an idea would be widely accepted as natural by the society, but may or may not represent a reality shared by those outside the society, and would be termed as an invention or artifice of that society (Collins, 2008). Social constructionism is a theoretical movement that brings an alternative philosophical assumption regarding reality construction and knowledge production and is concerned with the ways in which knowledge is historically situated and embedded in cultural values and practices (Agrawal, Dick, Bucholz, Madden, Cooper, & Sher, 2010). According to this approach, meanings are socially constructed via the co-ordination of people in their various encounters; thus, always fluid and dynamic (Agoabasa, 2012).

In line with the views of Collins (2008), Burr (2007) and Agoabasa (2012), social constructionism uncovers the ways in which individuals and groups participate in the

construction of their perceived social reality. It involves looking at the ways social phenomena are created, institutionalized, known, and made into tradition by humans. Social constructionism of reality, thus interrogates how individuals were raised and what they were raised to believe as it affects how they present themselves, how individuals perceive others, and how others perceive them. Perceptions of reality are colored by beliefs and backgrounds and reality is also a complicated negotiation. What is real depends on what is socially acceptable (Anyon, 2009). Most social interactions involve some acceptance of what is going on (Hibberd, 2005). The construction of reality, is not entirely a product of our own doing (Boudry & Buekens, 2011), but is also contributed by an external environment outside an individual. This external environment encompasses the social surroundings in the form of friends, families and other communion promoting institutions such as cultures, churches, working environment and entertainment spots. In this external environment interactions occur and relationships are begot, giving rise to construction of reality (Agoabasa, 2012).



Social constructionism has been applied widely in social research which makes significant contributions to the study of deviances, social problems, social movements, the self, gender, race, education, health, emotions, family and other areas. For the social constructionist, each person has a unique view of the world in line with one's perception and description of oneself and their reality. So, the application of social constructionism has been used widely in the fields of disability, mental health, gender, race, and ethnicity (Boudry & Buekens, 2011). This provides a deeper understanding of the determinants of human actions in society which results from construction of reality (Burr, 2003).

2.3 Origin and evolution of the Social Constructionist Theory.

The roots of constructionism can be traced back to existential-phenomenological psychology, social history, hermeneutics and social psychology (Shotter, 1993). The history of the evolution of the social constructionist theory is better described by an analytical review of the work of scholars such as Immanuel Kant, Karl Marx, Alfred Schutz, Edmund Husserl, Herbert Blummer, George Herbert Mead and Harold Garfinkel. Burry (2003), highlights some features of social constructionism that help understand and narrate the origin of constructionism. These are: (a) the rejection of the traditional positivist approaches; (b) the reinforcement of the influence of dominant social groups in the construction of knowledge; (c) the upholding of the conviction that the way we understand the world is a product of historical processes of interaction and negotiation between groups of people; (d) the goal of research is not to produce knowledge that is fixed and universally valid but to open up an appreciation of what is possible; (e) Social Constructionism represents a movement toward redefining individual psychological constructs such as the mind, emotion and self into a social discourse. The views discussed below contribute to a nuance in the understanding of the development of philosophical assumptions of the nature of reality and knowledge construction in general. The contributions illuminate an approach of enquiry that leads to the discovery of the constructionist theory. Recognised scholars who made significant contribution to the development of the social constructionist theory are highlighted below.

2.3.1 Husserl's Transcendental Phenomenology

The roots of social constructionism can be attributed to nominalist philosophy. Although the nominalist philosophical tradition can be traced back to the 11th century and can be found in the

18th-century philosophy of Immanuel Kant and the 19th-century philosophy of Friedrich Nietzsche, it is Edmund Husserl's 20th-century transcendental phenomenology that laid the foundation for social constructionist theory (Shotter, 1993). Husserl combined insights from philosophy, mathematics, and early psychology. He developed a method for suspending, or "bracketing," what was taken for granted as objects in the natural attitude (a commonsense, mundane approach to the world) in order to see how these were constituted in the human consciousness. The natural attitude is the taken-for-granted assumption that objects have material-like qualities (Poerksen, 2004).

The interpretivist /constructionist paradigm grew out of the philosophy of Edmund Husserl's phenomenology and Wilhelm Dilthey's study of interpretive understanding called hermeneutics (Collins, 2008). Interpretivist is associated with the philosophical position of idealism, and is used to group diverse approaches, including social constructionism, phenomenology and hermeneutics; approaches that reject the objectivist view that meaning resides within the world independent of consciousness. The interpretive approach assumes that access to reality (given or socially constructed), is only through social constructions such as language, consciousness, shared meanings, and instruments (Hibberd, 2005). Interpretivist approaches suggest that reality is socially constructed and this forms the fundamental basis of social constructivism.

2.3.2 Schutz's Sociological Phenomenology

Husserl's transcendental phenomenology had a major influence on the work of sociologist Alfred Schutz. In his *Phenomenology of the Social World (1932/1967)*, Schutz integrated Husserl's phenomenology with Max Weber's sociology, in particular with Weber's concepts of

interpretive understanding and ideal-type construction, which are generalized types of behaviour (Bartlett, 2005). Schutz saw that in their day-to-day mundane existence in the social world, humans experience both an objective and subjective existence. Humans take both this world for granted as a reality, yet also see it as shared with others inter-subjectively, while also interpreting it differently, depending on their past experience. Because human action is purposive, based on human interpretation and shaped as a project by past biography and social position, a socially constructed shared experience by people having different experiences produces multiple views of social reality, which leads to a position of moral relativity (Downing, 2001). Schutz's contribution to the social construction theory is signified by the social influence shaping an individual towards social construction (Burr, 2003).

2.3.3 Berger and Luckmann's Social Construction of Reality

In the 1960s, during a time when Western industrial societies were undergoing significant social and political change and when protest against establishment institutions was rampant, from anti-Vietnam war protests to civil rights and women's movement protests, a social climate emerged that resonated with the intellectual view that social structures and their institutions needed not be what they had always been and that they could be changed. Poerksen (2004) classic book, *The Social Construction of Reality*, captured the historical moment of liberation from our self-made social order by building on the insights of Schutz (Lock & Strong, 2010). In this work Berger and Luckman (1966) showed that although society and its institutions appear to be real, having an independent and object-like existence, its reality is the outcome of a series of social processes through which humans interactively create institutionalized social phenomena but in the process lose sight of the fact that they created those phenomena. The resultant reification (reification is

making something real, bringing something into being, or making something concrete), leaves the created social world appearing through types and patterns of behavior as an object-like entity, acting outside and independent of the humans who created it (Dickerson & Zimmerman, 1996). According to Berger & Luckmann (1996), reification involves three interrelated processes: (1) externalization, (2) objectification, and (3) internalization.

Externalization occurs through communication whereby people create categories that define and classify the events that they experience, which eventually become patterns that are institutionalized, formalized, and codified to stand objectified apart from those who created them, who then develop “recipe knowledge” about them and how to relate to them (Agrawal, Hinrichs, Dunn, Bertelsen, Dick, & Saccone, 2008:45).

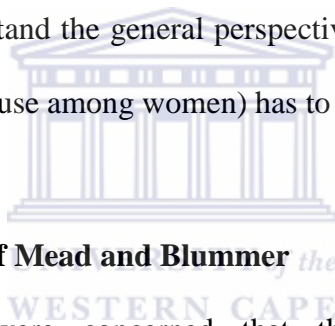
The process of objectification and explaining the existence of these object-like social entities serves to further legitimize their independent existence.

The process of internalization occurs when knowledge about these social institutions and structures is communicated back to members of society, who embody it as part of their knowledge of social reality (Boudry & Buekens, 2011).

2.3.4 Garfinkel's Ethnomethodology

Harold Garfinkel's (1967) *Studies in Ethnomethodology* contributed to the development of social constructionist thinking in that, like Berger and Luckmann, (1966), Garfinkel and colleagues, such as Harvey Sacks, (1960), David Sudnow, (1963), Don Zimmerman, (1964) and

Melvin Pollner (1966) focused on how social order, social institutions, and social structure emerged from shared mundane interactions among ordinary people in their everyday lives (Ernest, 2009). In defining their world and acting toward its boundaries through routine practices of interpretation, people create and negotiate categories of behaviour that are deemed acceptable and categories that are unacceptable or deviant. Exploring the ways or the methods, rather than the shared meaning, by which this everyday interpretive process produces realities is the contribution made by ethnomethodology. Garfinkel's contribution was mainly reinforcing and adding on to the main ideas of Berger & Luckmann. This explains the way people use everyday knowledge to interpret and understand the world and communicate with other people about a phenomenon. This helps to understand the general perspectives of the society when meaning of behaviour (for example, alcohol abuse among women) has to be reconstructed (Gergen, 1985).



2.3.5 The Social Interactionism of Mead and Blummer

Whereas ethno-methodologists were concerned that the ways of interpretation were accomplished through routine practices, Herbert Blummer, a student of social psychologist George Herbert Mead and influenced by pragmatic philosopher John Dewey's ideas about human interaction with the environment, had been working on developing an interactionist perspective. Blummer's Symbolic Interactionism (1969) demonstrated that, instead of being fixed to objective roles, statuses, and structures in an interrelated system, as functionalist theorists had argued, social meaning was created through interaction and subjective interpretation with others (Kuhn, 1996). Mead, in his 1934 work *Mind, Self and Society*, showed that human identity was the outcome of both people's own emergent sense of self, derived from their individualized self-concept he called the 'I', and an internalized sense of the social self he

called the ‘**me**’, which were derived from generalized views that others held of them that they perceived through taking the role of the other (McLeod, 1997).

Blummer argued that people act toward others and the world around them on the basis of the meaning that they attributed to people, events, and structures. The meanings were not fixed but negotiated through a social process of symbolic communication both with one’s self and with others, during which items were named or labeled (Matsumura, Slater, & Crosson, 2009). Despite the successful development of the social constructionist theory by several scholars, the theory has been criticized by other authorities. The main principle of this approach is on ‘the meaning of things is not inherent’ as reflected by Blummer’s, (1956) *Premises of Symbolic Interactionism*. According to Glaserfeld (2011), Blummer’s symbolic interactionism argues that meanings are created, learned, used and revised in social interaction. This principle assists researchers to look at the research problem, meaning in its context and relationships rather than investigating it alone, and it needs interpreting rather than describing (Kitsuse & Spector, 1975). Despite the successful development of the social constructionist theory by several scholars, the theory has some critiques from other authorities.

2.4 Critiques of the social constructionism theory

Social constructionism falls toward the nurture end of the spectrum of the larger nature and nurture debate. Consequently, critics have argued that it generally ignores biological influences on behavior or culture, or suggests that they are unimportant to achieve an understanding of human behavior (Hibberd, 2005). Philosopher Paul Boghossian (1989) has also written against social constructionism. He follows Ian Hacking's argument that many adopt social

constructionism because of its potentially liberating stance: if things are the way that they are only because of our social conventions, as opposed to being so naturally, then it should be possible to change them into how we would rather have them. He then states that social constructionists argue that we should refrain from making absolute judgments about what is true and instead state that something is true in the light of this or that theory (Moerman, 1999). The main criticisms levelled against social constructionism can be summarized by its perceived conceptualization of realism and relativism.

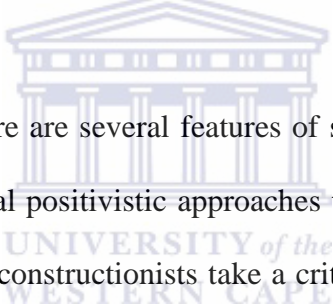
It is accused of being anti-realist, in denying that knowledge is a direct perception of reality (Mair, 1999). Bury (1986) maintains that social constructionism challenges biomedical reality and questions apparently self-evident and stable realities, but he offers little evidence to support this contention. As an example, Burr (2003), claims that it views the discovery of diseases as themselves social events rather than having an objective reality. This criticism of social constructionism not recognizing an objective reality is both widespread and common, that nothing exists beyond language (Burr 2003). Also, depending on the particular target, it is only a simple matter of citation to show that any number of claims fulfill the criteria of anti-realism and hence, are in error (Bakhurst, 1991). This is even more so the case when one assumes that any position warrants itself by an implicit appeal to realism.

In a similarly realist-inspired critique, John Maze takes social constructionism (again, largely Gergen's) to task for its internal contradictions. These include its incapacity to assert anything at all given its claims on the nature of language, objects, reality, and the like, and the argument that objectivism is inherently authoritarian (Moerman, 1999).

Lock & Strong (2010) criticize the constructionist enterprise for, among other things, its failure to distinguish content from process. They argue that, the content of the self, differs radically across cultures but the processes that presumably generate and maintain that self are universal.

2.5 Relevance of the Social Constructionist Theory to the study.

The social constructionist perspective offers a way to define, understand, and study social problems that are decidedly distinct from previous generalized ways which dwell on the surface of the problem. Constructionism is based on relations and sustains the role of the individual in the social construction of realities (Cojocaru, 2013).



According to McLeod (1997), there are several features of social constructionism. First, social constructionists reject the traditional positivistic approaches to knowledge that are basically not reflexive in nature. Second, social constructionists take a critical stance in relation to taken-for-granted assumptions about the social world, which are seen as reinforcing the interests of dominant social groups. Third, social constructionists uphold the belief that the way we understand the world is a product of a historical process of interaction and negotiation between groups of people. Fourth, social constructionists maintain that the goal of research and scholarship is not to produce knowledge that is fixed and universally valid, but to open up an appreciation of what is possible. Finally, social constructionism represents a movement toward redefining psychological constructs such as the “mind,” “self,” and “emotion” as social constructed processes that are not intrinsic to the individual but produced by social discourse (Barry, 2013). Social constructionism, thus, has multiple functions: it is a method of finding

personal truth, problem solving, the reduction of anxiety and guilt, symptom removal, gaining relationship skills, reduction of alienation from self, others and society, finding reasons/causes and understanding others (Collins, 2008).

As a field of interest about the constructed nature of reality, it has been influenced by different psychological, philosophical, and social perspectives, such as the analytical philosophy, the sociology of the knowledge, and the rhetoric. Centering on the process of the social construction of reality, social constructionist perspectives have been used to support a variety of practices in the fields of education, health care, community work, conflict resolution, and organizations (Kuhn, 1996). He emphasizes that there is no single truth because people perceive the environment around them differently. Furthermore, he highlights that reality is uniquely experienced, interpreted, and created by people who have lived the experience. The main consideration of constructionism is about the meaning of social fact. To regard social fact that is socially constructed is to focus on its dependence on contingent aspects of social selves. Neufeld, Harrison, Stewart, Hughes & Spitser, 2009) affirms that people understand their own issues more than any other person, and as such, they are in a better position to explain them. Constructionism also considers how social phenomena operate in particular social settings (Conoldi, 2008). The meaning of phenomena is not discovered but can be constructed (Gergen, 1985). Crotty (1998) claims that meanings are constructed by human beings as they participate in the world they are interpreting. The theory argues that a person's sense is a result of social interchange. In describing, explaining and accounting for the reality as a social process, "the aim of constructionism is to investigate new ways of relating social structures to experience of showing social etiology in disease and illness" (Crotty, 1998:43).

According to (Burr, 2007) social constructionism involves challenging commonsense knowledge of individuals and the world they live in. This means that social constructionism does not just offer an analysis on personality or attitudes but also provides an understanding of every aspect of social and psychological life. Although genetically inherited factors and social factors are at work at the same time, social constructionism does not deny the influence of genetic inheritance, but decides to concentrate on investigating the social influences on communal and individual life (Lock & Strong, 2010). (Bakhurst, 1991) points out that social constructionism provides an understanding of the social and psychological aspects of life. In the context of this study, psychosocial determinants of alcohol use are embedded in these aspects (social and psychological as mentioned by Bakhurst). In conjunction with Harris's notation, Bartlett (2005) points out that social constructionism investigates social influences on people. In relation to the study alcohol use is a social influence on communal and individual life (among women in the study) which is being investigated in terms of psychosocial determinants. Collectively, social and psychological aspects of life are the psychosocial determinants and social influences on communal and individual life are alcohol use among women in Oshana region. Thus, the social constructionist theory assisted by providing a full understanding on the factors determining heavy alcohol use among women in Oshana region. This was achieved due to the theory's consideration of both individual and social influence in the construction of reality. Alcohol use determinants are embedded in both individual and social influences.

2.6 Conclusion

This chapter presented the social constructionist theory as theoretical framework of the study and its justification and suitability to the current study exploring the psychosocial determinants of heavy drinking among the women in Oshakati. Social constructionism theory plays an important role in understanding these women explaining their lived experiences. This chapter started off by explaining the evolution and development of social constructivism, followed by the critique of this theory. The chapter is concluded with an understanding of the relevance of this theory to this study. The relationship of heavy alcohol drinking and psycho-social determinants of alcohol use will be presented in the next chapter through a comprehensive review of literature.

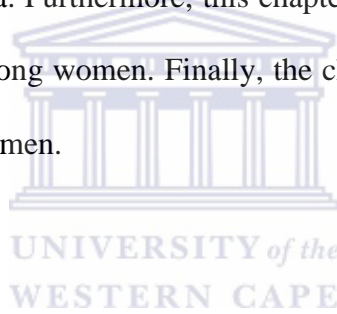


CHAPTER 3

LITERATURE REVIEW

3.1 Introduction

The previous chapter presented the theoretical framework and justifications of its relevance to the current study. This chapter presents a comprehensive review of literature on alcohol use internationally and also in Namibia. Furthermore, this chapter presents the psycho-social factors determining heavy alcohol use among women. Finally, the chapter focuses on the consequences relating to heavy alcohol use of women.



3.2 Alcohol use

Alcohol use poses a global burden, and in 2014, 3.3 million deaths or 5.9 global deaths (4 % for women) were attributed to alcohol consumption (World Health Organization, 2014). The WHO estimates that about 76 million people worldwide suffer from alcohol-related disorders. Globally, alcohol use is the 5th leading risk factor for premature death and disability among people between the ages of 15 and 49 years. The prevalence of alcohol use varies in different countries. In the United States about 15 percent of the population experiences problems related to the use of alcohol. Of these, alcohol dependence affects about 12.5 million men and women, or almost 4 percent of the population, while people aged 65 and older have the lowest rates of alcohol dependence (Deal & Gavalier, 2011).

Alcohol use involves alcohol abuse and alcohol dependence. Alcohol abuse involves persistent drinking behavior in the face of repeated social, interpersonal, and occupational problems that are due to excessive alcohol consumption. However, abuse does not include the same compulsive drinking pattern or physical symptoms of alcohol tolerance and withdrawal that are observed in dependence (Moos & Henry, 2008). Alcohol dependence refers to a severe and persistent pattern of alcohol use which results in psychosocial or medical impairment. Symptoms can include physiological dependence, such as tolerance and withdrawal, and/or an inability to control the amount of drinking, inability to cut down even when one is experiencing problems, spending a lot of time drinking, and giving up relationships and activities in order to drink. This is the syndrome that is often referred to as alcoholism. Signs of alcohol use include the smell of alcohol on the breath or skin, glazed or bloodshot eyes, the person being unusually passive or argumentative, and/or deterioration in the person's appearance or hygiene (Valliant, 2006). Alcohol dependence is a disorder in itself, but is also a powerful mechanism, sustaining alcohol consumption and mediating its impact on both chronic and acute physiological and social consequences (Mulongeni, 2011).

