FACTORS INFLUENCING ALCOHOL CONSUMPTION AMONG MOTHERS OF REPRODUCTIVE AGE IN ANAMBRA STATE, SOUTHEAST NIGERIA

EZEKWE Emmanuel Chika, NWANKWO Ignatius Uche & OSAYI Kelechi Kenneth

Department of Sociology/Anthropology,
Nnamdi Azikiwe University, Awka.Anambra State, Nigeria
Emmachika89@gmail.com; iunwankwo@yahoo.com;
KelechiKenny@yahoo.com;

Abstract

The rate of alcohol use and misuse among women in Nigeria is alarming; this is notwithstanding the social and health implications of its abuse. Most studies usually focus on male related issues with regard to drinking. Using Symbolic interactionism paradigm, this paper interrogated factors that influence drinking among mothers of reproductive age and its effects. Data was collected using concurrent mixed method involving quantitative and qualitative tools of questionnaire and in-depth interview guide.. A total of 373 close ended copies of questionnaire were validly filled, processed with SPSS and analyzed with descriptive tools. Also, in depth interview was conducted among 12 mothers purposively selected from different occupational backgrounds. The interview data were thematically analyzed using manual content analysis techniques. It was found that factors such as partner involvement, social acceptance, sexual stimulation, desire to induce sleep constitute social factors that influence consumption of alcohol among mothers of reproductive age. It was also found that women drink alcohol when they are pregnant and after delivery because of the belief that it can wash away blood clot after delivery. It is believed in the area that drinking locally produced gin (kai-kai) can help reduce the size of the baby and aid delivery, while drinking palm wine can help produce breast milk. Other reasons why mothers drink alcohol include to get high, to ward off boredom or idleness, as well as ignorance about the outcome, emotional imbalance and for enjoyment. The research recommended the need to regulate production, marketing and consumption of alcohol across age and gender.

Keywords; Alcohol, Mothers, Reproductive age, Consumption, Mixed research

Introduction

The complex nature of alcohol is in its relevance in social, cultural and religious activities despite the health and social problems associated with its intake. There are clear evidence both in terms of morbidity and mortality rate (Cheah



and Rasiah, 2017). However, despite the obvious health and social consequences, alcohol seems an inevitable part of human existence. Societies have always found it difficult to restrain the spread and pervasive use of alcohol.In Europe, alcohol has been assumed to have high cultural value and it is incorporated into many cultural practices (Jarvine & Room 2007; Skagerstrom 2015). It has also been part of the social and religious life of Africans since the third century B.C (Martinez, Roislien, Nirmala & Clause 2011). In Nigeria, drinking alcohol was culturally tolerated as part of ceremonial lives of many ethnic groups. There were no written rules prohibiting women from drinking. Consumption was originally reserve for men and played a vital role in political, religious and socio-economic relationships (Odejide, 2006). However, available empirical studies reveal fluctuating patterns of alcohol intake, that women challenge gender roles through their use of alcohol (Dumbili, 2015).

Statement of the Problem

Alcohol consumption among mothers of reproductive age is a public health concern, considering its adverse outcomes for both mother and the children. In recent decades, there has been increased concern about drinking behavior of women and mothers due to their biological composition and their role in families. Despite the efforts put in place by World Health Organization and other international agencies towards reducing heavy drinking and the effects associated with alcohol misuse, consumption of alcohol remains a significant global phenomenon. In 2012, about 3:3 million deaths or 5.9% of all global deaths were attributed to alcohol consumption (WHO, 2014). There are however substantial sex differences in the proportion of global deaths attributable to alcohol. For example in 2012 13.9 million DALYs (Disability Adjusted to Life Years) or 5.1% of the global problem of disease and injury were attributable to alcohol intake (WHO, 2014). Among men in 2016, an estimated 2.3 million deaths and 106.5 million DALYs were attributable to the consumption of alcohol. Women experienced 0.7 million deaths and 26.1 million DALYs attributable to alcohol consumption. It has been suggested that perception of women (mothers) consuming and becoming intoxicated has also significantly changed (Schmidt 2014; Nam Tran 2016). A significant proportion of pregnant women and women of reproductive age (young mothers) take alcohol irrespective of the fact that it has being established as a teratogen (A drug or chemical which affects the development of the foetus or causes birth defects) since 19th century. Harmful use of alcohol is one of the leading risk factors for population health worldwide and has a direct impact on many healthrelated targets of the Sustainable Development Goals (SDGs), including those for maternal and child health. (W.H.O 2018). Mortality resulting from alcohol



