ASSESSING ALCOHOL ABUSE IN A SAMPLE OF NIGERIAN UNDERGRADUATES: PREDICTIVE EFFECTS OF PEER PRESSURE AND SELF-ESTEEM.

Chukwuemeka A. F. Okoye,
Nwana Ifeanyi,
Bernard .C. Chine
Oguegbe, Matthew Tochukwu
Nnamdi Azikiwe University Awka
drokoyecaf@gmail.com

Abstract
The rate at which alcohol is abused in Nigeria is quite alarming. This study assessed peer pressure and self-esteem as predictors of alcohol abuse among undergraduates of the institute of Management and Technology, Enugu, Nigeria. Two hundred and Forty-five (245) participants took part in this study. They constituted 117(47.8%) males and 128(52.2%) females, who were selected through simple random sampling. Their ages ranged from 17-31 years, with a mean age of 22.7 and standard deviation of 3.74. The instruments utilized for data collection were Alcohol Use Disorder Test, Index of Peer Relation, and Self-Esteem Scale. The design adopted in the study was a predictive design while multiple Linear Regression was adopted as a Statistical tool for data analysis. Three hypotheses were tested and the result revealed that the first hypothesis which stated that peer pressure will significantly predict alcohol abuse among undergraduates was accepted at F (2,242) = 16.391, Beta= -.345 P<.05. The second hypothesis which stated that self-esteem will significantly and negatively predict alcohol abuse among undergraduates was rejected at F (2,242) = 16.391, Beta = -.005, P>.05. The third hypothesis which stated that peer pressure and self-esteem will jointly predict alcohol abuse among undergraduates was accepted at F (2,242) = 16.391, R square = .119, P< .05. Based on the findings, the researchers recommended for urgent public health preventive intervention and enlightenment on the consequences of alcohol abuse on the health of the abuser.

Keywords: Alcohol, Abuse, Peer Pressure, Predictive, Self-Esteem, Undergraduate.

Introduction
In Nigeria, the use of substances have been a serious issue among undergraduates in Nigerian higher institutions of learning. The most used substances by these
undergraduates are marijuana, crack, codeine, tramadol and alcohol. But, in this study, the researchers focused on alcohol consumption.

Alcohol is one of the substances that is legally consumed in many countries of the world, and it is socially acceptable in most countries (Keller & Villiant, 2010), and Nigeria is not an exception. Alcohol is taken mainly for relaxation and enjoyment. Alcohol as a substance is a depressant, meaning that it slows the activity of the nervous system and also impair thought process (DSMV, 2013).

The consumption of alcohol in many Nigerian higher institutions of learning has become a problematic behaviour among the student population. It continues to be one of the risky behaviour engaged in by adolescents and young adults. The abuse of alcohol has been the cause of many road accidents in the country. The use of alcohol may also contribute to a “depressed” emotional state. College students in Nigeria experiment with substance (alcohol and tobacco) without knowing which of the substances to take, and when to take it (Adekye, 2012), and presently, risky alcohol use among university students has become a serious public health issue in Nigeria (Ekpenyoung & Aakpege, 2014).

Indeed, observations and literature has shown that some students are involved in alcohol abuse as a result of certain factors (Obot and Ibang, 2002; Makanjuola, Daramola and Obembe, 2007). Most deplorable however, is the rate of increase in the use of alcohol and other substances that can cause serious harm to their user. While people of all ages tend to be involved in the abuse of alcohol, the increase of this phenomenon among young people, between the ages of sixteen and thirty in contemporary Nigeria is regrettably serious and alarming (Suleman, 2003).