The Substance Abuse and Mental Health Services Administration (SAMHSA) defines heavy drinking as drinking five or more drinks on the same occasion on each of five or more days in the past thirty days (WHO, 2012). The guidelines put forward by the National Institute on Alcohol Abuse and Alcoholism define heavy or binge drinking as operationalized for both men and women as having four or more, or five or more, drinks per occasion and moderate drinking

for women to be no more than one drink per day, and at risk-drinking to be more than seven drinks per week or more than three drinks per drinking occasion (Sher & Trull, 2014).

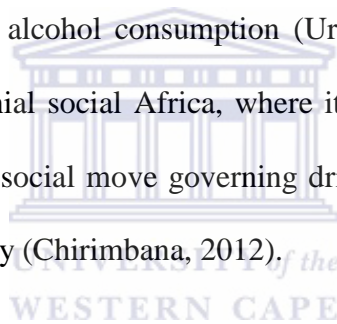
Alcohol use varies depending on an individual's social, cultural, or religious background. Those suffering from alcohol dependence drink to appease an uncontrolled craving for alcohol or to avoid experiencing the unpleasant symptoms of withdrawal (Brennan, Harrel, & Mahatma, 2012). Importantly, alcohol use takes into account the motivation behind the drinking process, drinking patterns and accommodates greater focus on outcomes that are likely to follow (Carey, 2014). The following section presents an overall overview of alcohol use in Namibia.



3.3 Alcohol use in Namibia

The Namibian Ministry of Health and Social Services (MOHSS) reported in 2012 that there were 56% of adults who drank alcohol in the country, 26% of this proportion engaged in binge drinking. The Oshana region, where this study was carried out, was reported to have 210 cases of alcohol related problems which were dealt with by the Social Workers of the Social Welfare Services office (MOHSS, 2012). Windhoek, the capital city, was described as the drinking capital of Namibia with 69% of the alcohol consumers as residents. This was followed by the Southern Regions, which showed that 65.2% were alcohol consumers (Tjatindi, 2012). On the contrary, people in the Northern Regions that included Oshana, preferred home brewed alcohol to other beverages (Chirimbana, 2012).

The consumption of alcohol beverage has a long history in Namibia dating back to the pre-colonial period. Alcohol consumption patterns in Namibia have been in transformation (Mulongeni, 2011) Traditionally, Namibians, like all Africans, indulged in beer brewing by using sorghum, maize, millet and other traditional agricultural crops. Beer served as an incentive to work and was available at different special occasions ranging from agricultural ceremonies to entertainment. Beer was not drunk at any time but only during clearly defined social and ritual occasions mostly during harvesting, funerals, weddings and cleansing ceremonies. Traditional drinking was generally acceptable among male elders, although chiefs and kings controlled the use. Drunkenness was unacceptable. Because improper behavior was condemned, the pre-colonial communities had limited alcohol consumption (Ureydarius & Patel, 2014). Similar circumstances existed in pre-colonial social Africa, where it is indicated that alcoholic content was low and because of the strict social move governing drinking ,it did not occur in the form and to the extent that it occurs today (Chirimbana, 2012).



The colonial era brought alcoholic wines and spirits into Namibia and the colonial labour system supported occasional heavy drinking. The racial liqueur laws prohibited the sale of alcohol to the indigenous people and strict regulations ruled where, when and to whom alcohol was being sold (WHO, 2012). In consequence of the legislation and the regulations, illicit trafficking increased. These regulations also supported and forced the people to adopt a particular drinking pattern known as ‘get drunk-and fast-before the bottle is taken away’. The racial liqueur law bans were later lifted. After that, alcohol consumption began to increase considerably. Since the beginning of independence in the early 1990s, the same trend has continued and the slowly widening

relative affluence has brought along a very permissive atmosphere concerning alcohol use (Debie, 2009).

In Namibia, alcoholic beverages are easily available countrywide, and alcohol abuse is a major problem, causing social and economic problems in families and society. In 2000, researchers found that alcohol was the most widely abused substance in Namibia (Debie, 2009). Early 2010 estimates indicated that 7.5% of the Namibian population had alcohol-related diseases and were thus classified as alcoholics, while Pomuti and Eiseb (2011) stated that alcohol abuse was “rampant” in many communal areas in Namibia. A total of 61% of Namibians had consumed alcohol at some time in their lives. Advertisement of alcohol is not controlled. Access to alcohol is found to be easy anywhere in the country, with communities having become more tolerant of people drinking alcohol (Mulongeni, 2011). Alcohol is readily available and its outlets are the most frequent services in the communities (Mulongeni, 2011). Production of home-brewed beverages is the dominant channel for alcohol availability. Production of home-brewed beverages is closely connected to food production in both the urban and rural areas. In Namibia, home-brewed beer is the most significant type of alcoholic beverage. Even after all the consumed alcohol is converted into absolute alcohol, home-brewed beer accounts for 67% of the total consumption. Further, consumption of homebrewed beer was highly prevalent, particularly among women. The proportions of the other types of alcoholic beverages are in the order of preference as following: store-purchased beer 15%, store-purchased hard liquor 10%, home-brewed hard liquor 6%, and wine 2%. It is illegal to brew beer at home, but control is practically

non-existent and cheap home-brewed beer found easily a market among the low- or no-income consumers (Shivute, 2009).

Much alcohol use by women takes place in both private and public drinking environments, such as pubs, bars and nightclubs (drinking venues). Well-managed drinking venues can provide some level of social protection for drinkers (for example, preventing drunk customers from accessing more alcohol or from customers being identified by many people), yet at the same time the convergence of large numbers of drinkers in public places creates conditions conducive to harm (for example, confrontation and encounters with aggressive strangers) (Carey, 2014). Thus, public drinking environments see high levels of alcohol-related harm, including drunkenness, aggression, sexual assault, public disorder, unintentional injury, drink driving and road traffic crashes (Zucker, Battistich, & Langer, 2008). In a baseline study carried out in Namibia found that 35% of formal businesses identified, were liquor outlets, making liquor sales the single largest commercial activity in the area. There are more unlicensed liquor outlets in the urban and peri-urban areas than any other type of business. These unlicensed liquor shops stock a range of drinks, the most common and the cheapest alcohol sold is tombo, which has higher alcohol content than traditionally brewed beer, but is less nutritious (LeBeau, Pendleton, & Tapscott, 2010). Traditionally, in all known societies where alcohol is consumed, the men drink more than the women. Because of this, men have been much more likely than women to experience alcohol problems (Rossouw & Van Tonder, 2007). However, in recent decades, the gap between men and women has narrowed in relation to both consumption and problems. Women represent a growing percentage of alcohol drinkers, those with alcohol problems and those with alcohol dependence (Wilsnack & Wilsnack, 2010). Wilsnack & Wilsnack (2010) identified that

women's alcohol use pattern appears to be different from men's in several ways. This intensifies the gender sensitivity in alcohol consumption. Studies further suggest that the nature of problems associated with dependence and heavy alcohol use distinguish men from women. One study of women found that 70% had a history of using prescribed psychoactive drugs, at a rate 1.5 times greater than for the alcoholic man (Wilsnack & Wilsnack, 2010). The Namibian survey indicates that women consume a relatively large portion of alcohol. In the Namibia, there has been a levelling off in female alcohol consumption in recent years and instances of heavy drinking remain at historically high levels (Strydom, 2010).

A study of the Namibian population done by then Namibian Planning Commission (2010) found that the proportion of drinkers who had drunk heavily (six or more units) at least on one occasion during the past year was 46% for women and 27% for men. Women take light alcohol (wines and ciders) which have a relatively high alcohol percentages than other alcohol beverages and the homemade type as well (Carey, 2014). The majority of women who drink alcohol do so on a weekly basis, and many of those drinkers regularly consume more than the recommended alcohol guidelines. These findings suggest that the Namibian women drinking frequency is relatively high. In Namibia, heavy drinking seems to increase by age up to age of 30 -45 for women and up to ages 40- 49 for men (Chirimbana, 2012). Chirimbana (2012) further argues that women from ages 40 -49 years have the highest frequency of heavy drinking, while for men it is most common at 30 – 39 years of age. Married male and female drinkers have six or more units on one occasion more frequency than do their single counterparts, but for women the difference is small. Heaviest drinkers among women are those self- employed and co –workers

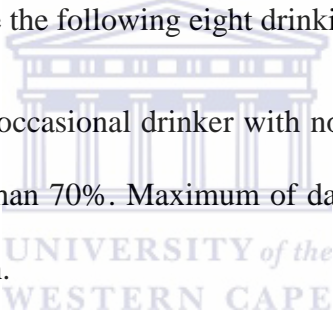
(casually employed). In fact, in the self – employed and day –worker categories, women drinkers were more frequency than men drinkers (Mustonen, Beukes, & Du Preez, 2013). Women from managerial and professional socio-economic groups – aka 'high fliers' –also drink heavily on a regular basis. This is seen as a reflection of lifestyle changes in recent decades which have made it more socially acceptable for women to consume alcohol to levels comparable with their male counterparts. (Kafuko & Bukuluki, 2012).

3.3.1 Drinking patterns

Drinking patterns form a fundamental element in alcohol use as they depict the way (process) in which alcohol motives are transformed into outcomes. Drinking patterns describe various dimensions of drinking: how people drink, the beverages they consume, how much they drink, how often they drink, where, and with whom (Carey, 2014). Patterns of drinking vary a great deal between societies; many of the developing countries are characterized by hazardous drinking patterns (Perkins, 2011). Hazardous drinking is defined as a pattern of drinking which brings about the risk of physical or psychological harm. This occurs when a person regularly drinks over the recommended daily limit. The cumulative effect over a week's worth of drinking will most likely exceed 21 units for men and 14 units for women (Macdonald, 2009). Harmful drinking, a subset of hazardous drinking, is defined as a pattern of consuming such quantities of alcohol that will cause significant harm to physical and mental health, and may cause substantial harm to others (Barry, 2013). Women, whose alcohol consumption regularly exceeds six units a day, or over 35 units a week, are at highest risk, along with men whose consumption exceeds eight units a day or 50 units a week. Harmful drinking patterns include both heavy long-term

drinking and heavy drinking episodes, such as “binge” or extreme drinking (Humphreys & Moos, 2010 :120).

Description and classification criteria of drinking patterns are according to three dimensions: frequency, average number of drinks per drinking days, and variability of drinks per drinking days. Low frequency/high amount would signify binges and low frequency/low amount would indicate less risky behaviour. As frequency increases, (that is, drinking on at least 50% of the days) the next dimension becomes variability in drinking amounts (Ureydarius & Patel, 2014). This variability is indicative of a tendency for binges, as opposed to a steady drinking pattern. Roberts and Robins (2010), outline the following eight drinking patterns found in alcohol users:

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- Type 1: Abstinent or very occasional drinker with no high drinking days. Percentage of non-drinking days greater than 70%. Maximum of daily number of drinks less than five for men and four for women.
 - Type 2: Abstinent or very occasional drinker with high drinking sometimes. Percentage of non-drinking days greater than 70%. Maximum of daily number of drinks greater than four for men and three for women.
 - Type 3: Mostly occasional drinker with relatively low or medium risky drinking. Percentage of non-drinking days less than or equal to 70% but larger than 50%. Average consumption on a drinking day less than or equal to four for men and three for women.
 - Type 4: Mostly occasional drinker with relatively medium or high risky drinking. Percentage of non-drinking days less than or equal to 70% but larger than 50%. Average consumption on a drinking day greater than four drinks for men and three for women.

- Type 5: Frequent and steady drinker mostly with relatively low or medium risky drinking. Percentage of non-drinking days less than or equal to 50%. Average consumption on a drinking day less than or equal to four drinks for men and three for women.
- Type 6: Frequent but unsteady (binge) drinker mostly with relatively low or medium risky drinking. Percentage of non-drinking days less than or equal to 50%. Average consumption on a drinking day less than or equal to four drinks for men and three for women.
- Type 7: Frequent and steady drinker mostly with relatively medium or high risky drinking. Percentage of non-drinking days less than or equal to 50%. Average consumption on a drinking day greater than four drinks for men and three for women.
- Type 8: Frequent but unsteady (binge) drinker mostly with relatively medium or high risky drinking. Percentage of non-drinking days less than 50%. Average consumption on a drinking day greater than four for men and three for women.

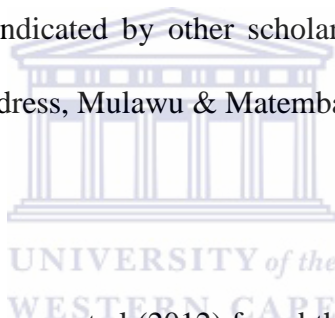
According to the Substance Abuse and Mental Health Services Administration (Bakhurst, 1991) a standard drink of alcohol is any drink that contains 0.6 fluid ounce or 17.7 ml of pure alcohol and heavy alcohol use was defined using a quantity-frequency measurement, for a 'week as usual,' for both weekdays (Monday to Thursday) and weekend days (Friday to Sunday). The pattern of drinking is operationalized mainly as the presence of heavy drinking occasions, defined as 60+ g of pure alcohol on one single occasion (corresponding to five or more drinks on the same occasion on each of five or more days in the past 30 days) (WHO, 2012). The guidelines put forward by the National Institute on Alcohol Abuse and Alcoholism (NIAAA)

define heavy or binge drinking is operationalized as men consuming at least eight and women at least six standard units of alcohol in 24 hours, that is, double the maximum recommended 'low risk limits'. It must be noted however, that this classification does not apply in practice to everyone because the tolerance and the speed of drinking in a session varies from person to person (Sher & Trull, 2014).

3.4 Women and alcohol use

Women and alcohol use is defined by Boyle and Boffetta (2009) as the way women attach themselves to alcohol. This has to do with women's behaviour in alcohol uptake. Women represent a growing percentage of alcohol drinkers, those with alcohol problems and those with alcohol dependence (Barry, 2013). Jean (2004) identified that women's alcohol use pattern appears to be different from men's in several ways. This intensifies the gender sensitivity in alcohol consumption. Studies further suggest that the nature of problems associated with dependence and alcohol use disorder distinguish men from women (Boyle & Boffetta, 2009; Cronin, 2012). One study conducted with women found that 70% had a history of using prescribed psychoactive drugs, at a rate 1.5 times greater than for the alcoholic man (John, 2011). The vulnerability of females to alcohol-related harm is a major concern because it has numerous factors involved such as risk sexual behavior that contributes to the spreading of HIV. According to Pretorius "there is a correlation between alcohol consumption and HIV risk contraction" (Deress & Azazh, 2012)

Heavy drinking at the workplace may potentially lower productivity. Sickness absence associated with harmful use of alcohol and alcohol dependence entails a substantial cost to employees and social security systems (Ellickson, Collins, Hambarsoomians, & McCaffrey, 2008). There is ample evidence that people with alcohol dependence and problem drinkers have higher rates of sickness absence than other employees (Kidorf, Sherman, Johnson, & Bigelow, 2015). Kidorf et al. (2015), further noted that a number of studies in Namibia have demonstrated an association between heavy drinking or alcohol abuse and unemployment. Here, a causal association may go in either direction. Heavy drinking may lead to unemployment as suggested by Cronin (2012) and Debie (2009) but loss of work may also result in increased drinking, which may become heavy drinking, as indicated by other scholars (Deress & Azazh, 2012; Cronin 2012; Mustonen, et al, 2013, Latendress, Mulawu & Matemba, 2011).



Deress and Azazh (2012) and Brennan, et al (2012) found that work performance was related to volume and pattern of drinking among the Damara women who drink heavily. Ureydarius and Patel (2014) and her colleagues found no significant relationship between work performance and average daily volume when performance was assessed by self-reports of the drinker among those men working in one of the construction companies. However, lower performance, lack of self-direction and problems in personal relations were found to be related to heavy drinking among men and women working on the farms, particularly when collateral reports were used. A study by Debie (2009) found that although moderate to heavy and heavy drinkers reported more work performance problems than very light, or moderate drinkers, the lower-level-drinking employees,

since they were more plentiful, accounted for a larger proportion of work performance problems than did the heavier drinking groups in central Namibia for both men and women.

Women and alcohol use deals with the effects of the consumption of alcohol by women. Alcohol is a depressant and after consumption alcohol causes the body's systems to slow down. Feelings of drunkenness are associated with elation and happiness but other feelings of anger or depression can arise (Shivute, 2009). Alcohol is a high risk factor for premature death, and it has been linked to more than sixty diseases and conditions, affecting nearly every organ in the body. Misuse of alcohol can cause health and social problems, including chronic ill-health, violence, mental health difficulties, and relationship problems, as well as indirect effects on those around the drinker (Hughes, 2007). All the evidence shows that alcohol in general has more negative than positive effects on a person's health. Research has shown that although women on average consume less alcohol than men, the impact of alcohol on their health is often disproportionately high. Women appear to be more vulnerable than men to many adverse health consequences of alcohol use. Women's biological make-up is partly responsible; since women have a proportionally higher ratio of fat to water than men they are less able to dilute alcohol within the body, and will therefore have a higher concentration of alcohol in their blood than men after drinking the same amounts of alcohol (Institute of Alcohol Studies, 2008). This means that women are significantly more impaired than men after drinking equivalent amounts of alcohol. Women's hormones also affect how much and how quickly alcohol is absorbed. Hormonal levels during ovulation and the premenstrual period in some women mean alcohol takes longer to be metabolized; thus blood alcohol concentrations are higher and more prolonged, and women may be more affected by alcohol during those times (Agrawal, et al, 2008).

Women are generally more vulnerable to the effects of alcohol because on average, women weigh less and people who weigh less reach higher blood alcohol levels (Deal & Gavalier, 2011). This means they have less tissue to absorb alcohol. Women have more adipose tissue (fat), causing alcohol to be absorbed more slowly and the effects of alcohol to take longer to wear off. Women have lower levels of the enzymes that break down alcohol. This lower level of enzymes means that alcohol remains in a woman's system longer (Barry, 2013). Women have been found to develop alcohol-related health problems earlier in their drinking careers than men (Morgan, et al 2010). Ellickson et al. (2008) found that the risk of developing alcoholism for women increased significantly with even low intakes of alcohol (1-7 drinks per week), whereas the risk for men only increased significantly with the consumption of more than twenty-one drinks per week. Drinking above the guidelines of more than fourteen standard drinks per week for women is, therefore considered risky, and it has been linked to increased risk of long-term harm, such as high blood pressure, cancers, liver cirrhosis and alcohol abuse (Cronin, 2012).

Women who drink heavily are at higher risk of brain shrinkage and impairment. Using magnetic resonance imaging (MRI), researchers found that a brain region involved in coordinating multiple brain functions was significantly smaller among alcoholic women compared with both non-alcoholic women and alcoholic men, suggesting that women's brains may be more vulnerable to alcoholic damage than men's (Institute of Alcohol Studies, 2008). Misuse of alcohol by young people can be particularly damaging, as this is the time when the brain develops rapidly and research has found that alcohol use at this stage can irreparably damage the

prefrontal cortex (responsible for self-regulation, reasoning, judgment, and problem-solving) and the hippocampus (involved in learning and memory) (Plant, 2009). This finding is of particular concern given the increasing numbers of young women misusing alcohol in Namibia.