consumption is higher than that caused by diseases such as tuberculosis; HIV/AIDS and diabetes (WHO, 2018). Women are more vulnerable than men to alcohol effect even after drinking smaller amounts. Heavy drinking can lead to increased risk of health problems affecting the liver, brain damage and leading to breast cancer (Havard Health Publications 2014). In pregnant women, alcohol effect has been associated with miscarriage, premature birth still birth, low birth weight and diagnosis that are encompassed by the umbrella term Fetal Alcohol Spectrum Disorders (FASD). In children we observe prenatal or post-natal growth retardation and issues with the central nervous system (Havard Health Publications 2014). Alcohol consumption among mothers of reproductive age has social and psychological implications, expectant mothers who take alcohol for instance represent many ethical and legal problems including, their reproductive rights, their responsibility for their children's health and the way in which they behave during child rearing (Mondoza et al 2005). Lyons and Willot (2008), suggest that feminity equates motherhood and heavy drinking among women especially mothers is viewed as deviant and breaking traditional codes of feminity.

In Nigeria, alcoholic drinks are the most widely abused psychoactive substance and the Nigerian government had recognized the need to establish policies towards controlling and regulating production and consumption. As far back as 1920, measures were established to control the importation, sale, local fermentation and distillation of alcohol, including the requirement for a special permit (Oshodin, 1995). In contrast, drinking has been an integral part of daily and ceremonial lives of those Nigerians who are not Muslims, so government efforts to establish control measures have had little effect. There are currently no platforms established for the control of production, marketing, advertising and availability of alcohol in Nigeria (Dumbili2013). This tends to influence the prevalence and frequency of its consumption among mothers of reproductive age.

Considering the relatively more adverse effects of drinking on women compared to their male counterparts due to their biological composition, and despite all the health and social problems associated with the abuse of alcohol, much of the literatures concerned with alcohol use and misuse in Nigeria and other African nations has focused for understandable reason on male drinking. Much of the research on women and alcohol consumption has paid relatively little attention to social and psychological aspects of maternal drinking behaviour. Klingeman and Gmel (2001), opined that bio-medical issues associated with alcohol have dominated discussions on alcohol and its related problem. As a result there is need for an elaborate knowledge of the factors influencing alcohol consumption among mothers of reproductive age in Anambra state, Southeast Nigeria.



Research Objectives

- 1. To identify the social factors influencing alcohol consumption among mothers of reproductive age.
- 2. To ascertain the category of mother who are more inclined to drinking alcohol
- 3. To find out the motives that stimulate alcohol consumption among mothers of reproductive Age, (both Psychological factors and economic factors)

Review of Relevant Literature

Alcohol Consumption in Nigeria Alcohol has been an important part of Nigerian culture (Dumbili 2013). Consumption of alcohol predates colonial rule in Nigeria and as in many Africa countries (Bennet, Campillo, Chandreskan & Gureje 1998). It is thought to be the most commonly abused substance in Nigeria, possession has always been legal and access readily available. Bennet et al., (1998) also stressed that alcoholic beverages are the most widely abused psychoactive substance in Nigeria. However Okolo (2016), opined that alcoholic beverages are symbolic vehicle for identifying, describing constructing and manipulating cultural values and interpersonal relationship in almost all cultures. According to Adekeye, Adeusi, Chenube, Ahmadu and Sholarin (2015), alcohol occupies a prominent position in the worship of deities. It is a central feature of adulthood in Nigeria and plays a major role in social, religious political and economic relationships. (Bennet et al 1998).Oshodin, (1995) emphasized that alcohol is symbolic and it's consumed at almost all ceremonies including cultural festivals, chieftaincy enthronement child dedication and even funeral obsequies especially among ethnic groups that are not Muslims. In traditional Nigerian societies, there was no codified social rule. However there was a general awareness of the social control that governed all forms of behavioural dispositions (Ikuesan, 1994). Drinking alcohol typically indicates hospitality, although different age groups, men and women are not explicitly separated during these occasions, elders and men are expected to drink more than either younger people or women (Oshodin 1995; Bennet et al 1998). Many people tend to view consumption of alcoholic beverages as socially useful and necessary. This standpoint is likely to continue for a long time in future, even though the drinking of alcoholic beverage has lost some of its traditional values, new values seems to be emerging (Mushengh 1998; Myadez&Rwomire 2014). The Nigerian culture emphasizes hospitality and alcohol consumption is an essential part of our culture in occasions and ceremonies. Moreover, because drinking is an integral part of daily and ceremonial life of Nigerians (except Muslims) government's efforts to establish regulatory prevention and treatment program may have little effect.



Alcohol Consumption among Nigerian Women Alcohol consumption was gender and age 75based (Dumbili 2013). It was considered an absurdity for a woman to drink and female alcoholic intoxication was unheard, only in very special occasions such as traditional occasions like traditional religious festivals, christenings and similar social functions were culturally appropriate for all present to take alcohol (Ikuesan, 1994). It was a consistent characteristics of the pattern that alcohol consumption among women was not popular (Odejide, Ohaeri&Ikuesan 1989, Dumbili 2013). Male alcohol misuse may be tolerated by the society while female consumption is generally not tolerated (Ikuesan 1994).

