

**EFFECTS OF ALCOHOL ABUSE ON EMPLOYEE PERFORMANCE
AND ABSENTEEISM IN KENYA PORTS AUTHORITY**

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DECLARATION

This project is my original work and has not been presented for examination in any other university.

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This project has been submitted for examination with my approval as University Supervisor

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DEDICATION

This project is dedicated to my family for their inspiration, encouragement and prayers towards the successful completion of my Master Psychology degree. I give praise and gratitude to God Almighty who has given me the strength and wisdom to undertake this degree.

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My special and sincere thanks go to my supervisor Prof. Michael M. Ndurumo for his unfailing guidance, support, useful comments and constructive critique which were all instrumental to the successful completion of this research work. I also appreciate the support and encouragement from my friends and family during the times that I had to balance between the demands of this academic program and an equally demanding work environment. My gratitude also goes to God who renewed my strength at every single stage of this study.

ABSTRACT

The World Health Organization(WHO) defineS a drug as any chemical substance which when taken into the body can affect one or more of the body's functions. Alcohol, a legalized drug, is among the substances currently abused in the world. According to the World drug report (2013), alcohol abuse is recognized as a global threat with serious effects on people's health, security, socio-economic status and cultural welfare.

This study sought to establish the effect of alcohol abuse on employee performance and absenteeism at the Kenya Ports Authority. The main variables of the study included extent of abuse, staff productivity, absenteeism, and alcohol abuse prevention practices and employee improvement programs. To achieve its objective, the study used questionnaires and interview guides. The study targeted staff based at the Inland Container depot Nairobi. Sampling method was used to obtain 60 respondents. Simple stratified random sampling was used to select the sample elements.

The study absorbed a descriptive research design. The study collected both quantitative and qualitative data and analyzed it through SPSS and content analysis respectively. The findings were presented using frequency tables. The study revealed and concluded that alcohol abuse is not so major a challenge at KPA. Factors such as work related stress, availability of extra monies and influence from peers are among the major contributors towards alcohol abusing habit; affects the productivity of the related employees; increases employee absenteeism and proneness to accidents at the workplace; there exists a varied degree of relationships between alcohol abuse and employee performance, absenteeism, workplace accidents, alcohol abuse prevention practices and employee improvement programs. It was also evident that effective alcohol abuse prevention practices and employee improvement programs impact employees against alcohol abuse. The study however recommended that KPA should adopt policies and other alcohol abuse control tools in order to curb the problem of alcohol misuse. Effective employee improvement programmes should also be put in place to facilitate the employees in beating the vice while the system of measuring the employee performance should also be enhanced as this supports the reduction of the alcohol abuse at the workplace.

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CHAPTER ONE: INTRODUCTION

1.1 Background of the Study

WHO (2004), Frone (2009) and NACADA (2006), have a basic definition of a drug and abused substances as any chemical substance which affects one or multiple functions of the body when taken. It is also referred to as a substance that interferes with an individual's behaviour, cognition, mood and general body functions. Nnachi, (2007) considers them as chemicals that result to physiological and/or behavioral modifications through changing the living tissues. Drugs includes those substances that are either useful or harmful to the body. Since the days of the old treatment and disease control has been aided by plants. Drugs have for long been a blessing to the human body hence their use does not amount to any danger especially when the drugs are correctly administered and used for medical reasons. When wrongly used however, drugs produce side effects to the human body.

Some are usually therefore categorized as licit which implies that there is no violation of the law with their sale whereas others are categorized as being illicit which implies that being in possession, selling, purchasing or using is generally prohibited by law. Moore *et al.*, (2009) differentiated between drug abuses from substance abuse. They argued that whereas drug abuse is the use of illegal drugs or inappropriately using of drugs that have been legalized, substance abuse on the other hand entails a broader range of chemicals that are abused. Excessively and with persistence administering drugs to self-administration drug without regarding the medically or culturally accepted norms amounts to drug abuse and further adds that using the drug to the point that it affects and/or interferes with the social and health functions of a person's body. Drug abuse can therefore be viewed as use of alcohol drugs and substances until the individual's health and social functions are interfered with. This therefore implies for a drug not to be categorized as misused a prior medical diagnosis from qualified health practitioners is required. However, unlawful overdose can also be viewed as abuse.

The last twenty years has seen abuse of alcohol in Kenya has greatly been on the increase and hence reached to unprecedented heights such that every part of the country has been scourged. NACADA (2006) links alcohol abuse to the increase in crimes, prevalence in HIV/AIDS, unrest in schools, family dysfunction, poverty and other malaise in the country. Drug and substance abuse greatly interferes with performance at the workplace in any industry. According to Bayer and Waverly, (2005), the interference is recorded in various forms including monetary costs from tardiness, overly utilized sick days, turnovers, increased claims from the insurance, time costs linked with diverted managerial time, work related conflicts and of great essence, the organization's reputation. These employees register high absenteeism as a result of sickness or accident, have more health connected issues, and have a higher likelihood of being involved in workplace accidents. These issues further result into higher workers compensation obligations, greater civil liability risk, increased recruitment and training expenses as a result of a high staff turn-over, and generally high health care expenses.

Alcohol consumption currently defines daily lives of many people. All around the world, alcohol is taken in economies that are both developed or developing. According to the World drug report (2013), alcohol abuse is recognized as a global threat with serious effects on people's health, security, socio-economic status and cultural welfare. Alcohol is frequently and wrongly categorised as a stimulant but it is generally a depressant that affects the central nervous system (Butcher, Mineka & Hooley, 2005). The term alcohol is a generically derived for ethanol which is a substance found in many drinks that humans consume. Alcohol also occurs in other forms that are harmful hence toxic to humans. This form include methanol (NHMRC, 2009). The combination of sugar and yeast through fermentation of specific food stuffs produces alcohol. According to the National Health and Medical Research Council (2009), various categories both socially and culturally cite different causes among individuals who use alcohol. Individuals drink so as to socialise, participate culturally, as a religious obligation or from effect from colleagues.

The main and immediate claimed benefit of alcohol include liberation and enhanced power. Moderate alcohol drinking is commonly acknowledged. When abused, alcohol results to a great effect on the user. This also varies from one individual to another depending on the concentration of alcohol in the blood (Blood Alcohol Concentration – BAC). Misuse of alcohol results to both psychological and social effects;

Longterm use of alcohol can lead to psychological damage. A number of researches have revealed a strong link between alcohol abuse and mood disorders. The other side of this argument is that alcohol can be while seeking to treat oneself against several forms of mood disorders, whereas it can also increase mood disorders if used with no limits (Prince, Akincigil, Hoover, Walkup, Bilder, Crystal, 2009). The arguments around worrying indicate that people suffering from social phobia usually feel free in a social set-up once under the influence of alcohol abuse; this is according to Abrams, Kushner, Reinertsen, 2002. Several aspects result from increased use of alcohol including high irritability, reduced clear reasoning and impartial judgment (Butcher, Mineka & Hooley, 2005). The National Health and Research Council (2009) argues that there is a well established comorbidity between alcohol abuse and schizophrenia. The report also adds that alcohol abuse may increase symptoms linked to schizophrenia such as hallucinations. According to Shand, Gates, Fawcett and Mattick (2003), alcohol abuse is also counted to be a causal factor in most road accidents. They also relate financial problems and loss of job loss to high risk alcohol use. The general community is also usually adversely affected when an individual excessively uses of alcohol. Abuse of alcohol is used to explain high rates of crimes that are violent. Families also stand affected in wake of alcohol abuse (Butcher, Mineka & Hooley, 2005). Alcohol abuse can also be linked to risk behaviors such as drunken driving and ill sexual behaviors.

Du Toit and Van Der Waldt (1998) define the absence of employee from the workplace as workplace absenteeism. On the other hand, Robbins, Odendaal and Roodt (2004) define absenteeism as what occurs when an employee fails to report for duty as scheduled, without looking at the reason or cause. According to Markussen, Rogeberg and Gaure (2009) attribute several aspects as contributors to employee absenteeism.

These include nature of work, age and gender of employee, education and occupation. Absenteeism can be directly used to ascertain the level of staff morale and also indirectly measure an employees' health and well-being. Motivated and committed employee usually have to be so sick before they book for their sick-off (Griep, Rotenberg, Chor, Toivanen & Landsbergis 2010).

Social norms such as abuse of drug affect the absence of employee from their workplace. According to a study conducted by Pidd, Berry and Roche (2006) in Australia, \$437m was lost in 2001 as a result of alcohol related absenteeism. A research carried out in the UK in 2001 revealed that employee absenteeism due to alcohol had a financial impact of averagely £1.5bn per year (Institute of Alcohol Studies, 2009). According to the findings in a study conducted by Kaithuru and Stephen (2015), alcohol accounts for up to 10% of workplace absenteeism and up to 50% of lateness.

In the current competitive business environment, the relationship between employee performance and organizational success cannot be overstated and organizations have to professionally compete in such times. Employees in any organization and their work performance is a vital indicator for a business to attain its goals. Hassan et. al. (2015) refers to employee performance as the ability of an employee to successfully perform within an agreed framework including constraints and available resources. Hardworking and effectively performing employees in a company are vital for its survival since capable employees create competitive advantage for their organization.

Employee performance can however be hindered by aspects such as and drug abuse. Costa Rica for example, up to 30% of workplace accidents and absenteeism were caused by alcohol dependency (Ames, Grube & Moore, 2007). Rohman & Blum (2002) argue that that abuse of alcohol hampers employee output by an estimated 10%. Kenya was placed among the four most notorious nations in African experiencing drug problems (UNODC, 2010) . The National Survey On Alcohol-related Illnesses and Deaths conducted by NACADA in 2013 found that 15% of Kenyans aged 15-64 are “current users” of alcohol. Analysis of alcohol-attributable deaths (AADs) for 2010, 2011 and

2012 found that alcohol accounted for an average of 4.5% of all the deaths. In May 2014 approximately 200 Kenyans died countrywide as a result of consuming alcohol containing methanol an illegal spirit used by unlicensed brewers in brewing cheap alcohol consumed by low earners all over Kenya.

There is urgent need to resolve alcohol abuse related challenges at workplaces in Kenya through addressing alcohol abuse related challenges. Organizations should also make intentional moves towards adopting policies, regulations and other tools in connection with alcoholism control so as to capture the problem of alcohol abuse according to United Nation AIDS (2009). Kaithuru and Stephen (2015) argue that regulations in a work environment in relation to alcohol may positively influence an organization and its employees. They also add that by putting in place clear regulations on alcohol and offering intervention programs for employees who need treatment or are somehow at risk in relation to alcohol abuse, organizations can develop healthier, safer and more productive workplace.

1.2 Statement of the Problem

The effects of drug and alcohol abuse problem which include ill-health, disability, low productivity, and even death, have impacted negatively on Kenya Ports Authority through loss of skills and experienced manpower of all cadres due to ill-health, loss of man hours as a result of absenteeism, reduced performance and increased stress (KPA Baseline Survey 2009 and the follow-up survey 2014). At the workplace, Alcohol and Drug abuse can greatly and negatively affect the safety, health and general performance of employees, which result into low output in the organizations. According to the NACADA National strategy 2007-2014, alcohol and drug abuse mostly happens within the context of family and the overall society. However, the workplace gives an opportunity for an early identification, intervention and support e.g. psycho-social for the affected employees. This may also benefit the employee's organization, their family and the community as a whole.

Developing countries have little studies and documented information available on alcohol abuse and work productivity. Factors such as gender (Beck, Behr, & Güttler, 2009), stress (Hourani, Williams, & Kress, 2006) and training & development (Sultana, 2013) have been studied to determine the relationship of these variables to employee performance. It was therefore imperative to evaluate the effects of alcohol abuse on both absenteeism and employee performance in Kenya Ports Authority.

