



PHYSICAL, EMOTIONAL, SOCIAL AND PSYCHOLOGICAL EFFECTS OF ALCOHOL USE ON INTIMATE PARTNER VIOLENCE IN NYERI CENTRAL SUB-COUNTY, KENYA

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Abstract:

Intimate partner violence (IPV) is one of the leading gender issues that has affected women for many years, leading to serious physical, psychological, emotional, economic, and social ramifications. Intimate partner violence, as noted in this study, is a major problem not only globally but locally. Various global studies, including those conducted in Kenya, have demonstrated a strong interlinkage between alcohol use and its contribution to widespread violence against women and girls. This study sought to investigate physical, emotional social and psychological Effects of Alcohol Use on Intimate Partner Violence in Nyeri central sub-county, Kenya. The study was based on two theories: the biopsychosocial model and socio-cultural theory. This study employed a descriptive research design descriptive survey design to collect data from 110 respondents under a random sampling technique. The respondents comprised of adult males and females who were in previous or current intimate relationships. Data collection was done through questionnaires and focus group interviews. The tools were administered to 10 participants to test liability using Cronbach's alpha threshold, which scored at 0.80. The data collected was then analyzed quantitatively using SPSS version 21.0. The study's findings on the effects of alcohol use on IPV highlight a cascade of devastating consequences that extend beyond the immediate partners to impact families and communities. These effects are consistent with the long-term problems outlined in the Biopsychosocial and Sociocultural model. The study recommends the need to promote and establish accessible psychosocial support and counseling services for both individuals struggling with alcohol addiction and survivors of IPV.

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1. Introduction

According to the World Health Organization (WHO, 2021), global and regional estimations indicate that 30% of women have experienced intimate partner violence or non-partner sexual violence. World Health Organization (WHO) defines interpersonal violence as "violence that occurs between family members, intimate partners, friends, acquaintances, and strangers, and includes child maltreatment, youth violence, intimate partner violence, sexual violence and elder abuse. According to another study, men were more likely to perpetrate violence if they had low education, a history of child maltreatment, exposure to domestic violence against their mothers, harmful use of alcohol, unequal gender norms, including attitudes accepting of violence, and a sense of entitlement over women (Jewkes, 2002). Global estimates indicated that about 1 in 3 (35%) of women globally have experienced either physical and/or sexual intimate partner violence or non-partner sexual violence in their lifetime (WHO, 2021). Evidence suggests that alcohol use increases the rate at which conflicts occur within the family system." (Jewkes, 2002).

Global estimates indicated that about 1 in 3 (35%) of women globally have experienced either physical and/or sexual intimate partner violence or non-partner sexual violence in their lifetime (United Nations Women [UN Women], 2021). Evidence suggests that alcohol use increases the rate at which conflicts occur within the family system. (Jewkes, 2002). Globally, alcohol dependence was the most prevalent of the substance use disorders, with 100.4 million estimated cases (WHO, 2024). The disorders affect all facets of human life, including increased poverty, disease burden, mortality, and social disintegration, among other challenges. Chronic drinking results in liver cirrhosis, dementia, diabetes, heart failure, certain cancers and alcoholism. Alcoholism results in motor vehicle accidents, engaging in risky or unprotected sex, rape, suicide, violence, seizure, family breakdown and poor judgment.

Of all forms of gender-based violence (GBV), intimate partner violence (IPV) accounted for the most common form, which involved all physical, sexual, or psychological harms as well as controlling behaviors aggravated by a current or former partner. According to Laura *et al.* (2016), intimate partner violence (IPV) was widespread throughout much of sub-Saharan Africa, with an overall prevalence of 36%, exceeding the global average of 30%. Poverty, war and conflict, harmful cultural practices such as female genital mutilation, and crime rates contribute to the high percentage of IPV in the sub-Saharan region. More women in Africa are subjected to lifetime partner violence (45.6%) and sexual assault (11.9%) than women anywhere in the world (Gracia, 2013). "*In Sub-Saharan Africa, women showed several psychological disorders in response to intimate partner abuse, although both men and women manifest psychological symptoms in the aftermath of a physical altercation*" (Jankey, 2011). In addition, parents play multiple roles for their

children, such as being role models and primary agents of socialization for their children; however, family breakdown usually results in strong psychological, behavioral, and social effects on the immediate family members.