According to Lindberg, Burgress and William (200), over ninety percent of teenagers who drink regularly also do other things that can put them at risk of harm. Alcohol abuse is also associated with many accidents, fights, offenses and unprotected sex
(Michand, 2007). Study conducted in Nigeria (Obot and Ibanga, 2002), reported that over 97,000 university students are victims of alcohol-related sexual assault. Furthermore, a survey data indicated that over 696,000 university students in Nigeria are assaulted each year, and 1,700 die annually as a result of such assaults (Adewuya, 2005); Consequently, elevated rates of academic problems, such as missing class, poor performance on assignments, examinations and low grades, as well as related problems have also been linked with heavy alcohol use among university students (Rotimi, 2005).

Therefore, it is pertinent and apt to study if certain factors like peer pressure and low self-esteem are portent predictors of alcohol abuse among students’ population, especially in Nigeria. There are various social and psychological factors that contribute to young peoples’ motivation to start using drugs, particularly alcohol. According to Lee, Neighbors & Woods (2007) the most prominent influence on alcohol abuse is peer pressure.

Indeed, a peer can be any one you look up to or someone you would think is of equal age or ability. However, peers do not only refer to those of the same age and ability, there are also peers in workplace, in school, church and even in the place of relaxation. A peer could be a friend, someone in the community or even someone on the television (Hardcastle, 2002). Peers play a large role in the social and emotional development of an individual (Allen, 2005).

On the other hand, the term “pressure” implies the process that influence people to do something that they might not otherwise choose to do. According to Harley (2011) peer pressure refers to the influence that peers can have on each other. In the views of Jones,
Peer pressure is the ability of people from the same social rank or age to influence another one. Peer pressure is commonly associated with episodes of adolescent and young adults risk taking (such as drug abuse, sexual behaviour, etc), because these behaviours commonly occur in the company of peers.

It can also have positive effects when youths are pressured by their peer towards positive behaviour such as excelling in academics or volunteering for charity (Kellie, 2013).

However, peers can also have a negative influence. They can encourage each other to skip classes, steal, cheat, use of substance, or become involved in other risky behaviours. Majority of youths and adolescents with substance abuse problems began using substance as a result of peer pressure. Negative peer pressure may influence in various ways like joining group who drink alcohol, smoke cigarette and marijuana among others (Arief & Martin, 2011). Besides, another factor of interest to the researchers is self-esteem. The way that people view themselves will have an impact on how they experience their life. Most peoples’ thoughts and feelings about themselves are partly based on their daily experiences. Historically, self-esteem has been conceptualized as a positive or negative evaluation of the self (Rosenberg, 1979). Currently, self-esteem according to Orth & Robins (2013) refers to an individual's subjective evaluation of his or her worth as a person, which has an important function on psychological well-being.

Self-esteem has been divided into two types, which are the high self-esteem and the low self-esteem. Indeed, people with high self-esteem are able to act according to what they think to be the best choice, trusting their own judgement, and not feeling guilt when others do not like their choice. They fully trust their capacity to solve problems, not hesitating after failures and difficulties. They also resist manipulation, collaborate with others only if it seems appropriate and convenient (Rosenberg & Owens, 2001).
Low self-esteem is the focus of this study. It can result from various factors including genetic factor, physical, socioeconomic status, significant emotional experience, peer pressure and bullying (Jones, 2003). Low self-esteem describes a substandard evaluation or disappointing appraisal of one’s own self-worth (Rosenberg & Owens (2001). Individuals with low self-esteem may show heavy self-criticism and dissatisfaction, chronic indecision and an exaggerated fear of mistakes, and jealousy in relationships Orth and Robins, 2013).

Low self-esteem has been linked to behavioural problems and poor school performance (Agarwala and Raj, 2003), it is related with serious behavioural problems such as suicidal tendencies (Bhattacharjee and Deb, 2007, Manani and Sharma, 2013); leads to psychological problems such as depression, social anxiety, loneliness, alienation, e.t.c. Furthermore, low self-esteem seems to be a motivation for consuming high amounts of alcohol among adults. Substance use seems to escalate in students with low self-esteem, and it has been linked to weight problem and social phobia (Zou and Abbott, 2012).