In contemporary Nigeria, these situations have not noticeably changed though women have taken on or become more socially responsible and are now more socially mobile with society generally seeming tolerant, still traditional social control have not totally lost their grip. According to Adelekan (1993) there is a new trend in alcohol consumption which is the increasing consumption of alcohol by females in Nigeria. Ikuesan (1993), also emphasized that, there is a silent increase in female drinking that is believed to be the preserve of some educated westernized female city dwellers and also female socialites. According to Obot (2007), with the rising influence of globalization and the rise of feminism in the country, women have recently begun to challenge the status quo that relegated them to the background and this seems to have been extended to alcohol consumption. Dumbili (2013), further stressed that women challenge gender roles through their use of alcohol. However in traditional Nigerian society, the women hardly drank alcohol because of cultural constraints. These days more women drinkers, who drank what exceeds moderate drinking have been reported in Nigeria.

Factors Influencing alcohol consumption among mothers of reproductive age Scholars have revealed the factors influencing alcohol consumption among women/mothers of reproductive age. Availabilty of alcohol has been revealed as a major factor influencing alcohol consumption of alcohol, this was revealed by Dimelu, Igbo and Agbo (2011), from their structured interview session conducted in Enugu to ascertain patterns of alcohol consumption and its effects on selected rural community in Enugu state, 53% of the respondents said they were influenced by availability of alcohol 50 %said it has to be the ability to produce the beverage type 46.7% said they consider cost/ prices and 43.3% said it is prestige .Social factors have also been revealed as influencing alcohol intake among women, Wangeci in (2011), in a cross-sectional survey in Kirinyaga Kenya studied patterns and effects of women alcohol consumption on family cohesiveness, revealed that majority of the respondents take alcohol for social purposes,47.4% of respondents take alcohol as way to meet people or



be more comfortable with others,44.7% said it's to have fun 60.9% percent find it hard to resist if someone offered or brought them a drink or offered to do so. Elek, Shelly, Claudia, Marjone, Marykate, Darra Dang and Mitchel (2013), conducted a focus group discussion among women between the ages of 18-35 to ascertain women's knowledge, views and expectancy regarding alcohol use and improved pregnancy; The findings related that women partners, families and friends impact women resolution to drink or abstain from alcohol. In a related discovery, they also revealed that aside social pressure, the alcohol use behavior of a woman's companion, family and friends play a key role in women's drinking by providing them acquaintance with alcohol and modelling of alcohol use. A woman's partner, her family and her friends all act either as strong supporter of the woman's effort not to drink or as negative influences by pressurizing them to drink. Baker (2017) conducted a qualitative study (Focus Group Discussion) in United Kingdom on the patterns and perceptions of maternal alcohol use among women with pre-school aged children where majority of the mothers who took part in the focus Group agreed that their perception of what was acceptable behavior among mothers and fear of disapproval from others impact their actions including alcohol consumption.

Psychological factors have also been associated with alcohol intake, Wangeci (2011), revealed that financial frustration coerce women to consume alcohol, 41.2% of her respondents(women) consume alcohol when they could not afford something they are in need of, 57.9% acknowledged taken alcohol by guilt and about not being good providers to their wards. The findings further revealed that women tend to consume alcohol when under physiological stress, fatigue restless, sleepless and while experiencing physical pain .Other commonly mentioned motivations for drinking during pregnancy as revealed by Elek e al, (2013), include unawareness about the outcome, peer pressure, selfishness, immaturity and irresponsibility, having an unplanned pregnancy or desire to abort the child. Participating in celebrations or social settings are some of the places mothers don't care about the baby. Moreover, depression has been revealed as a major factor influencing alcohol consumption.

Economic independence has also been identified as a major factor influencing alcohol consumption among women (mothers) of reproductive age. This was revealed by Wangeci 2011 in her cross-sectional study in Kirinyaga Kenya. The freedom economic independence offers influence alcohol consumption. The study observe that even if the incomes are inadequate they are able to plan their roles, determine amounts, where and when to drink. In a related report provided by Organization for Economic Cooperation and Development (2015), educated women are more likely to be hazardous drinkers. It is said that growing numbers of professional women are drinking at dangerous level to keep up with men and



further their careers. In what has become the dark side of equality, their drinking habit is now similar to those of men, one in five women graduates repeatedly drink hazardously compared with one in ten for those with lower levels of education. According to OECD(2015) study, women now consume alcohol regularly with male colleague in the public after work, not only has it became more socially tolerable, many feel pressure to enhance their career prospects, they have adjusted to the male culture in the labor market.