Drinking at levels above the recommendations can lead to a wide range of long-term health problems, including alcohol dependence and chronic disease. Women are more susceptible to alcohol-related heart disease and the risk of stroke is at least double the risk for men when they exceed the limits. As well, women who drink alcohol are more likely to develop alcoholic hepatitis than men, and alcohol consumption can increase the chances of developing certain types of cancer (Valliant, 2010). Higher blood ethanol concentrations can affect the risk of dependence at an earlier stage for women. Dependence jumps dramatically for men who exceed 7/8 drinks per occasion, but it can affect women sooner, that is who drink 5/6 drinks per occasion (aka binge drinking levels). Heavy steady chronic drinking at sufficiently high levels can also lead to the physiological changes that result in alcohol dependence – including liver diseases such as cirrhosis and hepatitis – after a comparatively shorter period of heavy consumption than men (Mann, Batra, Gunthner, & Schroth, 2009).

The World Health Organisation [WHO] states that alcohol consumption, especially at harmful and hazardous levels is a major contributor to the occurrence of intimate partner violence and links between the two are manifold. Victims may also use alcohol as a coping mechanism and, in some cases, this may be used by violent partners as an excuse for continued abuse (WHO, 2011). Experiences of violence, family and inter-personal problems, financial problems, unplanned sex,

unintended pregnancy and work or school-related problems are common harms associated with drinking. Women are particularly at risk of experiencing gender-based violence. Drinking by both women and men can affect judgment and the ability to evaluate risk, and therefore increases women's vulnerability to aggression, date rape, violence. In a general population survey published by Alcohol Action Ireland, 57% of Irish people said they had been concerned about someone else's use of alcohol and many reported experiencing harm as a result of their own or someone else's drinking (Simons, et al., 2007). Young women have been found to be more likely to suffer negative experiences than their older counterparts, with misuse of alcohol particularly harming their work and friendships, and causing them to get into fights and have accidents (Lader & Meltzer., 2010).

In addition to the physical consequences, alcohol misuse can also affect a woman's relationships and her personal life. In the U.K., for example, it has been estimated that alcohol consumption contributes to one in three divorces and, here in Ireland, marriage counselling services report that alcohol misuse is the primary presenting problem in up to 25% of the cases (Omura, Constable & Canli, 2006). A survey by Wilks and Callan (2009) produced similar findings; over half of female students (55%) said that they had experienced at least one harm, most commonly verbal abuse (25%), arguments with friends (21%), and relationship difficulties (16%) as a result of alcohol consumption.

Mulongeni (2011) has highlighted an undeniable link between the over-consumption of alcohol and risky sexual behavior. The same study found that over a quarter of women respondents (26%) and 45% of men said that drinking alcohol had contributed to them having sex without

using contraception, and 41% of women and 55% of men reported alcohol or drug use at the time of conception of a crisis pregnancy. A *Well Woman Centre* study found that women who had been drinking were more likely not to use contraception than those who had not. 42% of those requesting emergency contraception said they had been drinking when unsafe sex occurred compared to 28% who said they had not consumed alcohol (Varlinskaya, Spear & Spear, 2009).

3.5. Psycho-social determinants of drinking alcohol

Psycho-social factors are embedded in human social relations and human beings interact with the environment in this development which is rooted in the behaviour and mind (experience) (Momtahan, 2008). Social relations or an interaction is an elementary component of all relationships and groups that make up human society. Behavior refers to any action or reaction that can be measured or observed and mind refers to both conscious and unconscious mental states (Deress & Azazh, 2012). Psycho-social determinants reveal how the thought, feeling and behavior of individuals are influenced by the actual, imagined or implied presence of other human beings towards heavy drinking of alcohol, thus pointing out how individuals' perceptions, belief systems, moralities, identities, and behavior in their positions in social space (both the mental processes and social) determine alcohol use (Davis, 2011). Barry (2013) states that different motives for drinking are thought to relate to primary psychological effects that are experienced with the consumption of alcohol by the individual. Alcohol expectancies are defined as specific beliefs the individual has about the behavioural, emotional and cognitive effects of alcohol (Kidorf, et al, 2015). There is no single definition of the social determinants of alcohol use disorder, but there are psychological and social factors, for example unemployment, poverty, family dysfunction, community, stress and cultural factors that can be classified as

psycho-social determinants (Tjatindi, 2012). Psycho-social determinants of alcohol use are presented in two broad categories which are: (a) psychological determinant factors and (b) social determinant factors.

3.5.1 Psychological determinants

Psychological determinants are concerned in building a body of knowledge which explains how and why individuals behave the way they do, thus aiming to discover the common patterns or principles as well as to identify the circumstances which emphasize the difference between individuals in such areas as their behavior, abilities and interests (John, Naumann, & Soto, 2008). Barry (2013) indicates that there has been a growing interest directed toward identifying personality correlates of alcohol use. The importance of identifying personality factors that predict alcohol use cannot be overlooked. In psychology, personality is regarded as a collection of emotional, cognitive and behavioral patterns unique to a person that is relatively consistent over time.

3.5.1.1 Personality

Personality refers to characteristic ways of thinking, feeling and acting that show some consistency when measured across situations and over time. Research on personality and alcohol use and misuse here is organized based on three, broad-based personality constructs: impulsivity/disinhibition, extraversion/ sociability and neuroticism (Sher & Trull, 2014).

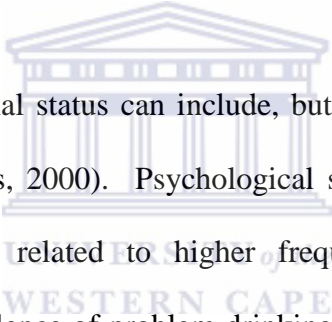
Impulsivity/disinhibition: Brennan, et al, (2012) noted that a general personality dimension described as "impulse expression / sensation seeking" was associated with drinking more

frequently, in greater quantities and with more negative consequences among Namibian men and women. In these early studies, heavier drinkers were described as pleasure seeking, extraverted, impulsive, rebellious and non-conforming. This relationship appeared true for both men and women and for studies of observed behavior as well as self-report. Brennan, et al. (2012) further documented that heavier drinkers consistently endorsed attitudes that were permissive of heavy drinking. This relationship between a personality style of sensation seeking, disinhibition and nonconformity has been replicated consistently. Heavy drinking women are described as impulsive (Debie, 2009) and disinhibited (Carey, 2014). These women drink more heavily and more frequently than other women. Heavy drinking women with a history of deviant conduct not only drink more before entering high school, but increase their drinking rates to a greater degree on after adolescence exit (Sher & Trull, 2014).

Three individual difference characteristics that overlap conceptually and cluster together empirically impulsivity, sensation-seeking, and behavioral under control are consistently related to heavy alcohol consumption and alcohol-related problems (Robbins, 2005). Sensation-seeking, is being easily bored and having difficulty in postponing gratification, so the individual may use alcohol in order to enhance positive mood.

Extraversion/sociability personality: Dimension of extraversion/sociability has also been investigated as an individual difference predictive of drinking among the Namibian women (Kafuko & Bukuluki, 2012; Latendress, Mulawu, & Matemba, 2011). Women rated as extraverted (Debie, 2009) and those who rate parties as important (Deress & Azazh, 2012) have been shown to drink more than other women. Mustonen et al. (2013) noted a positive relationship between drinking and sociability. By analyzing daily logs of drinking and social

activities of drinking men and women, Cronin (2012) concluded that the greatest intimacy was experienced by women who drank heavily occasionally. Those women who did not drink reported less intimacy and less self-disclosure, and men who drank heavily frequently rated their interactions as less intimate than any other group of men or women (Agoabasa, 2012). Alcohol is a social lubricant and assists people to relax, converse more easily and mix socially. It disinhibits defenses and facilitates “good company” (Robbins, 2005:67). Mustonen et al. (2013) suggested that women who have some heavy drinking experiences (but not a great deal) appear most integrated into the drinking community. Thus, extraversion/sociability is related to drinking rates among women, but less related to drinking problems.



Neuroticism/emotionality: Emotional status can include, but is not restricted to anxiety, stress, depression, and child abuse (Coles, 2000). Psychological stress includes depression, anxiety, irritability, denial, and anger is related to higher frequencies and volumes of alcohol consumption and to a higher prevalence of problem drinking (for example, alcohol dependence, intoxication, and negative consequences). The “stress-response-dampening theory” argues that individuals consume alcohol to reduce the intensity of their response to anxiety and stress, which results in higher levels of alcohol consumption (Kotov, Gamez, Schmidt & Watson, 2010; Gill, 2008). To cope with psychological distress feelings, more alcohol may be consumed and this may lead to more alcohol-related health problems (Hampson, Andrews, Backley & Stevenson, 2009; Park, Sher & Krull, 2008). A related theory is that heavy drinking is part of a style of coping with stress that involves denying or avoiding one’s negative emotions, and that individuals are more likely to engage in denial or avoidance of emotions. Avoidant coping, measured with responses to stressors such as avoiding being with people and daydreaming about

better time, have been related to greater alcohol consumption and problems (Deal & Gavalier, 2011).

Some researchers argue that women's drinking is more often the result of an underlying depression (Encarta, 2009). Studies by Ureydarius and Patel (2014) revealed mixed support for a relationship between drinking patterns of heavy drinking women and anxiety, depression and other indices of emotional distress. Ureydarius and Patel (2014) noted furthermore a relationship between variables such as loneliness, frustration, depression and boredom and heavy drinking frequency, quantity and consequences among females but not males. Some individuals drink heavily as a result of a low self-esteem (Deal & Gavalier, 2011). Carey's (2014) review showed a relationship between frequency and problems of drinking and lower self-esteem, although one study specifically tested for this relationship and did not find it (Mustonen et al, 2013). Mustonen et al. (2013) interpreted that a relationship between self-esteem and heavy drinking was stronger among females than males in Oshikango. Debie (2009) found that low self-esteem at baseline prospectively predicted alcohol use disorders at three minus (3-) and four minus (4-) year follow-up among women in Windhoek than in Eastern Namibia. It is noteworthy that Debie (2009) tested and ruled out the reverse effect, that heavy drinking or drinking problems create low self-esteem. Rebelliousness, being anti-establishment or being against laws is a psychological trait which contributes to "macho" behavior. Mostly men consume large amounts of alcohol as an indication of their strength and manliness (Valliant, 2006). Behavior such as drinking more than anyone can do, or quicker than anyone else is often regarded as admirable masculine qualities. With changing gender roles, some women also "prove" themselves with binge drinking patterns (Coles, 2000).

3.5.1.2 Sensation seeking and mood enhancement

Women drink heavily for them to boost their mood. This suggests that sensation seekers could be more susceptible to feeling tiresome and bored for any given stimuli. One previous study showed that sensation seeking had a positive relationship to anhedonia which is a primary symptom of depression (Barry, 2013). Another study was performed in smokers before and during smoking cessation with a transdermal nicotine patch (Lader & Meltzer, 2010). Other studies examine the potential impact of behavioral disorders such as Barry (2013) by examining the relationship between investor mood and the willingness to take risk, as well as the potential financial ramifications of such a relationship (Humphreys & Moos, 2009). For example, Carton et al. (1995) conclude that depression reduces risk seeking (thereby increasing the general level of pessimism), and, as such, affected individuals are more reluctant to make decisions that have a greater level of risk or necessitate optimistic thinking. Individuals, therefore, require a higher return in such an environment.

3.6 Social Determinants

There are many social determinants that can lead to alcohol use among individuals (Momtahan, 2008). These social determinants include family, friends, social class, education, income, occupation, and religion. Social context is a term that is used to attempt to characterize social and psychological environments where drinking takes place, and in so doing, attempt to measure the interaction of interpersonal, temporal and situation factors (Debie, 2009). Social contexts for drinking naturally vary with respect to participants' age, gender, living situation, work and thus

hold promise for capturing differences and similarities in drinking practices (Latendress, Mulawu, & Matemba, 2011). Drinking contexts can be described without psychological features, but simply by the size and the composition of participants. Carey (2014) reported that larger drinking groups in Namibia were associated with greater consumption of alcohol. The following determinants were noted by social pressure to drinking: pleasant times, pleasant emotions and physical discomfort are the various reasons that force women in Northern Namibia to drink heavily (Deress & Azazh, 2012).

3.6.1 Family

Studies found that the greatest risk factor for alcohol use and abuse is family history. Although genetics have a significant role in alcohol abuse, the family environment has a role in both developing and protecting one from abuse and dependence (Macgowan & Rice, 2003). Research shows that family history leads to alcohol use in two ways. First, when some family members drink (Social Drinking Model), other family members are influenced to drink (by observing and learning). Therefore, family drinking behavior becomes a future indication of alcohol problems (Barry, 2013). For example, children of alcoholics, especially males, are more inclined to develop alcohol issues than children of non-alcoholics (Chipperfield & Vogel-Sprott, 2007). Many researchers agree that a family history of drinking problems is an important correlated of drinking behavior (Barry, 2013). People with a family history of alcohol problems may have different drinking patterns from those who do not have such a family history; in addition, those drinking patterns may lead to greater drinking problems (Carey, 2014).

Parental drinking patterns have been shown to affect offspring over the life course. Young people model their own behavior on their parents' patterns of consumption (including quantity and frequency), situations and contexts of use, attitudes regarding use, and use expectancies (Huselid & Cooper, 2010). Young adult offspring from the families with alcoholism had elevated levels of alcohol problems compared with peers with no family history of alcoholism. The likelihood of starting to drink was also found to relate to adolescent perceptions of greater mother's and father's permissiveness and to lower levels of adolescent identification with the mother. The structure and environment of the family unit, as well as parent-child relationship attributes (for example, parenting style, attachment and bonding, nurturance, abuse or neglect, conflict, discipline, and monitoring), have been found to correlate with adolescent alcohol use (White, 2010).

Studies by Mustonen et al. (2013) found that the following factors are more influential to heavy drinking among women: poor parental monitoring, marital and family problems and peer influence, conducive environmental for alcohol use and alcohol availability, ability to buy alcohol and to socialize. Parental alcohol use disorders have been found to negatively affect the family situation during childhood. Parents who heavily drink display particular patterns of alcohol consumption and thereby increase the likelihood that their children will develop drinking disorder when they are introduced to alcohol when they are young (Carey, 2014).

The behavior of both parents with respect to drinking has been studied as a predictor of an individuals' drinking behavior. Studies by Deress and Azazh (2012) on parental reports of drinking practices of man and women and women in central Namibia showed that those

individuals who were brought up by parents who were heavy drinkers of alcohol were seven times more likely to be heavy drinkers than those who were brought up by parents who do not drink. Studies by Kafuko and Bukuluki (2012) and Carey (2014) on the same aspect, showed a positive but small effect, suggesting heavy drinking was associated with increased drinking by their parents. Studies were inconsistent with respect to gender differences, with some suggesting the effect was stronger among men and other studies suggesting the effect was stronger among women. All studies were based on women's perceptions of parental behavior, which could easily be confounded by the women's own drinking practices and perceived norms for drinking. These findings suggest that the aspect of heavy drinking among individuals can best be explained from a genetic and upbringing perspective. However, the parental upbringing of the women who drink heavily in Oshakati remains unknown (Agoabasa, 2012).

It is possible that problems with generalized parenting skills, not restricted to parental alcohol use, are associated with heavy drinking women's adjustment, which then indirectly affects alcohol use; this indirect relationship has been described in research on adolescent alcohol use (Debie, 2009; Mustonen et al, 2013). Among heavy drinking women in Namibia, Perkins (2011) reported that a family history of depression was predictive of alcohol misuse, but not a family history of drinking problems. In order to mitigate on the heavy drinking habit of individual, Carey (2014) suggests that effective parenting had the potential on an individual's heavy drinking habit. There is some suggestion that the relationship between parent and an individual's heavy drinking habit exists only when the parent-child relationship is experienced as close or the individuals perceive themselves as similar to the parent (Barry, 2013).

3.6.2 Marital Status and Parenthood.

A study conducted by Ureydarius and Patel (2014) found that being married had a strong effect in heavy drinking behavior. Married women had the least of chances of being engaged in heavy alcohol use compared to women in all other categories of living arrangements (that is, co-habiting or living with parents, in a dormitory, alone, or in other arrangements). A different study by Huselid (2009) also indicated that becoming engaged (that is, making a commitment to a relationship) had a similar but less powerful effect on drinking compared with marriage, whereas becoming divorced led to increased drinking behavior. Being a parent also was related to reductions in alcohol use for both men and women, although a large part of this effect was simply a result of getting married. Most women who became pregnant eliminated their indulgence in alcohol use (Huselid, 2009). A study by Moos (2008) unveiled that alcohol abuse increases the feelings of marital distress. Individuals in marriages in which one or both spouses is an alcoholic report higher levels of marital distress or trouble than do married individuals who are not married to alcoholics. Another study by Zuckerman (2000) established that marital satisfaction is related strongly to a couple's ability to communicate effectively. But heavy alcohol use is associated with more negative and hostile communication, more expressions of anger, and less warmth and unity in the relationship. These factors decrease a couple's satisfaction in their marriage and create greater tension. Martinic and Measham (2008) noted that alcohol abuse decreases marital satisfaction because it decreases the drinking spouse's ability to participate in everyday household tasks and responsibilities. This inability leads to greater stress on the non-drinking spouse and decreases satisfaction in the marriage (Macdonald, 2009). In another study Macdonald (2009) found out that alcohol abuse increases the psychological distress of the non-

drinking spouse. An adult's alcohol abuse also is related to children's increased social, emotional, behavioral, and academic problems, which, in turn, leads to more stress in the family and less marital satisfaction.

3.6.3 Cultural practices.

Culture is the pattern of behavior and thinking that people living in social groups learn, create, and share (Deal & Gavalier, 2011). Culture distinguishes one human group from others (Encarta, 2009). Social norms or practices within different cultures shape common perceptions and behaviors around drinking. Cultures accepting heavy drinking and alcohol-centred recreation create a significant risk for alcohol use and abuse (May 2015).

Some studies have acknowledged that the problem of drinking alcohol cannot be separated from the pervasive culture that accepts and supports frequent, and often reckless, use of alcohol. For example, alcohol use in Russia is excessive and the annual consumption of alcohol is among the highest in the world (Macdonald, 2011). Similarly, Italian studies have commented on the distinctive drinking patterns in Italian culture. Although binge drinking behaviour is rare in Italy, in rural areas, daily consumption of “moderate” or marginally amplified amounts of wine with meals is so extensive that abstainers are rare, and the vast majority of women continue to drink even during pregnancy (Coles, 2010). Cultures differ in the degree they accept drinking and tolerate particular behaviors. For instance, the “Wet” cultures (for example, the Mediterranean) are characterized by greater tolerance and integration of drinking, particularly on social occasions and with meals, and by moderate drinking patterns and stigmatization of chronic heavy drinking and drunkenness. On the other hand, the “Dry” drinking cultures (for example, the

Nordic European countries), are traditionally less permissive of regular drinking but characterized by episodes of heavy consumption and tolerance for drunken behavior (Deress & Azazh, 2012). These drinking settings and venues vary across cultures, but will affect the common drinking patterns and practices.

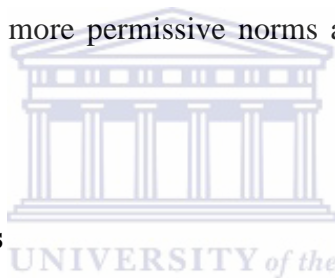
The Namibian cultures are quite diverse and the way alcohol is perceived varies from tribe to tribe. Among the Damaras, the drinking of alcohol can start from any age, and is acceptable, but among the Oshiwambo speaking people and the Herero's, only those children who are no longer in school can drink openly (Mulongeni, 2011).