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In many settings, notions of masculinity are linked to frequent and heavy drinking. A review of masculinity and alcohol reported that alcohol use was associated with masculine norms, including strength, stamina, aggressiveness, competition and dominance, risk-taking, power, and self-confidence; the desire to conform to such norms was a major motivator for men's drinking. Alcohol industry marketing efforts (and product options) are often designed to appeal to certain notions of masculinity, such as strength, financial and sexual success) and increasingly femininity (being attractive, sociable, and empowered. The research emphasizes the ability to drink large quantities of alcohol and 'hold your liquor' as markers of masculinity and notes that alcohol is also used to lower inhibitions. These norms can be particularly powerful in certain social settings and elsewhere demonstrate links between increased alcohol use/harms and male-dominated institutions like fraternities, athletic teams (and events), the military, and law enforcement. At the same time, men often use alcohol to cope with shame or purposelessness related to their inability to achieve masculine ideals like providing for their family. Social norms around women's drinking vary more widely, with greater stigma attached to women's drinking in many settings. Of course, gendered norms interact with other factors: poverty, ethnicity, religion, and other context-specific norms shape drinking patterns and their consequences.

In informal settlements of Kenya, intimate partner violence (IPV) has a higher prevalence than national and global averages and is associated with increased risk of depression and alcohol use. This study examined correlations of depressive symptoms and hazardous alcohol use among IPV survivors in Nairobi's informal settlements. According to Balaji (2025), *"This cross-sectional secondary analysis of baseline data from a 2018 randomized controlled trial examined depressive symptoms and hazardous alcohol use among 352 IPV survivors in Nairobi's informal settlements. Logistic regressions examined associations between individual-level, partner-level, psychosocial (abuse recognition, self-blame), protective factors (self-efficacy and resilience), and depressive symptoms and hazardous alcohol use."*

1.1 Objective of the Study

- To investigate the physical, emotional, social, and psychological effects of alcohol use on IPV in Nyeri Central Sub-County.

2.1 Research Question

- What are the physical, emotional, social, and psychological effects of alcohol use on IPV in the Nyeri Central Sub-County?

3. Literature Review

3.1 Physical, Emotional, Social, and Psychological Effects of Alcohol Use on Intimate Partner Violence

Intimate partner violence (IPV), often exacerbated by alcohol use, inflicts a wide array of devastating consequences on survivors, affecting their physical, emotional, social, and psychological well-being. These effects can be immediate or long-lasting, significantly impacting the victim's quality of life and overall health.

3.2 Physical Effects

The most overt consequences of IPV are physical injuries, which range from minor bruises and cuts to severe trauma such as fractures, internal injuries, and even death. Alcohol-related IPV often results in more severe and frequent physical injuries due to the perpetrator's impaired judgment and increased aggression (Foran & O'Leary, 2008). These injuries can lead to chronic pain, disabilities, and a higher likelihood of sexually transmitted infections (STIs), including HIV, due to forced sexual acts (Chitama, 2016; WHO, 2013). Furthermore, victims may experience unwanted pregnancies, miscarriages, and complications during childbirth (Chitama, 2016). Chronic exposure to violence also correlates with an increased risk of long-term health problems such as cardiovascular disease, gastrointestinal disorders, and neurological damage (Campbell *et al.*, 2020).

