

**AN ASSESSMENT OF THE RELATIONSHIP BETWEEN ALCOHOL
DRINKING AND DOMESTIC VIOLENCE IN KYABANATI/
NYAKAIHURA; KYABIGAMBIRE SUB COUNTY
HOIMA DISTRICT**

BY

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**THIS DISSERTATION IS SUBMITTED TO KAMPALA INTERNATIONAL UNIVERSITY
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DECLARATION

I Atugonza Esther Lillian declare that this piece of work is my own and has never been submitted by any one to any Institution for any award of SWASA.

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APPROVAL

This work has been done under my Supervision as a University Supervisor,
and submitted with my approval.

Signed: 
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Date: 

DEDICATION

This research is fully dedicated to my beloved mother Mrs. Alice Rwakibuye Atwooki and Mr. Isingoma Henry for the kindness, encouragement and advice they rendered to me that have enabled me to be what I am.

ACKNOWLEDGEMENTS

I generally find it difficult to acknowledge all the personalities in their different capacities for the wonderful contributions towards the collection and completion of this report.

My lovely Isingoma Henry who has always been there for me any time any where giving me courage and support throughout my course.

Surely a lot of thanks to all the family members that I will not break down, and many more who provided financially, moral and spiritual support for the success of this report.

I also extend my sincere thanks to Dr. Otanga Rusoke who readily accepted and objectively sacrificed to supervise this research and honestly worked for the success.

Finally, thanks goes to all comrades and friends without their assistance this research would have been meaningless. I still cherish the endeavors of my mother and Mr. Isingoma Henry without their assistance dedications and commitment towards my academic success, this research would have not seen light.

May the almighty Lord reward them all accordingly.

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LIST OF ABBREVIATIONS

IPV	-	Intimate Partner Violence
ASPD	-	Anti Social Personality Disorder
AOD	-	Alcohol and Other Drug
AUDIT-		Alcohol Use Disorders Identification
CD	-	Community Development
REHAB-		Rehabilitation

ABSTRACT

The study is mainly aimed at finding out the relationship between the problem of alcohol drinking and domestic violence in Kyabanati village Hoima district. The prevalence of domestic violence in drinking situations varies by cultural setting. Violence whether personal violence, such as suicide, interpersonal violence, such as rape, homicide, or domestic abuse, or group violence, such as unruliness and riotous acts at sporting events is a major concern to everyone.

Kyabanati has been known for so long as a place of brewing spirits. It is a place, which is inter-mixed with many tribes. There has been an increasing rate of domestic violence, which is presumed that the major cause is that most families are alcoholics.

The specific objectives of this study are: to investigate the causes of domestic violence in Kyabanati village, to investigate the causes of alcohol in Kyabanati village, examine the prevalence of alcoholism in Kyabanati village, examine the relationship, between alcoholism and domestic violence and examine how the affected families are addressing the problem of alcoholism.

The researcher examined the relationship between domestic violence and alcoholism, what is involved in the domestic violence and the causes of the increasing rate of domestic violence. The study focused on a period from 2006 to 2007 and enlisted adults involved in brewing and spouses in affected families.

Alcohol dependence has reached critical proportions in the country and the world around. Many studies show a high rate of alcohol abuse among men who batter their female partners.

It is described by study sampling instrument tools used for study and validity of the research tool. Procedure and data analysis thus the findings were presented, interpreted and discussed by respondents and the researcher hence helped in summary and drawing conclusion basing on stated specific objectives.

CHAPTER ONE

INTRODUCTION

This study is concerned with trying to understand the relationship between alcohol consumption and domestic violence. It is known however that even in societies that prohibit the production and consumption of alcohol. There are human male tendencies to attack and aggressively suppress women. This study is focusing on how alcohol consumption may act as an increasing stimulant for inducing domestic violence.

First it is necessary to differentiate domestic violence from other forms of violence in order to determine the influence of alcohol consumption on domestic violence.

Domestic violence is the abuse of power in an intimate relationship. It is domestic because it may or may not take place in the home where the women lives, but it always at the hands of a man who is in most sort of relationship with her.

It covers a wide range of physical attacks, sexual violations, and psychological brutalities.