3.6.4 Loss of religion.

Religion is sacred engagement with that which is believed to be a spiritual reality. Religion is a worldwide phenomenon that has played a part in all human culture and so is a much broader, more complex category than the set of beliefs or practices found in any single religious tradition (Encarta, 2009). Most major religions provide paths that deliver individuals from the bondage of sin, immorality, ignorance, and other types of impurity or disharmony and lead them toward a state of purity of soul, spiritual knowledge, wisdom, godliness, enlightenment, or even eternal life. The three major world religions, Judaism, Islam and Christianity discourage alcohol use in their doctrines (Agoabasa, 2012). Cronin (2012) is of the belief that "religion is important", was significantly and independently related to reduce frequency of heavy drinking among young adolescence in central Namibia. Deress and Azazh (2012) similarly noted that women who

endorsed the response that "religion was not important" drank more heavily and reported greater incidences of drinking problems compared with others.

In a recent survey by Kitsuse and Spector (1975) it was noted that women in Northern Namibia with no religious affiliation drank more frequently and higher quantities but did not have greater problems than those with religious affiliations. Lack of religious affiliation was also associated with higher perceived drinking norms. Perkins (2011) also suggested that religiosity may protect against heavy drinking under contexts of greater ambiguity about drinking (less constraint). In his study, Perkins (2011) found out that the relationship between religiosity and drinking was greatest among men at periods of more permissive norms and when men perceived norms as more permissive.



3.6.5 Education and Social Status

Social marginalization has been associated with high prevalence of alcohol use disorders (Barry, 2013) Drinking patterns and outcomes of drinking are correlated with an individual's socio-economic status, including employment and income level (Barry, 2013). He further suggests that there is a positive relationship between being a current drinker and an individual's education level and income. Higher rates of alcohol abuse have been reported among the indigent and homeless although there is variation across countries (Agoabasa, 2012). Women's Socio-Economic Status (SES) and educational level are important factors that influence one's well-being. Although alcohol use affect individuals from all walks of life and has been identified among all SES groups and nationalities, those most affected are poverty-stricken and bear the greatest burden (Armstrong & Abel, 2009). Studies have shown that the use of alcohol is

relatively high in low SES women. Drinking behaviors in a study by Coles (2010) were the highest among those with lower education and lower income. The implication here is that, women from lower socio-economic standings were more likely to engage in heavy alcohol use whereas women who are highly educated and have high socio-economic status are less likely to engage in heavy alcohol use. Therefore, it entails that low social status is a contributing factor towards alcohol abuse among women.

Results from a study by Saatcioglu (2010) showed that a higher percentage of those in high social classes reported drinking alcohol two to three times a week or more often, and that women from this social class were more likely to consume more than the recommended amount of alcohol per week than those in the other social classes . It has been suggested that the increased opportunities for women in society have led to women having more opportunities to drink than they did previously and to the greater acceptability of women's drinking (Moos, 2008). Although women with higher levels of education are more likely to drink at least occasionally, paid employment does not consistently raise the likelihood that women will drink heavily (twelve or more drinks per week) (Wilsnack & Wilsnack, 2010).

On a contradictory note, a different study by (Gill, 2008) showed the link between status and consumption appears to go further than the drinking habits of female high-fliers. There is evidence to suggest an association between education and consumption levels. The study found out that the more educated women are, the more likely they are to drink alcohol on most days

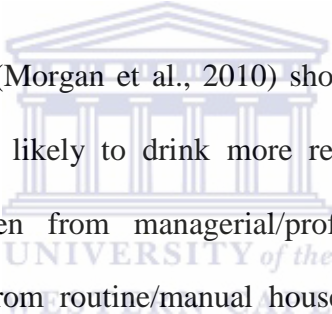
and to report having problems due to their drinking patterns. The relationship is stronger for females than males. Humphreys and Moos (2009) offer a set of explanations for the positive association between education and drinking behavior which includes a more intensive social life that encourages alcohol intake; a greater engagement into traditionally male spheres of life, a greater social acceptability of alcohol use and abuse; more exposure to alcohol use during formative years; greater postponement of childbearing and its responsibilities among the better educated, and smaller underreporting.

3.6.6 Employment/ Occupation.

Bachman (2009) reported that people who obtained fulltime civilian employment after high school showed a slight increase in current drinking (past 30 days) and a slight decrease in heavy drinking. In contrast, those who joined the military reported greater than average increases in current drinking and in heavy drinking. These changes persisted when other variables were controlled, suggesting that the military experience contributes to increased alcohol use. Unemployed men, but not women, significantly reduced their drinking. Homemakers also reduced their current and heavy drinking, but the author suggests that this change was a result of their marital and parental status rather than the role of being a homemaker (Plant, 2009).

Overall, people with higher levels of education and those in employment are more likely to consume alcohol than those working within the home and those who finished their education by age fifteen (Flensburg, Knop, Lykke Mortensen, Becker, & Gronbaek, 2008) . Results from a study by Saatcioglu (2010) showed that a higher percentage of those in high social classes

reported drinking alcohol two to three times a week or more often, and that women from this social class were more likely to consume more than the recommended amount of alcohol per week than those in the other social classes. It has been suggested that the increased opportunities for women in society have led to women having more opportunities to drink than they did previously and to the greater acceptability of women's drinking (Barry, 2013). Although women with higher levels of education are more likely to drink at least occasionally, paid employment does not consistently raise the likelihood that women will drink heavily (twelve or more drinks per week) (Wilsnack & Wilsnack, 2010).

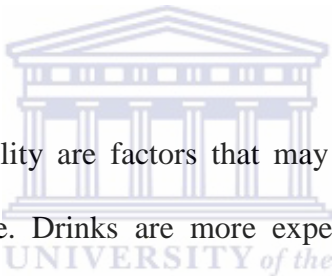


Results of a study carried out by (Morgan et al., 2010) showed that women from managerial/professional households are more likely to drink more regularly than women from routine manual households. Also, women from managerial/professional households drink more frequently compared to women from routine/manual households. The economically inactive drink heavily (more than six units) on one day.

3.6.7 Alcohol availability and accessibility.

It is important to consider the socio-environmental factors such as accessibility and law/policies which oppose or support use of alcohol. Unregulated production, distribution, commercialized alcohol sales and alcohol availabilities contribute to an increase of alcohol consumption (Kluwe, 2007). Environmental factors such as economic development, culture, availability of alcohol and the level and effectiveness of alcohol policies are relevant factors in explaining differences in vulnerability between societies, historical trends in alcohol consumption and alcohol-related

harm (World Health Organisation, 2012). The availability and cost of alcohol and other substance abuse clearly influence overall patterns of use (Debie, 2009; Barry, 2013; Mustonen, et al., 2013) and can contribute to use and relapse. There is also evidence that low price influences people who drink heavily in the community. A person's decision to drink alcohol is potentially influenced by both place and availability of alcohol in the local area. A study carried out by Karriker-Jaffe and Kaskutas (2009) showed that density of bars within 0.5 km of a person's residence is associated with small increases in alcohol consumption. Hence, bar density in an area surrounding the individual's home has, at most, a positive effect on alcohol consumption.

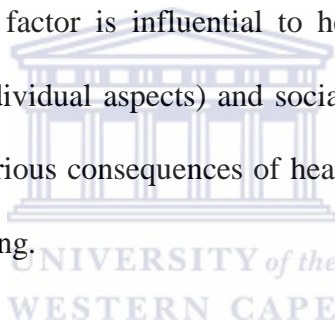


Physical availability and affordability are factors that may contribute to the level of alcohol consumption among young people. Drinks are more expensive in clubs and bars, so some individuals often consume alcohol at home before they go out (Cronin, 2012). The introduction of ready-to-drink (RTD) or 'alcopop' products, specifically designed to appeal to young people is also often cited as a factor influencing consumption among young people. However, alcohol producers point out that RTD comprises only 4% of total drinking (by volume) (Latendress et al., 2011). Bars designed to offer drinking while standing as the only entertaining activity ('vertical drinking establishments'), and irresponsible promotions, such as happy hours, 'two for the price of one' are thought to significantly contribute to heavy drinking among young people. Overall, price, availability, taste and image undoubtedly play a role in influencing drinking patterns and preferences. However, the interplay between these factors and other variables such as attitudes,

cultural norms among peers, expectancies and context all play a role in shaping drinking behavior among young people (Park. et al, 2008).

3.7 Conclusion

This chapter presented the literature review of the study. It started off by elaborating alcohol use from an extensive point of view down to the Namibian context. The following part gave an overview of women and alcohol in Oshana Region followed, thus, deliberating on how alcohol is taken in the Namibian setting. It then gave the various psycho-social factors that are determinant to heavy drinking and how each factor is influential to heavy drinking. These factors were presented two-fold: as psycho (individual aspects) and social (interpersonal relations). The last part of the chapter outlined the various consequences of heavy drinking and their repercussions to women involved in heavy drinking.



CHAPTER FOUR

RESEARCH METHODOLOGY

4.1 Introduction

Chapter 3 provided a literature review for this study. This chapter presents the research methodology as applied during the research study following a brief overview of the methodology in Chapter 1. This will include an explanation of the research design, research approach, research

question, aims and objectives, methodology, data collection, data analysis, data verification and trustworthiness and ethics considerations and how they were negotiated throughout the research process.

4.2 Research Design and Approach

Research design provides the glue that holds the research project together (Trochim, 2015). A design is used to structure the research and to show how the major parts of the research project work together in addressing the central research questions (Baker, 2015). The research design provides the components and the plan for successfully carrying out the study, hence the research design is the “backbone” of the research protocol (Polit & Beck, 2014). The study adopted a descriptive and an explorative research design with descriptive design being a scientific method and involves observing and describing the behaviour of a subject without influencing it in any way (Brickman, Leonard, & Debra, 2016). A descriptive study is one in which information is collected without changing the environment (that is, nothing is manipulated) (Denzin & Lincoln, 2005).

In human research, a descriptive study can provide information about the naturally occurring health status, behaviour, attitudes or other characteristics of a particular group (Trochim, 2015). A descriptive design was appropriate for the study because it required analysing and describing collected data inform of behaviours (Cohen, 2006), attitudes and characters underlying in the psychosocial aspects influencing heavy alcohol drinking amongst women in Oshana, Namibia. Exploratory research is defined as the initial research into a hypothetical or theoretical idea (Ader, 2015). This is where a researcher has an idea or has observed something and seeks to

understand more about it (Valliants, 2010). An exploratory research project is an attempt to lay the groundwork that will lead to future studies or to determine if what is being observed might be explained by a currently existing theory. Most often, exploratory research lays the initial groundwork for future research (Kothari, 2014).

4.3 Research question

A research question is the fundamental core of a research project, a study, or review of literature and focuses the study, determines the methodology, and guides all stages of inquiry, analysis, and reporting (Gay, Mills, & Airaian, 2016). Specifying the research question is one of the first methodological steps the investigator has to take when undertaking research (Cox, 2015). The research question therefore should be a clear, focused question that summarizes the issue that the researcher will investigate (Hulley, Cummings, & Browner, 2014).

The research question of the study is:

- What are the psycho-social determinants of heavy alcohol drinking among women in Oshana, Namibia?

4.4 Aims and Objectives.

4.4.1 Aim of the study.

The aim of this study is to explore the psycho-social determinants of heavy alcohol drinking among women in Oshana, Namibia.

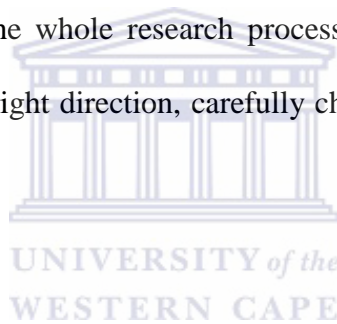
4.4.2 Objectives of the study.

The objectives of this study are to:

- explore and describe the reasons for women's alcohol use in the Oshana, Namibia.
- explore and describe the psychological and social factors that affect women's drinking.

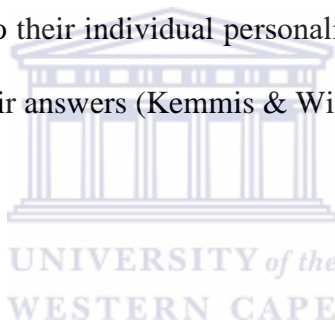
4.5 Research Methodology.

Research methodology is a systematic way to solve a problem; it is a science of studying how research is to be carried out (Brickman, Leonard, & Debra, 2016) and provides the procedures by which researchers go about their work of describing, explaining and predicting phenomena (Franklin, 2012). In simple terms, methodology can be defined as, giving a clear cut idea on what methods or processes the researcher is going to use in his/her research to achieve the research objectives. In order to plan for the whole research process at the right point of time and to advance the research work in the right direction, carefully chosen research methodology is very critical (Silverman, 2015).



The study adopted an inductive qualitative research approach defined as “a form of systematic empirical enquiry into meaning” (Christensen & Johnson, 2012:56). By systematic, they mean “planned, ordered and public,” following rules, agreed upon by members of the qualitative research community. By empirical, it means that this type of inquiry is grounded in the world of experiences and inquiry is about the researcher trying to understand how others make sense of their experiences. Strauss & Corbin (2014), claim that qualitative methods can be used to better understand any phenomenon about which little is yet known. They can also be used to gain new perspectives on things about which much is already known, or to gain more in-depth information that may be difficult to convey quantitatively. Qualitative research has an interpretive character,

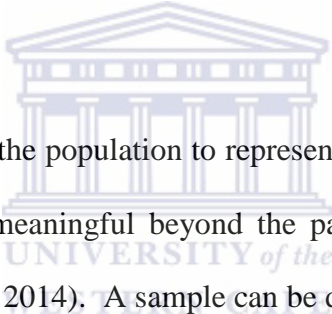
aimed at discovering the meaning events have for the individuals who experience them and the interpretations of those meanings by the researcher (Kothari, 2014). An advantage of qualitative methods in exploratory research is that use of open-ended questions and probing gives participants the opportunity to respond in their own words, rather than forcing them to choose from fixed responses, as quantitative methods do. Open-ended questions have the ability to evoke responses that are meaningful and culturally salient to the participant, unanticipated by the researcher, and rich and explanatory in nature (Saunders, 2015). Another advantage of qualitative methods is that they allow the researcher the flexibility to probe initial participant responses – that is, to ask why or how. The researcher must listen carefully to what participants say, engage with them according to their individual personalities and styles, and use “probes” to encourage them to elaborate on their answers (Kemmis & Wilkinson, 2014).



4.6.1. Population and sampling.

A study **population** is a term that sets boundaries on the study units (Denzin & Lincoln, 2005) and also known as a well-defined collection of individuals or objects known to have similar and/or specific characteristics (Taylor, 2015). Population is defined “the aggregate or totality of those conforming to a set of specification “(Polit & Beck, 2014). It is also further defined by Babbie (2010) as” the group of people about who we want to draw conclusion. The research setting can be seen as the physical, social, and cultural site in which the researcher conducts the study. The population for this study is derived from a place in Oshana region which is situated in the Centre of North West Namibia and shares borders with the following regions: Oshikoto to the East, Omusati to the South and West Ohangwena to the North. It is the smallest region with a

population of 80,797 people, 50,271 of which are women (National Housing Census, 2010). The region comprises towns: Oshakati, Ongwediva and Ondangwa (urban areas) where many companies and industries have sprung up, influencing people to migrate from rural to these urban areas (Namibia Statistics Agency, 2013). As a result, employment opportunities are high as compared with neighboring regions. The rural communities rely on subsistence agriculture, rear livestock that includes cattle and own small business enterprises. Oshana region has a mixed culture consisting of local tradition (Oshiwambo), Western culture and other African cultures mainly from Zimbabwe and Angola (Mulongeni 2011). It is in this region where heavy alcohol drinking has been high among women (World Vision, 2010).



Sampling is the use of a subset of the population to represent the whole population or to inform about (social) processes that are meaningful beyond the particular cases, individuals or sites studied (Onwuegbuzie & Johnson, 2014). A sample can be described as a portion, or part of the study population, composed of a member, an element or subjects from which the information is collected (De Vos, Strydom, Fouche, & Delport, 2016).

The study sample consisted of eight participants who were drawn using two different sampling techniques. The first participant was selected through convenience sampling strategy followed by simple random sampling. Simple random sampling is the basic sampling technique where a group of subjects (a sample) are selected for study from a larger group (a population). Each individual is chosen randomly and entirely by chance, such that each individual has the same

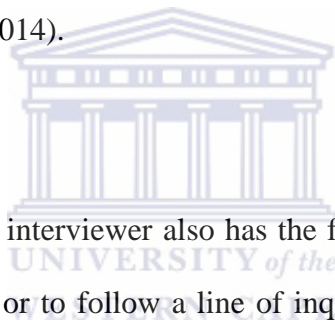
probability of being chosen at any stage during the sampling process (Soeters, Shields, & Rietjens, 2014).

Secondly, each of the randomly selected participants from the DSS office records did direct the researcher with details to approach a further participant which is by means of snowballing sampling technique. Thus, the respondents in the simple random sample provided the researcher with information of how to get the other four participants. Snowball is a non-probability sampling technique where existing study subjects recruit future subjects from among their acquaintances (Slowther, Johnston, Goodall, & Hope, 2004). Thus, the sample group appears to grow like a rolling snowball (Franklin, 2012). As the sample builds up, enough data is gathered to be useful for research. In snowball sampling, individuals act as information providers in order to identify other members (for example, friends) from the same population who may be willing to participate in a study, until data saturation has taken place (Gay, et al, 2015). This study involved participants who were hidden and their drinking habits were not something for public discussion and as such, that was supposed to be confidential. Snowball sampling technique is often used in hidden populations which are difficult for researchers to access; example populations would be alcohol and drug users or sex workers (Voicu & Mirela-Cristina, 2015).

4.6.2 Research instrument.

Research instruments are measurement tools designed to obtain data on a topic of interest from research subjects and can be in the form of a survey, questionnaire, test, scale, rating, or tool designed to measure the variable(s), characteristic(s), or information of interest, often a behavioral or psychological characteristic (Pierce 2009; Kothari, 2015). Semi- structured

interviews (sometimes referred to as focused interviews) involve a series of open-ended questions based on the topic areas the researcher wants to cover and are used to collect data from the participants (Holloway, 2014). An interview guide was developed to keep the researcher focused and on-track to what she wanted to obtain from the participants through the interviews (Appendix E). The questions on the interview guide were derived through literature exploration. The open-ended nature of the question defines the topic under investigation but provides opportunities for both the interviewer and the interviewee to discuss some topics in more detail. If the interviewee has difficulty answering a question or provides only a brief response, the interviewer can use cues or prompts to encourage the interviewee to consider the question further (Christensen, Johnson, & Turner, 2014).



In a semi-structured interview, the interviewer also has the freedom to probe the interviewee to elaborate on the original response or to follow a line of inquiry introduced by the interviewee. Semi-structured interviews are most often used in qualitative studies (Cohen, Mannion & Morrison, 2015). A semi-structured interview encourages a two-way communication. This allows the participants the freedom to express their views in their own terms making it easier to discuss sensitive issues thereby providing reliable and comparable qualitative data. Semi-structured interviews are often used when the researcher wants to delve deeply into a topic and to understand thoroughly the answers provided (Cohen, et al, 2015; Bernard, 2015).