3.3 Emotional and Psychological Effects

The emotional and psychological toll of IPV is profound and often more enduring than physical injuries. Survivors frequently experience a range of mental health issues, including depression, anxiety disorders, post-traumatic stress disorder (PTSD), and suicidal ideation (Anderson & Saunders, 2018; Wood *et al.*, 2024). Feelings of fear, shame, guilt, hopelessness, and isolation are common. Victims may also develop low self-esteem, self-blame, and a diminished sense of self-worth. The unpredictability of alcohol-fueled violence can lead to heightened vigilance and hyperarousal, contributing to chronic stress and trauma responses. Disrupted sleep, nightmares, and flashbacks are also prevalent (Jankey, 2011). These psychological impacts can hinder a survivor's ability to form healthy relationships, maintain employment, or engage effectively in daily life.

3.4 Social Effects

IPV, particularly when linked to alcohol abuse, significantly erodes a survivor's social connections and support systems. Victims may experience social isolation as perpetrators often control their access to friends and family, or as shame prevents them from seeking help (Heise & Garcia-Moreno, 2019). The instability caused by alcohol-related violence can lead to family breakdown, affecting children who witness the abuse and are at higher risk of developing behavioral problems, academic difficulties, and perpetuating violence in their own adult relationships (Widom *et al.*, 2018). Economic instability often results from disrupted employment, loss of income, and increased healthcare costs. Stigma associated with both IPV, and alcohol abuse can further marginalize survivors, making it difficult to access community resources or reintegrate into society. In informal settlements, these social vulnerabilities are often compounded by limited community support and economic hardship.

3.5 Economic Effects

The economic consequences of alcohol-related IPV are substantial for survivors and society. Victims often face job loss due to injuries, absenteeism, or the perpetrator's interference (WHO, 2013). This can lead to financial dependence on the abuser, trapping them in the abusive relationship (WHO, 2010). Healthcare costs for treating physical and psychological injuries can be extensive, creating further financial strain. Legal expenses, relocation costs, and the inability to maintain stable housing add to the economic burden. For society, IPV results in significant costs related to healthcare services, legal and criminal justice systems, lost productivity, and social welfare programs (World Bank, 2014). In areas like Nyeri's informal settlements, where poverty is already prevalent, alcohol-fueled IPV exacerbates economic hardship, making it harder for women to escape violent situations and achieve financial independence.

4. Methodology

This study adopted a descriptive cross-sectional design to collect data from 110 respondents under a random sampling technique. The respondents comprised adult males and females who were married, divorced, separated, widowed, or cohabiting. The respondents comprised of adult males and females who were in previous or current intimate relationships. Data collection was done through questionnaires and focus group interviews. The tools were administered to 10 participants to test liability using Cronbach's alpha threshold, which scored at 0.80. The data collected was then analyzed quantitatively using SPSS version 21.0.

5. Findings

5.1 Physical, Emotional, Social, and Psychological Effects of Alcohol Use on Intimate Partner Violence

The study's findings on the effects of alcohol use on IPV highlight a cascade of devastating consequences that extend beyond the immediate partners to impact families and communities. These effects are consistent with the long-term ramifications outlined in the Biopsychosocial and Sociocultural models.