1.3 Objectives of the Study

The objective of the study were;

- 1 Determine the effects of alcohol abuse on levels of performance and absenteeism in Kenya Ports Authority.
- 2 Determine the influence of alcohol abuse on the levels of performance among employees in Kenya Ports Authority.
- 3 Determine the extent to which alcohol abuse influences workplace absenteeism in Kenya Ports Authority.

1.4 Research Questions

The study sought to answer the following questions;

- 1 To what extent does alcohol abuse affect work performance in Kenya Ports Authority?
- 2 To what extent does alcohol abuse influence workplace absenteeism in Kenya Ports Authority?
- 3 Is there a relationship between alcohol abuse, absenteeism and work performance in Kenya Ports Authority?

1.5 Hypotheses

The study sought to test the following hypotheses;

H₀₁: Alcohol abuse does not affect levels of performance and absenteeism in Kenya Ports Authority.

H₀₂: Alcohol abuse does not affect the levels of performance among employees in Kenya Ports Authority.

H0₃: Alcohol abuse does not influence workplace absenteeism in Kenya Ports Authority.

1.6 Justification of the Study

Alcohol abuse is associated with health, social, physiological and economic challenges including increasing death rates as a result of medical and accident related incidences and deterioration of health standards among citizens. In the current competitive business environment, the vitality of output of employees towards business success cannot be overstated as businesses are compelled to compete and behave professionally. Work environments are affected by employee absenteeism and are further affected by employees' interaction processes. Alcohol, substance and drug abuse can cause absenteeism in the workplace in situations where an employee whereabouts are unaccounted for or reports to work late and leave early. Alcohol abuse does not only affect the abuser but also the society they live in. This may in turn affect their performance at workplace.

1.7 Significance of the Study

The findings of this study could also be useful to the human resources professionals and various level decision makers in organizations. It will build their capacity in understanding and implementing strategies on curbing alcohol abuse within their organizations and therefore enhancing employee performance. The study is also of significance to the employees of Kenya Ports Authority, those having an alcohol problem and those dealing with colleagues having the problem; to the managers supervising employees with alcohol problem as recommendations on dealing with the problem as per terms and conditions and regulations set by Kenya Ports Authority will assist the supervisors in dealing with the employees with alcohol problem. The study is also of significance to the families and dependents of employees abusing alcohol as strategies recommended to deal with the issues will impact on their family lives.

1.8 Scope of the Study

In analyzing the aspects on alcohol abuse on employee performance and absenteeism, the study focused on some of the main issues including impact of alcohol abuse on managers and employees on job performance; practices that prevent alcohol abuse at the workplace; factors that improve health, welfare and productivity of KPA employees through a sustainable and effective alcohol prevention program; workplace absenteeism; prevalence of alcohol abuse on workplace accidents in KPA and the effect of abusing alcohol on the amount of employee job output in KPA.

1.9 Limitations of the Study

The study focused on effects of alcohol abuse on employee performance and absenteeism at KPA. Several factors at workplace are influenced by alcohol abuse but the study was limited to these two aspects. Additionally, the study limited its data source to the organization's offices in Nairobi and from all the departments. Some of the respondents were also not easily reachable as a result of conflicting schedules whereas others were not willing to give their feedbacks to the researcher citing strict organizational regulations on information issuance and the fear of stigma and discrimination as a result of the information given.

1.10 Operational Definition of Terms

Employee:	Any person employed in the Authority for wages or salary (KPA Human Resources Manual).
Immediate Supervisor:	Any supervisor, Manager or Head of Department accessible to the employee at that time and within the specific job task.
The Authority:	Kenya Ports Authority as established by the Act of Parliament in 1978.
Alcohol Abuse:	Persistent or periodic excessive Alcohol use inconsistent with or unrelated to acceptable medical practice.

Dependent:	Anyone enslaved by drugs whose body cannot function without great discomfort or feelings of sickness unless supported by alcohol and drugs.
Relapse:	In Alcohol, Drug and Substance Abuse context, it is the act of one returning to using alcohol, drug and substance abuse, after a period of abstinence.
Dependence:	The need for repeated doses of the alcohol or drug to feel good or to avoid feeling bad
Drug:	Any substance which, when introduced into the human body will often alter the normal biological functioning of that body.
Alcohol:	A mood altering drug, sedative, hypnotic, obtained by fermentation of carbohydrates using yeast. Its active form is ethanol.
Treatment:	Treatment in this context will comprise of but not limited to Counseling, Detoxification, Rehabilitation and aftercare.
Workplace:	Any premises or place where a person performs work in the course of his/her employment.
Illicit drugs:	This refers to any psychoactive substance whose production, sale, use, or purchase is generally prohibited by law, and for which violators are subject to criminal penalties.

CHAPTER TWO: LITERATURE REVIEW

2.1 Introduction

This chapter reviews literature relevant to the study. The review discusses the concept of alcohol abuse, factors contributing to alcohol abuse at the workplace, effects of alcohol abuse on workplace absenteeism, accidents, and symptoms of alcohol abuse, performance problems and job productivity.

2.2 Theoretical Framework

Generally, the theories of drug abuse depict that several factors determine the dependence of people on certain drugs; these factors vary from person to person. The study will be founded on three theories; Reinforcement theory, Social cognitive theory and Biological theory of drug abuse.

2.2.1 Reinforcement Theory

The reinforcement theory is a psychological based theory. This theory overlooks the aspect of difference in personality between drug users and nonusers of drugs. It emphasizes the role of reinforcement in drug abuse which states that people mostly look at maximizing reward and minimizing punishment; people continue doing specific things because historically, they have been rewarded for them (Wise & Rompre, 1989).

This theory argues that all drugs and substances activate the brain reinforcement system and thereby act as rewards biologically. This drug or substance when taken once induces a reinforcement process which triggers a future chance of an increase in the drug taking behavior. Sanchis & Spanagel (2006) argue that the drug-reinforcement theory is generally and extremely helpful for understanding the biological substrates of a drug and substance taking behavior. They however add that it does not explain why an individual would love taking several drugs at a given time whereas another would only take a single drug and neglect any other. In relation to the study, most employees develop the tendency of taking alcohol and drug taking since the drugs act as stress relievers or alleviate their anxiety and enhance relaxation,

2.2.2 Social Cognitive Theory

The social cognitive theory constitutes the social learning theory. Albert (1986) formulated both theories. According to this theory individuals, their environment and behaviour work concurrently, thus influencing all aspects of their reality. McMurrann (1997) adds that behaviour does not only result from environmental stimuli but people have the capability of thinking and developing opinions from any circumstance, measuring the consequences of their specific behaviour through reflections and further deciding on the best course of action. Social cognitive learning theory is utilized in the areas of substance use claiming that people presume positive expectancies and attitudes towards substances through the process of observing or imitating positive statements or attitudes of their peers, (Theodoros & Olga 2014).

Two aspects, denoting the cognitive processes that influence a person's behaviour, make up this theory: self-efficacy and outcome expectancies. According to (Marks et al., 2000), self-efficacy relates to a person's belief that they can maintain control over the facts that influence their life but it comprises a general cognitive mechanism which intervenes in the person's behavioral response to the received stimuli. An individual's belief that being involved in a certain behaviour will result to an expected result or not entails their outcome expectancies. A person's immediate results from a certain behaviour determine their outcome expectancies. The expectancies can also be as a result of observing other people's experiences from their behaviours.

2.2.3 Biological Theory

In explaining the Biological Theory of Drug Abuse, Dorcas (2012) states that the behaviour of drug abuse is linked to the individuals' biological factors that make them prone to drug addiction. Dan, Mollie and Helen (1980) suggests that perception of an individual as whether she or he is in a helpless situation, with reference to behavioral or internal events, may give themselves to using drugs with an intend to attain some level of theoretical control over these experiences, more specifically when other non-drug options are unavailable or have been ineffective.

Arguing about the early drug experiences, Gorsuch and Butler (1976) assert that initial use of drug may be triggered by a need alleviate physical pain; need to deal with anguish mentally and need to kill boredom by means of sensation seeking.

2.3 The Genetics of Alcoholism

There is an increasing amount of evidence scientifically that link genetics to alcoholism. Possibilities have been explored through studies on familial transmissions of the disease and that environmental factors do not single handedly affect alcoholism. Behavioral patterns that influence families with a habit of alcohol abuse form the basis for the research. However more studies on the relationship between genetics and alcoholism are still ongoing (National Institute on Alcohol abuse and Alcoholism, 2009). A study involving two pairs of twins raised by separate parents with different alcoholic adoptive patterns, revealed that proneness to alcoholism was generally higher among the pair of twins with a biological father who was alcoholic as compared to the twins born of a father who was non-alcoholic. Alcoholism was also revealed to likely occur among twins who are identical and have the same components genetically, in comparison to twins who are fraternal and share their genes up to only 50%. These children are linked to environmental aspects and stand a higher risk of developing problems both emotionally and behaviorally. Likewise, the likelihood of alcohol abuse among relatives in the first generation lies between three to four times in comparison to the general population.

2.4 Concept of Alcohol Abuse

Alcohol abuse is termed to be a psychiatric problem that involves the continuous use of alcoholic beverages with disregard to its attached negative consequences. It is also termed as alcoholism. Alcoholics can be categorized as either being anti-social alcoholics or anxiety-ridden alcoholics. The latter stay without drinking for long but are usually not able to set controls for themselves when they begin drinking. The adolescent generation of the United Kingdom's were ranked as the heaviest drinkers according to an international survey. According to the American Medical Association (2009), alcohol abuse is a disease that supports classification of both physical and mental aspects. It is believed that the Social environment which includes stress, age, family, gender and

mental health determine the risk level for the condition. Alcoholism produces changes in the structure of the brain and chemistry. These changes sustains the alcoholic person' compulsive inability to change their habit and also result to alcohol withdrawal effects once the person stops.

People affected with alcoholism may not be in position to identify this habit. According to Gelder, Mayou and Geddes (2005) ease in accessing alcohol is one of the main contributing factors among people engaged in its abuse. According to the National Council on Alcohol and Drug dependence, alcoholism is a chronic disease influenced and enhanced by factors that are genetic, psychological or environmental. Lack of control, over indulgence with alcohol, continuous use of alcohol without considering its effects and distorted thought patterns characterize this disease. Millions of people in the world get involved in risky drinking habits that could mature up to alcoholism. Several studies and reports in relation to alcohol abuse and workplace costs report costs that from 33 billion dollars to 68 billion dollars annually.

2.5 Factors Contributing to Employee Alcohol Abuse

Abuse of alcohol has a number of negative impacts on workplace which include compromised safety in the workplace with accidents resulting to either injury or death especially in environments with heavy machinery. Strained relationship between co-workers, clients and customers are also recorded. Alcohol also impacts on behavior of an employee affected by alcohol by unruly behavior, lack of etiquette and displaying unprofessional conduct towards customers. The alcoholic' workmate may also be resentful for taking up duties and responsibilities for those affected by alcoholism or having, residual hangovers as a result of alcohol. Employee productivity will also be affected as a result of lateness and absenteeism. Low quality and quantity of work as a result of poor decision making, stalling of operations and co-workers having to cover for alcohol-affected employees are also as a result of alcohol abuse. Cost effects are also attributed to alcohol abuse including staff compensation and employer liabilities, skill loss and costs of replacement and training new employees due to the affected employees

being laid off or staff turnover. The cost of rehabilitative interventions is a burden to the organization in the long term.

According to NACADA Survey(2014) on Alcohol and Drug Abuse Situation among Employees in the Public Sector, the main causes of alcohol abuse in the workplace include; Workplace Culture: Gender mix of a workplace determine its tolerance of drinking. Several researches indicate that male-dominated occupations are associated with heavy drinking cultures where workers use drinking to enhance solidarity hence recording high rates of alcohol related problems. Workplace Alienation: Duties that are termed to be isolating, boring or stressful may result to employees drinking. Employee's habitual drinking can also be linked to job simplicity, autonomy, minimal supervision or having no influence or authority in the workplace harassment of employees both physically; sexually and verbally. Availability and ease in accessing the drink may affect the habit of alcohol use in the workplace . Having rules and regulations that restrict accessibility of the drink to the employees may control their alcohol use at workplace.