4.7 Data collection

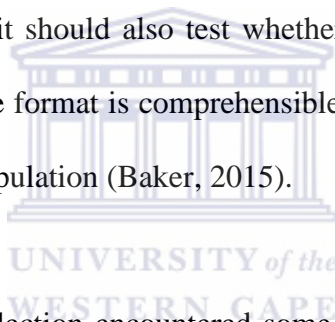
Data collection is the systematic gathering of data for a particular purpose through various sources, including questionnaires, interviews, observation and existing records. The process provides source data for analysis and interpretation (Given, 2015). While methods vary by discipline, the emphasis on ensuring accurate and honest collection remains the same (Huysamen, 2010).

4.7.1 Pilot study

Pope and Mays (2008) point out that the term 'pilot studies' refers to mini versions of a full-scale study (also called 'feasibility' studies). A pilot study is a preliminary small-scale study that researchers conduct to help them decide how best to conduct a large-scale research project. A pilot study can also be the pre-testing or trying out of a particular research instrument such as a questionnaire or interview schedule (Holloway, 2014). Using a pilot study, a researcher can figure out what methods are best for pursuing it, test logistics, estimate time and resources required to complete the larger version and to gather information prior to a larger scale study (Saldana, 2015). This will help to improve the quality of the interview guide and the efficiency of conducting the research prior to performance of a full-scale research project (Peat, 2014; Cox, 2014).

A pilot study was conducted in the Oshakati area which is part of the Oshana region. Three participant were recruited, who were not part of the main study, were used during the pilot study and were selected from alcohol strategic points. The researcher approached, invited subjects to

participate in the study and gave them adequate time to consider if they wished to participate. The participants demonstrated their consent by signing the consent form; other participants invited did not want to participate in the study. The researcher arranged for participants to be referred to a social worker colleague in case of debriefing. Debriefing is necessary to remove any harmful effects or misconceptions about participation (Strauss & Corbin, 2014) . It is in the pilot study where determination of the feasibility of the study protocol and identification of the weaknesses of the study is accomplished. It also tests the data collection process – the time taken to complete the questionnaire, and the subjects’ willingness to participate in the study (Baker, 2015) and whether the questions on the semi-structured interview guide accurately address the research objectives. Furthermore, it should also test whether the study instrument(s), is asking the intended questions, whether the format is comprehensible and whether the selected validated tool is appropriate for the target population (Baker, 2015).



The study procedures for data collection encountered some initial problems, with the research instrument which had some offensive questions and others were repetitive and this did not go down well with the participants. The processes of approaching and securing access to potential participants were initially rather frustrating due to the fact that some participants were not willing to participate. Others did not want to disclose information during the interviews and had a perceived difference of status between them and the researcher. The pilot study provided a unique opportunity to improve the researcher’s skills in conducting semi-structured interviews in terms of approaching potential participants, selecting the interview environment, engaging in deep conversation, and in seizing opportunities for probing and following-up emerging topics. The pilot study enabled the consideration of strategies to minimize these problems and

ultimately, determined the success of data collection during the main study. For this matter, pilot studies are a valuable source of contextual data, which have the ability of moving the researcher into the phenomenon's ecology and into the core of respondents' accounts, thus partitioning the broad emergent theory into workable, theoretically-relevant conceptual units (Ader, 2015). The pilot study was done using subjects from a population with similar characteristics as those recruited for the main study and from the experience encountered by the researcher showed that the study was feasible.

4.7.2 Preparation of participants for the interview.

McNamara (2015) suggests the importance of the preparation stage in order to maintain an unambiguous focus as to how the interviews will be erected in order to provide maximum benefit to the proposed research study. McNamara (2005) applies eight principles to the preparation stage of interviewing which include the following ingredients: (1) choose a setting with little distraction; (2) explain the purpose of the interview; (3) address terms of confidentiality; (4) explain the format of the interview; (5) indicate how long the interview usually takes; (6) tell them how to get in touch with the researcher later if they want to; (7) ask them if they have any questions before they get started with the interview; and (8) the researcher should not count on memory to recall their answers .

The researcher contacted the participants telephonically and booked for appointments to meet with them at their own convenient times. Some interviews were conducted at the residence of the participants and others were conducted at the participants' workplaces during lunch hour mainly

and at times when they were free. On arrival, introductions are done- which form the initial stage in data collection. The researcher introduces the general topic of the discussion, stimulates the conversation and improves interaction between the researcher and the participants (Kemmis & Wilkinson, 2014).

In this study, the researcher introduced herself to the participants and explained to them the purpose of the interview (Information sheet, Appendix A and B), why the participants were chosen, and the expected duration of the interview. This was followed by written consent forms (Appendix C and D) which were reinforced orally in seeking the participants' permission (Appendix F). If the participant consented, then the interview would be conducted. Furthermore, the researcher also checked for any environment disturbances such as background noise. It might be easier to conduct the interviews with participants in a comfortable environment where the participants do not feel restricted or uncomfortable to share information (Denzin & Lincoln, 2005). At this stage the researcher took the chance of setting up audio recording equipment, upon being granted permission by the participants to voice record them. Setting up recording equipment and the physical space where interviews take place is one key element that should not be overlooked (Kothari, 2014).

4.7.3 Interview process.

Data was collected through a semi-structured face-to-face interview. The interview involved asking questions that elicited information about the psycho-social determinants of heavy

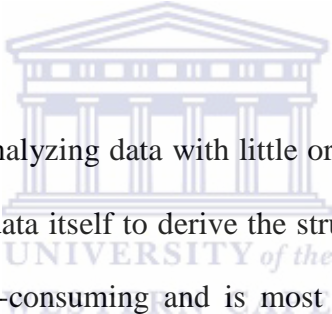
drinking among women. Each interview session lasted 25-30 minutes, with the researcher using both Oshiwambo (local language) and English to strengthen the understanding of the participants on the questions which were asked. The researcher recorded the data in English for easy coding and transcription. The interviews were transcribed by the researcher. An audio recording of an interview also allows you to refer back to the interview and take a fresh look at the interview data. (Baker, 2015). An audio recorder was also used during the interviews to enable referencing when the researcher was alone compiling the data. The use of open- ended questions enabled the research to get some hidden information which was not provided by the interview but was relevant to the study (Peat, Mellis, Williams, & Xuan, 2014). The researcher also capitalized on non-verbal communication to get a full picture and understanding of the participant's response. Non-verbal communication reinforced verbal and written communication (Ader, 2015).



McNamara (2015) makes some excellent recommendations for the implementation stage of the interview process. He includes the following tips for interview implementation: (a) occasionally verify the tape recorder (if used) is working; (b) ask one question at a time; (c) attempt to remain as neutral as possible (that is, do not show strong emotional reactions to their responses; (d) encourage responses with occasional nods of the head, "uh huh"s, etc.; (e) provide transition between major topics, for example, "We've been talking about (some topic) and now I'd like to move on to (another topic);" (f) do not lose control of the interview (this can occur when respondents stray to another topic, take so long to answer a question that time begins to run out, or even begin asking questions to the interviewer).

4.8 Data analysis.

Qualitative Data Analysis (QDA) is the range of processes and procedures whereby we move from the qualitative data that has been collected into some form of explanation, understanding or interpretation of the people and situations we are investigating. QDA is usually based on an interpretative philosophy (Dyer, 2015). The idea is to examine the meaningful and symbolic content of qualitative data. Qualitative data analysis (QDA) is the process of turning written data such as interview and field notes into findings. Analysis of data is a process of inspecting, cleaning, transforming, and modelling data with the goal of discovering useful information, suggesting conclusions, and supporting decision-making. (Ader, 2015).



The inductive approach involves analyzing data with little or no predetermined theory, structure or framework and uses the actual data itself to derive the structure of analysis. This approach is comprehensive and therefore time-consuming and is most suitable where little or nothing is known about the study phenomenon. Inductive analysis is the most common approach used to analyse qualitative data (Onwuegbuzie & Johnson, 2014). The researcher used the inductive way in data analysis (coding and theme development are directed by the content of the data). Thematic analysis is the most common form of analysis in qualitative research. It emphasizes pinpointing, examining, and recording patterns (or "themes") within data (Valliant, 2010). Since the study was following a qualitative approach, data was analysed in themes.

Themes are patterns across data sets that are important to the description of a phenomenon; hence the themes become the categories for analysis (Saldana, 2015). Thematic analysis is performed through the process of coding in six phases to create established, meaningful patterns. These phases are: familiarization with data, generating initial codes, searching for themes among codes, reviewing themes, defining and naming themes, and producing the final report (Clarke, 2014). The researcher followed the six steps as outlined by (Braun, Clark, & Virginia, 2007) and did the following:

Step 1: Familiarization with the data.

The researcher began the process carefully reading through all the interview transcripts and field notes and making comments in the margins about the key patterns. The objective of reading the data several times was to become immersed in and intimately familiarize with it. Immersion in the data to comprehend its meaning in its entirety is an important first step in the analysis (Given, 2015).

Step 2: Coding

During this phase, the researcher generated succinct labels or codes that identified important features of the data that might be relevant to answering the research question: What are the psycho-social determinants of heavy drinking alcohol among women in Oshana, Namibia? This also involved coding the entire dataset, and after that, collating all the codes and all relevant data extracts together. A code is a way of organising data in terms of its subject matter and data can be coded by means of the following: 1) open coding is the first organisation of the data to try to make some sense of it, 2) axial coding - axial coding is a way of interconnecting the categories

and 3) selective coding - selective coding is the building of a story that connects the categories (Saldana, 2015).

Step 3: Searching for themes.

This phase involves examining the codes and collating data to identify significant broader patterns of meaning (potential themes). This is followed by collating data relevant to each candidate theme, so that the researcher can work with the data and review the viability of each candidate theme (Bernard, 2015). The researcher looked for the range of views expressed by participants. Once the initial list of codes was put in place, organization of data into similar categories was done. Themes are general propositions that emerge from diverse and detail-rich experiences of participants and provide recurrent and unifying ideas regarding the subject of inquiry (Poilt, Dave, & Huggent, 2014). Themes typically evolve not only from the conceptual codes and sub-codes as in the case of taxonomy but also from the relationship codes, which tag data that links concepts to each other (Holloway, 2014)

Step 4: Reviewing themes

During this phase, the researcher put data into perspective by comparing the results with the research question and objectives, attaching significance to the data and making sense of the findings. This phase involves checking the candidate themes against the dataset, to determine that they tell a convincing story of the data, and that they answer the research question. In this phase, themes are typically refined, which sometimes involves them being split, combined, or discarded (Hulley, Cummings, & Browner, 2014).

Step 5: Defining and naming themes

This phase involved developing a detailed analysis of each theme, working out the scope and focus of each theme and deciding on the appropriate name.

Step 6: Writing up

This final phase involved weaving together the analytic narrative and data extracts, and contextualization of the analysis in relation to existing literature. Although these phases are sequential, and each builds on the previous, analysis is typically a recursive process, with movement back and forth between different phases. So it is not rigid, and with more experience (and smaller datasets), the analytic process can blur some of these phases together (May, 2015).

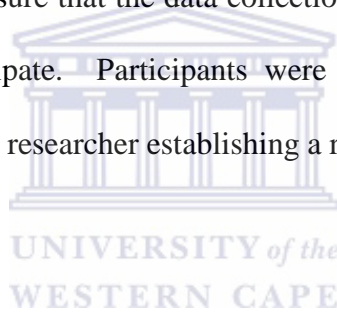
4.9 Data verification and trustworthiness

Verification is the process of checking, confirming, making sure, and being certain. In qualitative research, data verification refers to the mechanisms used during the process of research to incrementally contribute to ensuring reliability and validity (Strauss & Corbin, 2014). Data is systematically checked, focus is maintained, and the fit of data and the conceptual work of analysis and interpretation are monitored and confirmed constantly (Bernard, 2015).

The aim of trustworthiness in a qualitative inquiry is to support the argument that the inquiry's findings are "worth paying attention to" (Lincoln & Guba, 2015). In order to maintain high trustworthiness in a qualitative study, Silverman (2015), suggested four criteria to ensure valid interpretation of data: credibility, transferability, dependability and conformability. Hence,

trustworthiness refers to the way in which qualitative research workers make sure that transferability, credibility, dependability, and conformability are evident in their study.

Credibility means the concept of internal consistency, where the core issue is how we ensure rigour in the research process and the way we communicate with other people and that we have done so. Credibility can be accomplished by tactics to help ensure honesty in informants when contributing data (Cox, 2015). In employing this, the researcher prolonged engagement with participants. Each participant who was approached was given the opportunity to refuse to participate in the study so as to ensure that the data collection sessions involved only those who were genuinely willing to participate. Participants were encouraged to be frank from the beginning of each session, with the researcher establishing a rapport in the opening moments.



Transferability to the extent to which the reader is able to generalize the findings of a study to her or his own context and addresses the core issue of “how far a researcher may make claims for a general application of their theory” (Gasson, 2004: 98). The researcher ensured transferability by providing information that showed that the study was restricted to women only who contributed data, indicated the number of participants (eight) involved in the fieldwork, the data collection methods that were employed and the number and length of the data collection sessions. Transferability in qualitative research is achieved when the investigator gives adequate information about the self (the researcher as instrument) and also the research context, processes,

members, and researcher-participant connections to make it possible for the reader to decide how the findings may transfer (Trochim, 2015).

Dependability deals with the core issue that “the way in which a study is conducted should be consistent across time, researchers, and analysis techniques” (Gasson, 2004, p. 94). Thus, the process through which findings are derived should be explicit and repeatable as much as possible. In ensuring dependability, through the research design and its implementation the researcher gave an in depth methodological description, fully describing the operational detail of data gathering, addressing the minutiae of what was done in the field. This allows the study to be repeated. Dependability can be ensured by an in depth chronology of research activities and processes; influences on the data collection and analysis; emerging themes, classifications, or models; and analytic memos (Peat, Mellis, Williams, & Xuan, 2014).

Confirmability addresses the core issue that “findings should represent, as far as is (humanly) possible, the situation being researched rather than the beliefs, petty theories, or biases of the researcher” (Gasson, 2004, p. 93). With the issue of confirmability, the researcher recognized and acknowledged shortcomings and limitations in the study’s methods and their potential effects.

4.10 Self-reflexivity

Self-reflexivity is the process of becoming self-aware. Researchers make regular efforts to consider their own thoughts and actions in light of different contexts. Reflexivity, then, is a researcher's ongoing critique and critical reflection of his or her own biases and assumptions and how these have influenced all stages of the research process. The researcher continually critiques impressions and hunches, locates meanings, and relates these to specific contexts and experiences (Cohen, Manion, & Morrison, 2012). The act of reflection enables the interviewer to thoughtfully consider this asymmetrical relationship and speculate on the ways the interviewer-interviewee interaction may have been exacerbated by presumptions arising from obvious sources, such as certain demographics (for example, age, gender, and race), or more subtle cues such as socio-economic status, cultural background, or political orientation (Cox, 2015). I used mutual collaboration and social critique techniques to understand the interviewee during the interview. In the current study self-reflexivity was developed by me by constantly asking myself what I had learned during the process of collection of data and also asking myself whether the collected information was sufficient enough to answer the research question of the study.

4.11 Ethics considerations.

Ethical considerations in research are critical. Ethics are the norms or standards for conduct that distinguish between right and wrong. They help to determine the difference between acceptable and unacceptable behavior (May, 2015). Ethical standards prevent against the fabrication or falsification of data and therefore, promote the pursuit of knowledge and truth which is the primary goal of research. Ethical behavior is also critical for collaborative work because it

encourages an environment of trust, accountability, and mutual respect among researchers (Omura, 2010). Researchers must adhere to ethical standards in order for the public to support and believe in the research (Given, 2015).

- **Permission to conduct research.**

Ethical approval for the study was obtained from the University of Western Cape Senate Research Committee (appendix F).

- **Informed consent**

In every discipline, it is considered unethical to collect information without the knowledge of the participant, and their expressed willingness and informed consent. Informed consent is a mechanism for ensuring that people understand what it means to participate in a particular research study so they can decide in a conscious, deliberate way whether they want to participate (Christensen & Johnson, 2012). Informed consent implies that subjects are made adequately aware of the type of information wanted from them, why the information is being sought, what purpose it will be put to, how they are expected to participate in the study, and how it will directly or indirectly affect them (De Vos, Strydom, Fouche, & Delport, 2016). The researcher obtained a signed written consent form (Appendix C and D) from the participants after detailing the purpose of the study, its importance and what was expected from them so that they would make informed decisions to participate or not to participate.

- **Voluntary participation**

The respect for human dignity affirms the rights of participants to self-determination, and the right to decide on whether to participate in the study or not, after full disclosure of the aim and purpose of the study (National Housing Census, National Planning Commission, 2010). Research

participants must participate in a voluntary way, free from any coercion and they should be informed of their right to refuse to participate or withdraw from an investigation (Gay, Mills, & Airaian, 2016). The participants were informed that they were free to withdraw from the study at any time they felt they would not want to carry on.

- **The principles of beneficence.**

Beneficence requires a commitment to minimizing the risks associated with research, including psychological and social risks, and maximizing the benefits that accrue to research participants. Researchers must articulate specific ways in which this will be achieved (Voicu & Mirela-Cristina, 2015). The researcher secured the well-being of the participants, who have a right to protection from discomfort and harm be it physical, psychological, emotional, spiritual, economic, social or legal. The researcher protected the participants from harm by protecting the anonymity and confidentiality, avoiding deceptive practices and providing participants with the right to withdraw from the research at any time.

- **Debriefing.**

The purpose of debriefing is to remove any misconceptions and anxieties that the participants have about the research and to leave them with a sense of dignity, knowledge, and a perception of time not wasted (Slowther, Johnston, Goodall, & Hope, 2004). The participants were given a general idea of what the researcher investigated with their part in the research being well explained. They were asked if they had any questions and those who had them, were fully and honestly answered. The researcher arranged for participants to be referred to a social worker colleague in case of debriefing. Debriefing is necessary to remove any harmful effects or misconceptions about participation (Strauss & Corbin, 2014).

- **Privacy and Anonymity.**

Any individual participating in a research study has a reasonable expectation that privacy will be guaranteed. Consequently, no identifying information about the individual should be revealed in written or other communication (Burns & Groove, 2004). It is unethical to identify an individual's responses, therefore there is need to ensure that after the information has been collected, the source cannot be known (Brickman, Leonard, & Debra, 2016). The researcher ensured that no form of identification on the instrument, thus no names were written and participants were coded with numerical numbers.

- **Confidentiality.**

Any individual participating in a research study has a reasonable expectation that information provided to the researcher will be treated in a confidential manner. Consequently, the participant is entitled to expect that such information will not be given to anyone else (Burns & Groove, 2004). The confidentiality of information supplied by research subjects must be respected (Ader, 2015). All data was treated with strict confidentiality, and only the researcher knew the origin of the data and data was stored in a computer with a password only known to the researcher.

4.12 Limitations of the study

The limitations of the study are those characteristics of design or methodology that impact or result influence the interpretation of the findings from the research. They are the constraints on generalizability, applications to practice, and/or utility of findings that are the result of the ways in which one initially chooses to design the study and/or the method used to establish internal and external validity (Onwuegbuzie & Johnson, 2014). The researcher experienced a number of

challenges during the process of recruiting study participants and the actual data collecting. These challenges are identified and explained below.

