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Influence of Irresponsible Alcohol-Related Sexual Behaviour on Trainee Dropouts in Vocational Centres in Nakuru County, Kenya

Teresiah Kerubo Nyatich

Post Graduate Student, Department of Psychology, Humanities and Languages,
Mount Kenya University, Kenya

Dr. Jane Karimi

Senior Lecturer, Department of Psychology, Humanities and Languages,
Mount Kenya University, Kenya

Abstract:

Alcohol abuse and related behaviour are the main problems affecting trainees while taking their studies in Vocational Training Centres in Nakuru County. The study focused on the hypothesis: There is no significant relationship between irresponsible sexual behaviour and trainee dropouts in vocational training centers in Nakuru County, Kenya. The study was based on the cognitive-behavioural theory of alcohol abuse. The study adopted a cross-sectional survey design that entails the collection of data at a single point in time from different groups of respondents. Further, the study adopted a descriptive research design, which involves collecting, analysing, and interpreting quantitative and qualitative data. The study targets a population of 1550 within 10 vocational training centres in Nakuru. The sampling was done using Yamane sampling formulae to obtain a 318 sample size. The study's correlational analysis explored the relationships between "Trainees' Dropout" and "Irresponsible Sexual Behaviour," Irresponsible sexual behaviour exhibited a strong positive correlation ($r = 0.664, p < 0.01$). These findings collectively underscore the importance of addressing alcohol-related behaviours, peer influences, and counseling effectiveness in tackling trainee dropout rates.

Keywords: Alcohol abuse, sexual behaviour, drop out

1. Background to the Study

Alcohol abuse poses many challenges globally, not only for trainees but also for the entire society. Alcoholism is an age-old problem, with archaeological evidence showing that the history of alcohol consumption dates back at least 7,000 years, revealing its deep historical root (Rodriguez, McCluskey, Krohn & Lizotte, 2012). Statistical accounts on the influence of alcohol on behaviour show that almost 60.2% of trainees get involved in the abuse of alcohol, while 12.1% are connected to rehabilitation due to excessive consumption of alcohol and related behaviours (National Authority for the Campaign against Alcohol and Drug Abuse, 2019). Recent statistics suggest that about one in every two persons above 14 years of age has ever engaged in excessive use of alcohol and related behaviour (Francis, 2015) and about 33% of this population are alcohol addicts (Juma, Kyobutungi, and Mohammed 2017).

The reports published by WHO (2018) on alcohol usage in higher learning institutions put alcohol at number three globally on the factors that contribute to global death among trainees. Alcohol abuse shows a prevalence of consumption in centres aggravated by peer pressure, stress or depression as the contemporary trend. Alcohol use disorders and related behaviours have resulted in almost 35% of reported deaths (Watkins, 2016). It is not news nowadays in media channels where adolescents and pre-adolescents are involved in high-risk behaviours related to alcohol abuse (NACADA *et al.*, 2019). Many research experts attribute mental health problems to alcohol abuse, which results in brain damage and long-term or permanent cognitive deficits. Early initiation of alcohol intake is associated with more problem-generating behaviour and more sustained substance use, including later addiction (National Household Survey on Drug Abuse Report, 2010).

Alcohol abuse is not only related to academic decline and dropout in vocational centres but also becomes a societal problem. The consumption patterns in vocational colleges are related to gaps of incompleteness of courses in college and ultimate dropouts. Chronic/heavy usage of alcohol has been estimated to be a high contributor to a pervasive disorder of stress and depression among trainees (Wangui, Mariene, and Wamalwa, 2017). A research finding on the usage of alcohol by trainees has found that the behaviour is more prevalent in vocational institutions as compared to secondary schools (NACADA *et al.*, 2019). It is estimated that 25 trainees out of 65 have engaged in alcoholism, both male and female, which translates to 37.5% of students who are classified to have used illicit substances. These collective findings cry out for both parents and the education community to educate and counsel on the reduction of alcohol substance use among

adolescents. Preventing alcohol use by trainees is not the only element of successful programs to target potential trainee dropouts, but it is a significant and now largely overlooked component (Ksir et al., 2012).

Globally, statistics suggest that approximately three in every 10 persons of trainees have engaged in overconsumption of alcohol (Francis, 2015). Compiled statics indicate that 16.7% develop mental disorders, calling for the launch of rehabilitation centres to curb alcohol-related behaviour while assisting the trainees affected by the addiction. Although traditionally, alcohol consumption was preserved for the elders and had cultural significance, all over the globe, alcohol consumption, particularly for trainees, has become an issue of concern with the rapid growth of toxic brews. In the 21st century, trainees' consumption of alcohol rate has increased with related societal problems. This has also become more pronounced, especially among trainees in the technical institution (Myadze and Rwomire, 2014). The impact of alcohol has brought health and well-being problems with increased risks of student behavioural challenges that ultimately result in school dropouts (Berg, Back, Vinnerljung, and Hjern, 2016).

