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Examining the Relationship Between Substance Abuse and Social Wellbeing of Women in Likki Slum, Laikipia County, Kenya

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Abstract: Substance addiction has adverse effects on the well-being of women. Evidently, it can also lead to the failure to meet one's obligations in the workplace, educational institution, or household. It adversely affects social engagement and leisure pursuits, leading individuals to disengage from family relationships and personal interests. This study examined the relationship between substance abuse and the social wellbeing of women in Likii slum, Laikipia County. The objective of this study was to assess the effects of substance, abuse on the social wellbeing of women in Likki slum, Laikipia County. This study will be guided by theories Social Learning theory by Albert Bandura (1997) and Feminist theory by Mary Wollstonecraft (1759). A mixed-methods approach utilizing in-depth interviews and standardized questionnaires was employed to gather data from 360 women. The study indicates that substance abuse adversely affects women's social welfare by undermining familial relationships, increasing economic instability, diminishing community engagement, and eventually threatening mental health. This study used the mixed-methods study on substance abuse among 360 women in Likii Slum. Prevalence was high at 85%, with alcohol (92%) as the most common substance, followed by inhalants, marijuana, tobacco, and prescription drugs. Logistic regression showed no significant link between substance use and demographic factors, indicating the role of broader socio-economic and psychosocial determinants. Key contributing factors included partner abuse, peer pressure, post-traumatic stress, poverty, accessibility of substances, and lack of social support. Substance abuse was associated with reduced income, domestic conflict, social isolation, poor living conditions, and mental health challenges. These findings underscore the essential requirement for community-oriented therapies, educational programs, and strengthened local support systems to facilitate the healing and social reintegration of affected women.

Keywords: Wellbeing, Women, Substance Abuse, Social Life Effects, Withdrawal Effects

1.1 Introduction

In many contexts, women who abused substances experienced heightened social isolation, disrupted family dynamics, and strained interpersonal relationships. Cultural expectations placed on women—particularly as mothers, spouses, and caregivers often resulted in disproportionate social consequences when women engaged in substance misuse. This led to a cycle of social deterioration, affecting their

roles within the family and the broader community. Substance abuse has become a widespread global concern, with substantial implications for individuals and communities. According to the United Nations Office on Drugs and Crime (UNODC) World Drug Report (2020), an estimated 270 million individuals aged 16 to 60 had used substances at least once in their lifetime, with approximately 30 million experiencing substance-related health complications. Social well-being is the ability to form meaningful relationships, engage in communal life and access vital social resources. For women, this includes nurturing families, sustaining stable households, economic activities, and communal cohesiveness. Volkow & Blanco, (2023) highlight that in deprived areas like urban slums, substance abuse has endangered this balance. Substance-abusing women suffer family breakdown, community isolation, stigma, and loneliness. Due to gendered expectations of caregiving and domestic duties, substance misuse by women is more severe in many civilizations. In deprived areas like urban slums, substance misuse has endangered this balance (NACADA, 2022).

Substance usage makes women look depraved, the society label them unfit moms and wives, and isolate them from society. This cycle causes societal marginalization, family conflict, and declining well-being (Beckerleg, 2020; Webb & Skanner, 2022). Substance abuse impacts millions worldwide. Over 270 million individuals used drugs in 2020, with 35 million needing treatment, according to the UNODC. Substance addiction research has traditionally focused on men, yet women's vulnerabilities, coping methods, and societal repercussions differ. Women suffer greater social stigma, job uncertainty, and custody loss for substance misuse (Njenga, 2023; Mitchell, 2021).

In several European countries, notably Portugal, women with chronic substance use issues were found to face long-term social disadvantages, including homelessness, unemployment, and involvement in sex work (Buelga et al. 2020). These consequences harmed the women and negatively affected the broader community by limiting the women's capacity to contribute meaningfully to social and community development (Nyambura, 2019).