2.6 Effects of Alcohol abuse on Work Performance

Alcoholism has causes significant social and economic effects to the workplace. This is mainly due to reduced productivity. Lost productivity is counted as the main social cost of alcohol abuse (Saar, 2009). Lunchtime or drinking heavily after work are some of the productivity losses experienced by organization. However, a small percentage of this loss is attributed to workplace drinking. Additionally, the regular drinkers account for approximately 10% of the workforce problems according to Henderson, Hutcheson and Davies, 1996) as their drinking habits result to reduction in productivity. Moderate drinking may end up as an addictive habit which may result to productivity losses. This argument is as raised by Bacharach, Bamberger, and Biron (2010) and Frone, (2006).Employees who report to work drunk or nursing hangovers will not be productive at the workplace compromising the business output and overworking their colleagues who may have to perform their duties and cover up their tardiness. This may cause resentment, lower morale among colleagues and affect productivity at the workplace.

2.6.1 Absenteeism and Presenteeism

After a heavy drinking episode, hangovers may result to employees calling in sick or reporting late. Bacharach et al., (2010) asserts that high alcohol consumption levels also relate to increased number of sick days taken by employees. Studies conducted in Sweden and Norway by Nordstrom (2006) and Nordstrom and Moan (2009) revealed that a single liter increase in cumulative consumed alcohol results to 13% increase in absence due to sickness in men but with no statistical significance with women. The organization as a whole feels the whole impact including the employees with increased work load due to absent colleagues as a result of alcoholism (Dale & Livingston, 2010).

Drinking before reporting to work may result to lower employee productivity. This sometimes referred to as “presenteeism.” It is close to impossible to quantify the effect of hampered staff productivity in relation to drinking although it is strongly argued that reduced staff productivity has a greater impact compared to the economic effect as a result of employees not reporting to work (Goetzel et al., 2004).

2.6.2 Accidents and injuries

Premature deaths and poor health among the majority of the population in the working age is attributed mostly to alcohol misuse. The deaths and poor health as a result of alcohol abuse significantly impact the employer’s costs that results from lost productivity and additional resources used in recruiting and training replacements. According to World Health Organization (2011), the illnesses related to alcohol further impact the organizational cost on healthcare, compensations, legal fees and insurance. Working under the influence of alcohol places the user and other employees at risk of injury in the work environment especially among employees who work with huge machines. (Frone, 2006, 2009). Henderson et al., (1996) estimated that up to 20%–25% of accidents in the workplace are alcohol related. Adverse accidents that are alcohol related can also affect the organization’s reputation and finances in compensation costs.

2.6.3 Effects of harmful drinking on colleagues

Aside from the drinkers, alcohol abuse may be harmful leading to significant lost productivity among employees who are not drinkers. The no-drinkers have to work extra hours in order to cover for the coworkers whose performance at work has been hampered by heavy drinking. This may also increase their risk of injury. Alcohol abusing employees may have strained relationships with co-workers. They are usually argumentative and/or short-tempered. The work place environment may affect employees who are non-drinkers in three other ways; by ease of assessing alcohol in the workplace during working hours or breaks. The extent to which members of an individual's workplace social network use alcohol or work while impaired by alcohol .The extent to which members of an individual's workplace social network approve of using or working under the influence of alcohol at work.

Another study indicated that employees who are addicted to alcohol have a higher chance of viewing lower levels of some workplace alcohol social controls against drinking. Employees who were problem-drinkers were also found to be more likely than abstainers and non-problem-drinkers to report higher levels of certain forms of social availability of alcohol at the workplace (Berger, 2009). Ease of access of drinks in Canada's working environment resulted to issues in relation to abuse of the alcohol (Hodgins, Williams) more specifically a day after when the employees are out of work. The employee may choose to segregate themselves and this may be revealed through having debts with his colleagues at work or other external parties.

2.6.4 Working environments

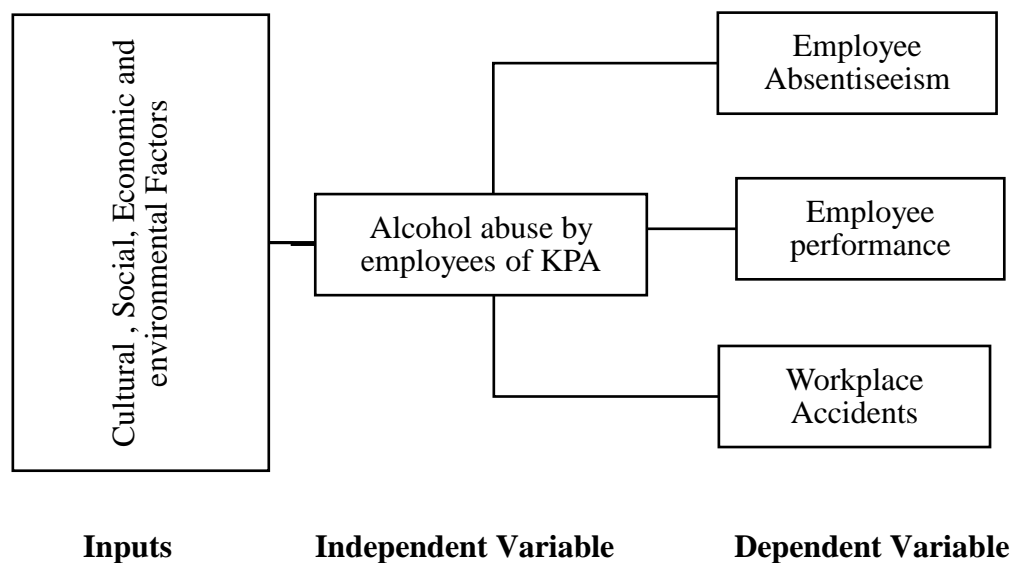
High or over indulgence in alcohol use may end up in a burnout, where the employee experiences extreme fatigue due to work related stress (Ahola et al., 2006). Unsafe working environment (Frone, 2008), over worked employees (Butler, Dodge, & Faurote, 2010), and poor working environment (Seror, & Beck, 2009) also encourage alcohol abuse and hence its related problems. Several studies have indicated that several working environments record a high rate of deaths linked to abuse of alcohol.

These include bars, hospitality industry, catering and entertainment business environments (Coggon et al., 2009; 2010; Hemmingsson et al., 1997). Interestingly, while male medical practitioners were among the occupations with the highest alcohol-related mortality in the 1960s to 1980s in the United Kingdom they were among the occupations with the lowest alcohol-related mortality in 2001–2005 (Romeri, Baker & Griffiths, 2007). Although a portion of business losses can be linked to reduced employee output as a result of drinking while on duty, a greater economic impact is as a result of taking alcohol away from the working environment including drinking during breaks. Additionally, employees who are addicted to alcohol, forming approximately 10% of the workforce (Henderson, Hutcheson, & Davies, 1996), who impact employee output negatively since employees who are mild drinkers may at some point over indulge in drinking therefore resulting to reduced productivity too (Frone, 2006).

2.7 Conceptual Framework

The research conceptualized that workplace performance and employee absenteeism; both being dependent variables are influenced by alcohol abuse which is the study's independent variable.

Figure 1.1: Conceptual Framework



2.8 Summary

The literature reviewed in the study reveal that employee's abuse alcohol at the workplace and that the abuse is on the increase amongst employees in many organizations. However, few studies on the abuse of alcohol at workplaces among employees, targeting government organizations and departments, have been conducted in the country. Human resources supervisors find the trend of alcohol abuse as a challenge that cannot be ignored anymore. Several theories have been developed to explain the challenge of alcohol and substance abuse including the Reinforcement Theory, Social Cognitive Theory and Biological Theory. In the abuse of alcohol, there is a growing amount of scientific evidence that suggests genetics play a major role. The study also found out that the main causes of alcohol abuse at workplace include; Workplace Culture, Workplace Alienation and Alcohol Availability. Alcohol abuse can also be associated with culture as social and cultural factors such as an ethnic group's norms and attitudes can influence alcohol abuse. Harmful drinking of alcohol can have a number of adverse impacts on workplace which include compromised safety; hampered relationships among workers, between workers and clients; reduced productivity; employee absenteeism and increased organizational expenses. However, this study was limited to alcohol abuse and its effect on work performance and employee absenteeism at the Kenya Ports Authority. Fundamentally, this does not down play the other factors influenced by alcohol at the workplace.

From the reviewed literature, the research therefore concludes that alcohol abuse at the workplace should be treated as a matter of interest among all stakeholders in organizations . The literature reviewed reveals that there exists a relationship between alcohol abuse and the two main aspects under this study; employee absenteeism and employee productivity, where abuse of the drink negatively affects these aspects.

CHAPTER THREE: RESEARCH METHODOLOGY

3.1 Introduction

This chapter gives a comprehensive blueprint of the procedures to be followed right from sampling to data analysis; it summarizes how the research was executed. This chapter is subdivided into the following subsections; Research Design, Location of Study, Target Population, Sampling Techniques, Research Instruments, Data Collection Techniques, Data Analysis and Ethical Consideration.

3.2 Research Design

The study used a descriptive research design which describe or define a subject, often by creating a profile of a group of problems, people, or events, through the collection of data and tabulation of the frequencies on research variables or their interaction (Cooper and Schindler, 2006). Creswell (1994) also argues that a descriptive method of research gathers information about the present existing condition. The study used both quantitative and qualitative approaches in collecting both primary and secondary data. The researcher used both questionnaires and interview schedules to help in the collection of primary data.

3.3 Location of Study

The study was conducted at the Kenya Ports Authority, Inland Container Depot office located in Nairobi. The research site was mostly advised by the fact the number of employees in the location is the right size to use as a sample for the study and the findings can be generalized to the whole population of Kenya Ports Authority. This also sought to achieve accuracy in the responses obtained hence improve reliability of data collected and analyzed.

3.4 Target Population

Population studies give every element an equal chance of being used in the sample thus they are more representative. The general population for this study composed of 6984 employees who are geographically spread within the branches of Kenya Ports Authority.

This is the total population of employees who are currently part of the organization based in the offices in Mombasa, Kisumu, Nairobi, Eldoret, Bujumbura and Kampala. However, a total of 217 employees based at the Nairobi office were targeted during the study.

3.5 Sample and Sampling Techniques

Mugenda & Mugenda (1999) argued that it is not necessary to study the entire population in order to be accurate and reliable in describing a population characteristic. Out of the total target population of 217 staff based in Nairobi, 60 staff were sampled, representing approximately 28% of the employees. Mugenda and Mugenda (2003) state that a sample of 10% - 30% of the entire population under study is a good representation of the population. The population was then divided into three strata: Top management, Middle management and union-sable employees. Samples from the strata were obtained using simple stratified random sampling. This allows for the making of proportionate samples, and hence comparisons between sub-groups with homogeneous characteristics. The study deployed purposive sampling method in selecting the sample elements.

Table 3.1: Sample Distribution

Level of Management	Population	Proportion	Sample
Top	26	10%	6
Middle	44	23%	14
Low	147	67%	40
TOTAL	217		60

3.6 Research Instruments

The study used both quantitative and qualitative methods to collect secondary and primary data. Silverman (2001) argues that quantifying the data obtained results to an increased confidence in the precision of conclusions obtained from qualitative data while giving the reader an opportunity to scrutinize the researcher's findings.

The researcher used both questionnaires and interview schedules to help in the collection of primary data. The interview schedules were organized in such a way that managers were grouped in three to five and using the interview questions their responses were recorded appropriately.