- The researcher is a full time Social Worker at Oshakati in Oshana Region and had to arrange for a convenient time to do the interviews.
- The matter under investigation is quite sensitive, and most of the members who had indicated that they would take part in the study gave excuses in the last minute and the researcher had to replace them with new members who also drink heavily. This created time delays as new participants had to be recruited.
- Some of the participants were not willing to participate in the study and they gave negative responses to participation. The researcher motivated the participants so that they participated.
- Language barrier was an obstacle faced during the interviews. English is a second language to some of the participants; hence it took longer for the participants to fully understand some of the questions asked. Therefore, the study was conducted in both English and Oshiwambo (the vernacular language) in order to aid better understanding and to allow participants to express themselves freely.

4.13 Conclusion

This chapter presented the research methodology as applied in conducting this research by discussing and explaining the actual procedures and measures adopted during the course of data collection and analysis. Ethical considerations which enabled the smooth flow of the data collection process were discussed. Despite the limitations as indicated above, the researcher was

able to successfully access participants who met the selection criteria and managed to interview eight of them until data saturation occurred. In the next chapter, full detail of the research results with appropriate literature discussion will be provided.

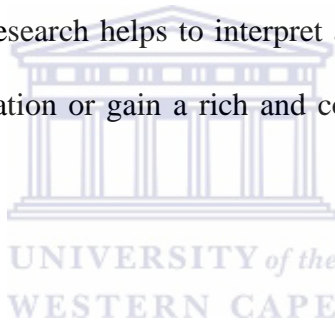


CHAPTER 5

RESULTS AND DISCUSSION

5.1 Introduction

This chapter presents, analyses, and interprets data which was collected through interviews to address the aim of the study which is to explore the psycho-social determinants of heavy alcohol drinking amongst women in Oshana region of Namibia. The study used a qualitative approach since its strength is its ability to provide complex textual descriptions of how people experience a given research issue. Qualitative research helps to interpret and enhance a better understanding of complex reality of a given situation or gain a rich and complex understanding of a specific social context or phenomenon.



5.2 Demographic information of the participants

This section presents the demographic information of the participants to provide the reader with a better understanding of the study participants as reflected in Table 5.1. The respondents were women who drink heavily in the Oshana region. Eight participants took part in this study. Four participants were selected using the snowballing technique and other four using randomly selected by the first four participants.

Table5.1: Demographic details of each participant

Participant	Gender	Age	Educational level	Employment Status	Marital status
1	Female	35	Primary	Unemployed	Single
2	Female	28	Tertiary	Employed	Single
3	Female	34	Primary	Self-employed	Cohabiting
4	Female	24	Primary	Unemployed	Single
5	Female	30	Secondary	Employed	Single
6	Female	33	Tertiary	Employed	Married
7	Female	26	Secondary	Self-employed	Married
8	Female	22	Tertiary	Unemployed	Single

5.2.1 Age

The participants were aged from 22 years to 35 years and four of the participants were in their 30s while the other four were in their 20s. From the ages of the participants, there is a clear indication that some of the women started drinking at a tender age.

5.2.2 Educational level

Four participants indicated that they were exposed to only primary education. Three participants were exposed to tertiary education while the remaining two participants attended secondary school. As is the case with income, lower levels of education are associated with greater quantities of alcohol and higher levels of education are associated with greater expenditure of alcohol (WHO, 2012).

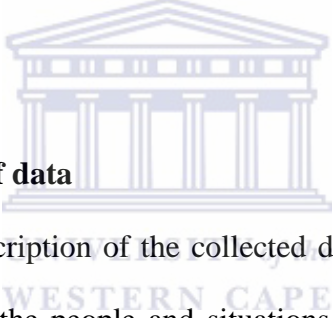
5.2.3 Employment status

Three of the participants who took part in the study were unemployed and three of them were formally employed as teachers. Two participants were self-employed and had each a self-catering business. The Namibia Labour Force Survey (2013) showed that the overall unemployment of women in Oshana region was 23.5% and women faced higher unemployment that led them to use alcohol.

5.2.4 Marital statuses

The majority of the participants were single, meaning that they were unmarried and a smaller number of them were married, thus they had spouses.

5.3 Presentation and discussion of data



Data presentation includes the description of the collected data into some form of explanation, understanding or interpretation of the people and situations under investigation. This involves turning and modelling the data from the interviews into findings which provide useful information, suggesting conclusions, and supporting decision-making (Anyon, 2009). Since the study was following a qualitative approach, data was analysed thematically and presented in themes and sub-themes. The data collected during the individual semi-structured interview was transcribed and then analysed according to the framework of data analysis for qualitative research. Thematic analysis is performed through the process of coding in six phases to create established, meaningful patterns (Braun & Clarke, 2007). The researcher's interpretations and analysis are integrated with the literature, which serve as evidence of the themes and sub-themes (Holloway & Wheeler, 2003). The themes were identified through sequential phases which are

data familiarization, data coding, searching for themes and theme development, reviewing themes, defining and naming themes and finally writing up the themes. The data was then presented in themes with transcribed quotations of the respondents being included to support the findings. The themes and sub-themes that emerged from the analyzed, transcribed collected data are tabulated in Table 5.2.

Table 5.2: Themes and sub-themes

THEMES	SUB-THEMES
Theme 1: Family influence	Sub-theme 1.1: Resemblance of family member's drinking behavior during childhood upbringing
	Sub-theme 1.2: Poor or lack of parental control on alcohol restrictions during childhood
Theme 2: Coping with stressful life events or situations	Sub-theme 2.1: Stress around lack of financial resources for family upkeep
	Sub-theme 2.2: Escaping emotions of separation or divorce
	Sub-theme 2.3: Coping with loneliness
Theme 3: Social interaction	Sub-theme 3.1: Boosting low self-esteem
	Sub-theme 3.2: Business information, sharing opportunities and connection
Theme 4: Socio-economic status	Sub-theme 4.1: Lower socio- economic status
	Sub-theme 4.2 : Lack of occupation
Theme 5: Positive mood enhancement	Sub-theme 5.1: Increasing sexual enjoyment
	Sub-theme 5.2: Seeking pleasant relaxation

5.3 .1Theme 1: Family influence

Family is the first basic social institution and it is regarded as the cornerstone of the society. It guides and moulds the child in a way that he or she is expected to behave (Lee, Sudore,

Williams, Lindquist, Chen, & Covinsky, 2009). All the women indicated that parental alcohol use had been found to negatively affect the family situation during their childhood. Parents who heavily drink display particular patterns of alcohol consumption and thereby increase the likelihood that their children will develop drinking problems when they are introduced to alcohol use while they are young (Kafuko & Bukuluki, 2012).

“I started drinking alcohol when I was very young. My parent used to send me to buy tombo at the cooker shops in the morning, and sometimes we would eat our pap with tombo during breakfast.”(Participant2).

“I only know tombo as a basic food for the family since my youth. (Participant 7)

From a social constructivist perspective, Hibberd (2005) states that heavy drinking can be inherited from developmental aspects of humanity. This habit can then develop as an aspect of humanity and maintained through time. This means the meaning, perspectives and solutions of individual's behavior are social constructs enshrined within the cultural, political and historical evolution or family upbringing.

5.3.1 .1Sub-theme 1.1: Resemblance of family member`s drinking behavior during childhood upbringing.

This study showed that family influence is an important determinant in alcohol use in women. All the participants indicated that the family members whom they were raised with were heavy alcohol drinkers. Subsequently, they grew up in and were exposed to an alcohol drinking

environment. In this upbringing, alcohol use became a norm to them such that they adapted and they were then also into it. This is evidenced by what the following participant said:

“I grew up with my uncle from my mother’s side and his wife. Both of them used to take alcohol so much almost on a daily basis and even used to send me to get their beer from bars and bottle-stores, so I grew exposed to alcohol up to now. To me alcohol was a norm and I always wanted to do what my uncle and wife used to do when they were drunk.” (Participant 1)

“Drinking is a family habit, my grandparents were heavy drinkers, and my father and mother were also heavy drinkers. Therefore, drinking is a family norm. I grew up among family members who drank heavily. Who I am I not to drink? After all there is death in front of me...” (Participant 4).

These findings corroborate with Navarro, Dorani and Shakeshaft (2011) who found out that family history leads to alcohol use. When some family members drink (Kafuko & Bukuluki, 2012), other family members are influenced to drink (by observing and learning). Therefore, family drinking behaviour becomes a future indication of alcohol problems (Agrawal, et al, 2010). Studies by Deress and Azazh (2012), further support Navarro, Dorani and Shakeshaft (2011) as they found out that parental reports of drinking practices of men and women showed that those individuals who were brought up by parents who were heavy drinkers of alcohol were seven times more likely to be heavy drinkers than those who were brought up by parents who did not drink. Many researchers agree that a family history of drinking problems is an important correlation of drinking behaviour (Barry, 2013; Agrawal et al., 2010). From a social constructivist perspective, Collins (2008) states that the family of the society from which one

comes from, defines and determines how one will reflect certain behavioural traits (habits) in future. The family is the first place where an individual is cultured and takes whatever norms are taught in that family into their lives. In that respect, a social construct as an idea would be widely accepted as natural by the society, but may or may not represent a reality shared by those outside the society, and would be termed as an invention or artifice of that society (Collin, 2008).

People with a family history of alcohol problems may have different drinking patterns from those who do not have such a family history; in addition, those drinking patterns may lead to greater drinking problems (Agrawal et al., 2010). The family structure can also be a risk factor in the development of drinking patterns. However, it is unclear if drinking at an early age itself has the likelihood of harmful tendencies in adulthood. Drinking problems among women is predictive of an elevated risk for similar problems in children. In general, children with alcohol dependent parents are more likely to be dependent or abuse drinking themselves (Chalder, Rossol, Maximam & Limen, 2009). However, parents with heavy alcohol drinking display a particular pattern of alcohol consumption and thereby increase the likelihood that their children will develop drinking patterns associated with a high risk of alcohol heavy drinking when introduced to alcohol. Parents often give their children alcohol with the intention of encouraging a safe introduction to drinking and to control what and how much they drink.

“I drink because my parents used to give us alcohol when we were young and even when we grew up they never had a problem with us taking alcohol in the house.”
(Participant 3)

“Drinking is what we grew up doing in our family and my parents never had problems with us drinking when we were young.” (Participant 6)

Individuals drink to resemble their family members and some parents may not have good parental control on alcohol drinking. The family should be the one to teach children norms and behavior. If children lack proper parental control on alcohol uptake, it can impact negatively on their livelihoods in the future (Agoabasa, 2012). The next theme presents the role of parental control on heavy drinking.

5.3.1.2 Sub-theme 1.2: Poor or lack of parental control on alcohol restrictions during childhood.

Parental control is the power possessed by a parent or guardian to influence a child’s behavior which may involve the restriction to certain activities, tendencies, or phenomenon which may be harmful to the child (Brennan, Harrel, & Mahatma, 2012). Some participants in the study grew up freely without any restrictions or controls placed on them such that they engaged in alcohol consumption without their parents noticing. Two of the women participants described their parent’s poor parental control as follows:

“I can attribute my present day alcohol drinking to my parent’s inability to control and guide me from when I was young. My parents loved me so much that they gave me all the freedom to go and do what I wanted, up to a point I started learning to drink alcohol. I would be free go out where I wanted without my parents’ considering much where I was going and what I was doing there. I would go and drink there then come back and lock myself in my room.” (Participant 4)

“Our parents never had control over us when we were growing up and we could come back home anytime we wanted and no one would say anything. (Participant 6)

The findings of this study concur with Grittner, Kuntsche, Graham and Bloomfield, (2012) who say that parenting styles are important; teens raised with a combination of discouragement, and no discipline are more likely to disrespect their parents’ boundaries. Inadequate parental supervision during the early adolescent years forecasts a host of conduct problems, including illicit alcohol consumption. Parents may have trouble setting concrete family policies for alcohol use. They may find it difficult to communicate with children about alcohol-related issues.

Neglectful parents exert low control and discipline as well as low warmth and responsiveness (Barry, 2013). For example, they show no interest at all in a child’s whereabouts. From a social constructivist perspective. Carey (2014) suggests that effective parenting had the potential to mitigate on an individual’s heavy drinking habit. It becomes obvious from the participants’ quotations that parents who drink heavily display particular patterns of alcohol consumption and thereby increase the likelihood that their children develop a drinking problem when they are introduced to alcohol use when they are young. Participants reflected on low control and discipline from their parents through saying:

“I grew up with parents who drank heavily and who never had control over us at all, so each one of us chose to live our lives our ways with no parental control at all. So I chose to live the way they lived their lives too.” (Participant 3)

“Drinking was a family habit from a tender age and our parents never bothered whether we drank or not, so I used to drink even at high school until I was fired from hostel.”
(Participant 6)

Latendress, Mulawu and Matemba (2011) further argue that the mistreatment of children, including sexual abuse, physical abuse and neglect, may also lead to childhood psychopathology and later to drinking problems. Habits are constructed from the environment where one stays. From the perspective of social constructivism, most of the children who are raised this way will start drinking alcohol at tender ages and they will not even complete grade twelve as they become alcohol addicts at tender ages. They also start selling alcohol and produce their kids at tender ages, leading to a cycle of addiction and poverty (Latendress, et al. 2011).



5.4 Theme 2: Coping with stressful life events or situations

The study ascertained that women’s alcohol drinking is a coping strategy of stressful life events or situations. Most of the participants cited stress as the main psychological cause, thus they resorted to alcohol use as a remedy. Stressful life events or situations is the mental and emotional strain felt by an individual which brings about depression, anxiety, irritability, denial, and anger. It may cause such symptoms as raised blood pressure or headaches or both. This study revealed the following stressful situations resulting in woman alcohol consumption. Alcohol is often used to reduce the tension of an impending or actual event (Barry, 2013).

Some participants have experienced an abusive and difficult relationship with their parents during their childhood. During their adulthood, the participants experienced high conflict within

relationships with their partners and family members. Some of the participants felt that they carried their negative attitude from their original families into their intimate relationships. Two participants stated that they used alcohol to escape or cope with their problems. Alcohol helps reduce stress and focus attention elsewhere for a while, but the problems remain well after they stop drinking (Barry, 2013).

“I drink to forget my problems and have peace with the whole world.”
(Participant3)

“Heavy drinking makes me relax and feel like I am in control of the world.”
(Participant 5)

Women expecting alcohol to relieve their feelings and having a coping style characterized by avoiding rather than confronting life issues all combine to make it more likely that an individual will be motivated to drink to cope with stress. In this instance, drinking can reduce stress in certain people and under certain circumstances. Individuals often drink alcohol to decrease anxiety to cope with stress, especially related to the tension of an actual event, impending anxiety (Bachman, 2009).

“I have a lot of family members to take care of and I cannot afford to buy food for them. I can only drink alcohol to forget this burden on my shoulder.”
(Participant 8)

“I grew up with my grandmother with no idea about where my mother was. At the age of 15 my grandmother disclosed that my mother had tried to kill me when I was a baby and had run away to Angola. Since that time, I am not psychologically fine; it affects me a lot. I started to be absent from school in

order to drink alcohol to forget the problems because I feel I'm a useless and helpless person and tried to commit suicide.” (Participant 5)

These findings concur with the findings of Chacter and Daniel (2011) who stated that some individuals may fail to cope with emotional stress and may resort to alcohol abuse. (Agrawal, et al., 2010) pointed out that a lack of coping responses among people who attempt suicide exists as they may see no other way of resolving their problems or ending their unendurable psychological or physical pain.

5.4.1 Sub-theme 2.1: Stress around lack of financial resources for family upkeep

Financial resources are important in the day to day running of families. Due to unemployment some Namibian families are unable to meet the basic family demands. This stresses mothers (women) mostly as children always bother them with food or other basic demands which they cannot provide. Hence, they go out to drink alcohol to run away from being bothered. This is indicated by the following participant.

“My husband does not work and I am not having a sustainable income. We are having four children and these children need food, clothing and school fees. My husband is very lazy. He cannot even go and find work, so tell me how we survive. The father of my kids does not help me and I suffer alone in raising the kids. The children cry to me for food and other stuff which I cannot provide sometimes and this pains me so much. I tend to drink alcohol so that I am not bothered because I don't want to be stressed.” (Participant 1)

“The type of job I am working does not sustain me and my family that much. It is really stressful for me if I think of how I will support my family. I am a single mother having four children and my husband died, so that leaves me as the sole provider. The only way to rub these emotions is through alcohol drinking.” (Participant 8)

The above quotations reveal that alcohol can help an individual relieve stress about a particular situation. For as long as the problem of too many family responsibilities is not solved, it will always be there even when someone becomes sober. These findings corroborate with the findings of Simons and Arens (2007), who point out that experiencing negative emotions such as anxiety or depression, expects that alcohol will relieve these feelings. Thus, having a coping style characterized by avoiding rather than confronting life issues, all combine to make it more likely that an individual will be motivated to drink to cope with stress. To most women, the failure to provide for their family needs is a stressing experience; hence they deal with it through drinking alcohol. These findings concur with earlier findings of Chacter and Daniel (2011) and Kowalski (2009) who pointed out that people who drink heavily are motivated by various stress related matters.

5.4.2 Sub-theme 2.2: Escaping emotions of separation or divorce

Couples separation is agreement not to live together as husband and wife while remaining married. Divorce is an official ending of a marriage by an official decision in a court of law (Lee, et al, 2009). Both separation and divorce result in a couple not being together. To some women, this emotionally affects them as their communion and attachment to the partner is jeopardized and a lot of complications such as property ownership come up (Braun, Clark, & Virginia, 2007). Married women had the least of chances of being engaged in heavy alcohol use as compared

with women in all other categories of living arrangements (that is, cohabiting or living with parents, in a dormitory, alone, or in other arrangements), who showed relatively high chances (Debie, 2009). A different study by Huselid (2009) also indicated that becoming engaged (that is, making a commitment to a relationship) had a similar but less powerful effect on drinking compared with marriage, whereas becoming divorced led to increased drinking behavior. The participants described it as follows:

“My husband left me two years back and I am not able to cope with this situation since my children are still schooling and I’m unemployed, I opt to drink alcohol to forget him. (Participant 8)

The findings from this study are supported by the study of Sloan, Grossman and Platt, (2011), who attribute people’s motives to drink alcohol in order to cope with distress or depression, or to escape from negative feelings. In addition, Deal and Gavalier (2011) point out that heavy drinking is part of a style of coping with stress that involves denying or avoiding one’s negative emotions, and that individuals are more likely to engage in denial or avoidance of emotions. Couple separation or divorce is one emotional stress factor women would want to forget or hide.

5.4.3 Sub-theme 2.3: Coping with loneliness

Loneliness is a subjective experience that can cause a great deal of discomfort (Braun, Clark, & Virginia, 2007). It is a type of undesirable state that a person experiences when they are feeling a strong sense of emptiness and solitude. It can also be defined as an unbearable feeling of separateness from other people (Carey, 2014). According to the findings of this study, coping with loneliness or solitude was a motive behind alcohol use amongst women in Oshana region.

The study showed that single women felt lonely when home, hence each one resorted to going out to socialize with other individuals for company. Furthermore, the single women do not have spouses who control or restrict them in going out to consume alcohol; hence, they have autonomy which includes alcohol use.