In Lesotho, alcohol abuse among women also presented significant social challenges. According to the Southern African Alcohol Policy Alliance (2021), alcohol use was the most common form of substance abuse among women. Married women who consumed alcohol frequently faced social stigma, marital separation, and exclusion from community life. These consequences were exacerbated by deep-rooted patriarchal norms that viewed women as subordinate and financially dependent on their husbands. As a result, alcohol abuse undermined both their physical health and social standing, often threatening the stability of their families (Kattimani et al. 2021).

Kenya's substance misuse problem is growing. Substance abuse affects 1 in 16 women (949,000), according to NACADA (2022). Slums, where poverty, domestic violence, and insufficient services foster substance abuse, are most affected. Substance addiction in such context's damages women's physical and mental health and impairs their social, familial, and economic functioning. In slums like Likii in Laikipia County, gender inequality, poverty, and substance misuse are especially harmful.

Education, economic prospects, and rehabilitation are few for these women. Substance use becomes a coping technique and a trap, intensifying social marginalization and eroding important social institutions (Brent et al.2022). As women lose social support, confront stigma, and experience family breakup, their

social welfare plummets (Obeng, 2021; Njenga, 2023). Additionally, these women's specific needs are not adequately met by rehabilitation services and gender-sensitive approaches.

1.2 Statement of the Problem

Substance addiction among women in Likii Slum, Laikipia County, Kenya, has become a pressing public health and social issue with far-reaching consequences. Many women in this community face socioeconomic hardships, limited educational opportunities, unemployment, and experiences of domestic violence — all of which contribute to their vulnerability to substance use and dependency. These conditions have led to significant social consequences, including weakened interpersonal relationships, social exclusion, economic instability, and deteriorating mental health. In Likii Slum, the effects of addiction among women manifest in strained family and community relationships, reduced participation in social and economic life, and increased exposure to stigma and discrimination. Despite the visible social implications, support systems — including rehabilitation services and communitybased interventions — remain limited and poorly targeted to address the specific needs of women in low-income informal settlements. The core issue lies not only in the rising prevalence of substance abuse among women in Likii Slum but also in the lack of contextualized understanding and response to the social dimensions of this problem. Existing literature has predominantly focused on urban centers, with little attention paid to informal settlements like Likii slum, where poverty, social marginalization, and gender disparities converge. Moreover, women are often portrayed in narrow roles, such as mothers or caregivers, yet they represent diverse identities and experiences that deserve equal consideration in research and intervention efforts. The independent variable in this study is substance addiction, which directly influences the dependent variable — social well-being. There is a need to explore how substance abuse affects women's social lives, including their access to support systems, sense of belonging, safety, and agency. This study aims to fill a significant gap by investigating the relationship between substance addiction and the social well-being of women in Likii Slum, while also identifying the key social and structural factors contributing to substance use. Understanding these dynamics is essential to inform interventions that are inclusive, gender-sensitive, and responsive to the lived realities of women in marginalized communities.

1.3 Study Objective

The objective of this study was to investigate the relationship between substance abuse and the social well-being of women in Likii slum, Laikipia County, Kenya

1.4 Significance of the Study

The study results may be used to streamline the strategies used by service providers in the rehabilitation of substance abuse. They can incorporate the feedback into their services so that there is a continual effort to enhance the social well-being of women. The study results may also open a discourse on how different government bodies, such as NACADA and the Ministry of Health, and social workers can collaborate to enhance the social well-being of women, as well as tackle substance abuse amongst women. The study is expected to contribute to the field of information in the sociology sector for future research and studies. This study will further contribute to the human biology of knowledge by filling a gap in the literature, particularly in examining substance abuse among women, and providing a benchmark for future studies in similar contexts. This research offers a detailed case study and a model for scholars researching substance abuse and Well-being, the social Well-Being of women, informing their methodologies and analytical frameworks.

1.5 Literature review

In this section, theoretical framework and empirical literature on the relationship between substance abuse and the social well-being of women will be presented.