3.7 Data Collection Procedures

The study sought permission from KPA General Manager Human Resource Department and the Chief Medical Officer through the facilitation of the University of Nairobi's administration to collect the data. The study used semi-structured questionnaires; containing both open-ended and closed-ended questions, and sent them to the employees through email to obtain the primary data. The respondents who needed clarification were encouraged to make calls and seek guidance. The questionnaires were issued to the respondents who were to fill and later collected after four days; this was to increase the response rate. Semi-structured interviews were also carried out among the top management staff in order to obtain additional primary information. To supplement the data, secondary data was also obtained from records and published documents in relation to the population of interest. Human Resource records on alcohol related disciplinary issues were sampled. Attendance registers for employees under rehabilitative programs were sampled,

3.8 Data Analysis

The study obtained both quantitative and qualitative data for analysis. Quantitative data was mainly collected from the close-ended questions in the questionnaire and analyzed using SPSS (Statistical Package for Social Sciences) program. Various descriptive statistics measures were determined including proportions and measures of central tendency such as mean, standard deviation (SD), median and ranges. Further, inferential statistics was applied to analyse the data including Pearson's Chi-square that was used to test the strength of association between categorical variables

3.9 Ethical Consideration

Ethical consideration were put in place during the research particularly for the data collection process since the study sought to obtain very sensitive and secretive information from the respondents. The researcher therefore foresaw a tendency of information being concealed or false information being revealed by the targeted respondents. The study sorted this by assuring the respondents of privacy on all information given. The respondents were also not required to give their names as part of the feedback information hence anonymity was maintained. The researcher sought consent from the management of KPA management to undertake the study in the organization. The respondents were assured that any information they give would not be used against them nor would it be used as a basis for punitive action, to stigmatise or discriminate against them. Medical records used and sampled were strictly kept confidential as sampling them was just to see how effective early referral to intervention programmes assisted staff affected by alcohol to seek help and how this affected the rate of relapse or full recovery.

CHAPTER FOUR: DATA ANALYSIS, RESULTS AND DISCUSSION

4.1 Introduction

The overall research objective was to establish the effect of alcohol abuse on employee performance and absenteeism at the Kenya Ports Authority. This chapter presents the analysis, findings and discussion of the same. The findings are presented in percentages and frequency distributions tables, mean and standard deviations. A total of 60 questionnaires were issued out to the respondents and 58 were returned. This represented a response rate of approximately 97%.

4.2 Personal Profile

The personal demographic information considered in this study included gender of the respondents, age, level of education, marital status, family size, marital status and length of period in marriage.

4.2.1 Gender

Figure 4.1: Respondents Gender

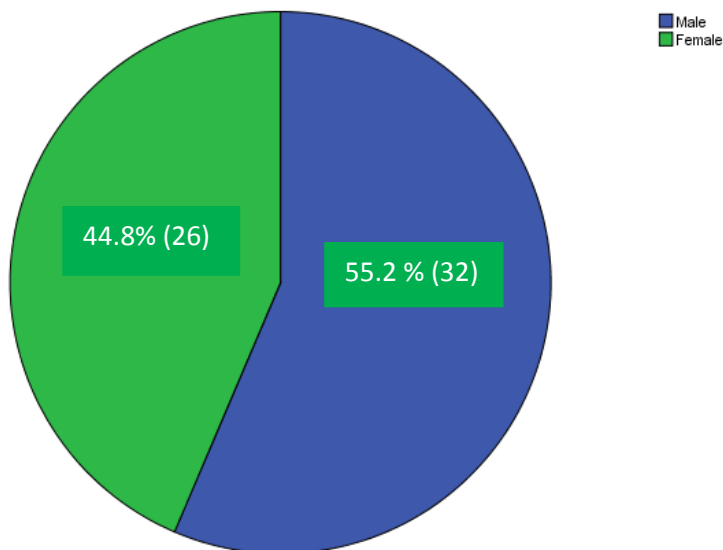


Figure 4.1 indicates that 32 respondents representing 55.2% were male while female respondents were 26 representing 44.8% were male.

4.2.2 Age of the Respondents

Table 4.1: Summary of Socio-demographic characteristics of employees

Variable	Frequency	Percentage %
Age		
18 – 35 years	27	46.5
36 – 50 years	23	39.7
50+ years	8	13.8
Level of Education		
Primary	-	-
Secondary	4	6.9
Tertiary	54	93.1
Marital status		
Single	14	24.1
Married	33	56.9
Divorced/Separated	7	12.1
Widowed	4	6.9
If married, how long?		
< 1yr	3	9.1
1 – 5yrs	11	33.3
5 – 10yrs	11	33.3
> 10yrs	8	24.3
Family size		
1 persons	11	19.0
2 – 4 persons	36	62.0
> 5 persons	11	19.0
Religion		
Christian	43	74.1
Islam	13	22.4
Hindu	2	3.5
African Traditionalist	-	-
Others	-	-

Table 4.1 shows that 27 out of the 58 respondents are in the age bracket of 18-35, representing 46.5%; 23 respondents representing 39.7% are in the age of 36-50, while only 8 of the respondents representing 13.8% are above 50 years of age.

4.2.3 Level of Education

Table 4.1 above shows that out of the 58 respondents, none had Kenya Certificate of Primary Education (K.C.P.E) as their highest attained while only 4(6.9%) had only attained Kenya Certificate for Secondary Education (K.C.S.E). 54(93.1%) have a tertiary certificate which indicates that the respondents had a college certificate, diploma or degree.

4.2.4 Marital Status

Table 4.1 show that majority of the employees were married 56.9% (33); 24.1% (14) were single; 12.1% (7) indicated that they had either divorced or separated while only 6.9% (4) were widowed. Among those who were married, the more than half (57.3%, 19) had married for a period more than 5 years.

4.2.5 Family Size

Table 4.1 also indicates that only 19% (11) of the respondents had a family size of one while a similar percentage revealed that they had a family size of more than 5 people. On the other hand, 62% (36) had a family size of between 2 and 4 persons. This was also expected since most of the respondents had not married for more than 10 years and family planning knowledge is also on the increase.

4.2.6 Religion

Table 4.1 shows that nearly 75 % of the employees were Christians, 22.4% (13) were Muslims while only 3.5% were Hindus. However, none of the respondents indicated that they either believed in African traditions or any other religion outside the earlier mentioned. This was not surprising given that Christianity is the most predominant religion in the country.

4.3 Organizational Profile

The study considered employment rank for the employees, their income and length of service at KPA.

4.3.1 Employment Rank

The study sought to determine how alcohol abuse was spread out within the ranks in KPA.

Table 4.2: Employment Rank

Rank	Frequency	Percent
Top Management	8	13.8
Middle Management	16	27.6
Union sable	34	58.6
Total	58	100.0

Table 4.2, 8(13.8%) of the respondents were from the top management at KPA, 16(27.6%) of the respondents served in the middle management level whereas more than half (58.6%, 34) of the respondents serve in the low level management. This depicts that more than one third of the respondents (41.1%, 24) are in the decision making bracket hence very conversant with the organizations' strategies in relation to alcohol abuse and employee absenteeism and the resultant effect on their performance.

4.3.2 Length of Service

The study looked at length of service among respondents to determine whether duration worked within the organization had an impact on the knowledge of the rules and regulations guidelines and expected behaviour at the workplace.

Table 4.3: Length of Service

Length of Services	Frequency	Percent
Less than 1 year	6	10.3
1 – 5 years	14	24.1
6 – 10 years	21	36.3
Above 10 years	17	29.3
Total	58	100.0

Table 4.3 depicts that 6(10.3%) of the respondents had worked at KPA for less than a year; 14(24.1%) of the respondents indicated that they had worked in the organization for a period of between 1 and 5 years while, 21(36.3%) of the respondents indicated that they had worked for the organization for a period between 6 to 10 years and 17(29.3%) of the respondents had worked for the organization for more than 10 years. The results depict that more than two-thirds of the respondents (38, 65.6%) have worked at KPA for more than 5 years, an indication that they understand the organizations' strategies in relation to alcohol abuse and employee absenteeism thus increasing their reliability in providing feedback for the study.

4.3.3 Income

The study sought to determine whether economic status is commensurate with behaviour related to alcohol abuse.

Table 4.4: Income

Variable	Frequency	Percentage %
Monthly Income		
< 20,000	2	3.4
20,001 – 50,000	23	39.7
50,001 – 100,000	26	44.8
>100,000	7	12.1

The results in Table 4.4 depicts that more than half of the respondents (56.9%, 33) have a monthly income of more than 50,000 and only 3.4% (2) have an income less than 20,000 monthly. The findings also show that slightly above three-quarters (75.9%, 44) of the workforce at KPA have other sources of income other than their salaries. This reveals that most of the employees may have extra money at their disposal for other use and may have divided attention at work due to the other income generating ventures they are engaged in.

4.4 Alcohol Abuse

The respondents were asked about their consumption of alcohol, the duration they have consumed alcohol, how often and where they consume alcohol to determine the frequency of their alcohol consumption and how it affects their performance.

Table 4.5: Alcohol Abuse

Variable	Frequency	Percentage %
Do you take Alcohol?		
Yes	38	65.5
No	20	34.5
If yes, for how long?		
< 1yr	2	5.3
1 – 5yrs	12	31.6
6 – 10yrs	16	42.1
>10yrs	8	21.0
I can't remember		
If yes, have you tried quitting?		
Yes	10	26.3
No	28	73.7
Weekly Alcohol consumption		
1-5 bottles	8	21.1
6-10 bottles	19	50.0
11-20 bottles	7	18.4
Above 20 bottles	4	10.5

Preferred drinking time		
Weekdays	6	15.8
Weekends	28	73.7
Both	4	10.5
Any member of your family taking alcohol?		
Yes	44	75.9
No	14	24.1
If yes, who?		
Child		
Mate	14	31.8
Parent	34	77.3
	41	93.2
Frequency of alcohol abuse at KPA		
Not at all		
Not frequent	36	62.1
Frequently	15	25.9
Very frequent	4	6.9
	3	5.1
Any other drug abused at KPA?		
Yes		
No	53	91.4
	5	8.6
If Yes, which ones?		
Miraa/khat	7	13.2
Cigarette	44	83.0
Marijuana	1	1.9
Cocaine	1	1.9

Table 4.5 revealed that 65.5% (38) of the respondents take alcohol while only 34.5% (20) submitted otherwise. Among those who take alcohol, nearly two-thirds (63.1%, 24) have been taking alcohol for a period not less than 6 years whereas only 5.3% have taken alcohol for less than one year. Similarly, of those who take alcohol, only 26.3% (10) have tried quitting. This depicts that most of the KPA employees who take alcohol are addicted to it. The study also revealed that 21.1% (8) take at least a bottle weekly; 50.0% (19) take between 6 to 10 bottles weekly; 18.4% (7) take not less than 11 bottles but not more than 20 bottles weekly whereas 10.5% (4) take more than 20 bottles weekly. The study established that more than two-thirds of the respondents (73.7%, 28) take alcohol over the weekends. This may be attributed to the fact that weekends avail more time for the alcohol takes to enjoy the beverages as compared to the weekdays.

The respondents were also asked if there were members in their families who take alcohol. The findings in table 4.6 revealed that more than three-quarters (75.9%, 44) of the respondents have at least a family member taking alcohol. Most of the respondents cited that their parents (93.2%, 41) and/or their mates (77.3%, 34) are the ones mostly engaged in alcohol taking. This finding depicts a probable family influence towards the use of alcohol.

The study sought to determine how frequent alcohol was being abused at KPA. The summarized findings in table 4.6 depicted that 62.1% (32) believe that alcohol is not at all abused at KPA; 25.9% (15) believe that the drug is not frequently abused at KPA; 6.9% (4) reported that the drug is frequently abused while 5.1% (3) said that the drug is very frequently abused. 91.4% (53) of the respondents indicated that other drugs apart from alcohol are abused at KPA. The responses revealed that cigarette was the most abused drug alongside alcohol at 83% (44) followed by khat at 13.2% (7). Legality, availability and accessibility of the drugs explained the prevalence in the use of the two drugs at KPA.