Theoretical Framework

Symbolic interactionist theory provides the best explanation for the subject of discourse because alcohol consumption is a symbolic characteristic of human behavior. It seems a cultural universal and almost inevitable in our social and cultural activities. Alcohol consumption is a symbolic tool in our everyday life that is essential in almost all our social or religious activities. In Nigeria the symbolic importance of alcohol consumption cannot be undermined and despite the multi-ethnic nature of the society, alcohol is an essential part of the social system and in social integration. The meanings we attach to the status of a woman as a mother is borne out of social interaction. Those meanings can also be modified and changed to suit the changing patterns in the ever evolving social system. The status of a mother is also symbolic; it depicts love, virtue responsibility and maturity for the conformist mothers while also depicting irresponsibility, immaturity or selfishness among mothers who are alcohol addicts or heavy consumers.

Furthermore, whether it is taking as a way of fighting gender imbalance, deriving pleasure, celebrations or manipulations, the symbolic importance of alcohol can never be undermined and the meanings individuals attached to taking alcohol stems from social interaction. The expectations mothers attached to alcohol consumption influence their indulgence in it, alcohol is also borne out of the social interaction and the meanings attached to it by the society. The level of reinforcement attached to a particular action is influenced by the language of the society and the meaning which the environment attaches to such action. Societies and mothers constructs and live in a world of meaning which the society offers and which they create by themselves, alcohol consumption will be reduced or eradicated if it is influenced by the level of importance attached to it by the society and the meaning attached to the symbolic status of a mother.

Materials and Method

The study adopted a concurrent mixed method of research design. It is a research tool that involves simultaneous use of quantitative and qualitative method of data collection to gather information. The study location is Anambra



State in South East Nigeria. Through the multi stage sampling procedure that involves successive random sampling complemented by cluster techniques, senatorial districts, local governments and communities were selected to ensure equal representation. The study lasted for three months, a sample size of 400 was drawn from the projected population (1,036,251) of married women using Taro Yamane formula of (1967). 400 structured questionnaire schedules were shared among mothers who fall within the reproductive age. 373 questionnaires were considered valid for analysis and data presentation. The qualitative data gave room for mothers of reproductive age, female medical practitioners, and other informed persons who fall within the category of the target respondents to air their views. The In-depth interview guide (IDI) helped in gaining deeper insights into the issue of discuss. The transcripts derived from the In-depth interviews were thoroughly read,coded and analysed thematically.

Research Findings/Results

Table1: Socio- Demographic Characteristics of the Respondents

2002020	gr	Frequency	Percent
Respondents'	15 - 24 Years	43	11.5
Age Category	25 - 34 Years	170	45.6
	35 - 44 Years	125	33.5
	45 - 54 Years	33	8.8
	Sub-Total	371	99.5
	Missing Values	2	.5
	Total	373	100.0
Respondents'	Single	5	1.34
Marital Status	Married	337	90.3
	Divorced	6	1.6
	Separated	11	2.9
	Widowed	14	3.8
	Total	373	100.0
Respondents'	FSLC	24	6.4
Educational Attainment	GCE/SSCE/NECO/NABTEB	93	24.9
Attailinent	NCE/OND	60	16.1
	B.Sc/HND/Equivalent	177	47.5
	M.Sc/PGD	15	4.0
	PhD	4	1.1
	Total	373	100.0
Respondents' Occupation	Trading	93	24.9
	Civil/Public Servant/Private Employee	168	45.0



The Nigerian Journal of Medical Sociology Volume 2, Issue 1, October, 2020

	Self-employed/Artisan		80	21.4
	Housewife		30	8.0
	Sub-Total		371	99.5
	System		2	.5
	Total		373	100.0
Respondents'		Freq.	%	
Income Level	10,000 - 20,000	42	11.3	
	21,000 - 30,000	91	24.4	
	31,000 - 40,000	87	23.3	
	41,000 - 50,000	57	15.3	
	50,000 and above	95	25.5	
	Sub-Total	372	99.7	
	System	1	.3	
	Total	373	100	
Respondents'	Christianity		367	98.3
Religious Affiliation	Islam		2	0.5
	African traditional religion		4	1.1
	Total		373	100.0

Field Survey, 2019

Table 1 contains analysis of demographic characteristics of respondents. As expected, virtually all the respondents fall within reproductive age, a higher proportion of the respondents fall within the ages between 25- 34 which is (45.6%) of the respondents. This is followed by those within the age bracket of 35-44 years (33.5%), mothers between 15-24 are (11.5%), while 45-54 years are (8.8%). The mean age of the respondents is 33.3 years. This shows that the respondents were matured to provide reliable information and are apparently within reproductive age needed for this study.