1.5.1 Theoretical Framework

This study was guided by the Feminist Theory and social Learning Theory to analyze the effect of substance addiction among women in Likii Slum. Feminist Theory elucidates the ways in which patriarchal frameworks, gender disparities, and institutional marginalization heighten women's vulnerability to substance use and exacerbate its societal ramifications. In slum settings, substance misuse frequently exacerbates stigma, undermines family stability, and restricts women's access to healthcare, economic opportunities, and social assistance. Social Learning Theory elucidates the acquisition and perpetuation of substance use through observation, peer influence, and reinforcement. In settings where substance use is acceptable, women may engage in these activities as coping strategies for poverty, stress, and trauma, thereby elevating the risk of addiction and relapse. Thus, the intersection of structural gendered inequities and acquired behaviors in influencing women's social health. The approach stresses that interventions to substance misuse must address both structural impediments and community-level dynamics.

1.5.2 Empirical review

Effects of Substance Abuse on Women

Throughout history, the use of substances by women has consistently been disapproved of. Criteria for acceptability dated back to the ancient laws like the Manusmriti in India, which explicitly specifies that a woman who consumes alcohol may be abandoned at any moment. Globally, the issue of alcohol consumption among women has garnered the most extensive focus. Despite the lack of sufficient documentation, the frequency of females using illegal drugs has become a widespread phenomenon, thereby necessitating the need for autonomous study. An overarching motif that unifies all instances of substance use among women in every country is the profound social disapproval experienced by these women, together with the victimization of women who use drugs (Naseera, Kuruvilla & Moly, 2022). The desktop survey conducted by Mokutu (2020) reveals that social disorder, such as substance misuse negatively affects people's ability to think clearly and interact with others, resulting in impaired decision-making abilities. Furthermore, this imposes further constraints on future life prospects, leading to reliance and disturbed social interactions that perpetuate poverty and impact their social welfare (Malik et al, 2023). The repercussions extend beyond the individual substance abuser who is deeply reliant and addicted to these illegal narcotics and alcohol.

In 2019, Hunter carried out a study to look into the impact of substance abuse on an individual within a specific area. The research findings indicate that substance misuse is a contributing factor to mental disease, which in turn leads to the emergence of unproductive individuals in society. The use of hazardous substances by women is associated with the experience of loneliness, despair, and alienation. Research suggests that social disorders, such as substance abuse, modify individuals' cognitive processes and social abilities, resulting in impaired decision-making. This, in turn, restricts future prospects and leads to dependency and disrupted social interactions, further perpetuating poverty and indirectly exacerbating psychological instability. Kenakin (2019) asserts that persistent use of these hallucinogenic drugs causes both physical and psychological addiction, which in turn impairs brain function and leads

to hallucinations and delusions. This renders the user incapable of establishing or maintaining social connections. Moreover, Thapar (2022) asserts that the persistent impact of these drugs leads users to engage in criminal or violent conduct and suicide. Sarkar and Katimani (2019) argue that social participation is essential for individual well-being since it facilitates social involvement with friends, family and community events. It has been documented that a sizable proportion of women who are addicted to drugs experience unhealthy interactions with their family. A considerable number of individuals expressed instances of confrontations, disagreements, lack of involvement in family events, and times of less communication with their relatives. Furthermore, studies have indicated that substance misuse is linked to a significant strain on members of the family. The dependence of drugs on a single family member can impose a weight on the entire family household, leading to ongoing emotional strain that disrupts the familial relationships. The strain placed on family connections had an adverse impact on the support systems of the participants, whereby in times of stress, families withdrew their material and emotional support.

In South Africa, Peltzer, Phaswana (2019) reported comparable results, indicating that unsafe sexual activity led to the transmission of Sexually Transmitted Diseases (STIs), which accounted for 31.5% of the total life years adjusted for disabilities in the general population. A study looking at the relationship between high-risk sexual behaviours, substance abuse, and STDs in women in Northern Tanzania found that alcohol abuse was connected with STIs, mainly because it was linked to having several sexual partners. According to National Agency for the Control of AIDS (NACA) studies conducted in Nigeria, women under the influence of drugs have about seven times higher rates of HIV prevalence than men in West Africa (WHO ,2019).