4.4.1 Signs of Alcohol Abuse

The respondents were asked whether they identify the signs and symptoms of alcohol abuse to determine whether colleagues and managers or supervisors can identify when an employee needs intervention or if drunk not to be allocated heavy machinery as they can be a risk to themselves and those around them.

Table 4.6: Signs of alcohol abuse at KPA

Feature	Yes	No
Possession of alcohol at the workplace	12.3%	87.7%
Possession of alcohol related materials	29.0%	71.0%
Physical deterioration	72.4%	27.6%
Change in behaviour	85.0%	15.0%

Table 4.6 reveal that signs and symptoms of alcohol abuse at KPA are mostly signified by physical deterioration (72.4%) and change of behaviour (85.0%). The findings also indicated that only 12.3% of the respondents reported that signs and symptoms of alcohol abuse at KPA are revealed through possession of alcohol at workplace while 29.0% of the respondents submitted that possession of alcohol related materials has depicted the vice of alcohol abuse among employees at KPA. These findings are attributed to human resources policies and guidelines that restrict drug abuse at workplace.

From the interviews, it was also clear that alcohol abuse at KPA has both social and financial impacts on the organization as expressed by the finance manager;

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

4.4.2 Work Related Stress

Respondents were asked how stressful their roles are and the findings are as follows.

Table 4.7: Work Related Stress

	Frequency	Percent
Not stressful	13	22.4
Mild	25	43.1
Stressful	13	22.4
Very Stressful	7	12.1
Total	58	100.0

Table 4.7 indicated that 22.4% (13) reported that their daily roles at KPA not stressful and a similar percentage of respondents also indicated that their daily chores at the organization are stressful. 43.1% (25) indicated that their roles have mild stress levels whereas only 12.1% (7) reported that their daily responsibilities at KPA are very stressful. This depicts that more than one third of the employees (20, 34.5%) might not be in position to withstand the pressure at work since their duties are either stressful or very stressful. There is a needs to be studied further to determine whether stress levels at the workplace has an impact on alcohol abuse.

4.4.3 Alcohol Abuse Prevention Programmes

Respondents were asked about alcohol abuse prevention programmes to determine the awareness levels of employees about intervention and preventive programmes in the organization.

Table 4.8: Effectiveness of Alcohol Abuse Prevention Programmes

Variable	Frequency	Percentage %
Does KPA have staff improvement programmes?		
Yes	47	81.0
No	11	19.0
If yes, how effective are the programmes?		
Very Effective	16	34.1
Effective	23	48.9
Not Effective	5	10.6
Very Ineffective	3	6.4

Table 4.8 revealed that, 47 (81.0%) of the respondents pointed out that the organization has put in place the staff improvement programmes while only 11 (19.0%) suggested that no staff improvement programmes were in place to facilitate the prevention and improvement of employees affected with alcohol. In the interview with the human resources and operations managers, they both suggested that the programmes had facilitated the rehabilitation of some of the staff who had been addicts to alcohol. They added that some of these programmes had increased awareness of the effects of alcohol abuse thus assisted in preventing the vice among the employees.

The study also established that among those who acknowledged the presence of these staff wellness programmes at KPA, 34.1 (16) confirmed that the programmes are very effective; 48.9 (23) indicated that the programmes are effective. This implies that more than 80% of the respondents affirmed that the programmes have a positive resultant effect

on the employees. The findings also suggest that only 17% (8) of the respondents confirmed that the programmes are either not effective or very ineffective.

4.4.4 Methods of Improving Employees Addicted to Alcohol

Table 4.9: Methods of Improving Employees Addicted to Alcohol

Methods	Yes	No
Strict rules and regulations on drug abuse at workplace	94.8%	5.2%
Staff wellness programmes on drug abuse	58.6%	41.4%
Counselling sessions for affected staff	65.5%	34.5%
Availability of informative materials on drugs	31.0%	69.0%
Strict HR rules on work-time-management	84.5	15.5
Financial support for staff undergoing rehabilitation	1.7	98.3

Table 4.9 indicates the methods used by KPA to improve employees addicted to alcohol in the organization. Essentially, the respondents reported that several methods were being deployed by the organization to assist employees who are addicted to alcohol. 94.8% of the respondents indicated that the organization uses strict rules and regulations on drug abuse at workplace to restrict abuse of alcohol at KPA; more than half of the respondents (58.6%) reported that staff wellness programmes on drug abuse are utilized by the organization to curb alcohol abuse; counselling sessions for affected staff are also conducted by the organization. This was evidenced by nearly two-thirds (65.5%) of the respondents. Less than a third (31%) of the respondents indicated that no informative materials on drugs are made available to the staff; 84.5% of the respondents revealed that the human resources rules on work-time-management are strict within KPA. Only 1.7% of the respondents reported that the organization offers financial support to the staff undergoing rehabilitation. This suggests that the organization is quite supportive to its staff in improving them from alcohol addictions.

The operations manager affirmed that the organization sets aside an amount yearly in its budget that is directed towards the general wellness of the organization’ staff. On the other hand, the human resources manager indicated that the organization also frequently communicates its strict policies on work-time-management and rules and regulations on alcohol use at the workplace.

“...the rules and regulations pertaining drug and work-place are well and continuously communicated to the employees...”

4.5 Staff Productivity and Alcohol Abuse

Table 4.10 summarizes the responses on the relationship between staff productivity and alcohol abuse. The responses were given in the following scale; [1=Strongly Agree, 2=Agree, 3=Not sure, 4=Disagree, 5=Strongly Disagree].

Table 4.10: Staff productivity and alcohol abuse

Aspects	N	Min	Max	Mean	Std. Dev
KPA has well established procedures to measure employee productivity	58	1	5	4.08	.903
Procedures at KPA that facilitate the measure of employee productivity assist to curb effects of alcohol abuse	58	3	5	3.92	.723
Alcohol abuse has a huge negative impact on employee ability to execute their duties within scheduled time.	58	3	5	3.18	.885
KPA losses man-hours annually due to alcohol abuse from slow output delivery	58	3	5	3.44	.765
Employees addicted to alcohol deliver inconsistent quality and quantity output at KPA.	58	1	5	3.85	.696
Alcohol abuse has a direct negative impact on KPA clients	58	1	5	3.78	.801
KPA’s net revenues are greatly impacted by low productivity among alcohol abusing staff	58	3	5	3.66	.776

KPA incurs additional costs to cover for the un-attained productivity level as a result of alcohol abuse	58	1	5	3.32	.694
Absenteeism due to alcohol abuse greatly affects attaining of set productivity levels at KPA	58	3	5	4.11	.701
Alcohol abuse affects interactions among employees at KPA resulting to a poor coordination	58	3	5	3.54	.773
Employees who abuse alcohol record more careless and wreck less decisions at work	58	2	5	3.57	.731
Valid N (listwise)	58				

From table 4.10, there was a strong evidence that KPA has well established procedures to measure employee productivity. This is evidenced by a mean of 4.08 and standard deviation of 0.903. The mean of 3.92 with standard deviation of 0.723 reveals that the measure of employee productivity at KPA assists to curb effects of alcohol abuse while a mean of 3.18 with standard deviation of 0.885 and mean of 3.44 and standard deviation of .765 reveal that respondents were generally unsure if the alcohol abuse has a huge negative impact on employee ability to execute their duties within scheduled time and whether KPA losses man-hours annually due to alcohol abuse from slow output delivery. On the other hand, the mean of 3.78 with standard deviation of 0.801 reveals alcohol abuse has a direct negative impact on KPA clients.

The mean of 3.66 with standard deviation of 0.776 depict that KPA's net revenues are greatly impacted by low productivity among alcohol abusing staff while the mean of 3.32 and standard deviation of .694 reveal the respondents were unsure KPA incurs additional costs to cover for the un-attained productivity level as a result of alcohol abuse. Additionally, the mean of 4.11 with standard deviation of 0.701 strongly reveal that absenteeism due to alcohol abuse greatly affects attaining of set productivity levels while the mean of 3.54 with standard deviation of 0.773 indicate that alcohol abuse affects interactions among employees resulting to a poor coordination. Also, the mean of 3.57 with standard deviation of 0.731 show that employees who abuse alcohol record more careless and wreck less decisions at work. It was evident from the findings that staff productivity is greatly influenced by alcohol abuse.

4.5.1 Workplace Accidents

Table 4.11: Workplace accidents

Aspects	N	Min	Max	Mean	Std. Dev
Most of the recorded accidents at KPA are linked to employees with drug abuse traditions	58	2	5	2.99	.683
Workplace accidents as a result of drug abuse are more fatal than other workplace accidents recorded at KPA	58	2	5	3.51	.622
Alcohol abuse is the main cause of workplace accidents at KPA.	58	2	5	3.03	.775
Alcohol abusing employees register more accidents at work compared to their non-users counterparts	57	2	5	3.76	.774
Alcohol abuse related accidents at work impact the net revenue at KPA due to increased accident benefits pay-outs to employees	58	3	5	3.98	.893
Alcohol abuse results to employees having less regard to workplace safety precautions guidelines	58	2	5	3.71	.821
Alcohol abuse at KPA results to higher costs incurred on environmental safety programmes	58	2	5	3.81	.774
Employees who abuse alcohol execute their duties at work less carefully	58	2	5	3.99	.699
Workplace accidents at KPA as a result of alcohol abuse result to high recorded employee absenteeism	56	3	5	4.01	.711
Workplace accidents due to alcohol abuse affect future productivity of the affected employee	58	2	5	3.66	.673
Valid N (list wise)	58				

Table 4.11 summarizes the relationship between workplace accidents and alcohol abuse. The mean of 2.99 with standard deviation of 0.683 and the mean of 3.03 with a standard deviation of 0.775 reveal that the respondents were not sure whether most accidents at KPA are linked to employees with a drug abusing tradition and if alcohol abuse is the main cause of accident at KPA respectively. The mean of 3.51 with standard deviation of 0.622 indicate that workplace accidents as a result of drug abuse are more fatal than other accidents within KPA whereas the mean of 3.76 with standard deviation of 0.774 reveal that more accidents at KPA are registered by alcohol abusing employees compared to their counterparts.

Accidents related to alcohol abuse impact the net revenue of KPA due to increased accident benefits pay-outs and higher costs are incurred at on environmental safety programmes by KPA. These are depicted by the mean of 3.98 with standard deviation of 0.893 and the mean of 3.81 with a standard deviation of 0.774. Additionally, the mean of 3.71 with a standard deviation of 0.821 indicate that alcohol abuse results to employees having less regard to workplace safety precautions guidelines as the employees execute their responsibilities less carefully as revealed by the mean of 3.99 and a standard deviation of 0.699. The respondents also strongly indicated that accidents at KPA as a result of alcohol abuse result to high recorded employee absenteeism as revealed by the mean of 4.01 with a standard deviation of 0.711. The mean of 3.66 with a standard deviation of 0.673 additionally depicts that workplace accidents due to alcohol abuse affect future productivity of the affected employees. Besides, the human resources manager affirmed that sometimes the accidents are fatal citing that one death incident has ever been recorded at their Mombasa branch.