Some theories were reviewed to explain alcohol abuse and dependence. The social control theory by Hirschi (1969) also known as the social bond theory explain why people become law abiding and also engage in delinquent behaviour. It posits that if social bonds were not effective or broken, people would turn to delinquency because of the rewards it offers. These social bonds take four dimensions of (1) attachment: the emotional ties we feel towards other people and the degree of sensitivity to the feelings of others and their opinions, (2) commitments: the investment in our relationship with others, (3) Involvement: the actual ties that limit out availability to become delinquent,
and (4) Belief: the extent to which the individual is committed to the rules of a society. These four factors are interdependent. If all apply, then conformity is virtually guaranteed; if none apply, then a propensity to commit delinquent behaviour is possible. Hirschi's social control theory has been extensively used to explain deviant behaviours, such as delinquent acts (theft, vandalism) and drug use and addiction.

Another theory is the attachment theory by Bowlby (1969). This is a psychological, evolutionary, and ethological theory concerning relationship between humans. It stresses that relationship that exists between a child and caregivers influences the emotional development of the child. Attachment theory posits that in attachment behaviour; which is interaction with the mother, the infant learns the necessary skills for survival as well as develops an internal working model, which explains how the individual views the world, themselves and others. This attachment was classified as secure and insecure attachment. Individuals involved in secure attachment gain skills in negotiation, communication, compromise and assertiveness which comes handy in their social relationship throughout their lives (Cassidy, 2001). On the other hand, individuals with insecure attachment to their early figures were more likely to have parents who reported a history of abuse, adverse events (marital problems, alcohol abuse, domestic violence) and psychological problems (Wedekind, Bandelow, Heitmann, Havemann, Egel & Aucther, 2013). Indeed, individuals low in secure attachment were significantly more likely to report alcohol dependence and experience negative consequences from alcohol use.

*Also, the social learning theory developed by Akers (1977) was considered in this study. The theory is often applied to explain social behaviour and states that alcohol dependency and abuse develops as a result of negative social consequences (e.g. poverty and unemployment) by modelling the behaviour of those around them or be observing others who engage in addictive behaviour (Akers, 2011). This theory emphasized the role
of societal influences, which impacts individual and focuses on peer pressure and relationships. The theory further suggests that role modelling effects personal decisions and choices (Akers, 2011). In order words, students decision-making and actions are influenced daily by countless people.

Subsequently, several empirical studies were reviewed in order to give empirical impetus to this study. With respect to peer pressure and alcohol abuse, Nwoke, Ogba and Ugwu (2012), conducted a study on the influence of family and peer on drug use among Nigerian youths in which 233 undergraduate students of University of Nigeria Nsukka served as participants. Three instruments were employed for data generation and data were analysed through hierarchical multiple regression. The result showed that family and peer influences significantly predicted drug use (mainly alcohol) on the participants. Gboyega, Adeniyi and Adekoya (2014) conducted a study that evaluated the prevalence of substance abuse and its prediction by parenting style and peer pressure among university students. Participants in this cross-sectional survey consisted of 452 undergraduates of Oabisi Onabanjo University, Ago-Iwoye, Nigeria. The ages of the participants ranged as follows: 126 (27.9%) were 18-20 years, 312 (69.0%) were 20-25 years, while 14 (3.1%) were above 25 years. They comprised of 221 (48.9%) males and 231 (51.1%) females. The result indicated that about 47% of all the respondents reported current use while 58% reported lifetime use of one or more psychoactive substances. Lifetime prevalence rate was highest for alcohol (43.14%), followed by tobacco (37.6%), stimulants (22.5%), cannabis (18.14%), sedatives (17.92%) and heroin (12.17%).
Furthermore, the result also showed that parenting style, peer pressure, and sex jointly predicted substance abuse among undergraduates.