According to the National Institute on Drug Abuse (NIDA) 2019 report, females are inclined to encounter adverse health consequences of addiction in distinct ways compared to men, mostly because of biological factors like hormones, menstruation, pregnancy, menopause, and metabolism. The phenomenon of 'telescoping' elucidates the mechanisms by which metabolic disparities in women contribute to an expedited advancement from the commencement of substance use to the development of dependency. It is crucial to acknowledge that the declining health of women has a negative impact on their capacity to carry out many of their everyday activities, resulting in a diminished quality of life (Bold & Epstein, 2019). A scoping assessment undertaken by Mashingaidze (2023) discovered in Zimbabwe that, while under the influence of alcohol, 132 men and 92 women receiving STI clinic treatments in Cape Town, South Africa, did not use safe sex practices. The World Health Organisation (2019) asserts that heterosexual interactions significantly contribute to the transmission of HIV, which greatly impacts families. This broad generalization does not specifically target women and is applicable to all genders.

Hussein (2023) undertook a correlational study in the Korogocho slums of Kenya to examine the impact of women's drinking on their overall welfare. The data collected from 69 respondents with alcoholism and 36 respondents without alcoholism provided indicative evidence of the increasing prevalence of women engaging in alcohol and substance abuse. A significant number of participants who were avid consumers of illegal beverages had a tense connection with their close relatives, particularly their husbands. The majority of respondents had separated from their spouses and many had visible physical injuries, including one respondent who was on crutches with a broken arm and leg due to sexual assault. A significant proportion of the alcoholic participants freely acknowledged their lack of amicable

relationships with their partners or spouses, stating that an argument, whether physical or verbal, occurred on a daily basis. Among the concerns they raised were the improper use of family resources to obtain alcohol or the disregard for their responsibilities as parents. The World Health Organisation (WHO) status report on alcohol use 2023 indicates that there is statistical data indicating that excessive alcohol consumption can heighten the incidence of domestic violence within marital relationships. Furthermore, the study revealed that these women shoulder a greater strain on their domestic resources (WHO 2023).

A study was undertaken by Muiruri (2020) in Kirinyaga County to investigate the impact of substance misuse, particularly alcohol consumption, on women. In the study, which used multistage cluster sampling, 175 respondents were included. The researcher determined that the livelihoods of the women had been significantly impacted as a consequence. The participants highlighted the influence of alcohol and substance use disorders on the transmission of sexually transmitted diseases (STDs). An association was found between alcohol intake in heterosexual women and reduced condom use as well as other highrisk sexual activities, therefore increasing the chance of infection. Furthermore, although many women engage in sexual activity to support their alcohol and drug consumption patterns, research conducted among sex workers indicate that a significant number of female sex workers consume alcohol and drugs prior to engaging in sexual service. Rawat and Petzer (2021) support these results by asserting that women are more prone to participating in high-risk sexual behaviors while they are under the influence of drugs. Engagement in risky behavior is linked to the failure to use condoms and an increase in the quantity of romantic partners, therefore raising the likelihood of pregnancy and the acquisition of sexually transmitted diseases (STIs).

According to Rawat and Spenzer (2021), women's continued drug use during pregnancy is perceived as an inadequate coping mechanism for their daily socio-political challenges, which include extreme poverty, high rates of crime, and higher rates of morbidity and mortality from disease and physical abuse. Moreover, Brown (2021) claims that continued substance use during pregnancy may raise the risk of early birth, low birth weight, stunted growth, developmental delays, foetal alcohol syndrome (FAS), and a variety of physical, emotional, behavioural, and cognitive problems in the offspring. It may also affect one's responsibilities as a parent, spouse, or partner, as well as a contributor to the running of the home. According to research, there is likely to be an increased need to care for the mother of a child born with a physical or mental disease.