4.6 Alcohol Abuse and Employee Absenteeism

Table 4.12: Employee Absenteeism

Aspects	N	Min	Max	Mean	Std. Dev
Frequent absences from the work stations as a result of alcohol use	58	2	5	3.56	.783
Late reporting at work as a result of alcohol abuse	58	2	5	3.82	.623
Early sign-out from work before the scheduled time	58	2	5	3.38	.785
Recorded sick off as a result of alcohol related sickness.	58	2	5	3.66	.775
Unreported and unexplained absence	58	2	5	3.25	.896
Resistance to formal request to report early or sign-out late at work	58	2	5	3.98	.801
Disappearance from work without clear explanation of whereabouts	58	2	5	3.51	.777
Recorded emergency leaves from work as a result of alcohol abuse	58	2	5	3.88	.699
Fast utilization of earned leave days as a results of alcohol abuse	58	2	5	4.13	.721
Low morale among employees covering for the frequent absentee staff due to alcohol abuse	58	2	5	3.54	.773
Higher percentage of alcohol abuse absenteeism among lower level staffs compared to higher level staffs	58	2	5	3.81	.744
Valid N (listwise)	58				

Table 4.12 indicates the responses on the effect of alcohol abuse on employee absenteeism in a five point Likert scale. The range was ‘Not at all (5)’ to ‘very often’ (1). A standard deviation of >0.9 implies a significant difference on the impact of the variable

among respondents. The mean of 3.56 and standard deviation of 0.783 indicated that frequent absence from the work stations is a common trait among employees using alcohol. The mean of 3.82 and standard deviation of 0.623 reveal alcohol users often report late at work as a result of alcohol abuse. However, early sign-out from work before the scheduled time is moderately observed as indicated by the mean of 3.38 and standard deviation of 0.785. The mean of 3.98 with standard deviation of 0.801 indicates that employees who abuse alcohol frequently resist formal request to report ,overtime requests and early or late work schedules at work. The company records moderate disappearance from work without clear explanation of whereabouts among employees abusing alcohol as evidenced by mean of 3.51 and standard deviation of 0.777. This was attributed to the strict human resources policies in relation to work station at the organization.

The organization to a large extent recorded emergency leaves from work and fast utilization of earned leave days as a result of alcohol abuse as indicated by a mean of 3.88 and standard deviation of 0.699 and mean of 4.13 and standard deviation of 0.721. The mean of 3.54 with standard deviation of 0.773 indicated that employees covering for the frequent absentee staff due to alcohol abuse have a low morale. Lastly, the mean of 3.81 with standard deviation of 0.744 reveal that Kenya Ports Authority frequently records a higher percentage of alcohol abuse absenteeism among lower level staffs compared to higher level staffs. It is evident from these findings that employees at KPA who abuse alcohol register a higher absenteeism from work. This further suggests that abuse of alcohol affects availability at workplace. From the interviews, the finance manager indicated that the losses in man hours has not yet been determined but the human resources manager cited up to 1000 man-hours are lost annually due to alcohol abuse according to the clocking in system data analysis.

4.7 Other Alcohol Abuse Challenges

Several challenges apart from the ones addressed in the study were cited to be affecting KPA as a result of alcohol abuse among its employees. From the interviews, the human resources manager, finance manager and the operations manager cited difficulty in recalling own mistakes, difficulty in recalling directives, inability to beat deadlines,

terminations or dismissals that further increase the organization’s expenses in hiring replacement staff. The terminations also result to brain drain and high staff turnover rates.

4.8 Correlational Analysis

Table 4.13: Correlation Analysis

		Alcohol Abuse
Productivity	Pearson Correlation	.658
	Sig. (1-tailed)	.012
	N	58
Absenteeism	Pearson Correlation	.782
	Sig. (1-tailed)	.045
	N	58
Workplace Accidents	Pearson Correlation	.341
	Sig. (1-tailed)	.387
	N	58
Improvement Programmes	Pearson Correlation	.489
	Sig. (1-tailed)	.240
	N	58
Alcohol Abuse	Pearson Correlation	1
	Sig. (1-tailed)	
	N	58

Table 4.13 summarizes the results of correlation analysis that was conducted to establish the relationship between workplace accidents, employee productivity, employee absenteeism and improvement programmes and alcohol abuse. From table 4.13, the Pearson Correlation of .658, and .782 indicates a strong positive correlation which imply that alcohol abuse greatly impacts employee productivity and absenteeism. The significance values of 0.012 (< 0.05) and 0.045 (< 0.05) indicate that the relationships are

statistically significant. On the other hand, the Pearson Correlation of .341 and .489 indicate a weak positive correlation which imply that there exists a mild positive relationship between alcohol abuse with workplace accidents and employee improvement programmes. However, the significance values of 0.387 (> 0.05) and 0.240 (>0.05) indicate that the relationships are statistically insignificant.

4.9 Summary

This chapter looked at the background information of the respondents and sought to analyze the feedback received from the respondents. Views from 58 respondents formed the basis of the findings in the study. It was evident that alcohol abuse among KPA employees affect the employees' general performance and absenteeism. The study measured several aspects in relation to alcohol abuse; extent of abuse, staff productivity, absenteeism, workplace accidents and alcohol abuse prevention practices and employee improvement programs and found out that these aspects relate to alcohol abuse at KPA.

It was however not clear from the respondents whether alcohol abuse has a huge negative impact on employee ability to execute their duties within scheduled time and if KPA losses man-hours annually due to alcohol abuse from slow output delivery. This was evidenced by a mean of 3.18 with standard deviation of 0.885 and mean of 3.44 and standard deviation of .765 respectively. The correlational analysis however indicated a positive relationship between alcohol abuse and employees productivity and absenteeism; .658 and .782 respectively. Mean of 3.03 with a standard deviation of 0.775 also indicated that the respondents were not sure if alcohol abuse is the main cause of accident at KPA. The findings further indicated that frequent absence from the work stations is a common trait among employees using alcohol. On the other hand, the correlation analysis indicated a weak, though positive, relationship between workplace accident and employees improvement programmes to alcohol abuse.

CHAPTER FIVE: SUMMARY, CONCLUSION, RECOMMENDATIONS

5.1 Introduction

The study sought to assess the effects of alcohol abuse on employee performance and absenteeism in Kenya Ports Authority. This section summarizes the findings from the study in line with the research objectives, conclusions and recommendations from the conclusions of the study. The chapter also presents implication of the study on policy, theory and practice and suggestion for further study.

5.2 Summary of Findings

Findings indicate that the organization has employed more male than female employees. This is in line with the Kenya Economic Survey (KNBS, 2010) that reveals a gender disparity in the public employment. The disparity was however low and this was explained by the organizational gradual implementation of the Kenyan constitutional gender rule. Nearly half of the respondents were in the age between 18-35yr and according to Frone (2009), they are relatively prone to misuse drugs than the other cohorts in the general working population.

The findings also revealed that more than 90% of the employees had at least tertiary education. This was as a result of need for technical expertise in executing allocated duties. Approximately two-thirds of the employees have worked for the organization for more than 6 years. This depicts that the organization has a low staff turnover rates. The study revealed that at least 34.5% of the employees feel that their roles at KPA are stressful and approximately three-quarters of the employees have an additional income sources apart from their salaries. These findings depict that these portions of employees are prone to drug abuse. This argument is backed by the findings of Hodgin (2009) who cites job related and occupational stress as enhancers of increased drug and substances abuse at the organisation.

The study revealed that nearly two-thirds of the employees take alcohol at KPA and only 26.4% have tried quitting. Additionally, 10.5% of them take more than 20 bottles of alcohol weekly and would do that at any day of the week. This depicts that at least 6.9% of the employees at Kenya Ports Authority, Nairobi are addicted to alcohol. The WHO (2004) define standard drink as less than five drinks for male and four for female per drinking session. Apart from alcohol, the study established that cigarette and khat are the additional drugs misused by KPA employees. This was attributed to the legality and ease in availability of the two drugs even at workplace. This argument is in tandem with the studies undertaken by Frone (2009).

The findings also reveal that signs and symptoms of alcohol abuse at KPA are mostly signified by physical deterioration and change of behaviour. These results are reiterated by Mcfarlin and Fals-Stewart (2001) who assert that drug abuse is associated with increased aggressive behaviour at the workplace. However, aspects such as possession of alcohol at workplace and possession of alcohol related materials are not so frequent within the organization due to human resources policies and guidelines that restrict drug abuse at workplace.

In determining the relationship between alcohol abuse and staff productivity, the study strongly revealed that KPA has well established procedures to measure employee productivity which further assists to curb effects of alcohol abuse within the organization. It was however unclear whether alcohol abuse has a huge negative impact on employee ability to execute their duties within scheduled time, whether KPA losses man-hours annually and if additional costs are incurred by the organization to cover for the un-attained productivity level as a result of alcohol abuse that results to slow output delivery. This was attributed to the organization's unclear procedure in measuring time losses to the organization as a result of alcohol abuse. The study also revealed that alcohol abuse has a direct negative impact on KPA's clients and net revenues. Additionally, the findings strongly revealed that absenteeism due to alcohol abuse greatly affects attaining of set productivity levels while poor interactions among employees resulting to a bad coordination can also be attributed to alcohol abuse. It was also clear that alcohol abusing

employees' record more careless and wreck less decisions at work. The findings generally revealed that staff productivity is greatly influenced by alcohol abuse. Alcohol abuse also results to inability of the staff to recall own mistakes and difficulty in recalling directives.

Mohr *et. al*, (2005) in their study found that increased alcohol use is associated with increased absenteeism. In line with these arguments, the findings of the study depicted that alcohol abuse is closely linked to absenteeism. The study revealed that several aspects relating to absenteeism are mostly identified at KPA among the employees who abuse alcohol. The aspects include frequent absence from the work stations, late reporting at work, resistance to formal requests to report early or sign-out late at work, frequent leaves from work and fast utilization of earned leave days. However, early sign-out from work before the scheduled time and disappearance from work without clear explanation of whereabouts were moderately observed among employees abusing alcohol. This was attributed to the strict human resources policies in relation to work attendance and reliable clocking systems which records attendances and absences at the organization. The study also indicated that employees covering for the frequent absentee staff due to alcohol abuse have a low morale and that the organization frequently records a higher percentage of alcohol abuse and absenteeism among lower level staffs compared to higher level staffs. Absences related to alcohol abuse are mostly recorded at monthend when salaries have been paid, when bonuses have been paid, immediately after rehabilitation programmes and after annual leave. Other challenges to the organization arising from absentee staff include terminations or dismissals of staff that further increase the organization's expenses in hiring replacement staff, brain drain and higher staff turnover rates.

The findings of the study relate alcohol abuse to workplace related accidents. This argument is echoed by Frone (2006) who states that any impairment on the employee greatly hinders performance or safety resulting to serious accidents and interferences with accuracy and efficiency. Several aspects relating to workplace accidents were also identified by the study including higher and intense fatalities in relation to alcohol abuse accidents at KPA. It was evident that alcohol abuse related accidents at KPA impact the net revenue of the organization due to increased accident benefits pay-outs to employees and higher costs incurred on environmental safety programmes as alcohol abuse results to employees having less regard to workplace safety precautions guidelines

thus execute their duties at work less carefully. The findings also indicated that workplace accidents due to alcohol abuse affect future productivity of the affected employees.

The findings of the study also revealed that the organization has established effective programmes aimed at preventing and improving employees affected with alcohol. These programmes include strict rules and regulations on alcohol abuse at workplace, staff wellness programmes on alcohol abuse, counselling sessions for affected staff and strict human resources rules on work-time-management. The organization, at a low rate, also utilizes informative materials on drugs and significantly supports staff undergoing rehabilitation through financing the programmes, and aftercare programmes

5.3 Conclusion

From the findings of the study, the researcher made the following conclusions;

1. Although alcohol abuse is not so major a challenge at KPA, major factors may be attributed to be contributing towards some of the employees of the organization abusing the substance. Factors such as work related stress, availability of extra monies and influence from family members are among the major contributors towards alcohol abusing habit. Several indicators, at different degrees, may also be used to identify an alcohol abusing habit. These include physical deterioration, change in behaviour and possession of alcohol and alcohol related materials.
2. The study concludes that abuse of alcohol affects the productivity of the related employees. The effects range from a slow rate of output, reduced quality in output, increase organizational costs, careless and reckless decisions to poor interactions. However, clear procedures in measuring staff performance may be used to curb the abuse within organizations.