Furthermore, Laanyan (2014) carried out a study on the influence of peer pressure on drinking alcohol among Chinese college students, where he employed 951 students (Freshman, Sophomore, and Junior) from a University in central China who volunteered to participate in the study. The extent of perceived peer pressure and corresponding drinking behaviour were examined separately in subpopulations categorized by gender and peer groups. The result indicated gender differences and subgroup differences for perceived peer pressure. Pressure was significantly related to alcohol drinking frequency for both peer groups. Also, results from a path model indicated that perception of peer pressure was negatively correlated with alcohol self-regulation self-efficiency.

Moreover, in consideration of self-esteem and Alcohol abuse, Aguirre, Alonso, and Zanette (2010) conducted a study on the relationship of levels of self-esteem and alcohol consumption in adolescents through a transversal, descriptive study in a college of Nursing of Queretaro in Mexico. The participants were 109 adolescents aged from 17 to 20 years. Data was elicited using Audit and Rosenberg self-esteem scales. The majority of the participants had high self-esteem (94.5%) and non-presented low self-esteem of the adolescents in the study 80.7% did not consume alcohol hazardingly. It was concluded that the adolescents presented high self-esteem and low alcohol consumption.

Also, Zhai, Jang, Sui, Wang, Chen, Yang, et al (2015), conducted a study to determine whether coping mechanisms mediate the relationship between self-esteem and problem drinking among Chinese men and women with alcohol use disorders. A cross-sectional survey was conducted in Harbin, Heilongjiang province, China, where a sample of 5,689 community residents were screened from which 517 males and 172 female problematic drinkers were chosen to participate in the study. A self-esteem scale, a coping
A questionnaire and an alcohol use disorder identification test were completed in order to assess participants' self-esteem, coping mechanisms, and alcohol use disorders respectively. Participants' socio-demographic data were also generated at this stage. The data were examined through descriptive statistics, correlations, and bootstrap analyses. The result showed that low self-esteem levels were related to problematic drinking, and there were no gender differences in the relationship between self-esteem and problematic drinking. A relationship between low self-esteem and negative coping was observed only in men. Negative coping thus mediated the relationship between self-esteem and problematic drinking among men, but this was not the case for women. Positive coping did not mediate the relationship between self-esteem and problematic drinking among the participants, regardless of gender.

**Purpose of the study**

In order to contribute to knowledge in this area, the study presents the following research objective and hypotheses.

1) To examine if peer pressure will predict alcohol abuse
2) To investigate if self-esteem will predict alcohol abuse
3) To evaluate if peer pressure and self-esteem will jointly predict alcohol abuse

**Hypotheses**

1) Peer pressure will significantly predict alcohol abuse among undergraduates
2) Self-esteem will significantly and negatively predict alcohol abuse among undergraduates.

3) Peer pressure and self-esteem jointly will significantly predict alcohol abuse among undergraduates.

**Methods**

**Participants**

The participants in the study were 245 students, comprising of 117 (47.8%) male and 128 (52.2%) females drawn from two departments (Accountancy and Banking/Finance) in the school of Financial Studies, Institute of Management and Technology, Enugu, Nigeria. Their ages ranged from 17-31 years, with a mean age of 21.68 and standard deviation of 3.73. Simple random sampling was used in selecting the school, department and levels for the study, while convenience sampling technique was used in selecting the participants.

**Instruments**

Three instruments were utilized to collect data for the study. The instruments are: Alcohol Use Disorder Identification Test (AUDIT) developed by Sanders and colleagues in collaboration with World Health Organisation (1993). It is a self-rated 10-item questionnaire used to assess harmful and hazardous alcohol use. Each item is scored using a five point Likert scale, ranging from (0= “never” to 4= “Daily or almost daily”. Item 9 and 10 are scored on three (3) point Likert scale which are (0= “never”, 2= “yes”, but not in the past year”. Possible scores range from 0-40. A score of 8 or more is associated with harmful or hazardous drinking; while a score of 13 or more in women, and 15 or more in men, is likely to indicate alcohol dependence. Sample items include, “How often
do you have a drink containing alcohol?” and “Has a relative or friends, doctor or other health worker been concerned about your drinking or suggested you cut down?”. A pivot study conducted by the researchers using 100 participants yielded a Cronbach Alpha of .90.