The literature so demonstrates that substance addiction has adverse consequences on the well-being of women. Evidently, it can also lead to a failure to meet one's role obligations in the workplace, educational institution, or household. It adversely affects social engagement and leisure pursuits, leading individuals to disengage from family relationships and personal interests. The daily tasks for those with substance abuse disorder may center on the consumption of illegal drugs, leading to an imbalance in their occupation, inadequate cleanliness, and a decline in their physical appearance, ultimately resulting in diminished self-esteem. Primary functional tasks of everyday life, such as shopping, food preparation, home upkeep, and caring for others, are ignored. Maternal parents who engage in substance misuse are deprived of their capability to interact with their young ones, since they are perceived to be unsuitable to provide care for their kids (WHO 2023). The primary aim of this investigation is to look at the areas of vulnerability among women in relation to their encounters with substance abuse.

1.6 Methodology

Mixed-methods approach allowed the study to gather and evaluate both qualitative and quantitative data at the same time. 360 women between the ages of 15 and 65 were selected as a cohort using stratified random sampling from various Likki Slum locations. Quantitative information was gathered using standardized questionnaires that addressed social well-being topics such including psychological health, community involvement, family relationships, and economic sources helped to collect quantitative data (Creswell et al.2020). Semi-structured interviews with women affected by substance use allowed qualitative data to be gathered looking at their personal experiences. While qualitative comments were categorized and subjected to thematic analysis to provide a complete contextual awareness of the repercussions of substance use, quantitative data was investigated using statistical techniques with the help of SPSS version 26.

1.7 Findings and Discussion

Response Rate

Questionnaire Return Rate

Table 1: Response rate

Groups	Members in the Sampled	Questionnaires Returned.	Not Returned	% Respons
24	Groups.	360	24	94%
24	384	300	24	94%

Source: Field data, 2025

The above table shows the questionnaire response rates which was 94%. Additionally, 12 key informant interviews were conducted with NACADA officers, healthcare workers, and ward administrators. In table 1, in this study out of the total 384 distributed questionnaires, 360 were completed and returned, representing a return rate of 94%. This high rate of participation among the target group—women residing in Likii Slum, Laikipia County, who are directly affected by substance use—enhances the robustness of our dataset, thereby strengthening the reliability and validity of our findings. The non-response rate was 6%, signifying a minimal percentage of participants who failed to react.

Demographic Characteristics

Data was gathered under the following demographics of age, employment &income, marital status, household structure, education level. The findings for the demographic characteristics are tabulated in Table 2.

Table 2: Demographic Characteristics of participation

Predictor	Category	Odds (OR)	Ratio 95% Interval	Confidence p-value
Age (ref = $26-34$)	26–34 (Reference)	(Ref)	_	_
	15–25	1.86	0.86-4.03	0.116
	35–44	1.44	0.68 - 3.03	0.339
	45–65	1.64	0.59-4.52	0.341
	65+	3.72	0.46-30.31	0.220

Predictor	Category	Odds (OR)	Ratio 95% C Interval	confidence p-value
Education (ref = Vocational)	Vocational (Reference)	(Ref)	_	_
	None	3.69	0.77 - 17.73	0.103
	Primary	2.16	0.52 - 8.97	0.288
	S2econdary	1.99	0.48 - 8.33	0.345
	Tertiary	1.59	0.37 - 6.82	0.535
Marital Status (ref = Married)	Married (Reference)	(Ref)	_	_
	Unmarried	1.28	0.40-4.13	0.679
	Separated	2.07	0.68-6.31	0.203
	Divorced	2.33	0.54-10.06	0.256
	Bereaved	1.53	0.61 - 3.86	0.367
Employment Status (ref = Formally Employed)	Formally Emp (Reference)	oloyed (Ref)	_	_
	Other	2.57	0.95 - 6.93	0.062
	Self-employed	2.88	0.87 - 9.47	0.083
	Unemployed	2.63	0.95-7.27	0.063