3. Alcohol abuse was also concluded to increase employee absenteeism. The amount of work-time that these employees spent on drug use related activities i.e. early sign-outs and late sign-ins, time spent outside work due to sickness as a result of alcohol abuse and low morale among the staff covering for the staff abusing alcohol can impact negatively on an organizations revenue.
4. Employees abusing alcohol were more prone to cause accidents at the workplace. This thus led to the conclusion of the study that alcohol abuse is related to workplace accidents. The frequency of the accident incidences were however still low and causes the organization to incur more on safety programmes.
5. The study also concludes that effective alcohol abuse prevention practices and employee improvement programs greatly impact employees against alcohol abuse. The programmes should therefore include availing informative materials on drugs, wellness programs and counselling sessions for affected staff. Prevention practices should also revolve around strict HR rules against alcohol abuse.

5.4 Implication of the Study on Policy, Theory and Practice

The study acknowledges that alcohol abuse among KPA staff influences staff productivity and increases absenteeism. The findings of this study will be beneficial to the Kenya Ports Authority in enhancing staff productivity and reducing absenteeism through facilitating policy and decision makers in enhancing strategies that curb alcohol abuse at workplace. The findings will also offer a good reference to other researchers seeking to carry out a study in relation to alcohol abuse at workplace while relating these to staff productivity and absenteeism.

5.5 Recommendations

1. The study recommends that the problem of alcohol abuse in all workplaces in the country and the related problems be addressed and resolved. The Kenya Ports Authority and other corporate organizations should develop policies and

regulations that will be a deterrent to alcohol abuse. These control measures related to drinking can enhance both organizations and their employee performance.

2. Employees who are affected by abuse of alcohol, should be offered support through intervention programs by their employers to facilitate their recovery developing a conducive working environment. Organizations should have programmes that increase employee knowledge of the abuse of alcohol and other drugs. Assistance programs offered through the workplace can be designed so as to impact more employees including those who may in future be affected.
3. In relation to the support programmes, the study recommends that the staff wellness programmes should also facilitate the KPA employees towards sound financial management since a good portion engage in other revenue generating activities hence they may possess extra finances that may influence the affected employees to abuse alcohol. The programmes should deliberately and to a great extent also influence the employees' family members so as to reduce the influence towards alcohol abuse from their respective families.
4. More research is needed on the effectiveness of organizational policies and intervention programmes geared towards curbing alcohol abuse in KPA and other organizations. Organizations should also cater for their employees financially through the rehabilitation processes. After care after confined rehabilitation should be provided for by the medical department to deter the affected employees from relapse.
5. The study also recommends that KPA should develop a system of measuring the loss in man-hour in relation to affected employee performance so as to facilitate further development of curbing measures.
6. The study recommends that all managers/supervisors should be empowered with skills on how to handle alcohol abuse at work and identify symptoms of alcohol abuse in order to be able to refer affected employees for early intervention.

5.6 Suggestions for Further Studies

The study sought to establish the effect of alcohol abuse on employee performance and absenteeism in Kenya Ports Authority. The study recommends that similar studies should be done in all other government authorities and privately owned organizations so as to enhance the conclusions made in this study. Other studies can also be done on other features in relation to workplace performance that are also influenced by drug abuse so as to improve the approach in addressing the issue of alcohol abuse. Such aspects include employee workplace aggression and relationship among employees. The relationship of alcohol abuse on workplace accidents is another aspect for study as this study saw it as an emerging variable which may be studied further. The study also recommends further study on the influence of economic status to alcohol abuse in the workplace. As so many other factors can affect work performance and absenteeism more studies in this area are recommended.

REFERENCES

- Ames, G., Curnadi, C., Moore, R., and Stern, P. (2007). Military Culture and Drinking Behaviour Among U.S. Careerists. *Journal of Studies on Alcohol*, 68 (3): 336- 344.
- Balogun, S. K. (2006). “Chronic intake of separate and combined alcohol and nicotine on body maintenance among albinorats”, *Journal of Human Ecology*, 19(1) 21-24.
- Bayer, J. and Waverly, K. (2005). Tobacco Control Policies. Strategies and Setbacks: Brigden Co-publication of the World Bank and Research for International Tobacco Control.
- Bennett, J. B., & Lehman, W. E. K., (2001). Workplace substance abuse prevention and help seeking: Comparing team-oriented and informational training, *Journal of Occupational Health Psychology*: 6(3), 243–254.
- Borman, W. C., & Motowidlo, S. J. (1997). Task performance and contextual performance: The meaning for personnel selection research. *Human performance*, 10(2), 99-109.
- Cook, R. F., (2004). The prevention of substance abuse among construction workers: A field test of a social cognitive program, *Journal of Primary Prevention*: 25(3), 337–358.
- Dan, J. L., Mollie, S., Helen, W. P., (1980). Theories on drug abuse, Selected Contemporary Perspectives. *Department of Health and Human Services*.
- Dorcas, O. F., (2012). Drug abuse among Nigerian adolescents’ strategies for counselling. *The Journal of International Social Research*, 3(20).
- Du Toit, D.,& Van Der Waldt, G. 1998. *Public management: grassroots*. Cape Town: Juta.
- Du Toit, D., Knipe, A., Van Niekerk, D., Van Der Waldt, G.,& Doyle, M. 2001. *Service excellence in governance*. Cape Town: Heinemann.

- Frone, M. R., (2006). Prevalence and distribution of illicit drug use in the workforce and in the workplace: Findings and implications from a U.S. national survey, *Journal of Applied Psychology*: 91(4), 856–869.
- Frone, M. R., (2006). Prevalence and distribution of alcohol use and impairment in the workplace: A U.S. national survey. *Journal of Studies of Alcohol*: 67, 147–156.
- Frone, M. (2009). Does a Permissive Workplace Substance Use Climate Affect Employees Who Do Not Use Alcohol and Drugs at Work? A U.S. National Study *Psychology of Addictive Behaviours*, 23(2):386-390.
- Frone, M. and Brown, A. (2010). Workplace Substance- Use Norms as Predictors of Employee Substance Use and Impairment: A Survey of U.S Workers. *Journal Studies of Alcohol and Drugs*, 71(4) : 526 – 534.
- French, M. T., Roebuck, M. C., & Alexandre, P. K. (2004). To test or not to test: Do workplace drug testing programs discourage employee drug use? *Social Science Research*, 33, 45–63.
- Goldman, L., Schafer, A. I.,(2009). Alcohol abuse and dependence. *Ann Intern Med*. 2009 Mar 3 Philadelphia, Pa: Saunders Elsevier: 24, 150(5).
- Gorsuch, R.L., and Butler, M., (1976). Toward developmental models of non-medical drug use: The Effectiveness of Drug Abuse Treatment. Cambridge, Mass.: Ballinger, 3: 29-76.
- Griep, R.H., Rotenberg, L., Chor, D., Toivanen, S.,& Landsbergis, P.2010. Beyond simple approaches to studying the association between work characteristics and absenteeism.
- Combining the DCS and ERI models. Routledge Taylor & Francis Group. *Work & Stress*. 24, (2): 179–195.
- Haladu, A.A. (2003). Outreach strategies for curbing drug abuse among out-of-school youth in Nigeria: A challenge for community Based Organization (CBOS), in A. Garba (ed). *Youth and drug abuse in Nigeria: Strategies for counselling, management and control*. Kano: Matosa Press.

- Hassan M., Aboazoum E., Umar N., Mochammad M. (2015). Analysis Factors Affecting Employees Job Performance in Libya. *Journal of Business and Management*. 17 (7): 42-49.
- Hazelden Foundation (2007), Substance abuse and addiction among most serious workplace issues. Available: http://www.hazelden.org/web/public/2007workplace_survey. Page.
- Hodgins, D., Williams, R. and Munro, G. (2009). Workplace Responsibility, Stress, Alcohol Availability and Norms as Predictors of Alcohol Consumption-Related Problems amongst Employed Workers. *Substance Use and Misuse Journal*, 44(14): 2062 – 2069.
- Hourani, L. L., Williams, T. V., & Kress, A. M. (2006). Stress, mental health, and job performance among active duty military personnel: *findings from the 2002 Department of Defense Health-Related Behaviors Survey*. *Military medicine*, 171(9), 849-856.
- Safety resource (2005), “Safe work place handout by International Labour Organization”. Geneva. <http://www.ilo.org/safework/safeday>, last viewed on 10 August, 2010.
- Institute of Alcohol Studies (IAS), (2009). Alcohol and The Workplace. *IAS Factsheet*.
- Jonas DE, Garbutt J C, Amick HR, Brown JM, Brownley KA, Council CL, (2012). Behavioral Counseling after Screening for Alcohol Misuse in Primary Care: A *Systematic Review and Meta-analysis for the U.S. Preventive Services Task Force*.
- Jordan, N., et al. (2008). Economic benefit of chemical dependency treatment to employers. *Journal of Substance Abuse Treatment*: 34, 311–319.
- Kaithuru P. N, Stephen A (2015) Alcoholism and its Impact on Work Force: A Case of Kenya Meteorological Station, Nairobi. *J Alcohol Drug Depend* 3: 192.
- Kenya Ports Authority Act 1978 (Cap. 391).
- Kenya Ports Authority Human Resource Manual 2011.

Kenya Ports Authority Disciplinary Handbook 2008.

Kleberg, H. D., Weiss, R.D., Anton, R.F. Jr., George, T.P., Greenfield, S.F., Kosten, T.R., (2007). Work Group on Substance Use Disorders; American Psychiatric Association; Steering Committee on Practice Guidelines. Treatment of patients with substance use disorders. *Am J Psychiatry*; 2(164):5-123.

Larson, S.L. et al. (2007). Worker substance use and workplace policies and Programs (DHHS Publication No. SMA 07-4273, Analytic Series A-29). Rockville, MD: Substance Abuse and Mental Health Services Administration, Office of Applied Studies.

Markussen, S., Rogeberg, O.J., & Gaure, S. 2009. The anatomy of absenteeism. *IZA Discussion Paper Series. No. 4240 June*. Bonn: Institute for the Study of Labor.

McFarlin, S. and Fals-Stewart, W. (2002). Workplace Absenteeism and Alcohol Use. A Sequential Analysis. *Psychology of Addictive*, 16(1): 17–21.

Merrick, E. S. L. et al. (2007). Revisiting Employee Assistance Programs and Substance use problems in the workplace: Key issues and a research agenda, *Psychiatric Services*. 58(10),1262–1264.

Miller, T. R., Zaloshnja, E., & Spicer, R.S., (2007). Effectiveness and benefit- cost of peer-based workplace substance abuse prevention coupled with random testing, *Accident Analysis and Prevention*. 39, 565–573.

Moore, R.S., Cunradi, C.B., Duke, M.R. and Ames, M.G. (2009). Dimensions of Problem Drinking among Young Adult Restaurant Workers. *The American Journal of Drug and Alcohol Abuse*, 35(5): 329- 333.

Mohr, P. Charles, K. and Truxillo, D.(2005). “Perceived Workplace Drug and Alcohol Problem” PHRMA. *Workplace Substance Abuse Survey of Portland Employers*: Portland State University.

Mugenda, O. M., & Mugenda, A.G. (1999). *Research methods: Quantitative and qualitative Approaches*. Nairobi: ACTS Press.

Mugenda, O., & Mugenda, A. (2003). *Research Methods*. Nairobi: Acts Press.