The forms of violence may vary from one society and culture to another.

Domestic violence has always been and continues to be a hidden problem. This notwithstanding, as a result of tireless campaigning by feminist organizations and other women's groups, the secret around domestic violence is being exposed.

The effects of domestic violence are all encompassing and pervasive as they relate to women. There are health hazards both physical & mental. It affects other family members and neighbors who may try to intervene. The effects on the children can be devastating and result in permanent psychological damage.

Domestic violence is a reflection of a wider social & structural problem in our society. It is a manifestation of historically unequal power relations between men and women.

Domestic violence occurs in all races social-economic cases, nations, religions and cultures, to women of all ages and ability. The violence may be: Physical that is to say hitting, punching, slapping. Sexual: is rape or being forced to take part in humiliating sexual acts, Psychological: is mental and emotional abuse, Finances: is depriving the women of money if she is dependent on him refusing to pay bills.

Alcoholism or alcohol dependence is a chronic disease marked by a craving for alcohol. People who suffer from this illness are known as alcoholics. They can not control their drinking even when it becomes the underlying cause of serious harm, including medical disorders, marital difficulties, job loss or automobile crashes. Medical science has yet to identify the exact cause of alcoholism. But research suggests that genetic, psychological, and social factors influence its development. Alcoholism cannot be cured yet, but various treatment options can help an alcoholic avoid drinking and regain a health life.

1.1 BACKGROUND TO THE STUDY

The area chosen to be studied is called Kybanati, geographically located in Hoima district in Western Uganda. Kyabanati was selected because it has been known for a long time to be a place where many families brew crude spirits. Kyabanati has been known for so long as a place of brewing crude spirits. It is a place which is inter-mixed with many tribes. There has been an increasing rate of domestic violence which is presumed to be caused by the consumption of crude alcoholic spirits in many families.

The prevalence of domestic violence in drinking situations varies by cultural setting of violence whether personal violence, such as suicide, interpersonal violence such as rape, homicide, or domestic abuse, or group violence such as unruliness and riotous acts at sporting events is a major concern to every one. Alcohol abuse and alcoholism causes a significant number of severe sometimes fatal health, social and economic problems in Uganda.

As with other forms of violence, alcohol appears to play an important role in intimate partner violence. Survey results indicate that intimate partner violence is more prevalent among ethnic minorities than among whites. Researchers have proposed several theories to explain why rates of intimate partner violence vary among ethnic groups in the United States.

Studies of domestic violence frequently document high rates of alcohol and other drugs involvement and other drug use is known too impair judgment, reduce inhibition, and increase aggression. Alcoholism and child abuse including incest seems connected also. On the surface it seems hard to argue with the numbers 92% of the domestic abuse assailants reported use of alcohol or other drugs on the day of the assault, according to a recent JAMA report.

Scientists and non scientists alike have long recognized a two way association between alcohol consumption and violent or aggressive behavior. Not only may alcohol consumption promote aggressiveness but also victimization may lead to excessive alcohol consumption. Violence may be defined as behavior that intentionally inflict, or attempts to inflict, physical harm. Violence falls within the broader category of aggression, which also includes behaviors that are threatening, hostile or damaging in a non physical way. Based on published studies, Roizen summarized the percentages of violence offenders who were drinking at the time of the offense as follows: up to 86 percent of homicides offenders, 37 percent of assault offenders, 60 percent of sexual offenders, up to 57 percent of men and 27 percent of women involved in marital violence and 13 percent of child abuses. These figures are the upper limits of a wide range of estimates. In a community based study, Pernanen found that 42 percent of

violent crimes reported to the police involved alcohol, although 51 percent of the victims interviewed believed that their assailants had been drinking.

Although much remains to be learned, research suggests that some violent behavior may be amenable to treatment and some may be preventable one study found decreased levels of marital violence in couples who completed behavioral marital therapy for alcoholism and remained sober during follow up. Given the above background its clear that alcoholism has an influence on the prevalence of domestic violence which makes a study about the same timely and necessary.