Source: Field data, 2025

As seen in the table above there is no statistically significant association between age, education, marital status, or employment status and substance use among the 360 women surveyed in Likii Slum. Across all models, variance explained was minimal (Pseudo $R^2 \le 1.3\%$), and p-values exceeded 0.05. Although some groups—such as women aged 15–25 and 65+, those without formal education, separated/divorced women, and those self-employed or unemployed—showed higher odds of substance use compared to reference categories, these differences were not statistically significant. The findings suggest that substance use in this population is likely driven by broader socio-economic and psychosocial factors rather than demographic characteristics alone.

Thematic Findings

To assess the effects of substance abuse among women in Likii Slum, Laikipia County, Kenya.

One of the objectives of this study was to find out the effects of substance abuse to the social wellbeing of women in Likii slum, Laikipia County. The findings were as follows,

Social Life Effect

The majority of respondents (46%, n=139) reported that their social lives had become worse since they began using substances, highlighting the isolating and stigmatizing nature of substance dependency. Another 30% (n=92) felt that their social interactions remained unchanged, suggesting either long-standing social disconnection or normalization of substance use within their circles. Interestingly, 24% (n=74) perceived their social life had improved, likely due to increased socialization in peer groups who also use substances or temporary feelings of relief and connection. These findings underscore the diverse social effects of substance use, ranging from deepened isolation to superficial bonding, emphasizing the importance of restoring meaningful, stigma-free social support systems in recovery efforts.

Withdrawal and Medical problems

A substantial 67% (n=205) of women who abuse substances reported experiencing withdrawal symptoms, indicating a high level of physiological dependence. Additionally, 69% (n=209) disclosed having suffered from medical problems related to substance use, with the most common being depression and suicidal thoughts (25%, n=53), followed by headaches and mental distress (22%, n=45), stomach ulcers and respiratory issues (20%, n=41), liver problems and chronic fatigue (19%, n=39), and anxiety and sleep disorders (15%, n=31). These findings paint a troubling picture of the physical and psychological toll that substance abuse takes on women's health. The overlap between emotional distress and physical deterioration highlights the need for holistic healthcare approaches that address both mental and physical health in substance rehabilitation programs. Lee et al. (2020) contend that although medical services are accessible in industrialized regions like Canada, numerous socio-economic and identityrelated factors—such as low income, immigration status, mental health challenges, or motherhood—can hinder women's access to treatment. These issues reflect the circumstances of Likii Slum, where several women endure poverty and are likely subjected to multiple, intersecting vulnerabilities. Despite the study being conducted in a low-resource environment, the identified patterns mirror analogous structural and cultural exclusions, therefore validating the broader applicability of Lee et al.'s findings in a distinct geographical and socio-economic context.

Substance abuse has significantly disrupted the social well-being of most women, with 72% (n=219) reporting that it has led to lower income levels, and 66% (n=201) acknowledging conflict at home. A further 70% (n=213) experienced social isolation, while 69% (n=210) reported poor living standards, and 70% (n=214) felt a lack of support from their social networks. These findings paint a clear picture of the widespread social and economic consequences of substance abuse. Additionally, other selfreported effects include serious personal crises such as losing custody of children (25%, n=75), experiencing gender-based violence (21%, n=64), being completely isolated by family (21%, n=64), and being arrested for petty crimes (17%, n=52). The most alarming, however, is that 16% (n=48) reported suffering from severe depression. Insights from key informant interviews revealed similar patterns, with common themes including neglect of family and children, deterioration of mental health (depression, anxiety), increased poverty, and social stigma. Frequently mentioned keywords—neglect, poverty, mental distress, and isolation—capture the breadth of the effect substance abuse has on women's lives. Likii data confirms Brown's (2021) hypothesis that substance addiction impairs women's family and domestic functions. High rates of spousal dispute (66%), child custody loss (25%), and complete family rejection (21%) illustrate that substance use undermines parenting, intimate relationships, and the social safety net women rely on. This confirms the WHO (2023) findings that maternal substance use impacts caregiving and future generations.