Almost all the respondents 337 indicated being married (90.3%), while mothers who are 14 (3.8%) in number indicated that they are widowed. Also, 11 mothers (2.9%) of the respondents are separated while 6 mothers which is (1.6%) and 5 (1.34%) of the respondents indicated being divorced and single respectively. With regards to the educational attainment of the respondents, it was found that the majority 177 (47.5%) obtained HND/B.Sc certificates, 24.9% indicated that they have SSCE/O Level certificates. While 60 mothers (16.1%) obtained NCE/OND, 6.4% of them only obtained their First School Leaving Certificate. Only 15 (4.0%) of the respondents have M.Sc/PGD academic levels, while 1.1% of the respondents indicated that they have Ph,D. In view of the data presented, it shows that educational attainment of women in Anambra State is reasonably high.



From the occupations of the respondents, 168 women (45%) indicated that they are either civil/public or private employees of an institution, 90 (24.9%) of the mothers indicated that they are traders, 80 (21.4%) mothers said they were either self-employed or artisans while up to 8.0% (30) mothers out of 373 said they housewives.

Looking at the monthly income level, 25.5% (90) of the mothers reported their income level to be 50, 000 Naira and above, while 57 mothers (15.3%) said they earn 41-50,000 Naira monthly, Also, mothers numbering up to 87(23,3%) indicated that their income level is between 31-40.000, 24.4% said their income level is between 21-30,000 and 11.3%(42) are between 10-20,000 Naira monthly.

Virtually all the respondents are Christians 98.3%, 1.1% said they are traditionalists, while only 0.5% of the respondents are practicing Islam. It is not strange that majority of the respondents are Christians since the study was carried out in Anambra State, South-Eastern Nigeria which is predominantly Christian state

Analysis of Research Objectives

Research Objective 1: Factors Influencing Alcohol Consumption among Mothers of Reproductive Age

Table 2: Respondents views on social factors influencing mothers/women to take alcohol.

Respon	ses	Percent of	
N	Percent	Cases (%)	
172	34.6%	49.0%	
58	11.7%	16.5%	
62	12.5%	17.7%	
83	16.7%	23.6%	
122	24.5%	34.8%	
497	100.0%	141.6%	
	N 172 58 62 83 122	172 34.6% 58 11.7% 62 12.5% 83 16.7% 122 24.5%	

Dichotomy group tabulated at value 1.

Source: Field Survey, 2019.

It was found that 34.6% of the respondents believe that partner involvement is the reason why women take alcohol. This view corroborates Elek et al (2013) research conducted in Atalanta, United States of America, which revealed that partner involvement impacts on a woman's tendency to drink. From the qualitative data, women also believed that their husband's presence provide them social security whenever they are drinking. It goes a long a way to reiterate the presence of patriarchy in the research location.



Societal perception has also been revealed as a factor influencing mothers tendency to drink as 11.7% of the participants opined. This view is in agreement with Baker's (2017) qualitative study in the United Kingdom, where majority of the mothers who took part in the FGD agreed that their perception of what was acceptable behavior among mothers and fear of disapproval from others impact their decisions regarding alcohol consumption. This view on perception is subject to social change and societal evolvement, as society becomes more liberal what was considered abnormal may gradually gain acceptance due to social change. This is in line with Dumbili's (2013) view about the changing pattern of alcohol consumption which involves social acceptance. Another 12.5% of the research participants feel women drink in order to display equality with men. However, respondents from the interview session expressed varied opinion saying some women drink in order to identify with a particular class or others feel women cannot be equal Globalization/Westernization is also one of the factors influencing mothers' alcohol intake as 16.7% believed. This is no surprise as because of our digital age which aids acculturation and diffusion that have undeniably impacted on social change. Respondents also pointed out the influence from other women as one of the social factors influencing women to take alcohol, 24.5% of the participants revealed. The qualitative data supports this view as one of the responds opined that

Bad company led me to smoke, the groups or associations mothers belong to can push them to drink, if traders are in a meeting or in groups they usually bring lots of drinks to their occasions and some people learnt drinking from there. (40 year old trader from Aguleri

This view is in line with Wangeci's (2011) work on Patterns and effects of women alcohol consumption on family cohesiveness, 47.4% of her respondents revealed that they take alcohol as way to meet people or be more comfortable with others, 60.9% find it hard to resist if someone resist if someone offered or brought them a drink. This help further disclose how peers or friends influence people behavior. The views expressed by these respondents reflects the dynamic nature of humans, however if a larger proportion of the respondents can make reference to husband or partner influence it goes a long way to either remind us of male domination which can be attributed to patriarchal influence in the research location.

Research Objective 2: Which groups of women are more inclined to take alcohol?