Focusing on developed countries, the Americas and Western Pacific region, and other countries, alcohol use is a source of sickness (Hammer, 2018). World Health Organization reports that there is a major connection between adolescent deaths and alcohol use among adolescents who are between the ages of 15 -19 yearly, which stands at 35.3% (WHO, 2014). For instance, the Global Crime Prevention Centre (2019) reports on public health stated that Europe is the heaviest drinking region worldwide. In a survey conducted in New York, a person drinks 11 litres of alcohol each year. The rise in drinking in Northern and Central Europe rose between 2011 and 2020 to an average of 30.2% among people aged 14-19 years. This involved the consumption of alcohol in the form of beer (55.1%), spirits (34.7%), and spirits (10.2%). Similar reports from NACADA (2019) affirm that despite the pleasures of alcohol use, alcohol has a high risk of social problems, damaging mental health, and crime. This calls for any nation to deal with alcoholism as a national disaster because its outcome has been associated with social behaviour problems such as child abuse, crime, homicide, and violence (Anderson & Bamberg, 2016)

Trainees around the globe contribute 65.3%, as per the world's global population statistics. Dealing with alcoholism poses a major challenge with the escalated number of alcohol addicts in society. Studies conducted by Crowe and Reeves (2018) in Canada found that alcohol is a risk factor for numerous mental illnesses. However, Dobson (2012) noted that mental illness has other determinant factors. The report indicated that the rates of death related to suicide in parts of Europe are associated with the drinking patterns of the people. Data indicate that approximately 25.1 to 30.3% of suicidal cases relate to alcohol. However, alcohol and suicide cases were linked to mental health problems (WHO et al., 2014).

In Africa, alcohol is one of the most abused substances by trainees (Pinsky, 2010). Alcohol addiction and consumption pose serious behaviour problems for trainees coupled with school dropout. This ultimately has important implications for a wide variety of socio-economic outcomes. Oakley and Charles's (2012) studies on the effects of substance use carried out in Ethiopia found that trainees are at an essential stage of development where they are faced with many challenges. The study revealed that institutions that deal with trainees should be prepared well to face these challenges; otherwise, they may get perplexed, aggravated, and vulnerable when confronted with these challenges. In the process of trying to adjust, the trainees end up in alcohol abuse and related behaviours (Liranso, Eliyas, & Israel, 2017). Other studies carried out in South Africa indicated that many students are initiated to drinking alcohol in their adolescence. The drinking age has been highly reduced to 13 years, which indicates that alcohol is easily accessible to learners (Endo, 2014). Despite many organizations stating that alcohol is only restricted to people above 18 years, studies indicate that trainees start drinking alcohol as early as 13 years, which poses a very high rate of 33.3% of students who are struggling with alcohol addiction in training institutions.

In Kenya, alcohol consumption and other substances have become an issue of great concern. Kenya has a young population, with trainees aged 15-24 years, which stands at 20.3% of the total population of 49.7m, which is equal to 10.1m trainees, based on United Nations estimates, just like other countries in the world. Several studies show that many trainees have engaged in alcohol consumption and related behaviour. In the years 2012 and 2015, studies done in Nairobi County for Tvetcentres located in the region showed that more than 6,000 trainees were involved in criminal activities linked to alcohol. Alcohol use among trainees in learning institutions has equally endangered the well-being of trainees (Mathaiya *et al.*, 2015). According to Foxcroft (2016), approximately 40.3% of trainees who begin to drink alcohol before they are fully developed are likely to create liquor reliance (National Institute on Alcohol Abuse and Alcoholism, 2006).

Almost 60% of the total population in Kenya is in learning institutions, with 39.2% deemed to be in Tvet (Kenya Bureau of Statistics, 2019). Due to this, there is a rising concern regarding the degree to which learners engage in alcohol abuse and the age at which the practice commences. WHO (2019) reported that alcohol abuse was one of the top ten causes of admissions in psychiatric hospitals in Kenya. Similarly, alcohol addiction contributes to 80.1% of dropout rates in Tvet Colleges. The Kenya Police Service projected that about 70.5% of all crime is related to alcoholism (UNODC, 2010). In 2019, 36% of trainees were deemed to have been consuming alcohol, which contributes to social and behavioural issues (NACADA *et al.*, 2016).

Agreeing with the reports published by NACADA (2019) on the prevalence of violence and riots in Technical institutions, alcohol contributes to a bigger percentage of substances that have been rated to be consumed by students at 33%, followed by other drugs, khat/ miraa (17%), prescription drugs (16.1%), tobacco (14.5%), bhang (7.5%), inhalants (2.3%), heroin 1.2% and cocaine (1.1%). The report posits that many learners in vocational institutions use alcohol and other substances. Alcoholism and related behaviour cause them to drop out of learning centres. This report causes much concern in the training institution. Substance abuse has been identified as the main cause of problems in the country in the past years (NACADA, 2016). Alcohol has been abused in colleges between 2001 and 2002 (Mathaiya, 2015).

Vocational Training Centres (VTCs) are part of education aimed at providing specialized skills and professional knowledge to learners (Efstratoglou & Nikolopoulou, 2011). Adolescence is defined as a transition stage from childhood to adulthood (Sharma, Tyagi, 2016). Trainees generally experience many changes both biologically, cognitively, socially, and emotionally (Lumbanbatu & Daulay, 2018). The addiction to alcohol among trainees is a behavioural pattern that leads to loss of health and social well-being and may result in mental or physical dependence (National Institute on Drug Abuse, 2010). In many centres, almost 10% of trainees are under rehabilitation programs because of alcohol abuse which results in problem behaviours. In extreme cases, alcohol abuse has caused suicide and murder attempts, unplanned sexual activities, violence, and aggression (Fitzsimons, Jackman, Kyprianides & Villadsen, 2018).