- NACADA (2007). Rapid situation assessment of drug and substance abuse in Kenya.
- NACADA (2013). National Survey On Alcohol-related Illnesses and Deaths.
- National Agency for the Campaign Against Drug Abuse (NACADA, 2003). General Information on Drug and Substance Abuse, Preventative Education. Nairobi: NACADA.
- National Strategy on Prevention, Control and Mitigation of Drug and Substance Abuse 2009-2011.
- National Agency for the Campaign against Drug Abuse (NACADA) and Kenya Institute for Public Policy Research and Analysis (KIPPRA) (2006). Drug and Substance Abuse in Tertiary Institutions in Kenya: A Situational Analysis. Nairobi: NACADA.
- Nnachi, R.O., (2007). Advanced psychology of learning and scientific enquiries. *Enugu: J. J. Classic Publishers Ltd.* Occupational Health and Safety Act 2007.
- Robbins, S.P., Odendaal, A., & Roodt, G.2004.Organizationalbehaviour: Global Southern Perspective. 5th impression. Cape Town: Pearson.
- Robert-Phelps, G. (2004) Customer Relationship management, New York: John Wiley and sons.
- Rohman, M. and Blum, C. (2002). The Workplace and Alcohol Problem Prevention. *Alcohol Research and Health*, 26(1): 49 – 57.
- Sanjay, S. (2001). Common Dream New Centre. <http://www.common.dreams>.
- Schuckit, M.A., (2009). Alcohol-use disorders.
- Theodoros G. and Olga T. (2014). Social Learning Conceptualization for Substance Abuse. Implications for therapeutic Interventions. *The European Journal of Counselling Psychology*, 3(1), 69–88.
- Thornhill, R., Gangestad, S. W., Miller, R., Scheyd, G., McCollough, J., & Franklin, M. (2003). *MHC, symmetry and body scent attractiveness in men and women (Homo sapiens)*. Behavioral Ecology, 14, 668–678.

Trapenceire, 1., (2000). Statistics on Alcohol, Drugs Crime in Lativais.

Leifman,H., and Edgern (2000). Statistics on Alcohol, Drugs and Crime in the Baltic Sea Regions. Helsniki Nordic Council for Alcohol and Drug Research.

United Nation AIDS (2009) global report: UNAIDS report on the global AIDS epidemic. Switzerland: UNAIDS.

World Book Encyclopedia (2004). Vol. 6, Chicago: *World Book*.

World Health Organization (2004). Expert Committee on Problems Related to Alcohol Consumption. *WHO Technical Report Series*, 944: 1- 53

WHO (2004). *International Guide for Monitoring Alcohol Consumption*. Geneva: WHO.

APPENDICES

Appendix 1: Introductory Letter to Kenya Ports Authority - Nairobi

University of Nairobi
Faculty of Arts
Department of Psychology
Nairobi, Kenya

August 28, 2016

Dear Participant,

I am a M.A.student at the University of Nairobi undertaking a study on the **effects of alcohol abuse on employee performance and absenteeism at Kenya Ports Authority.**

You have been selected as one of the participants in this study to assist in supplying information that will be useful in facilitating the curbing of drug abuse and its effect at workplace.

Your sincere responses will be highly appreciated. The answers you give will be treated with utmost confidentiality and will be used only for the purpose of thi study.

Thank you in advance for your participation.

Yours faithfully,

Ruth Konchellah
MA Student
University of Nairobi

Appendix 2: Questionnaire to Employees of Kenya Ports Authority, Nairobi

Questionnaire Number: _____

Interview Date: _____

INSTRUCTIONS

1. Please do not write your name on the questionnaire.
2. The information you give will be treated with confidentiality
3. Kindly provide answers to the questions as honestly and precisely as possible.
4. Indicate your choice by a tick (√)

Kindly answer the following:

SECTION A: GENERAL RESPONDENT INFORMATION

1. Gender of respondent
Male [] Female []
2. Age of respondent
18 – 35 years [] 36 – 50 years [] 50+ years []
3. Level of Education
Primary [] Secondary [] Tertiary []
4. Marital Status
Single [] Married [] Divorced/Separated [] Widowed []
If married, for how long?
5. What is your family size?
1 persons [] 2 – 4 persons [] More than 5 persons []
6. Religion
Christian [] Muslim [] Hindu [] African Traditions []
Other

SECTION B: EMPLOYEE INFORMATION

7. Which department are you in?
8. What level do you serve in at KPA?
Top management [] Middle management [] Unionisable staff []
9. How long have you worked for KPA?
Less than 1yr [] 1 – 5yrs [] 6 – 10yrs [] Above 10yrs []
10. How stressful is your daily work at KPA?
Not stressful [] Mildly Stressful [] Stressful [] Very Stressful []
11. What is your monthly income in Kshs?
Less than 20,000 [] 20,001 – 50,000 [] 50,001 – 100,000 [] Above 100,000 []
12. Do you have any other source of income apart from your salary?
Yes [] No []

SECTION C: ALCOHOL ABUSE

13. Do you take alcohol? Yes [] No [].
If yes, how long have you been taking alcohol?
Less than 1yr [] 1 – 5yrs [] 6 – 10yrs [] Above 10yrs [] I can't remember []
Ife yes, have you tried quitting? Yes [] No [].
14. What is your weekly consumption rate of alcohol?
1-5 bottles [] 6-10 bottles [] 11-20 bottles [] Above 20 bottles []
15. What is your preferred drinking time?
Weekdays [] Weekends [] Both weekdays and weekends []
16. What reasons make you take alcohol?
17. Does any other member of your family take alcohol? Yes [] No []
If so, who
18. In your opinion, what is the frequency of alcohol abuse among employees in KPA?
Not at all [] Not frequent [] frequently [] Very frequent []
19. Apart from alcohol, is there any other drug abused at KPA? Yes [] No []

If yes, please list the drug(s);

.....
.....

20. Below is a list of some signs and symptoms of alcohol abuse. Please indicate which ones are common at KPA.

- | | | |
|--|---------|--------|
| a. Possession of alcohol at the workplace | Yes [] | No [] |
| b. Possession of alcohol related materials | Yes [] | No [] |
| c. Physical deterioration | Yes [] | No [] |
| d. Change in behaviour | Yes [] | No [] |

SECTION D: LEVEL OF PRODUCTIVITY AND ABSENTEEISM

21. Below statements relate to staff productivity in relation to alcohol abuse. Please indicate your opinion in this provided scale. [1= Strongly agree, 2= Agree, 3= Not sure, 4= Disagree, 5=Strongly disagree].

Statement	1	2	3	4	5
KPA has well established procedures to measure employee productivity					
Procedures at KPA that facilitate the measure of employee productivity assist to curb effects of alcohol abuse					
Alcohol abuse has a huge negative impact on employee ability to execute their duties within scheduled time.					
KPA losses man-hours annually due to alcohol abuse from slow output delivery					
Employees addicted to alcohol deliver inconsistent quality and quantity output at KPA.					
Alcohol abuse has a direct negative impact on KPA clients					
KPA's net revenues are greatly impacted by low productivity among alcohol abusing staff					
KPA incurs additional costs to cover for the un-attained productivity level as a result of alcohol abuse					
Absenteeism due to alcohol abuse greatly affects attaining of set productivity levels at KPA					
Alcohol abuse affects interactions among employees at KPA resulting to a poor coordination					
Employees who abuse alcohol record more careless and wreck less decisions at work.					

23. Alcohol abuse is believed to closely relate to employee absenteeism. Please indicate how often the below aspects are registered at KPA using the provided scale. [1= Very Often, 2= Often, 3= Rarely, 4= Very Rarely, 5= Not at all].

Aspect	1	2	3	4	5
Frequent absences from the work stations as a result of alcohol use					
Late reporting at work as a result of alcohol abuse					
Early sign-out from work before the scheduled time					
Recorded sick off as a result of alcohol related sickness.					
Unreported and unexplained absence					
Resistance to formal request to report early or sign-out late at work					
Disappearance from work without clear explanation of whereabouts.					
Recorded emergency leaves from work as a result of alcohol abuse					
Fast utilization of earned leave days as a results of alcohol abuse					
Low morale among employees covering for the frequent absentee staff due to alcohol abuse					
Higher percentage of alcohol abuse absenteeism among lower level staffs compared to higher level staffs.					

SECTION E: WORKPLACE ACCIDENTS

24. Below statements relate to workplace accidents in relation to alcohol abuse. Please indicate your opinion in this provided scale. [1= Strongly agree, 2= Agree, 3= Not sure, 4= Disagree, Strongly disagree].

Aspect	1	2	3	4	5
Most of the recorded accidents at KPA are linked to employees with drug abuse traditions					
Workplace accidents as a result of drug abuse are more fatal than other workplace accidents recorded at					

KPA					
Alcohol abuse is the main cause of workplace accidents at KPA.					
Alcohol abusing employees register more accidents at work compared to their non-users counterparts.					
Alcohol abuse related accidents at work impact the net revenue at KPA due to increased accident benefits pay-outs to employees					
Alcohol abuse results to employees having less regard to workplace safety precautions guidelines.					
Alcohol abuse at KPA results to higher costs incurred on environmental safety programmes					
Employees who abuse alcohol execute their duties at work less carefully.					
Workplace accidents at KPA as a result of alcohol abuse result to high recorded employee absenteeism					
Workplace accidents due to alcohol abuse affect future productivity of the affected employee					

SECTION F: ALCOHOL ABUSE PREVENTION PRACTICES AND EMPLOYEE IMPROVEMENT PROGRAMES

25. In your opinion, does KPA have programmes aimed at preventing and improving employees affected with alcohol?

Yes [] No []

If yes, how effective are these programmes?

Very Effective [] Effective [] Not Effective [] Very Ineffective []

26. Below are some of the ways employed by organizations to assist prevent alcohol abuse at workplace and improve employees addicted to alcohol. Please indicate which methods are deployed at KPA.

- a. Strict rules and regulations on drug abuse at workplace Yes [] No []
- b. Staff wellness programmes on drug abuse Yes [] No []
- c. Counselling sessions for affected staff Yes [] No []
- d. Availability of informative materials on drugs Yes [] No []
- e. Strict HR rules on work-time-management Yes [] No []
- f. Financial support for staff undergoing rehabilitation Yes [] No []

27. Please list other effects of alcohol among employees as observed by you at KPA.

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Appendix 3: Interview Guide to KPA Top Management

1. How many employees has the organisation employed in total in each branch?
2. Is alcohol abuse a problem in KPA?
3. How often are alcohol related cases raised and addressed at KPA? What guidelines are in place that facilitate their redressing.
4. Are alcohol abuse related accidents so often at KPA? How fatal have they been?
5. How much the organisation loose, if any, in cash and man-hours annually as a result of alcohol abuse?
6. Does the organisation record complains related to alcohol intoxicated employees from its customers? How frequent are these cases?
7. How does the organisation suffer from employee absentseeism and performance due to alcohol abuse?
8. What other effects does the organisation suffer as a result of alcohol abuse?
9. What are the resillience measures taken by the organisation to reduce their impact?
10. Does the organisation have policies and guidelines in place that assist in curbing drug abuse at workplace?
11. How are these policies and guidelinees adhered to by employees at KPA?
12. Which employee improvement and support programmes does the organisation have inplace that facilitate rehabilitation among affected employees.

Appendix 4: Letter of Authority from the Department



UNIVERSITY OF NAIROBI
FACULTY OF ARTS
DEPARTMENT OF PSYCHOLOGY

Telegrams: Varsity Nairobi
Telephone: 318262 ext.28439
Telex: 22095

P.O. BOX 30197
NAIROBI
KENYA
Email:dept-psychology@uonbi.ac.ke

November 09, 2016

The General Manager
Human Resource
Kenya Ports Authority

RE: RUTH SOKOYIAN MAGIROI – C50/71467/2014

The above named is a student in the Department of Psychology undertaking a Masters degree in Organizational Psychology at the University of Nairobi. She is doing a project on ***"Effects of Alcohol Abuse on Staff Performance and Absenteeism In Kenya Ports Authority"***. The requirement of this course is that the student must conduct research project in the field and write a project.

In order to fulfill this requirement, I am introducing to you the above named student for you to kindly grant her permission to collect data for her Master's project.

Thank you very much for accepting our student in your setting. If you have any questions, you may address them to Dr. Luke Odiemo, Chair, Department of Psychology, UoN. He may be contacted on Tel.020-3318262 Ext.28439.

Yours Sincerely,



Dr. Luke Odiemo
Chairman,
Department of Psychology