Table 3; Group of women that are more inclined to take alcohol

Variables	Frequency	Percent (%)
Uneducated women	195	52.3
Highly Educated women	49	13.1
Women leaders and politicians	84	22.5
Unmarried women of reproductive age	41	11.0
Total	369	98.9
No response	4	1.1
Total	373	100.0

The quantitative data revealed that being educated does not influence the tendency towards drinking as a larger proportion 52.3% of the respondents posited that uneducated women are more inclined to take alcohol. This view however contradicts the reports provided by the Organisation for Economic Cooperation and Development (2015) that educated women are more likely to be hazardous drinkers. In the current study 13.1% said the highly educated women drink more. 22.5% said women leaders drink more, while 11.0% of the respondents opined that unmarried women of reproductive age drink more. Participants in the qualitative study however expressed varied opinions: Participants believe that there are no categories of women more inclined to drinking. Some of them believe that traders drink more, while others posited that the educated working class drink more. One of the respondents said "There are no categories of women more inclined to alcohol, anybody can drink, whether you are rich or poor, working or housewives." (38 year old businesswoman in Onitsha)

However one of the respondents expressed a different view saying;

Most women who drink are not very educated, they are traders and people from average families, because they are psychologically insecure, some of them have this notion that drinking will make them to "belong" it now invariably impact on others to drink. For instance, if you go to the market and share soft drinks and alcohol, you will find out that those who will struggle to take alcohol will be higher, I have witnessed it where I was making my hair, a woman was celebrating childbirth, brought malts and alcohols, you need to see the way mothers contend to drink alcohol. Then among the educated ones, those women who are above 50 years and still want to maintain their shape do take dry gins because they believe it will help to burn fats.(30 year old teacher in Onitsha)



Research Objective 3: Motives that Stimulate Alcohol Consumption among Mothers of Reproductive Age, (both Psychological factors and economic factors)

Table 4: Motives that Stimulate Alcohol Consumption among Mothers of Reproductive Age

Frequency	Percent (%)	
116	31.1	
68	18.2	
95	25.5	
93	24.9	
372	99.7	
373	100.0	
	116 68 95 93 372	

Field Survey, 2019

Different motives for drinking alcohol was also discovered as respondents opined that they drink for sexual stimulation and performance as 31.6% indicated, 18.2% said they take alcohol for sleep inducement, 25.5% have a belief that alcohol act as stress antidote, while 24.9% drink alcohol because they believe it is a source of energy. The qualitative data shed more light into different motives for consuming alcohol as respondents disclosed that they drink locally made gins because of the belief that it can burn fats. Participants also argued that pregnancy pushes them to desire what was not part of their daily routine and alcohol is one of those things they desire. They also disclose that during pregnancy, because of the belief that it can make the baby smaller to aid delivery and after delivery. Participants also argued that it is what the baby desires that they give it, revealing that during pregnancy the baby talks to them.

One of the respondents revealed thus:

Some women believed that it is what their baby requires from them, that they take, there are women who don't drink at all but when they become pregnant, they will start taking alcohol, when they put to bed some of them will stop drinking while others may not stop. Women drink palm wine to produce bresatmilk (38 year old businesswoman in Onitsha)

Another respondent supported this view saying

It is true, there are some women whose pregnancy situation pushes to drink, some other women drink locally made gins(Kaikai) during pregnancy because of the believe that it can make the baby smaller to aid delivery." (40 year old trader in Aguleri)

Another IDI Participant further revealed that "women drink locally made distilled spirits (Kaikai) because of the belief that it can help reduce fats or



slim them down". Another respondent a (35 year old trader in Awka) reaffirmed this view saying "Personally I drink local herbal products because I believe it will help burn fats you can see that am chubby"

Meurk, Brown, Adams, and Jayne,(2014) conducted a focus group discussion on factors influencing women's decision to drink alcohol during pregnancy in Australia, their respondents admits drinking alcohol during pregnancy, they however expressed different motivations for drinking during pregnancy revealing that women generally described drinking small amounts of alcohol during pregnancy as being a low risk activity and talked about the importance of alcohol to their social lives as a reason for continuing to drink or finding abstinence as a burden. From the current study, it was also revealed that women/mothers take heavy alcoholic drinks because it can aid in abortion. Respondents also reveal that they take alcohol after putting to bed because of the belief that it can wash away blood clot left in the womb.

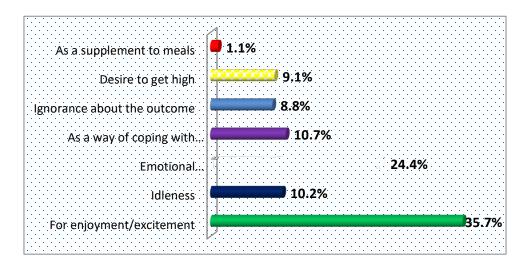


Fig. 1: Psychological factors influencing mothers to consume alcohol more.