Vocational training centres (VTC) admit trainees who are at a critical transitional stage that involves physical, biological, and emotional changes, increased need for autonomy, preoccupation with self, and desire to experiment. During this transition, trainees strive to make lifestyle choices and establish patterns of behaviour that may influence their current and future well-being. Several behavioural changes are evident, which involve resistance to advice, violence, and peer influence to anti-social behaviour in adolescence. The rates of alcohol use in vocational training centres are alarming and considerably higher than those of trainees from regular high schools and other learning centres; the trainees in these centres engage in alcohol consumption as a result of releasing stress, peer influence, and environmental changes. With this, the dropout rate is extremely high. These are the major concerns of undertaking the research. The previous studies carried out have scanty information about alcohol abuse in vocational training centres; the studies have emphasized alcohol use from a general perspective without analysing the influence of alcohol behaviour on dropout in vocational training centres. This current study is carried out to fill this gap.

2. Statement of the Problem

There has been rampant consumption of alcohol amongst trainees within vocational training centres. Trainees are found to engage in alcohol-related behaviours. Despite the government regulations to control alcoholism in learning institutions, the problem is serious in vocational training centres where learners engage in unwarranted social behaviour. This includes unplanned sexual activities, violence, intentional suicide or murder attempts, and habitual crime. This has a high negative impact on enrolment and completion rates, which ultimately leads to course dropouts. If these problems are not given intervention, the country will lose the fight against alcohol abuse, hence failing to achieve the goal of strengthening, preventing, and treating substance use among trainees.

MOE (2019) reports on the implementation of TVET-based programs states since the inception of vocational training centres, completion rates of students have been 78.5% on overall courses. The problems have been frequently attributed to behavioural factors and schooling factors that students are exposed to. Alcohol consumption dominates a bigger percentage of all the listed factors that contribute to dropouts among Trainees.

Because of the excessive alcohol consumption of trainees, vocational training centres record high enrolment with average completion rates for students, which puts the country at risk of not achieving educational millennium developmental goals as stipulated in the realization of Vision 2030. Similarly, an education report shows that 35.1% of trainees (both genders) consume alcohol. However, there are no adequate studies that have been conducted in the Kenyan context showing the influence of alcohol-related behaviour on trainees' dropout in the VTCs within the region, despite the International Community and Drug and Substance Abuse (ICDS), creating alarm on alcoholism consumption within training institutions. Hence, this study aims at ascertaining the influence of alcohol-related behaviour on trainees' dropout among adolescents in vocational training centres in Nauru County, Kenya.

3. Research Objective

- To examine the influence of irresponsible sexual behaviour on trainee dropouts in vocational training centres in Nakuru County, Kenya

4. Research Hypothesis

- H01: There is no statistically significant influence of irresponsible sexual behaviour on trainee dropouts in the vocational training centres in Nakuru County

5. Empirical Literature

The effect of alcohol abuse on student sexual behaviour is one of the most extensively researched issues in the contemporary scholarly world, demonstrating its continued cause for social concern for school dropouts. Tyler and Melander's (2015) research on those trainees who consume large amounts of alcohol not only causes an effect on their studies but also is, at times, abusive to their health, which requires special attention. In a study that consisted of 254 samples of trainees, both male and female, enrolled in different training institutions, 30.5% of the male students dropped out of college and never completed their courses due to engagement in alcoholism. The research also found that there is a rise in the consumption of alcohol by female students, where almost 10.2% of trainees had engaged in alcoholism. At the same, the research states that many trainees have acquired STDs/AIDS because of irresponsible sex or alcoholism. 7.4% of female counterparts had dropped out of school due to early pregnancies. According to ICDS (2017) report, the findings indicate that alcohol addiction has been a major cause of unwanted pregnancies among female trainees in vocational training institutions.

Conferring to National Household Survey on alcoholism for trainees-NHSDA (2019) survey on adolescent pregnancies, out of the survey conducted in 5 counties, the leading cause of engagement in sexual behaviour was

attributed to alcoholism. Several training institutions terminate the progress of female trainees due to misbehaviour related to the consumption of alcohol. NACADA (2016) report hypothesized that the negative influence of alcoholism has made trainees impotent at early ages, posing a high risk of bareness. The impact of alcohol consumption on career development, health, and well-being coupled with pregnancies for female students introduces them to early parenthood with high levels of irresponsibility, such as divorce, abortion, and committing suicide (Endo et al., 2014; Kyprianides & Villadsen, 2018). According to NHSDA et al. (2019), it is anticipated that addiction to alcoholism is likely to sire unknown children or become irresponsible parents at early ages.

Rothenberg, Hussong, and Chassin (2016) report on alcoholism and family conflict, indicating that many single-parented children have been attributed to engaging in alcohol abuse. 35.1% of male students ended their studies early to concentrate on their families, as compared to 16.1% of trainees who were expelled due to engagement in alcoholism. Similarly, a survey conducted by Nacada et al. (2016) showed that 78% of the female students in colleges who had engaged in unwanted sex out of alcoholism had had an abortion. The study puts forth recommendations such as conducting pregnancy tests, which ultimately leads to school drops for trainees. Similarly, various studies show that irresponsible sexual behaviour out of alcoholism has caused poor academic performance and school dropout, especially for female students. Friedman, Glickman and Utada's (2015) research shows that 23.3% of female students do not complete their education because they are addicted and have engaged in sexual activities leading to early pregnancies.

6. Conceptual Framework

The conceptual framework shows the interaction of variables for independent and dependent variables. The researcher views the influence of alcohol-related behaviour on trainees in terms of independent variables. The first variable relates to Irresponsible sexual behaviour with its components on early pregnancies, increase sexual crimes, and contraction of STD/AIDS.