“I stay alone at my flat; all my children are at boarding schools. Currently, I do not have a boyfriend whom probably I can be with. The majority of my friends are housewives and mostly they will be with their families. This leaves me lonely in my boring house, so I resort to going out to drink and hope to make new friends there.”
(Participant 4)

These findings are similar to the earlier findings of Latendress et al. (2011) and (Armstrong & Abel, 2009) who observed that alcohol could be used by many as a coping strategy for loneliness. Participants indicated a feeling of loneliness which made them join a peer group and become heavy alcohol drinkers. They described the loneliness as follows:

“I have good friends who like to go out during weekends and I’m always remaining in the hostel. My friends like to go to the clubs. One day I decided to join them and I drank a lot. Since that day, I started using alcohol every day.” (Participant 3)

What may have once been just drinks with friends becomes drinking at every social function and feeling the overwhelming urge to drink if alcohol is not part of the event. Cronin (2012) explored drinking behavior in relation to loneliness and found that some individuals drink heavily for them to cope with loneliness.

5.5 Theme 3: Social interactions

Sociability is a personality trait that triggers the ability to be fond of the other people's company and is defined by Schuckit and Smith (2008) as the play-form of association, that is, the pleasurable, joyful and delightful experience that comes out of people's interaction in society. Imagine the perfect social situation, when you are having fun with peers, chatting, laughing, joking and enjoying the sheer delight of being together (Jovchelovitch, 2007).

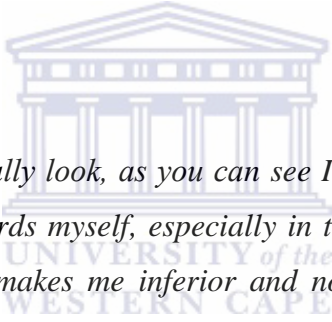
"I am working and after work I like to go straight home but feel bored. One day one of my friends asked me to go with her to a bar to have some drinks. Then after that day I started to drink more till late." (Participant 7)

"Most of my friends go out to drink and I cannot stay at home alone. I have to go out and drink with them; at least I feel good in the company of people who are drinking. I don't want to be isolated or left out. We can drink as long as we have a sponsor. It helps me to socialize with friends." (Participant 4)

Studies by Cronin (2012) on women who are involved in heavy drinking in Southern Namibian reflected a weak relationship between sociability and heavy drinking. Mustonen, Beukes and Du Preez (2013) noted a positive relationship between drinking and sociability. Mustonen et al. (2013) suggested that women who have some heavy drinking experiences (but not a great deal) appear most integrated into the drinking community. Thus, extraversion/sociability may be related to drinking rates among women, but less related to drinking problems (Sher & Trull, 2014).

5.5.1 Sub-theme 3.1: Boost low self-esteem and confidence

Self-esteem is a term used in psychology to describe how humans evaluate themselves overall in relation to self-worth and can be described as the confidence and satisfaction that the individual has with their own life (Agoabasa, 2012). Low self-esteem is the lack of confidence in one's merit as an individual person's self-confidence. It is a feeling of distrust or uncertainty in one's abilities, qualities, and judgment. This results in being nervous or timid in the company of other people, thus failing to perform or fulfil obligated intentions. This study found out that some women with low esteem took alcohol to boost or increase their self-confidence (Agrawal, et al., 2010). To them alcohol removes nervousness and the feeling of being timid, thereby improving their mood:

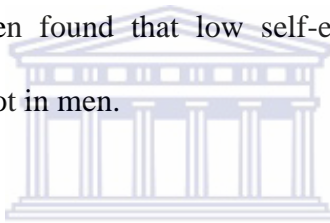


“You know the way I physically look, as you can see I am fat and unattractive. I have a negative feeling towards myself, especially in the eyes of everyone, I feel insecure and unloved. This makes me inferior and not to believe in myself. In order to deal with this, alcohol comes to my rescue. I feel elevated and more confident when I am under the influence of alcohol.” (Participant 4)

“Alcohol makes me feel like I am in control because it elevates my moral and confidence. Without alcohol, I feel powerless and intimidated; through drinking I gain power and control over everything.” (Participant 5)

Low esteem is a determining factor towards alcohol consumption. Individuals who have issues around their physical appearance can easily develop feelings of low self-worth. In the modern world, there is too much emphasis placed on physical beauty and feelings of being unattractive will lead to a low self-esteem. Low self-esteem is one of the characteristics of alcohol addictive

personality (Gill, 2008). People will use alcohol to increase their self-confidence; they become less concerned with what other people think of them. The individual begins to rely on alcohol in order to cope with life. This is in-line with the study of Brennan, Harrel and Mahatma, (2012), who found out that some individuals who drink heavily as a result of a low self-esteem as individuals would want to uplift their esteem through taking alcohol. From the social constructionist perspective, individuals believe that their social esteem is low and want to uplift it so that they are not isolated from the rest of the community that surrounds them. Therefore, they may opt to drink heavily to meet this social need (Chacter & Daniel, 2011). A study by Carey (2014), on the relationship between frequency and problems of drinking of a community sample of young men and women found that low self-esteem predicted an alcohol heavy drinking diagnosis in women but not in men.



5.5 .2 Sub-themes 3.2: Business information sharing, opportunities and connections

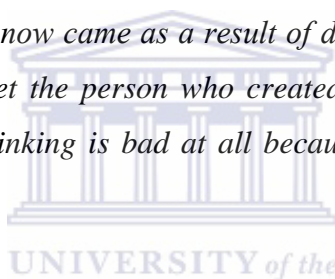
The study revealed that some women drink alcohol for socialization so that they can hook or grab business connections and opportunities and also exchange business information with counterparts. Most business people gather and chill at drinking spots and some adventurous women also follow to such spots and drink as well as to follow business opportunities:

“I am running a small business in catering, I need tenders and contracts so I need to be connected to the right people, I mean other business people as well. Most of the business people gather at specific drinking places. In order for you to access them, you should drink with them. It is through the drink you get business opportunities and other useful information because some of the people are well connected.”
(Participant 5)

“I started to drink when I had a meeting with my friends who were interested to support me on my business, and since then I started drinking heavily.” (Participant 4)

These findings are in conjunction with Neufeld, et al, (2009) who argue that one of the primary functions of alcohol intake noted by anthropologists is its role as a social bonding mechanism and symbolic marker of intimacy. As people chill out till late, they meet other individuals whom they can partner and do business with and end up creating business opportunities for them:

“The current job I am doing now came as a result of drinking. If I didn’t spend time drinking, I wouldn’t have met the person who created the business opportunities I have now. I wouldn’t say drinking is bad at all because it has made me who I am today.” (Participant 3)



These findings corroborate with the findings of (Agrawal et al., 2008) who found out that as individuals drink, they create social bonding and platforms for information sharing. The desire to keep hope that one day one will meet with people who may change their lives makes some individuals want to be in bars more often, therefore resulting in recurring heavy drinking.

5.6 Theme 4: Social economic status

Social marginalization/exclusion has been associated with high prevalence of alcohol use. Drinking patterns and outcomes of drinking are correlated with an individual’s socio-economic status, including employment and income level (Barry, 2013). Studies suggest a positive

relationship between being a current drinker and an individual's education level and income (Chacter & Daniel, 2011; Barry, 2013; DeBoer, Schippers & Van der Staak, 2010). Higher rates of alcohol abuse have been reported among the indigent and homeless although there is variation across countries (Agoabasa, 2012). Women's socio-economic status (SES) and educational level form important factors that influence one's well-being (Debie, 2009).

5.6.1 Sub-theme 4.1 Lower social economic status

If an individual feels that he/she is of a lower social economic status, he/ she feels isolated and feels unacceptable to their current community or environment. Braun, Virginia and Clarke (2007) point out that some individuals drink heavily for them not to worry about their socio-economic levels. Drinking heavily makes them feel that they are ok and will make them stop worrying about their low socio-economic status. Heavy drinking makes them have a sense of belonging and a sense of comfort. Participants in the study reflected that a low socio-economic status was one of the reasons that made women drink heavily in Oshakati. The following emerging sentiments support and validate this theme:

"I grew up in the limited economic status; my parents were unemployed." (Participant 3)

"I came to know money at the age of ten when I went to stay with my aunt and started buying alcohol...." (Participant 5)

"My entire family members are working and I am the only one who is not working and this haunts me a lot. So when I get money, I just drink." (Participant 2)

"My friends are all drinking alcohol after work and all from well-off families..." (Participant 8)

Social cultural factors such as poverty and low socio-economic status, which affect early development within the family, such as lack of mutual attachment, ineffective parenting and chaotic environment have been shown to be critical important indicators of risk (Agrawal et al., 2008). Thus, this is in line with the WHO (2014) who has shown that there are more drinkers in the higher socio-economic group and abstainers are much more common in the poorest social group. People with lower- socio-economic status appear to be more vulnerable to tangible problems and consequences of alcohol consumption.

Although alcohol use has effects on individual people from all walks of life, and has been identified among all SES groups and nationalities, those most affected are poverty-stricken and bear the greatest burden (Armstrong & Abel, 2009). Those that are from wealthy families who drink heavily do so because they are frustrated by other social aspects. Some may be wealthy but are lonely and this loneliness can drive them into becoming heavy drinkers (Cronin, 2012). The study by Chacter and Daniel (2011) has shown that the use of alcohol is relatively high in low SES women. A study by Coles (2010) regarding drinking behavior, showed that individuals who drank heavily were those with lower education and lower income. The implication here is that, women from lower socio-economic standings were more likely to engage in heavy alcohol use whereas women who were highly educated and had a higher socio-economic status were less likely to engage in heavy alcohol use. The participants expressed their voices as follows:

“Sometimes I feel isolated and I feel that I did not achieve as much as I should have achieved. I wasted my time at high school. I didn’t work so hard, I feel useless.”
(Participants 5)

“When I look at what my colleagues have achieved, I feel life did not treat me so well. Therefore, heavy drinking makes me forget about all these since it allows me to relax my mind for a while.” (Participant 2)

Based on these sentiments from above, it can be stated that low social status is a contributing factor towards alcohol abuse among women. On a contradictory note, a different study by Gill (2008) showed the link between status and consumption appears to go further than the drinking habits of female high-fliers. There is evidence to suggest an association between education and consumption levels (Ureydarius & Patel, 2014). This study found out that the more educated women are, the more likely they are to drink alcohol on most days and to report having problems due to their drinking patterns, and the relationship is stronger for females than males.

5.6.2 Sub -theme 4.2: Lack of occupation

Lower socio-economic class is typified by poverty, homelessness and unemployment. People of this class, few of whom have finished high school, suffer from lack of medical care, adequate housing and food, decent clothing, safety, and vocational training (Agoabasa, 2012). This study showed that women in the lower social class are idle most of the times due to lack of occupation and of being unemployed. In order to keep themselves occupied, they resort to drinking alcohol heavily to kill or while up time (Lee, Sudore, Williams, Lindquist, Chen, & Covinsky, 2009). They expressed their voices as follows:

“Since I am unemployed, I usually find myself having nothing to do almost all the time and it’s so boring you know. So I can only find what to do through drinking either at home or here at the bar. I feel occupied hence, drinking does it for me.”
(Participant 2)

“I was working as an engineer at a certain Company. Most of the time I knock off late and I don’t have time to cook for myself. I like to buy beer at the nearest bar and go home very late. I started being absent from work due to papalas. Currently, I lost my job due to alcohol misuse.” (Participant 4)

These findings relate with Agoabasa (2012) who says that social marginalization is associated with high prevalence of alcohol heavy drinking. The study by Armstrong and Abel (2009), agrees with the findings of this study as it mentions that higher rates of alcohol abuse have been reported than among the indigent and homeless although there is variation across countries. Although alcohol use affects individuals from all walks of life and has been identified among all SES groups and nationalities, those most affected are poverty-stricken and bear the greatest burden (Cronin, 2012).

5.7 Theme 5: Positive mood enhancement

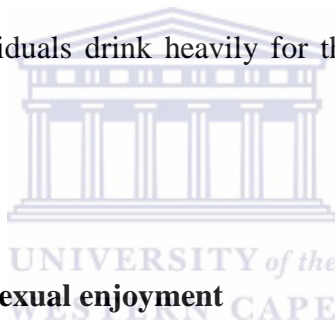
Every behavior an organism in engages involves information from the primary senses, such as vision, hearing (audition), and touch. Mood enhancement involves the improvement or addition to the strength in the general way of thinking and feeling about something, thus producing desirable outcome (Cronin, 2012). Alcohol alters mind and sensory information, thus influencing

perception of time, thinking, behavior, mood and sensational feeling (Kowalski, 2009). The study revealed the following positive mood enhancing constituencies they encountered:

“When I drink alcohol it makes me feel good and I feel like I am in control of the world.” (Participant 5)

“Alcohol makes me feel good and it makes me have strength from whatever is worrying me.” (Participant 1)

These findings concur with earlier findings of (Agoabasa, 2012; Merrill, Read & Barnett, 2013) who stated that some individuals drink heavily for them to have a positive mood enhancement.



5.7.1 Sub-theme 5.1: Increasing sexual enjoyment

According to Abraham Maslow’s pyramid of hierarchy of needs, sex is a physiological need which must be satisfied in order to move up the hierarchy (Deress & Azazh, 2012). In satisfying this physiological need, the study found that some women consume alcohol in order to encounter feelings of great happiness or pleasure.

“Sex is one of the tying ropes of a man and woman relationship and it should be interesting or done well as it is vital. I personally take alcohol to spice up my sex life.” (Participant 6)

“I enjoy having sex more when I am drunk than sober. Alcohol stimulates me more and adds the pleasure.” (Participant 2)

“I feel good when I am having sex under the influence of alcohol.” (Participant 5)

The findings of this study showed that women drink alcohol because they want to increase their sexual pleasure. (Lader & Meltzer, 2010) are in support of this finding who in their study found that high-sensation-seeking men and women consumed more alcohol than their low-sensation-seeking counterparts. High sensation seekers consumed more alcohol for enjoyment mood and body effects for a greater variety of experience-changing. In addition to this notion, (Humphreys & Moos, 2009) stress that many alcoholics drink alcohol to improve their mood and restore their spirits, among them is that alcohol increases sexual enjoyment. In many women, alcohol increases sexual arousal and desire for sex (Gill, 2008). Psychologically, alcohol has also played a role in sexual behavior and Cronin (2012) reported that women who were intoxicated believed they were more sexually aroused than before consumption of alcohol. Alcohol can influence the capacity for a woman to feel more relaxed and in turn, be more sexual (Agoabasa, 2012).

5.7.3 Sub-theme 5.2: Seeking relaxation

Relaxation is an enjoyable activity that provides a change and relief from effort, work, or tension, and gives pleasure, especially to hard working people (Martinic & Measham, 2008). The findings showed that relaxation can be added as an extra dimension through alcohol consumption. Some women find relaxing after working more pleasurable when they are drunk.

“I am a hard working woman who has achieved a lot in life. As you know when you work, you also need time to rest. The rest of a hard working person is not an

ordinary rest; it should be filled with joy and cheerfulness. The bottle (alcohol) for me ensures I relax happily and peacefully.” (Participant 3)

“Usually, I drink alcohol to rest or relax. To me drinking alcohol is a lubricant which facilitates and aids my happiness when I am at home mostly when I am not very busy.” (Participant 2)

Closely related to relaxation is the sensation of feeling happy and cheerful. Results of a survey on drinking habits by Kidorf, Sherman, Johnson and Bigelow, (2015) revealed that approximately half the drinking respondents reported this effect. Roberts and Robins, (2012) reported that subjects who had consumed alcohol were happier and laughed more than a comparable group who had not consumed any alcohol. From the social constructivist perspective, individuals construct their own reality; what they feel is the best for them (Berger & Luckmann, 1996). Therefore, some women drink heavily because they believe that when they are drunk, they relax and are at peace with everything.

5.4 Conclusion

This chapter presented and discussed the findings of the social-physiological determinants of alcohol use in women in Oshana region. The first part of this chapter presented the demographic information of the participants followed by the main findings presented in themes and sub-themes supported by relevant literature. This chapter unveiled that there are several psycho-social determinants of heavy drinking among women and that although these individuals may be aware of the negative effects of heavy drinking like losing their valuable jobs among others, they

still cannot learn much from these repercussions and they continue to drink heavily and further destroy their future since it seems that alcohol has taken control of them.

In the next chapter, the conclusion and recommendations of the study will be presented.

CHAPTER 6

CONCLUSION AND RECOMMENDATIONS

6.1 Introduction.

This chapter will present a summary of the study, the conclusions of the findings and recommendations for future research. The aim of this study was to explore the psych-social determinants of women living with heavy alcohol drinking in Oshana Region. The study adopted a qualitative research approach defined as a “form of systematic empirical enquiry into meaning (Christensen & Johnson, 2012). The research’s main question for the study was “*What are the psycho social determinants of heavy alcohol drinking among women in Oshana, Namibia?*” The question was answered in Chapter 5 where research findings were presented and discussed.

The study had two main objectives namely to:

- explore and describe the reasons of women’s alcohol use in the Oshana Region.
- explore and describe the psychological and social factors that affect women’s drinking.

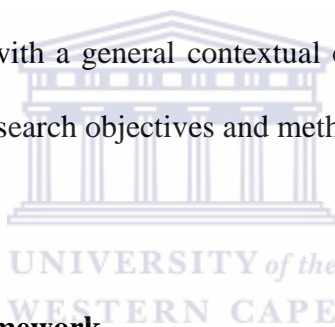
The collected data was analysed, from which five main themes emerged that were elaborated on in Chapter Five. Literature and theory was used to substantiate, explain, compare and contrast the findings of this study. A brief summary on each of the previous chapters, as well as conclusions and recommendations from the findings will be presented in the following sections.

6.2 Summary of the chapters.

The summary of the study provides a brief account of the chapters, without going into detail, as they have been thoroughly discussed already.

6.2.1. Chapter 1: Introduction of the study.

This chapter provided the reader with a general contextual overview of the research study, the research problem, research goal, research objectives and methodology used to execute the study.



6.2.2. Chapter 2: Theoretical framework.

The second chapter presented the theoretical framework which forms the underpinning framework of the study. In this study, the social constructionist theory was used to explain the drinking behaviours of women who drink heavily in Oshakati. In this chapter, the justification of adopting this theoretical framework was also elaborated in detail.

6.2.3. Chapter 3: Literature review.

In Chapter 3, the research presented a comprehensive review of literature. The literature which was explored mainly focused on women and alcohol in Namibia and literature was also used to

explore the various psychosocial determinants of heavy drinking and the negative consequences associated with heavy drinking with specific focus on women.

6.2.4. Chapter 4: Research methodology.

This research chose and used an explorative and descriptive design with a qualitative approach as the best suited in seeking to achieve the study's aim. Chapter 4 elaborated more on research methodology and the steps used to complete the research study successfully. This chapter presented the research design (explorative and descriptive) approach (qualitative), description of the studied population (women using alcohol) and sampling strategies (random and snowball) which were adopted in the study. In this study, the samples were women who are heavy alcohol drinkers. The data was collected by means of semi-structured face-to-face interviews. In addition to that, this chapter also presented issues of data collection and analysis, and ethical issues which were considered in the study.

6.2.5. Chapter 5: Presentation and discussion of the findings.

Chapter 5 presented a discussion of the main findings which were presented in the form of theme and sub-themes that were generated from the in-depth interviews which were carried out. This chapter also presented the demographic information of the eight participants in the study. With the five themes which emerged in the study, literature and theory was used to substantiate, explain, compare and contrast the findings of this study. Specifically, the following themes emerged from the study:

6.2.5.1. Theme 1: Family influence.

The study unveiled that family influence is one of the main determinants for heavy drinking. The study found out that women drink heavily because of the way the family has socialised them.