1.2 STATEMENT OF THE RESEARCH PROBLEM

Families are meant to be free from domestic violence, but because of alcoholism they are prone to violence. Several models have been proposed to explain the complex relationships between violence or aggression and alcohol consumption. Alcohol may encourage aggression or violence by disrupting normal brain function. Alcohol weakens brain mechanisms that normally restrain impulsive behaviors, including inappropriate aggression. By impairing information processing, alcohol can also lead a person to misjudge social cues, thereby overreacting to a perceived threat. Simultaneously, a narrowing of attention may lead to an inaccurate assessment of the future risks of acting on an immediate violent impulse. Because of all this it is necessary to carry out an assessment on the relationship between alcohol and domestic violence.

1.3 SCOPE OF THE STUDY

Kyabanati is found in Hoima district along Hoima Masindi high way. This place has been known for so long as a place of brewing crude spirits. It is a place which is intermixed with many tribes. There has been an increasing rate of domestic violence, which is presumed that the major cause is that most families are alcoholic. The researcher has examined the relationship between domestic violence and alcoholism, what is involved in the domestic violence

and the causes of the increasing rate of domestic violence. The study focused on a period from 2006 to 2007 and enlist adults involved in brewing and spouses in affected families. The affected families were enlisted in a purposive sample.

1.4 RESEARCH OBJECTIVES

The major objectives of this study is to establish or assess the relationship between problem drinking and domestic violence in Kyabanati, Kyabigambire Sub County, Hoima district.

The specific objectives of this research include;

- (i) To investigate the causes of domestic violence in Kyabanati village
- (ii) To investigate the causes of alcohol in Kyabanati village
- (iii) Examine the prevalence of alcoholism in Kyabanati village
- (iv) Examine the relationship between alcoholism and domestic violence.
- (v) Examine how the affected families are addressing the problem of alcoholism

1.5 SIGNIFICANCE OF THE STUDY

This study established the relationship between domestic violence and alcoholism in Kyabanati given that there are numerous problems that have arisen in the community.

- (i) This study will help health workers and social workers how to help the families affected with domestic violence in relation to alcoholism
- (ii) Help sensitize the community about the effects of alcohol in relation to domestic violence

1.6 STUDY HYPOTHESIS

- (i) Domestic violence is increased by alcohol consumption.
- 2) Violent people tend to become more violent after consuming a certain amount of alcohol.

- 3) Alcohol acts as catalyst for inducing violence in already violent prone individuals.

1.7 THEORETICAL FLAME WORK

This research was modeled on the theory of cognitive developmental theory advances by Jean Piaget (1923/1926). Cognition refers to the inner processes and products of the mind that leads to “knowing” it includes all mental activities. Remembering, symbolizing, categorizing, problem solving, creating, fantasizing and even dreaming. Indeed we could expand this test since mental processes make their way into virtually everything human beings do.

Proponents of this theory like piaget and vygoskey believed that integrated set of reasoning abilities that develop together and can be applied to any task.

The theory assets the role of language in cognitive development in similarly titled volumes. Do children first master ideas and then translate them into words? Or does the capacity for language open new cognitive doors, enabling children to think in more advanced ways?

In related development the theory asserts that in thought and language, he aimed that (vygoskey) human mental activity is the result of social, not independent learning. According to him as children master challenging every day task, they engage in cooperative dialogues with adults and more expert peers who assist them in their efforts. During these interactions, cognitive processes that are adoptive in a particular culture are socially transferred to children. Since language is the primary means through which humans exchange social meanings, vygoskey viewed it as crucial for cognitive change. Indeed vygoskey regarded the acquisition of language as the most significant achievement in children’s development (Bhank 1990). However, vygoskey’s theory was challenged in focusing on the cultural line, he said little about the natural line-far less than piaget or information. Processing, to which we now turn.

This theory was also supported by Mahoney (1974). According to him, most clinical problems are best described as disorders of the thoughts and feelings. The fact that behaviour is largely controlled by the way we feel, then the most logical way of changing maladaptive behaviour is by changing the maladaptive thinking that was behind it.