7. Research Methodology

The research adopted the use of quantitative data, where numerical data was collected and analysed using scientific methods. A quantitative approach was effective for the study since the researcher collected data from the field using a structured questionnaire and then analysed, interpreted, and presented data in a measurable format. The research design adopted was descriptive. Kothari (2018) underscores that descriptive research design aims to obtain information to describe a phenomenon, situation, or population. The design tends to achieve information that explains the situation that exists by questioning a person's perception, approach, conduct, or principles (Goddard & Melville, 2014). Thus, both designs will help interpret how one variable affects the other variable for both independent variables versus dependent variables while drawing inferences and conclusions.

The target population was taken from 10 vocational training centres in Nauru County with 1530 trainees, both male and female, who are between the ages of 13 to 19 years (Tvet admissions, 2020). Additionally, one instructor in charge of counselling from each centre was included in the study because they are the ones who handle trainees with challenges. Centre managers from each centre were interviewed because they are in a better position to provide information on enrolment and disciplinary action taken against trainees facing behavioural challenges.

Name of Training Centre	Target Population
Nauru	247
Njoro	164
Molo	146
Dundori	118
Saptet	128
Subukia	242
Cheptuech	202
Barut	111
Kagotho	84
Elbulgon	88
Principals	10
Counsellors/instructors	10
Total	1,550

Table 1: Target Population
Source: VTC Admissions, 2021

Morgan and Krejcie (2017) state that the sample size for the group can be obtained from the entire population to represent various subjects under investigation. The sample size in this study was obtained using Yamane sampling formulae

$$x_o = \frac{P}{1 + P(e^2)}$$

Where:

Xo – Obtained sample size.

P – Entire sampled population

E–level of precision (95% confidence level = 0.05) not known

Solved

$$x = \frac{1550}{1 + 1550(0.05^2)}$$

x= 318

From the generated sample, the sampling was done by choosing the appropriate method to achieve a sample that acted as a representative of the entire population. Essentially, clustered sampling, purposive sampling, and simple random sampling were adopted as the preferred methods to choose an unbiased sample of 318 respondents from the whole population. To start with, the population was grouped into clusters as per the intended information. The selection of principals and school counsellors was made using the purposive sampling technique, which involved the use of the researcher's knowledge to decide which characteristics of information to be included in the study. Secondly, the researcher incorporated the use of stratified random sampling to select students, especially those who are struggling with alcoholism, to be represented. A multiplying factor was calculated by dividing the sample size by the total number of trainees. This was: - 318/1550=0.205, as shown in table 2 below.

Name of VTCs	Target Population	Multiplying Factor	Sample Size
Nauru	247	0.205	51
Njoro	164	0.205	34
Molo	146	0.205	30
Dundori	118	0.205	24
Septet	128	0.205	27
Subukia	242	0.205	51
Cheptuech	202	0.205	42
Barut	111	0.205	19
Kagotho	84	0.205	13
Elbulgon	88	0.205	16
Principals	10	0.205	3
Counsellors/instructor	10	0.205	3
Total	1550		318

Table 2: Sampled Data for VTCs and School Administration

Source: Sampled Data, 2022

The researcher made use of questionnaires and interview schedules to gather facts from centre managers, counsellors, instructors, and trainees. The questionnaire was divided into different sections depending on the research questions.

The analysis started after completing the data collection phase. Data collected was grouped depending on the category of the respondents. Questionnaires were verified if they were properly filled, and those with errors were excluded from the analysis. Data were coded into SPSS (Software version 25) and ready for analysis. Quantitative data generated from the questionnaires was analysed using descriptive statistics and was presented using frequency tables, percentages, figures, charts, and graphs. To draw inferences from researched variables, correlation analysis was used to show the relationship between the influences of independent variables on the dependent variables. Finally, the researcher generated results, interpreted them and drew conclusions from the study.

8. Data Analysis

The irresponsible sexual behaviour was examined through the use of five items; this section examines various dimensions of irresponsible sexual behaviour among trainees. It explores the belief that unwanted pregnancies resulting from alcoholism can lead to course incompleteness. Additionally, it investigates the idea that alcoholism is linked to an increase in sexual crimes, potentially resulting in trainees being expelled from training centers. The study also delves into the perspective that intoxicated trainees engaging in unprotected intercourse expose themselves to STDs and HIV, potentially leading to course termination. Furthermore, the research touches upon the concept of peers being recruited into unwanted sexual activities. Lastly, it considers the belief that irresponsible sexual behaviour has contributed to the prevalence of rape within school environments. Collectively, these dimensions offer insights into participants' perceptions of irresponsible sexual behaviour and enrich the understanding of this significant aspect within the study's framework. The results are presented in table 3 below.

	N	Minimum	Maximum	Mean	Std. Deviation
Unwanted pregnancies due to alcoholism lead to course incompleteness	261	1	5	4.16	.966
Alcoholism Increases sexual crimes, which contributes to the trainee being expelled from training centers	261	1	5	4.13	1.039
Drunkard trainees engage in unprotected intercourse, hence exposing themselves to STDs & HIV, leading to course termination	261	1	5	4.03	.997
Recruitment of peers into unwanted sexual activities	261	1	5	3.99	.907
Have caused the prevalence of rape in school	261	1	5	3.89	.950
Valid N (listwise)	261				

Table 3: Irresponsible Sexual Behaviour

The variable "Unwanted pregnancies due to alcoholism lead to course incompleteness" garnered a mean score of 4.16 (SD = 0.966), indicating a considerably high level of recognition among participants regarding the potential link between alcohol misuse and unwanted pregnancies. This finding echoes existing research that emphasizes the propensity of alcohol-related behaviours to contribute to risky sexual behaviour and subsequent unintended pregnancies (NACADA, 2018). The study's outcome underscores the urgency of addressing the misinformation or lack of awareness that might perpetuate such risks among trainees.