1.8 Conclusion

Results show that substance use affects individual health, family relationships, economic stability, and mental health. Rehabilitation programs need integrated social support, protection services, and trauma-informed care. The study highlights gender-sensitive treatment disparities. Despite the emergence of best practice models for women worldwide, Noroozi and Farhoudian (2019) note that most programs are still designed for men. This mismatch causes treatment systems to ignore women's social, emotional, and caregiving concerns. The findings confirm this difference. Many women in Likii slum endure social rejection, domestic strife, and legal consequences with minimal help, proving that current options are

insufficient. The lack of institutional action on these crucial concerns reveals systematic gender neglect in health and social policy, according to international literature.

1.9 Recommendations

The findings prompt a number of recommendations, Women-focused community-based counseling and rehabilitation institutions should start in unauthorized communities. These facilities provide comprehensive care, including trauma-informed therapy and child care. Second, jobs, microfinance, and vocational training should enable women to reduce their financial dependence, which fosters drug use. Third, public awareness efforts must begin to reduce stigma and educate the public about drug use as a social and medical issue. Government and non-governmental groups should work together to develop social protection programs that address the root causes of substance abuse in underprivileged women.

References

- Akanle, O., Ademuson, A. O., & Shittu, O. S. (2020). Scope and limitation of study in social research. Contemporary issues in social research, 105, 114.
- Alcohol and Drug Foundation. (2019). Women and the use of alcohol and other drugs
- Ambekar A, Agrawal A, Rao R, Mishra AK, Khandelwal SK. (2019). Magnitude of Substance Use in India. New Delhi: Ministry of Social Justice and Empowerment, Government of India; Substance Use in India.
- Buelga, S., Ravenna, M., Musitu, G., & Lila, M. (2020). Epidemiology and psychosocial risk factors associated with adolescent drug consumption. In Handbook of adolescent development (pp. 337-364). Psychology Press.
- Harrison, R. L., Reilly, T. M., & Creswell, J. W. (2020). Methodological rigor in mixed methods: An application in management studies. Journal of mixed methods research, 14(4), 473-495.
- Mitchell, J, & Mactier, H. (2021). Accommodation outcomes for children of drug-misusing women. Arch Dis Child.
- NACADA. (2022). National Survey on the Status of Drugs and Substance Use in Kenya.
- Nyambura, M., R. (2019). Drug and Substance Abuse among the Youth in the Informal Settlements within Nairobi. *J Community Psychology*.
- Obeng, C. S., Obeng-Gyasi, B. (2021). African Young Women and Alcohol and Substance Abuse. The Palgrave Handbook of African Women's Studies. Palgrave Macmillan, Cham. https://doi.org/10.1007/978-3-030-28099-4_38
- Sarkar, S, Patra, B, & Kattimani S. (2021). Substance use disorder and the family: South African Journal of Occupational Therapy. SA Journal of Occupational Therapy an Indian perspective. https://doi.org/10.4103/0975-2870.172413
- Thapar, A., Eyre, O., Patel, V., & Brent, D. (2022). Depression in young people. *The Lancet*, 400(10352), 617-631.
- UNODC. (2019). World Drug Report. United Nations Off Drugs Crime.
- Volkow, N. D., & Blanco, C. (2023). Substance use disorders: a comprehensive update of classification, epidemiology, neurobiology, clinical aspects, treatment and prevention. *World Psychiatry*, 22(2), 203-229.
- Webb Lucy, Fox Sarah, Skårner Anette, Messas Guilherme. (2022). Women and substance use: Specific needs and experiences of use, others' use and transitions towards recovery. Frontiers in Psychiatry VOLUME 13. https://www.frontiersin.org/articles/10.3389/fpsyt.2022.1078605