According to this theory, our mental processor or cognition, such as emotions, beliefs, feelings, expectations or thoughts about situations are the cause of the way we behave. Therefore, if our thoughts are distorted we tend to suffer a psychological disorders, for example if a person takes much alcohol or drinks a lot of alcohol and he/she gets drunk, he may have a distorted mind and even becomes violent or gets aggressive behaviour thinking and feeling powerful than others abusing every body he/she meets like a wife or husband and even children and he or she starts fighting and using abusive language. This person may see no reason of living or staying without drinking a certain amount of alcohol he/she will feel bad and may even stay unhappy when there is no money to buy alcohol. According to this theory, such beliefs may not be right and are viewed as irrational or logical.

Therefore, it's the role of alcohol drinkers to make sure that they control their drinking and those who do not drink alcohol to realize that the beliefs they are holding are not right and try to counsel them to enable them over come the problems of alcohol drinking like domestic violence and other problems associated with alcohol drinking. For example, alcohol drinkers should compare themselves with those who do not drink alcohol the ways they live with their families and other people or the way they do live in the community. This theory helped the researcher to examine the copying mechanisms used by families in coping up with the problems of alcohol drinking like domestic violence.

It also helped to control alcoholism in families and domestic violence, relates more to piaget's role of language in cognitive development in opening new doors and enabling children to think in a more advanced ways.

Since the theory suggests that as children master challenging every to day tasks, they engage cooperative dialogues with adults and more expert peers, who assist them in their efforts. And so people who drink alcohol and those who do not drink should get help from the families which are able and expert in problem solving.

In order to get help of how they can prevent alcoholism and domestic violence. And it will also change peoples attitudes towards domestic violence and alcohol drinking that is to say that will stop doing both of them and it will change people's feelings about alcohol like for example those who have a feeling that when they take alcohol they reason very first. Therefore, this theory helped the researcher to asses the relationship between alcohol drinking and domestic violence.

1.8 CONCEPTUAL FRAMEWORK

This study was based on two types of variables, independent and dependents variables. Alcohol is independent variable and domestic violence is dependent variable because domestic violence depend on alcohol in that some people tend to become violent after consuming a certain amount of alcohol.

Domestic violence is the abuse of power in an intimate relationship. It is domestic because it may or may not take place in the home where the women lives, but it always at the hands of a man who is in most sort of relationship with her.

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Alcoholism: The conception of inveterate drunkenness as a disease appears to be rooted in antiquity. The Roman Philosopher Seneca classified it as a form of insanity. The term alcoholism, however, appears first in the classical essay "Alcoholisms chronicles" (1849) by the Swedish physician Magnus Huss. The phrase chronic alcoholism rapidly became a medical term for the condition of habitual inebriety conceived as a disease, and the bearer of the disease was called an alcoholic or alcoholist e.g Italian alcoolisto, French alcoohilique, German alkoholiker, Spanish alcoholico, Swedish akoholist.

Alcoholism consists of a repetitive intake of alcoholic beverages to an extent that causes repeated or continued harm to the drinker. The harm may be

physical or mental, it may also be social or economic implicit in the conception of alcoholism as a disease is the idea that the person experiencing repeated or long lasting injury from his drinking would alter his behaviour if he would. His failure to do so shows that he cannot help himself, that he has “lost control over drinking” this conception incorporates the idea of addiction or dependence.

Formal definitions of alcoholism vary according to the point of view of the definer a simplistic old-fashioned medical definition calls alcoholism a disease caused by chronic excessive drinking.

A purely pharmacological physiological definition of alcoholism dissifies it as a drug addiction recognizable by the need for increasing doses to produce desired effects and by the occurrence of a withdrawal syndrome when drinking is stopped. This definition is inadequate, once alcoholism does not resemble other additions in the need for increased doses.

Comprehensive definition of alcoholism: Behavioural rather than pharmacological – physiological signs are much more consistent and reliable in definitioning and diagnosing alcoholism.

A sophisticated definition representing modern conceptions of comprehensive medicine classifies alcoholism as a disease of unknown cause, without recognizing anatomical signs, manifested by addiction to or dependence on alcohol.