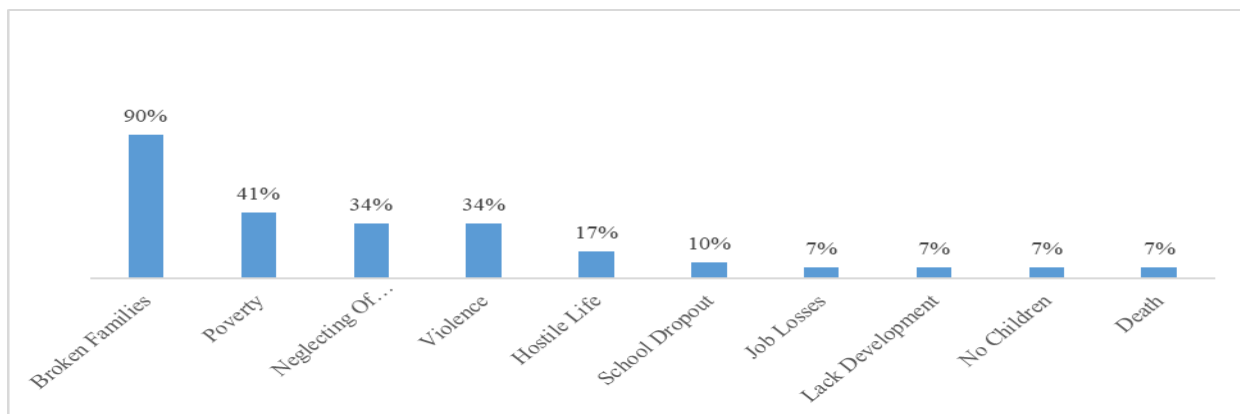


Figure 1: Effects of alcohol use on intimate partner violence when a man is using alcohol heavily or is addicted to alcohol

5.1.1 Family Breakdown and Neglect

The most frequently reported effect was "broken families/marital discord" (90%), indicating that alcohol abuse by male partners severely destabilizes intimate relationships. This leads to increased family negligence (34%), where basic provisions and care are compromised. These findings corroborate existing literature on the social consequences of alcoholism, including family disintegration and its profound psychological and social effects on family members, especially children (Jankey, 2011).

5.1.2 Economic Hardship

Increased poverty and financial strain (41%) were direct outcomes of alcohol abuse. This is often linked to job loss (7%) by the perpetrator, as well as the victim's inability to maintain employment due to the violence or need to care for the family. This economic impact traps victims in abusive cycles due to financial dependence (WHO, 2010), reinforcing the economic dimension of IPV and its perpetuation in low-income settings (Heise & Garcia-Moreno, 2002).

5.1.3 Increased Violence and Related Risks

While the study focused on IPV, respondents also reported an increase in general violence (34%) and, tragically, death (7%) linked to heavy alcohol use. These severe outcomes underscore the extreme risks associated with alcohol abuse, including motor vehicle accidents, homicides, and other violent crimes previously noted in the

background (NACADA, 2016; Mutahi, 2017). The intergenerational transmission of violence is also a concern, as children witnessing abuse are at higher risk of perpetrating or experiencing violence later (Widom *et al.*, 2018).

5.1.4 Educational Disruption

The finding of school dropout (10%) for children due to alcohol-related family issues highlights a critical intergenerational effect, impacting the future well-being and socio-economic mobility of affected families.

5.1.5 Psychological Distress

Although not directly quantified as a separate percentage effect, the broader literature reviewed (Wood *et al.*, 2024; Jankey, 2011) consistently points to significant psychological distress among IPV survivors, including depression, anxiety, and PTSD. The high prevalence of psychological abuse (64%) noted in Section 4.4.1 further indicates the severe mental health burden on victims. Alcohol, while sometimes used for coping, ultimately exacerbates these psychological conditions (Stark *et al.*, 2023).

6. Conclusion

The study concluded that the effects of alcohol-fueled IPV are extensive and devastating, causing significant family breakdown, economic hardship, social disruption, and profound negative impacts on the well-being of women survivors and their children. The high rate of family disintegration highlights the urgent need for interventions that address the root causes and consequences of this cycle of abuse.

7. Recommendations

Based on the findings of this study, the study recommends the need to enhance collaboration between health, gender, social welfare, law enforcement, and economic development departments to implement comprehensive prevention and intervention programs. The study further recommends the need to promote and establish accessible psychosocial support and counseling services for both individuals struggling with alcohol addiction and survivors of IPV.

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Conflict of Interest Statement

The authors declare no conflicts of interest.

About the Author(s)

The author is seasoned global humanitarian as a MHPSS specialist undertaking PHD in Clinical Psychology. He is passionate about research on mental health and cross cutting multi-disciplinary areas including GBV, public health etc. He has published related articles on different publishers.

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