Psychological factors indicates that 35.7% of the respondents consume alcohol for an information when they are availed. The qualitative data also supports this

for enjoyment or when they are excited. The qualitative data also supports this view, when participants revealed they drink during occasions and events to express gladness. One of the participants in the interview session revealed saying:

I drink whenever am happy or feel like enjoying myself, I also drink if am sad to forget my sorrows, sometimes I just feel like drinking." Another respondent added, "Some women drink with their partners just to be high, some of them don't have any reason they just drink



Adeyiga et al (2014) supports this opinion, they revealed that women drink during events, occasions to express happiness. The research also revealed that 24.4% drink because they are frustrated, this view is in line with Wangeci's view as respondents 41.2% of the respondents revealed that they consume alcohol when they could not afford something they are in need. 10,7% % said it for them a way of coping with mental stress Wangeci's view further revealed that women tend to consume alcohol, when under physiological stress, fatigue restless sleepless and while experiencing physical pain. From this study, 9.1% of the mothers who responded said they take alcohol to get high, 8.8% while 1.1% posited that they drink as supplement to meals. From the qualitative data, responds stressed that heartbreak and emotional trauma impacts on them to drink, some other revealed that they drink to just get high. The qualitative data supports this view when respondents said" That thing is heartbreak sometimes any married woman you see drinking to the extent of making it habit is caused by emotional trauma.".(38 year old trader in Nnewi). Another respondent agreed that heartbreak can make a woman drink, she however argued that

Heartbreak can only make you to start drinking if you do drink before, it's somebody who drinks that heartbreak can push to drink in excess, like me that don't drink emotional trauma cannot push me to drink. Heartbreak can frustrate you to do some other things not only drinking. Some of those women use alcohol to flush away a forming pregnancy that they don't want.(30 year old teacher in Onitsha)

The different perspectives is a reminder of the complex nature of man personal idiosyncrasies, how they influence motivations towards an action.

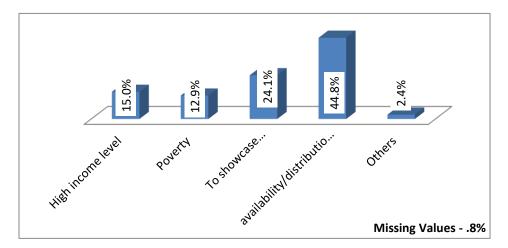


Fig. 4: Economic factors influencing alcohol consumption

The quantitative data clearly indicates that majority of the respondents believe that women drink because of availability/distribution of alcoholic drink, as 44.8% opined, this is followed by 24.1% who said women drink to showcase



wealth/affluence, another 15.0% posited that high income level influence women to drink, 12.9% said poverty influence mothers to drink more. About 2.4% went other factors. Respondents from the interview session raised different economic factors influencing mothers to drink. Participants raised different economic factors influencing mothers to drink, one of the respondents (38 year old trader in Onitsha) argued that

Poverty makes people to drink, poor people that are suffering sometimes will tell you "let me enjoy myself now that am alive" they will go to beer parlour order for drinks and meat, when they finish eating and drinking they will just be going home, but you see some of these rich people can be very stingy and not willing to spend their money.

Another interviewee (29 year old teacher in Awka)

High income makes people to drink, is it not if you have money that you will drink?"Our perception and understanding of social live can be influenced by our economic status, still the meaning we give those social lives is a clear indication of the dynamic nature of human being, The meanings and definitions we give to social actions differ not minding the economic situations.

Conclusion

The social and cultural significance of alcohol in social existence of man impacts on mothers identity and desire to continuously take alcohol, the factors and motivations reflects social and individualistic dimension of man and mothers in particular. The central theme behind this study was to examine factors influencing alcohol consumption among mothers of reproductive age in Anambra State, South Eastern Nigeria. The study became necessary because of reported increase in the rate of heavy alcohol consumption among women of reproductive age and the fact that most of the studies on female alcohol intake are Western and European based with few of such studies conducted in Africa and Nigeria. Factors influencing alcohol consumption varies across cultures and societies, the need to bridge the gap created by the dearth of studies and literatures while considering the social and cultural factors of the study location became of paramount importance. The study has yielded important findings. The findings of the study have added to our understanding of the factors influencing alcohol consumption among mothers of reproductive age it may however prompt other research into the cultural and traditional factors impacting on alcohol intake. The study obviously has clear implications for policy and future research.



Recommendations

- The need for the government and non-governmental organizations to sensitize the public against heavy alcohol consumption most especially among adolescent girls, unmarried women and mothers of reproductive age.
- Production, distribution, sale and consumption of alcohol should be monitored and regulated effectively especially during festivals or celebrations,
- Government and Non-governmental Organisations can partner to provide alternative means of handling emotional stress and other psycho-social issues, such as providing accessible medical psychotherapeutic service.