6.2.5.2. Theme 2: Coping with stressful life events or situations.

The study also established that women drink heavily because they want to cope with stressful situations or events in their lives. In this case, they heavily take alcohol for them to cope with their situations for a while.

6.2.5.3. Theme 3: Social interactions.

The study also found out that women drink heavily for them to interact with friends and other partners. Their heavy uptake of alcohol makes them interact and fit well with whoever they are interacting with who will also be drinking heavily.

6.2.5.4. Theme 4: Social economic status.

The study also unveiled that women drink heavily as a way of trying to ignore their low social economic status. When such women drink heavily for a while, they will not think of their low social and economic status.

6.2.5.5. Theme 5: Positive mood enhancement.

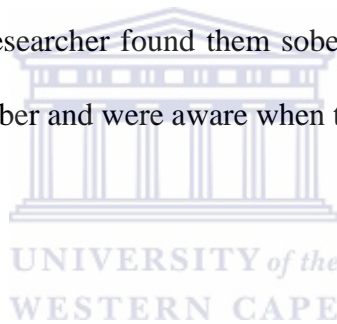
The study also elicited that women drink heavily for them to remain high, that is, for positive mood enhancement. Drinking heavily makes them feel good and keeps their moral high.

6.2.6. Chapter 6: Conclusion and recommendations.

Lastly, Chapter 6 presents the conclusions and recommendations of the study. It presents an overall summary of the chapters covered in the study, as well as the limitations that need to be observed simultaneously with the findings of the study. The chapter also provides recommendations for future research.

6.3 Limitations of the Study.

All the participants in the study were women who drink heavily and was sampled using random and snowball sampling strategy. Since the participants were drunk most of the time, the researcher had to arrange for suitable time to interview them when they were sober. More visits were required to ensure that the researcher found them sober. The interviews were done only when the participants were fully sober and were aware when they consent to be interviewed.



6.4 Recommendations.

6.4.1 Recommendations to the MOHSS.

The Ministry of Health and Social Services is the department responsible for the rehabilitation of women who drink heavily in the study. Some of the participants in the study lost their jobs as a result of heavy drinking.

- Therefore, the study recommends that more rehabilitation centres need to be built so that heavy drinking women can be rehabilitated for them to live a healthy and non- alcoholic life again.
- The service providers should improve service delivery by increasing awareness campaigns targeting women and young girls on alcohol abuse.

- Social workers should always refer women and young girls with alcohol problems to rehabilitation centres and sustain aftercare services to prevent rehabilitated clients from relapse.
- It is important for social workers to be trained specifically on the management of substance abuse in the field and sustain preventative programmes of alcohol abuse.
- The government, through MoHSS, should provide and facilitate the provision of incentives for ordinal community members to enhance programmes and services delivery related to harmful of alcohol.
- It is vital for stakeholders to be involved in regional planning and budget for the implementation of activities related to reducing heavy drinking amongst women.

6.4.2 Recommendations to family members.

The role of the family cannot be undermined in helping the women who drink heavily improve their situations.

- The family can be strengthened further so that norms and values can be instilled while children are still young and effects of heavy drinking are taught and avoided.

6.5 Suggestions for further research

This study was done in Oshana Region, Oshakati and Ondangwa which are big towns in Northern Namibia. Therefore, studies need to be done in other Namibian towns to:

- Compare the findings so as to have a better understanding of the psychosocial determinants of heavy drinking among women in Namibia.

- Compare if these psychosocial determinants are comparable between men and women in Namibia.
- Find ways to assist the children of these women who drink heavily so that they can be assisted not to follow the same drinking trends of their mothers.
-

6.6 Conclusion

This chapter presented the summary of the chapters in the study, followed by a summary of the main findings emanating from the study. It also presented recommendations and areas for further research.

A qualitative approach was used to answer the research question, thereby attaining the research goal and objectives of the study. The results of this study provided insight into the psychosocial determinants of heavy drinking among women. This last chapter of the study provided the reader with a summary and the conclusions of the preceding chapters, from the introduction, theoretical framework, literature review, applied methodology and the presentation of the research findings.

A number of recommendations were made to the Ministry of Health and Social Services and the families of any individual who drinks heavily, based on these results. In addition, the researcher made suggestions for future research. In conclusion, the study is expected to add new knowledge to a limited body of literature on alcohol use in Namibia.

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APPENDIX A: INFORMATION SHEET (ENGLISH)



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INFORMATION SHEET

Project Title: Exploring the Psycho-Social determinants of heavy alcohol drinking amongst women in Oshana, Namibia

What is this study about?

This is a research project being conducted by **Ms Hilya N Shikoyeni** at the University of the Western Cape. We are inviting you to participate in this research project because you are using alcohol. Your contribution in this study is crucial to alleviate the challenges and experience of being an alcoholic. The purpose of this research project is to explore the psycho social determinant of women who have heavy alcohol drinking.

What will I be asked to do if I agree to participate?

You will be asked to sign the consent form. You will take part in one on one interview with the researcher that is expected to take 60 minutes. You may choose not to answer any question or topic you are not comfortable with. Permission to use a record voice will be requested from you. At the conclusion of the interview, the researcher will summarize their understanding of your experience and will ask you to add anything you think they may have missed.

Would my participation in this study be kept confidential?

Your personal information will be kept confidential. To help protect your confidentiality, your real names will not be included in the data collection sheets and all information collected will be locked in cabinets and password protected computers. The researcher will use codes to represent your names and

only the researcher will have access to such information which will link you to the collected data. During the time when data collected will be reported about this research project, your identity will be protected.

In accordance with legal requirements and/or professional standards, I will disclose to the appropriate individuals and/or authorities information that comes to our attention concerning child abuse or neglect or potential harm to you or others.

All the data will be kept in password protected computer files known only to the researcher. Data collection sheets and audio tapes will be kept safely in a lockable filing cabinet accessed only by the researcher. All raw data including written documents and tapes will be destroyed after three months of the final dissertation being marked and graded. If I write a report or article about this research project, your identity will be protected.

What are the risks of this research?

Risks from participating in this research study mainly include discomfort around providing private or sensitive information. Should the discussion result in pronounced emotional discomfort or trauma, the researcher will provide references for further counselling to the participant. There are no other known risks associated with participating in this research project. The interview questions will focus on your experience of being woman having alcohol use disorder. All human interactions and talking about self or others carry some amount of risks. We will nevertheless minimize such risks and act promptly to assist you if you experience any discomfort, psychological or otherwise during the process of your participation in this study. Where necessary, an appropriate referral will be made to a suitable professional for further assistance or intervention.

Is any assistance available if I am negatively affected by participating in this study?

Where necessary, an appropriate referral will be made to a suitable professional for further assistance or intervention.

What are the benefits of this research?

There are no direct benefits to you for participating in this study. This study is not designed to help you personally, but the results may help the researcher learn more about psychosocial determinant of heavy alcohol drinking amongst women. We hope that, in the future other people might benefit from this study

through improved living standard and alert them about the psychosocial determinants of women's drinking alcohol.

Do I have to be in this research and may I stop participating at any time?

Your participation in this research is completely voluntary. You may choose not to take part at all. If you decide to participate in this research, you may stop participating at any time. If you decide not to participate in this study or if you stop participating at any time, you will not be penalized or lose any benefits to which you otherwise qualify.

What if I have questions?

This research is being conducted by **Hilya N Shikoyeni**, a student pursuing a **Masters in Child and Family Studies** at the University of the Western Cape, South Africa. If you have any questions about the research study itself, please contact Hilya Ndeapo Shikoyeni ko +264 221391(Namibia) or +264 812563080., or email at: hndoya@gmail.com

Should you have any questions regarding this study and your rights as a research participant or if you wish to report any problems you have experienced related to the study, please contact:

Head of Department: Professor R. Schenk
Department of Social Work

Dean of the Faculty of Community and Health Sciences: Professor J. Frantz

University of the Western Cape

Private Bag X17

Bellville 7535

South Africa

This research has been approved by the University of the Western Cape's Senate Research Committee and Ethics Committee.

APPENDIX B: INFORMATION SHEET (OSHIWAMBO)



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Private Bag X 17, Bellville 7535, South Africa

Tel: +27 21-9592459 Fax: 27 21-959 3686

E-mail: cjerasmus@uwc.ac.za/liezillejacob.phd@gmail.com

Ombaapila yomaulele

Oshipalanyolo__shoproyeka:__Ekonakono lyontseyonkalonawa yomatokolo gaakiintu mokulongitha omalovu pwahalandulathano.

Eyilongo ndino oyili kombinga yashike?

Eyilongo ndino tali ningwa ku Hilya Ndeapo Shikoyeni koshiputudhilo shopombanda sha Western Cape, mo South Africa. Otatu ku hiya wu kuthe ombinga mepekaapeko ndika molwaasho oto longitha iikolitha. Egwedhelopo lyoye meyilongo ndino olyasimana okutidhapo omaupyakadhi gokukala omulongithi gwiikolitha. Elalakano lyepekaapeko ndino okukonaakona omatokolo gaakiintu mokulongitha iikolitha pahalandulathano.

Oshike tandi pulwa ndi ninge uuna ndiitayela okukutha ombinga?

Otoka pulwa wu shayine ofooloma yepitikilo. Oto ka kutha ombinga moonkundathana pokati koye nomupekaapeki ndhono tadhi kutha ominute omilongo hamano. Oto vulu wu kale inoo yamukula omapulo uuna wuuvite inoo mangeluka. Epitikilo lyokukwata ewi lyoye oto keli indilwa. Kengongo lyoonkundathana omupekaapeki ota ngongo euveko lyawo pantsewo yoye notaye ku pula wu gwedhepo kehe shono to dhiladhila sha pukithwa.

Ekuthombinga lyandje meyilongo ndino olya gamenwa tuu?

Omauwuyelele gopawumwene otaga gamenwa. Edhina lyoye lyoshili itali kwatelwamo mombaapila yegongelo lyomawuyelele. Omawuyelele agehe ga gongelwa otaga patelwa muusikopa. Omupekaapeki otaka longitha oonomola dhakalelapo edhina lyoye na omupekaapeki owala tavulu okumona omawuyelele waholola. Ethimbo uuna omawuyelele taga gongelwa kombinga yomapekaapeko, uukwatya woye otawu kala wa gamenwa, shi nasha niipumbiwa yopaveta ya pitikwa, otandi ka holola koohandimwe uuyelele mbu tawuya, kutse shinansha nomahepeko gaanona kungweye nenge kuyalwe. omawuyelele agehe otaga pungulwa mocompiwuta yagamenwa na oyishiwike owala komupekaapeki. Ombapila yokugamena yomawuyelele nokakwatamawi otawu kala megameno wa patelwa mosikopa notawu mon

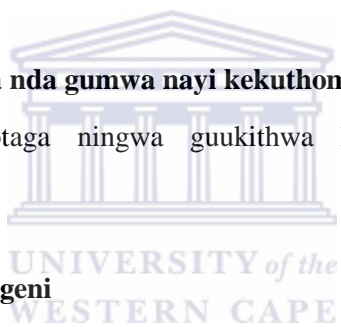
ika owala komupekaaapeki.Omawuyelele agehe mwakwatelwa oonndokumende dhashangwa otadhi hanagulwa po konima yoomwedhi ndatu dhomushangwa gwa hugunina uuna gwatalwa nogwa pewa oopente.

Omaupyakadhi geni gelipo kombinga yomapekaaapeko ngano?

Uupyakadhi mokukutha ombinga meyilongo ndino owakwatelamo okwaahamanguluka mokugandja uuyelele wopaumwene nenge mbo tawu nikitha oluhodhi. Omupekaaapeki ota gandja omawuyelele kaakuthimbinga kombinga yaamboka taa vulu okugandja chungomwenyo. Kapuna we omaupyakadhi galwe genasha nekuthombinga momapekaaapeko nga. Omapulo goonkundathana otaga ka kala kombinga yontseyo yoye okukala omukulukadhi ena uupyakadhi mokunwa iikolitha. Omakwatathano pokati komuntu nomuntu noshowo okwiipopya ngweye mwene nenge okupopya kombinga yaantu yalwe oshina uupyakadhi meyilongo ndi. Onkene otatu kambadhala okushonopeka omaupyakadhi goludhi ndoka nokuku kwathela uuna wakakala inoo manguluka pamadhiladhilo pethimbo lyekuthombinga meyilongo ndi.

Opuna tuu mpa puna ekwatho uuna nda gumwa nayi kekuthombinga lyandje meyilongo ndino?

Mpa sha pumbiwa, omakwato otaga ningwa guukithwa kaalongelwe yopombanda shinasha nokukwathelwa.



Omawuwananwa gomapekaaapeko ogeni

Kapuna omawuwanawa gothaathaa kungweye okukutha ombinga meyilongo ndi. Eyilongo ndino inali etwapo okuku kwathela ngweye mwene, ashike iizemo otayi vulu oku kwathela omupekaaapeki iilonga oshindji kombinga yomatokolo gaakiintu mokulongitha omalovu pahalandulathano. Otuna eyinekelo kutya, monakuyiwa aantu yalwe otaya vulu okumonamo omawuwanawa gasha meyilongo ndi tashi pitile melandululonkalo nokuyalondodha kombinga yomatokolo gaakiintu taya longitha omalovu.

Ondina ngaa okukutha ombinga momapekaaapeko, na otandi vulu tuu okuhulitha po ekuthombinga lyandje ethimbo kehe?

Ekuthombinga lyoye mepekaaapeko ndino olyopayiyambo. Oto vulu wu hogolole okwaahakutha ombinga nande nande. Ngele wa tokola waaha kuthe ombinga mepekaaapeko ndino, oto vulu wu mwene ethimbo kehe, kuna mpo no pewa egeelo nenge wu kanithe omawuwanawa gasha ngono wega ilongela.

Uuna ndina epulo?

Epakaapeko ndino otali kwatelwa komeho ku Hilya Ndeapo Shikoyeni, omulongwa tiilongo kombinga yaanona nomazimo koshiputudhilo sha Western Cape, mo South Africa. Ngele owuna omapulo genasha nelongo lyomapekaaapeko lyolyene mona Hilya Ndeapo Shikoyeni ko +264 221391(Namibia). Onomola yopeke +264 812563080.

Uuna wuna omapulo gasha kombinga yeyilongo ndika noshinasha nuuthemba woye mokukutha ombinga mepekaapeko ndika nenge wa hala okulopota uupyakadhi washa wa tsakaneka shinasha neyilongo ndika, kwatathana

Omukuluntu: **Professor R. Schenk**

Oshikondo shonkalonawa:

Oshikondo shoshigwana nuudjolowele Professor J. Frantz

Ko University ya Western Cape

Oshako x 17

Yili mo Bellville 7535

South Africa

Omapekaapeko ngano oga pitikwa ko sikola yopombanda University ya Western Cape shapitila moka komitiye komapekaapeko no kakomotiye komulandu mpango kosikola.



APPENDIX C: CONSENT FORM (ENGLISH)



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Private Bag X 17, Bellville 7535, South Africa

Tel: +27 21-9592459 Fax: 27 21-959 3686

E-mail: cjerasmus@uwc.ac.za/liezillejacob.phd@gmail.com

CONSENT FORM

Title of Research Project:

Exploring the Psycho-Social determinants of heavy alcohol drinking amongst women in Oshana, Namibia

The study has been described to me in language that I understand. My questions about the study have been answered. I understand what my participation will involve and I agree to participate of my own choice and free will. I understand that my identity will not be disclosed to anyone. I understand that I may withdraw from the study at any time without giving a reason and without fear of negative consequences or loss of benefits.

Participant's name.....

Participant's signature.....

Date.....

APPENDIX D: CONSENT FORM (OSHIWAMBO)



UNIVERSITY OF THE WESTERN CAPE

Private Bag X 17, Bellville 7535, South Africa

Tel: +27 21-9592459 Fax: 27 21-959 3686

E-mail: cjerasmus@uwc.ac.za/liezillejacob.phd@gmail.com

CONSENT FORM

Oshipalanyolo shomapekaapeco thaneko: Ekonakono lyontseyonkalamwenyo yomatokolo gaakiintu mokulongitha omalovu paahalandulathano moNamibia.

Eyilongo ondeli hokololelwa Melaka ndi ha ndi uvu. Omapulo gandje kombinga yeyilongo oga yamukulwa. Onduuvite kutya ekuthombinga lyandje otalika kwatelamo shike nondiitaala nondazimina kutya okukutha ombinga ehogololo lyandje nehalo lyandje. Onduuvite kutya uukwatya wandje itawu ka hololwa na itawu kuulikwa komuntu gulwe. Onduuvite kutya Otandi vulu okuninguluka okukutha ombinga meyilongo ndika ethimbo kehe nokaapuna egandjo lyetompelo noshowo pwaana uumbanda woshilanduli nenge okukanitha omauwanawa gasha.

Edhina lyomukuthimbinga.....

Eshayinokaha lyomukuthimbinga.....

Esiku.....

APPENDIX E: WOMENS' INTERVIEW GUIDE

Date of Interview: **Venue of Interview:**.....

Interview starting time:..... **Interview ending time :...(50-60)minutes**

This Interview guide has four sections: Section A, Section B, and Section C and Section D

Section A: Demographic information

Section B: Heavy drinking women's' experiences with alcohol

Section C: Psychosocial determinants of heavy drinking

Section D: Recommendations by the women

Section A: Demographic information

*What is your marital status?

*How many kids do you have?



Section B: Heavy drinking women's' experiences with alcohol

*For how long have you been drinking alcohol?

*What is your drinking frequency in a day (number of beers per day)?

*What type of alcohol do you drink?

*When do you drink heavily?

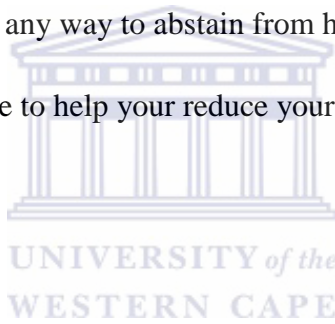
*How do you classify your drinking habit (probe)?

Section C: Psychosocial determinants of heavy drinking

-
- * Why do you drink heavily? (Probe for more)
 - * What happens to you if you do not drink heavily? (Probe)
 - *What factors do you think influence your drinking habit? (Probe)
 - *Do you know of any negative consequences of heavy drinking? (Probe)
 - *Have you been take to any rehabilitation center because of your drinking? (Probe)

Section D: Recommendations by the women

- * Does the government help you in any way to abstain from heavy drinking? (Probe)
- *What do you think need to be done to help your reduce your heavy drinking of alcohol (Probe).



APPENDIX F: ETHICAL CLEARENCE



OFFICE OF THE DEAN DEPARTMENT OF RESEARCH DEVELOPMENT

24 July 2015

To Whom It May Concern

I hereby certify that the Senate Research Committee of the University of the Western Cape approved the methodology and ethics of the following research project by:
Mrs HN Shikoyeni (Social Work)

Research Project: Exploring the psycho-social determinants of heavy alcohol drinking among women in Namibia

Registration no: 15/4/64

Any amendments, extension or other modifications to the protocol must be submitted to the Ethics Committee for approval.

The Committee must be informed of any serious adverse event and/or termination of the study.

*Ms Patricia Josias
Research Ethics Committee Officer
University of the Western Cape*

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E: [pj Josias@uwc.ac.za](mailto:pjosias@uwc.ac.za)
www.uwc.ac.za

A place of quality,
a place to grow, from hope
to action through knowledge