A more comprehensive definition incorporating the perspectives of both psychological and physical medicine recognizes that alcoholism may be either a symptom of another underlying, possibly psychological, disorder or a disease itself. Alcoholism in this view, is a chronic and usually progressive disease or a symptom of an underlying psychological or physical disorder, characterized by dependence on alcohol (manifested by loss of control over drinking) to relief from psychological or physical distress or for gratification from alcohol intoxication itself, and characterized also by consumption of alcoholic beverages sufficiently great and consistent to cause physical or mental or social

or economic disability. Here, the conception of disease undoubtedly rests on the evidence of disablement.

The various definitions that rely on the symptom of loss of control over drinking after consider the loss of control to consist of an inability to stop drinking once it is started implying that the alcoholic can choose not to take the first drink. But the more comprehensive definition sees the alcoholic as starting a drinking episode because he cannot retain. Nor does the loss of control over drinking hold true all the time.

As with symptoms in many diseases, the loss of control is active in most alcoholics only inconsistently. This means that an alcoholic is not always under internal pressure to drink and can sometimes resist drinking, if he drinks, he can sometimes drink in a controlled way. The inconsistency of the loss of control is, however, consistent with a definition of alcoholism based on learning psychology. Alcoholism, in this definition, is a learned (or conditioned) dependence on (or addiction to) alcohol that irresistibly activates resort to drinking whenever a critical informal or environmental stimulus (or cue) presents itself.

This definition leaves room for the conception that alcoholism may start as a symptom of an underlying disorder, which induces the learning of the alcoholism pattern, and that once the pattern is fixed or conditioned it may become a disease in its own.