"In my view, the influence of alcohol on unwanted pregnancies among college trainees is a pressing issue. It's not just about impaired judgment; it's about recognizing the vulnerabilities that arise in a college setting. When college students consume alcohol, their inhibitions decrease, and their cognitive function can be compromised. This makes them more susceptible to engaging in risky sexual behaviour without fully considering the consequences. I've seen instances where fellow college trainees found themselves in unexpected situations due to alcohol consumption."

Similarly, the variable "Alcoholism Increases sexual crimes which contribute to the trainee being expelled from training centers" achieved a mean score of 4.13 (SD = 1.039), signifying a significant concern among participants. This result resonates with the broader literature that highlights the association between alcohol misuse and an increase in sexual offenses, which, in turn, can lead to severe consequences for the perpetrators (Campbell & Hickman, 2017). The heightened awareness of this correlation underscores the necessity for tailored interventions that address the underlying behavioural issues driving such incidents.

"In my experience, alcoholism can significantly contribute to trainees being expelled from training centers due to its association with increased instances of sexual misconduct. When trainees struggle with alcoholism, it can impair their judgment and lead to a lack of control over their actions, which can result in engaging in inappropriate and harmful behaviours. In training environments where discipline and adherence to codes of conduct are paramount, such incidents of sexual misconduct are taken very seriously. Trainees found involved in such misconduct often face expulsion as a consequence."

The variable "Drunkard trainees engage in unprotected intercourse hence, exposing themselves to STDs & HIV, leading to course termination" obtained a mean score of 4.03 (SD = 0.997), signaling a clear recognition among participants of the potential health risks linked to alcohol-related behaviours. This result reinforces the understanding that alcohol misuse can amplify vulnerability to engaging in risky sexual practices, thereby heightening the risk of contracting sexually transmitted infections (NACADA, 2017). The study's findings highlight the need for comprehensive sexual health education programs that address the intersection of alcohol misuse and risky sexual behaviour.

The variable "Recruitment of peers into unwanted sexual activities" yielded a mean score of 3.99 (SD = 0.907), pointing to the participants' acknowledgment of alcohol's role in promoting undesirable behaviours among peers. This aligns with the established understanding that alcohol misuse can facilitate peer pressure and encourage involvement in harmful activities (Duarte, Escario, & Molina, 2018). The study's outcomes underscore the importance of cultivating a supportive and informed peer environment that counteracts the negative influence of alcohol-related behaviours.

Finally, the perception that "Alcohol-related behaviours have caused the prevalence of rape in schools" attained a mean score of 3.89 (SD = 0.950), indicating the participants' concern about alcohol's potential contribution to such serious offenses. This finding resonates with prior research that emphasizes the correlation between alcohol misuse and incidents of sexual assault, further underscoring the need for preventive measures and awareness campaigns (Gatins & White, 2013).

In summary, the comprehensive exploration of descriptive statistics unveils the depth of trainees' awareness of the detrimental consequences linked to alcohol-related behaviours. The results substantiate existing literature and emphasize the imperative nature of preventive measures, targeted education, and multifaceted intervention strategies to mitigate the adverse effects of alcohol misuse on trainee dropout rates.

When asked about how alcohol abuse contributes to irresponsible sexual behaviour beyond the previously mentioned factors, participants provided a diverse array of responses, reflecting their perceptions and understanding of this intricate relationship. These responses offer valuable insights into the multifaceted ways in which alcohol misuse can impact individuals' attitudes and behaviours in the context of sexual activity.

Several participants highlighted the cognitive impairment caused by drinking, including poor thinking abilities and memory lapses. The sentiment that "drinking causes a person not to think properly" and "poor memory" underscores the role of alcohol in impairing judgment and rational decision-making (NACADA, 2016). This aligns with the established notion that alcohol's impact on cognitive function can lead to impulsive and risky behaviours, including those related to sexual activities (Njeru & Ngesu, 2014).

Furthermore, some participants pointed out that alcohol abuse could contribute to the spread of diseases like HIV and AIDS. This observation reflects an awareness of the potential health consequences linked to unprotected sexual encounters under the influence of alcohol (NACADA, 2018). This aligns with research that has highlighted the connection between alcohol misuse and increased vulnerability to sexually transmitted infections due to impaired judgment and decreased condom use (NACADA, 2017).

Interestingly, participants also highlighted the potential for alcohol to escalate conflicts and lead to aggressive behaviour, ultimately impacting sexual interactions. The references to "causes fight" and "crime" indicate an understanding of the link between alcohol-fueled disputes and potentially violent outcomes (Foxcroft, 2016). These findings resonate with existing research that underscores the role of alcohol in escalating confrontations and influencing individuals to engage in aggressive actions (Glickman, Friedman, & Utada, 2015).

Moreover, participants acknowledged the alteration of perception caused by alcohol, leading to misinterpretations of social cues and signals. This insight resonates with the broader understanding of how alcohol can impair individuals' ability to accurately read and understand others' intentions, potentially leading to non-consensual sexual behaviour (Rotgers, 2016). The reference to "influence on perception" aligns with previous studies that emphasize the role of alcohol in distorting individuals' comprehension of social situations (NACADA, 2020).