Index of Peer Relation (IPR) was developed by W.W. Hudson (1986). This scale consists of 25 items which assesses the extent severity or magnitude of the problems of interpersonal relationship a client is experiencing in the course of social interaction with peers who include schoolmates, co-workers, club members, neighbourhood and other social groups. Participants rate each item on a five (5) point Likert format ranging from (1) very or none of the time) to 5 (most or all of the time). It can be administered individually or in groups. Twelve (12) items are scored in reverse while thirteen (13) items are scored directly. Add together the results of the direct and reverse scores to get a total score and subtract 25 from the total score to obtain the IPR score of the individual. Sample items are “l get along very well with my peers” and ”My peers treat me badly”. Hudson (1986) reported an Alpha coefficient of .94 while a pilot study conducted by the researchers yielded a Cronbach Alpha Coefficient of .86.

The Rosenberg self-esteem scale was developed by Rosenberg (1965). It consists of 10 items designed to assess global of self-worth by measuring both positive and negative feelings about the self. The scale is Uni-dimensional. All items are responded to using a 4-point Likert Scale Format ranging from 1= “strongly disagree” to 4= strongly agree; with five items being reverse score. The sample items include “l feel l do not have much to be proud of” and “All in all, l an inclined to feel that l am a failure”. The scale has an internal
consistency of 0.77 and a minimum coefficient of Reproducibility of at least 0.90 (Rosemberg, 1965). A pilot study conducted by the researchers on the scale yielded a Cronbach Alpha of .73.

**Procedure**

The school of Financial Studies in the Institute of Management and Technology was randomly selected from the list of other schools in the institution. Also, two departments (Accountancy and Banking & Finance) were selected using simple random sampling technique. The same technique was also employed in selecting the levels that was used for the study (National Diploma 2 and Higher National Diploma 2). The researchers sought and obtained permission from the authorities to conduct the study. After obtaining the consent of the participants, they were assured of utmost confidentiality of their responses. Thereafter, the instruments were administered to each, and was collected on completion. The responses were collated and statistically analysed.

**Design and Statistics**

The study was a survey that adopted a predictive design and Multiple Linear Regression Statistics was used for data analysis.

**Result**

The result of the statistical analysis of the data obtained were presented below.

**Table 1:** Summary table of Mean and Standard deviation of the variables

<table>
<thead>
<tr>
<th>Variables</th>
<th>Mean</th>
<th>Standard Deviation</th>
<th>N</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alcohol Abuse</td>
<td>15.43</td>
<td>7.67</td>
<td></td>
</tr>
<tr>
<td>Peer Pressure</td>
<td>50.89</td>
<td>13.02</td>
<td>245</td>
</tr>
<tr>
<td>Self-esteem</td>
<td>30.58</td>
<td>4.48</td>
<td></td>
</tr>
</tbody>
</table>
Table 2: Summary of Multiple Linear Regression of Peer Pressure and Self-esteem as predictors of alcohol abuse

<table>
<thead>
<tr>
<th>Variables</th>
<th>B</th>
<th>Beta</th>
<th>T</th>
<th>Sig</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Constant)</td>
<td>5.316</td>
<td>1.430</td>
<td>.154</td>
<td></td>
</tr>
<tr>
<td>Peer Pressure</td>
<td>.203</td>
<td>.345</td>
<td>5.720</td>
<td>.001</td>
</tr>
<tr>
<td>Self-Esteem</td>
<td>-.008</td>
<td>-.005</td>
<td>-.075</td>
<td>.940</td>
</tr>
</tbody>
</table>

Dependent Variable: Alcohol Abuse.