References

Adekeye, O., A., Adeusi S.O., Chenube, O. O., Ahmadu F.O., & Sholarin M.A (2015). Assessment of Alcohol and Substance Use among Undergraduates in Selected Private Universities in Southwest Nigeria IORS *Journal of Humanities and social Sciences*. (IOSR-JHSS) 20(3), 1-7.

Baker S., (2017) Patterns and Perception of Maternal Alcohol Use Among Mothers With Pre-school aged Children: A Qualitative Exploration of Focus Group Data. *Journal of addiction Research and Therapy*. V8. Issue 5 www. Semantic scholar.org.

Bennet, L.A, Carlos C.M, Chandrenshekar CR & Gureje O. (1998) Alcoholic Beverage Consumption in India, Mexico, and Nigeria, A cross cultural comparison. *Journal of Alcohol Health and Research World*. 22, No, 4.

Cheah, Y.,K and Rasiah,R.(2017) Analysis of the Determinants of Alcohol Consumption among Adult Males in Malaysia. *Journal of Health Management*. https:journals.sagepub.com.

Dimelu M.U., Agbo C. &Igbokwe E.M. (2011)Patterns of Alcohol Consumption and it Effects in Selected Rural Communities of Enugu State. *Asian Journal of Agricultural and Rural Development* 1(2) 67-79) Retrieved www.ageconsearch.umn.edu.

Dumbili E.W (2013) Changing patterns of Alcohol consumption in Nigeria. An Exploration of Responsible factors and consequences www.medicalsociologyonline.org.



Dumbili E.W. (2015) *What a Man Can Do a Woman Can Do Better*. Gendered Alcohol Consumption and (De) Construction of Social Identity Among Young Nigerians. Retrieved;http//bmcpublichealth.biomedcentral.com

Elek E., Shelly L.H., Claudia M.S., Marjone, M Marykate W., Darra Dang E., & Mitchel B (2013) Women's Knowledge Views and Experiences Regarding Alcohol Use and Pregnancies: *Am J Health Educ.* 2013; 44(4): 177–190. Opportunites Improve Health Messages Retrieved www.landfonline.com.

Haralambos M., Holborn M. & Heald R. (2008) *Sociology Themes and Perspectives* (Seventh Edition) published by Harper Collins Publishers 77 Fulliam Palace road Hammer smith London.

Havard Health Publications (2014) *Alcohol Abuse Among Women; the hidden Risk*. www.daily Mail.co.Uk. Health report retrieved www.Havardhealth.edu/addiction

Ikuesan B.A. (1994) Drinking Problems and The Position of Women in Nigeria *Journal of Addiction SSA (Society for the Study of Addiction.* Retrieved from www.onlinelibrary. Wiley.com

Martinez P; Roislien J. Nirmala N & Clause T (2011) *Alcohol Abstinence and Drinking Among African Women*. Data from W.H.O.Retrievedhttps://bmcpublichealth.biomedcentral.com

Mendoza, M.R., Medina Mora., Villatoro J. & Durand A (2005) Alcohol consumption Among Mexican Women Implications in a Syncretic Culture. *Alcohol Gender and Drinking problem (perspectives from low and Middle income countries)* Isidore S, Obot and Room (Ed) WHO Department of Mental Health and Substance Abuse. Geneva-Retrieved www.who.Int/substance public publications.

Obot, I. S. (2007). Nigeria: Alcohol and Society *Today*. Addiction,

Odejide O.A., (2006) Alcohol Policies in Africa. *African Journal of Drug and Alcohol Studies*.5-27-39.www.ResearchGate.net

Oshodin, O.G. (1995) Nigeria. In: Heath, D.B., ed. *International Handbook on Alcohol and Culture*. Westport, CT: Greenwood Press,.pp.213–223.

Ritzer G. and Stepniskey J. (2014) *Sociological Theory* (Ninth Edition) Printed in Singapore McGraw Hill Education.

Skagerstrom J. (2015) *Alcohol Consumption During Pregnancy Prevalence Predictors and Prevention*. Division of Community Medicine Department of Medical and Health Sciences Linkoping University Retrieved www.liu.diva.org.

Wangeci M.T (2011) Patterns and Effects of Women's Alcohol Consumption on Family Cohesiveness in Kirinyaga Country Kenya aged women; Retrieved; www.ir-library.ku.ac.ke>handle.

WHO (2014) *Global Status report on Alcohol* World Health Organization, Department of Mental Health and Substance Abuse (2014) WHO library calaquing in Publication Data.

WHO (2018) *Global Status report on Alcohol and Health*. ISBN 978-92-4 156563-9.www.who.int/about/licensing