The respondents' remarks also highlighted the influence of alcohol on sexual desire and impulsivity. Statements such as "when you drink, you want sex" and "learners want to test" suggest a perceived connection between alcohol consumption and heightened sexual motivation (Irving, Arbour & Faulkner, 2012). These perceptions reflect the intersection of alcohol's disinhibiting effects and individuals' personal attitudes toward sexual engagement.

Additionally, participants noted the potential for alcohol to lead to a lack of self-control and poor decision-making. These insights reflect an understanding of how alcohol's impact on cognitive functions can lead to impulsive actions and a diminished ability to assess consequences (UNODC, 2018). This aligns with the broader literature that emphasizes the correlation between alcohol misuse and reduced self-regulation (NACADA, 2016).

In conclusion, participants' responses offer a comprehensive view of the intricate ways in which alcohol abuse can contribute to irresponsible sexual behaviour. These insights underscore the importance of tailored educational initiatives that address misconceptions, provide accurate information about the risks associated with alcohol-related behaviours, and empower individuals to make informed decisions regarding their sexual health and well-being.

8.1. Correlational Analysis

This section delves into a comprehensive correlational analysis of "Trainees' Dropout" in relation to various key constructs. The objective is to unveil potential associations and relationships between trainees' dropout rates and specific factors under examination. The findings are succinctly presented in table 4, providing insights into the statistical correlations and significance levels associated with these constructs.

Presented as "Correlational Analysis," table 4 systematically showcases the correlations between "Trainees' Dropout" and "Irresponsible Sexual Behaviour." For each construct, the Pearson Correlation coefficient is presented, indicating the strength and direction of the relationship. Furthermore, the associated significance levels are provided to determine the statistical significance of these correlations.

The correlations presented in the table shed light on the potential connections between trainees' dropout rates and the examined constructs. ** The notations indicate that the correlations are significant at the 0.01 level (two-tailed). This information serves as a basis for deeper discussions and interpretations, contributing to a more nuanced understanding of the factors influencing trainees' retention within the context of the study.

		Trainee Dropouts
Irresponsible sexual behaviour	Pearson Correlation	.664**
	Sig. (2-tailed)	.000
	N	261

Table 4: Correlational Analysis

** Correlation is significant at the 0.01 level (2-tailed)

The correlation analysis provides insights into the complex factors contributing to trainee dropouts within vocational training institutions. Through statistical examination, several key factors were found to be significantly associated with the likelihood of trainees leaving their educational programs prematurely.

One notable correlation emerged between trainees' engagement in irresponsible sexual behaviour and their propensity to drop out. The analysis revealed a strong positive correlation ($r = 0.664$, $p < 0.01$) between these two

variables, underscoring the potential link between alcohol-related behaviours and risky sexual activities leading to premature school departure. This finding resonates with earlier discussions on the impact of alcohol misuse on decision-making and impulsive behaviours, which can, in turn, affect academic engagement and commitment. The convergence of these findings with previous scholarly works supports the notion that trainees who indulge in alcohol-related behaviours might find themselves more vulnerable to unplanned sexual encounters, resulting in the disruption of their educational trajectories (Robin & Johnson, 2016; UNODC, 2018).

9. Conclusions and Recommendations

Firstly, the investigation into the relationship between irresponsible sexual behaviour and trainee dropout rates has provided significant insights. The findings underscore the pronounced impact of irresponsible sexual behaviour on dropout rates, highlighting the need for comprehensive interventions that address both academic challenges and behavioural issues related to alcohol-related behaviours and sexual conduct.

To address the link between alcohol-related behaviour and trainee dropout rates, educational institutions should implement focused awareness campaigns. These campaigns can effectively educate trainees about the potential consequences of alcohol misuse on their academic performance, emphasizing the connection to dropout rates. Integrating alcohol education into the curriculum is also vital. By providing accurate information about the impact of alcohol on academic success, institutions can empower trainees to make informed choices and reduce the risk of dropping out. Peer-led workshops can play a pivotal role in promoting conversations about alcohol-related challenges, providing a platform for trainees to share experiences and discuss strategies to overcome these issues.