The result shown on table 2 indicated that peer pressure has a significant predictive effect on alcohol abuse at F (2,242) = 16.391, Beta = .203, P< .05. Also, self-esteem indicated no significant predictive effect on alcohol abuse at F (2,242) = 16.391, Beta = -.005, P> .05. Thus, the first hypothesis which stated that peer pressure will significantly predict alcohol abuse among undergraduates was accepted, while hypothesis two which stated that self-esteem will significantly and negatively predict alcohol abuse among undergraduates was rejected.

Table 3: Model Summary
The result obtained from table 3 indicated that peer pressure and self-esteem jointly predicted alcohol abuse at $F(2,242) = 16.391, P < .001$. This implies that peer pressure and self-esteem accounted for 11.2% of variance in alcohol abuse among undergraduates. So, hypothesis three was accepted.

**Discussion**

The study investigated peer pressure and self-esteem as predictors of alcohol abuse among undergraduates. The first hypothesis of the present study was confirmed. This indicated that peer pressure has a significant predictive effect on alcohol abuse among undergraduates. This result is in consonance with the findings of Nwoke, Ogba, and Ugwu (2012), who examined the influence of family and peer on drug use among Nigerian youth; and found that family and peer significantly predicted drug use (mainly alcohol). It is also consistent with the findings of Gboyega, Adeniyi, and Adekoy (2014), who examined the prevalence of substance abuse and its prediction by parenting styles and peer pressure among university students. Their findings indicated that 43.14% of students abuse alcohol and that parenting styles, peer pressure and sex jointly predicted substance abuse among students. More so, it is in tandem with the findings of Lanyan (2014), who examined the influence of peer pressure on drinking among Chinese college students, and found that peer pressure was significantly related to alcohol drinking frequency for both peer groups.
Also, hypothesis two was not accepted in this study. This shows that negative self-esteem has nothing to do with alcohol abuse among undergraduates. This result is not consistent with the findings of Zhai, Jang, Sui, Wang, Chen, Yang, et al., who conducted a study to determine whether coping mechanism mediates the relationship between self-esteem and problem drinking among Chinese men and women with alcohol use disorder; and found that low self-esteem levels were related to problematic drinking.

Furthermore, the third hypothesis was confirmed and accepted. This implies that peer pressure and self-esteem jointly predicted alcohol abuse and accounts for approximately 41.1% of the variance in alcohol abuse among undergraduates. The findings is in line with the Attachment theory by Bowlby (1969, 1973) which posits that attachment behaviour is seen as interactions with the mother and infant. The theory further postulates that when an individual experienced an insecure attachment style, the way he views himself will be affected and the individual will seek attachment from outside, which will thus expose the individual to the consequence of bad peer like alcohol abuse, substance abuse, gambling, etc.

**Implication of the study**

Practically, the findings of this study has implication for clinical advocacy and management. Adolescents needed to be helped if they are to overcome their drinking problem. Counselling intervention such as psychoeducation, self-monitoring, peer management, self-regulation, value clarification and thought stopping could help and other causative factors in adolescent alcohol abuse.
Furthermore, community rehabilitation counselling centres would need to be established.

Realizing that majority of adolescent are in schools, there is need to strengthen the provision of counselling services in colleges, universities, hospitals and rehabilitation centres to address the counselling needs of adolescent alcoholics.

Consequently, from the findings of this study, the following recommendations were made:

1) Parents should develop strong bond with their children to enable them have confidence and see them as friends to share problems with.

2) Conventional activities that would engage students from frivolous behaviours should be put in place in campuses.

3) Also, preventive programs related to alcohol consumption should be instituted, focusing on strategies which should address psychological aspects of counselling for the wellbeing of adolescents.

In conclusion, the study examined peer pressure and self-esteem as predictors of alcohol abuse among undergraduates. Three hypothesis were tested; two were accepted and one was rejected. The result showed that peer pressure has predictive effect on alcohol abuse, while self-esteem did not predict alcohol abuse. Furthermore, peer pressure and self-esteem jointly and significantly predicted alcohol abuse.
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