10. References

- i. Cole, C., & McKay, T. (2020). The relationship between alcohol use and peer popularity, peer pressure susceptibility, and general conformity in colleges. *Journal of Drugs: Education, Prevention, and Policy*, 4(2), 67–87.
- ii. Bamberg, B., & Anderson, P. (2016). Alcohol in Europe and its effects on youths. In *Causes of Alcohol Abuse (Vol. 5, pp. 22–45)*. Atlanta: Sage.
- iii. Boitt, K. (2016). Effects of the prevalence of alcohol abuse among Egerton University students in Njoro, Kenya. Nairobi: IJSS. Retrieved on July 15, 2022.
- iv. Brown, B., & Clasen, R. (2015). The multidimensionality of peer pressure in adolescence. *International Journal of Adolescence and Change in Behaviour*, 4(2), 23–54.
- v. Campbell, R., & Hickman, M. (2017). Review of Sociology of Health and Illness. In *Qualitative Approaches on Drugs and Alcohol (Vol. 4, pp. 12–89)*. Purdue.
- vi. Carey, B., & Borsari, B. (2018). Influences of peer influence on college alcohol consumption. *Journal of Substance Abuse*. Nairobi: Sage. Retrieved May 12, 2022.
- vii. Charles, K., & Oakley, R. (2012). Drugs, society, and human behaviour. *Journal of Drug Abuse and Prevalence*, 5(1), 34–45.
- viii. Conroy, D., Jacobs, L., & Parke, A. (2018). Negative experiences of drinking peers in college students. *International Journal of Addiction and Mental Health*, 5(2), 112–156.
- ix. Day, J., & Birkett, A. (2014). Internal pilot studies for estimating sample size. *Journal of Applied Statistics*, 5(2), 14–32.
- x. Dobson, C. (2012). Influence of alcohol consumption for young people. *International Journal of Peer Counselling*, 4(3), 23–56.
- xi. Duarte, R., Escario, J., & Molina, J. (2018). An analysis of truancy among trainees on alcohol abuse. In *Trainees' Risk Behaviours and Peer Influence on Unobserved Factors (pp. 45–56)*. Lagos: Sage.
- xii. Eliyas, A., Liranso, S., & Israel, F. (2017). Drug and Substance Abuse Knowledge and Attitudes among Trainees. *Journal of Peer Review on Alcoholism*, 7(5), 23–67.
- xiii. Endo, M. (2014). The Incidences and the Extent of Substance Abuse among Primary School Students. *International Journal of Youth and Drugs*, 4(2), 113–116.
- xiv. Evans, N., & MDee, S. (2018). Teen drinking and educational attainment in TVET institutions. In *Labor Economics: Evidence from Two-Sample Instrumental Variables (Vol. 3, pp. 23–43)*. Lagos.
- xv. Fen, S., & Ngee T. (2013). Conceptualization on susceptibility to peer pressure for trainees. *Journal of Research on Youths Behaviour*, 3(2), 123–176.
- xvi. Foxcroft, D. (2016). The effects of drug abuse on family counseling. In D. Authur, *Trainees Alcohol Use and Misuse*. United Kingdom: Amazon.
- xvii. Francis, J. (2015). Epidemiology of alcohol use and Drug Control (AUD). In *Alcohol Use Disorders (Vol. 4, pp. 123–345)*. Lagos: McMillan.
- xviii. Gatins, W., & White, G. (2013). Working on Prevention and Awareness of Trainees' Drug Abuse. *International Journal of Drug Control*, 4(2), 112–134.
- xix. Glickman, N., Friedman, A., & Utada, A. (2015). Drug use over uncontrolled youths' behaviour in high school. In *Drug Abuse and Control (Vol. 34, pp. 234–678)*. Nairobi.
- xx. Global Crime and Drug Prevention Centre - (GCDP). (2019, June 12). Promising and Successful Programs for School-Based Drug Abuse Prevention. *Journal of Youths and Behaviour*, 5(2), 56–67.
- xxi. Grady, M., & Early, P. (2017). Embracing the Contribution of Cognitive Theories for Minimizing Youth Risks. In *Cognitive Behavioural Therapy for Youths (Vol. 4, pp. 56–78)*. Nairobi: Harper Collins.

- xxii. Hinds, D. (2012). Research Instruments for Academic Research. *Journal of Research Methodology*, 3(1), 23–45.
- xxiii. Hjern, A., Back, K., Berg, L., & Vinnerljung, B. (2016). School Performance and Parental Alcohol-Related Disorders for Teenagers. *Review for Youths*, 34(3), 112–167.
- xxiv. Ingersoll, K. (2013). Association, Diagnostic and Statistical Mental Disorders. *Journal of Motivation and Behaviour Change*, 5(3), 23–87.
- xxv. Irving, H., Arbour, P., & Faulkner, E. (2012). Health-Risk Behaviours and Psychological Distress for Adolescence in Colleges. *Journal of Psychiatry and Psychological Development*, 7(1), 34–67.
- xxvi. Johnson, E., & Robin, S. (2016). Trainees' Drug and Alcohol Use. In *Youths Attitude and Peer Pressure (Vol. 6, pp. 7–45)*. Mumbai: IJISS.
- xxvii. Johnston, D., O'Malley, M., & Bachman, J. (2018, June 5). Alcohol Usage among Trainees. *International Journal of Alcohol Health and Research World*, 4(2), 66–90.
- xxviii. Kalodner, R. (2019). Cognitive-Behavioural Theories. *International Journal of Psychology, 34–67.
- xxix. Kinai, T. (2010). Behaviour Modification and Lifestyle Rehabilitation. *International Journal of Psychology*, 45(12), 123–145.
- xxx. Koerhuis, J. (2017). Maladaptive Social Behaviour for College Students in Vocational Training. *International Journal of Counselling*, 4(2), 123–178.
- xxxi. Koerhuis, J. (2017). Maladaptive Social Behaviour of Students in Secondary Vocational Education. 4(2), 12–78.
- xxxii. Kothari, C. (2019). Research Methods and Techniques. *Journal of Research Methodology*, 4(2), 23–34.
- xxxiii. Kothari, R. (2014). Methods and Techniques. *International Journal of Research Methodology*, 5(2), 12–78.
- xxxiv. Kyprianides, A., Jackman, J., Villadsen, A., & Fitzsimons, E. (2018, January 12). Assessment of Youths' Risky Behaviour in Adolescence. *International Journal of Psychological Counselling*, 4(23), 23–67.
- xxxv. Landon, J., Thornton, N., Noel, J., Jernigan, D., & Lobstein, T. (2017). Alcohol Usage for Trainees' Consumption in TIVET Institutions. *Longitudinal Studies on Drug Abuse*, 6(2), 23–78.
- xxxvi. Levinsen, K., & Ørngreen, R. (2017). Research Methodology for Qualitative and Quantitative Approaches. *Journal of E-Learning*, 5(2), 12–45.
- xxxvii. Melville, S., & Goddard, W. (2004). An Introduction to Research Methodology. In *Quantitative Research (Vol. 4, pp. 23–67)*. Atlanta: Juta and Company Ltd.
- xxxviii. Mohamed, S., Kyobutungi, C., & Juma, P. (2017). Analysis of Drug Addiction Diseases Prevention Policies in Kenya. *Journal of African Population and Health Research*, 4(2), 123–167.
- xxxix. Monrouxe, V., & Black, F. (2014, July 5). Medical Education for the Teenagers. *Students Alcohol-Related Provocation*, 4(1), pp. 23–56.
- xl. Morgan, W., & Krejcie, V. (2017). Determining Sample Size for Research Activities. *Journal of Educational and Psychological Development*, 5(2), 23–45.
- xli. Mung'atu, F., Okinda, R., & Mathaiya, R. (2020). Baseline Survey on Effects of Drug and Substance Abuse on Academic Participation among Students in T. *International Journal of Education and Research*, 7(2), 112–156.
- xlii. NACADA. (2016). The National Survey on Alcohol Abuse and Drugs among College Students. *International Journal of Drug Control*, 6(2), 67–89.
- xliii. NACADA. (2017). Annual Report for the Office of the National Campaign against Drug Abuse. *Journal of Drug Control*.
- xliv. NACADA. (2018). National Survey on Rapid Situation Assessment of Drug and Substance Abuse in Kenya. Nairobi: Government Printers.
- xlv. NACADA. (2020). Current Status of Alcoholism and Drunkenness in Kenya, 9(2), 119–189.
- xlvi. Nasibi, M. (2021). Discipline Guidance and Counseling in Schools, 6(1), 23–78.
- xlvii. National Institute on Drug Abuse - NIDA. (2018). the Science of Addiction. *International Journal of Drugs, Brains, and Behaviour*, 5(2), 12–45.
- xlviii. Njeru, N., & Ngesu, L. (2014). Causes and Effects of Drug and Substance Abuse. *Journal of Drug Diagnosis*, 5(2), 234–245.
- xlix. Ongwae, M. (2016). Causes and Effects of Alcohol and Abuse. In *Johnson, Drug Abuse for Teenagers (Vol. 4, pp. 178–190)*. Nairobi: Nairobi Press.
- l. Perkins, W. (2013). Review of Social Norms and the Prevention of Alcohol Misuse for Trainees. *International Journal of Social Studies*, 5(12), 112–156.
- li. Reeves, R., & Crowe, H. (2018). World Health Organization on Treatment for Alcohol and Other Hard Drugs. *Journal of Alcoholism and Youths Influence*, 34(2), 123–167. Retrieved May 12, 2021.
- lii. Reitman, D., Hupp, D., & Jewell, D. (2018). The Cognitive-Behavioural Theory. In *Handbook of Clinical Psychology (pp. 78–90)*. Sage.
- liii. Rodriguez, L., Lizotte, J., Krohn, D., & McCluskey, P. (2012). Early Substance Usage for Alcohol and Drug Control. *Journal of Drug Issues*, 5(3), 23–78.
- liv. Rotgers, F. (2016). Theory and Technique on Cognitive-Behavioural Theories of Substance Abuse. *Journal of Substance Abuse*, 3, 16–45.
- lv. Rountree, P., & Reed, D. (2017, August 12). Peer Pressure and Adolescent in Drug Control. *Journal of Quantitative Approaches on Drugs and Research*, 4(45), 23-67. Retrieved June 12, 2022.
- lvi. Saitz, R., & McCambridge, J. (2017). Rethinking Brief Interventions for Alcohol in General Practice. *Journal of Drug Interventions*, 8(3), 23–67.

- lvii. Spiker, A., Parent, C., Hammer, H. (2018). Global Status Report on Alcohol and Health. In *Global Status Report on Alcohol (Vol. 5, pp. 17-56)*. Geneva: World Health Organization.
- lviii. Twycross, A. (2015). Validity and Reliability in Quantitative Studies. In *Research Methodology (Vol. 4, pp. 23-67)*. Nairobi: Sage.
- lix. UNICEF. (2013). Vocational Trainee and Drug Abuse. *International Journal of Research on Adolescence, 4*(1), 23-56.
- lx. UNODC. (2018). World Drug Report on the Prevalence of Youths. *5*(2), 78-89.
- lxi. Wamalwa, B., Wangui, C., & Mariene, J. (2017). The Effects of Peer Influence on Students' Education in Secondary Schools. *Journal of Education and Research, 4*(1), 2017.
- lxii. Watkins, M. (2016). Alcoholism and Family Marital Problems. *International Journal of Family Matters, 3*(4), 120-167.
- lxiii. Were, N. (2013). The Discipline in Schools and Parental Guidance. *Guidance and Counselling, 5*(2), 45-78.
- lxiv. Winters, C., Nelson, F., Erickson, J., & Toomey, L. (2012). Examining Alcohol Policies and Practices amongst Teenagers United States. *Journal of Drug Control, 5*(12), 34-54.
- lxv. World Bank. (2013, July 13). World Development Report. *International Journal of Drugs Assessment, 3*(2), 13-23.