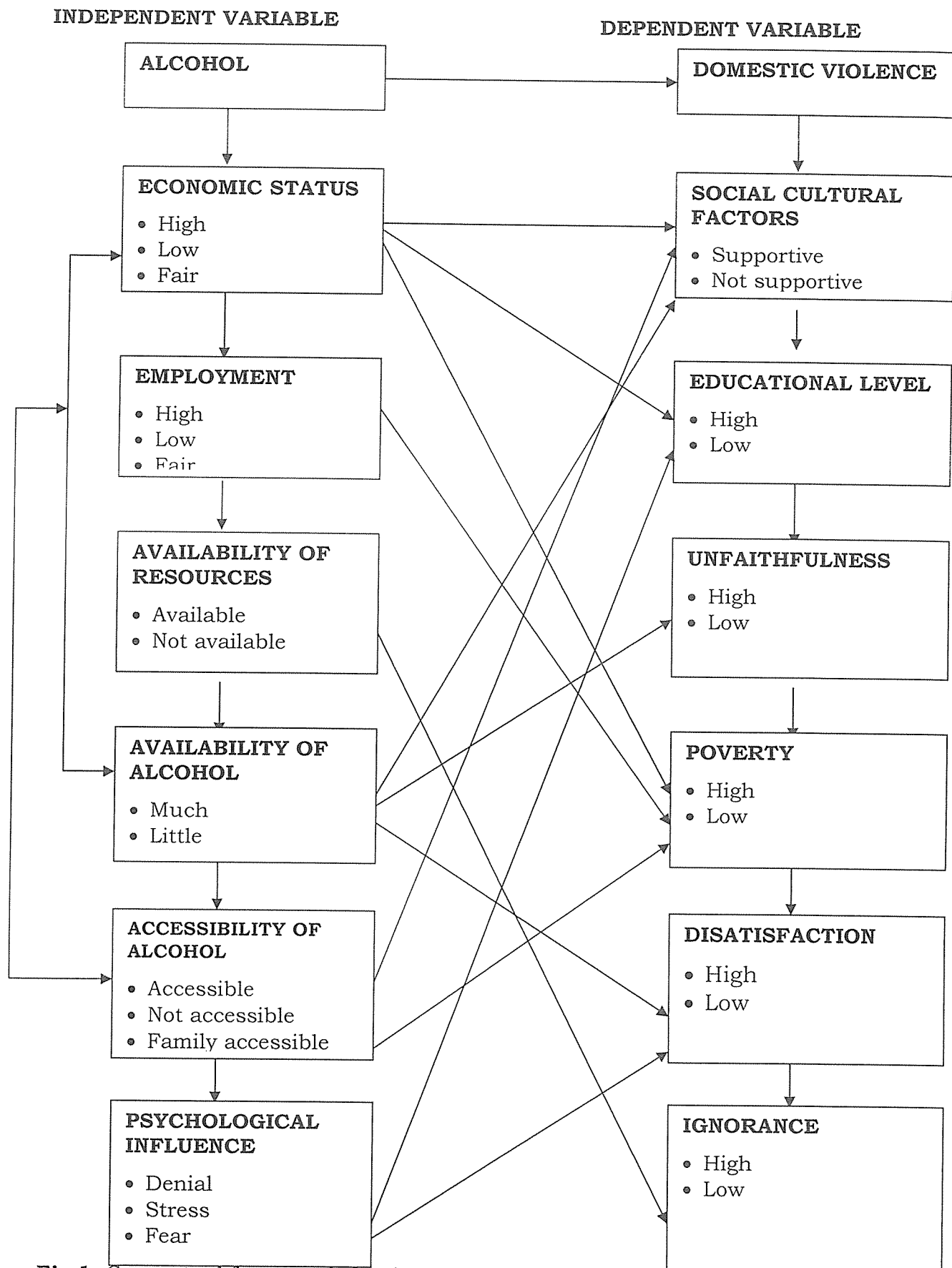


Fig.1: Conceptual framework for the relationship between alcohol and domestic violence.

CHAPTER TWO

LITERATURE REVIEW

2.1 CAUSES OF DOMESTIC VIOLENCE

This chapter is concerned with addressing up the problems which were established within the scholarly community. It is sectioned according to specific objectives.

According to Moeller and Dougherty (1997), people with anti social personality disorder (ASPD) a psychiatric condition characterized by a pervasive pattern of violent behavior and/or general disregard for other people's rights, may be particularly susceptible to alcohol related aggression. Statistics seem to indicate a connection between alcohol and domestic violence, but some researchers question the cause and effect relationship.

Another example of a common cause of alcohol in relation to domestic violence relates to the frequent co-occurrence of anti social personality disorder (ASPD) and early on set (i.e. type II) alcoholism. ASPD is a psychiatric disorder characterized by a disregard for the rights of others, often manifested as a violent or criminal lifestyle. Type II alcoholism is characterized by high heritability from father to son; early onset of alcoholism (often during adolescence) and anti social, sometimes violent, behavioral traits. Type II alcoholics and persons with ASPD overlap in their tendency to violence and excessive alcohol consumption and may share a genetic basis.

2.2 CAUSES OF ALCOHOLISM

Scientists do not know precisely what causes alcoholism, but most expert suspect that a combination of factors are involved, which may explain why some people who drink become alcohol dependants while most do not.

(a) Physiological cause

Scientists have explored the chemical action of alcohol among both normal individual and individuals that suffer from alcohol use disorders particularly

alcohol dependence. Some studies suggest that some people may have a physical trait that enables them to drink large quantities of alcohol before feeling its intoxicating effects. These people have an enhanced tolerance for alcohol. Scientists are unsure of this trait causing drinking/develops as the result of such drinking.

In 1998, researchers moved closer to the goal of finding the genes for alcoholism when they identified locations on four chromosomes where these genes are likely to be. Some experts speculate that these genes may not be specific for alcohol dependence but rather may determine temperament or personality traits increase a person's vulnerability to alcohol-use disorders.

(b) Environmental factors

Scientists recognize that problem drinking disorders are likely results from a complex interaction of biological influences and environmental factors that may affect the development of the diseases including personal behavioral skills, peer influences early in life parental behavior, societal and cultural attitudes towards alcohol use, life stress and availability of alcoholic beverages. Once a person has established a drinking pattern, environmental factors combined with physical changes induced by heavy drinking may re-enforce the continued use of alcohol.

(c) Psychological influence

Many experts believe that a loss of control over drinking is as much psychological as it is physiological. Studies show that alcohol dependent individuals will drink excessive amounts of a non alcoholic beverage if they believe it contains alcohol.

Moreover when they are given an alcoholic beverage that they believe is alcohol-free their drinking behavior is similar to that of persons not dependant on alcohol.

Many drinkers develop a psychological condition known as denial, in which they are unable to acknowledge that alcohol use lies at the root of many of their problems.

Denial was long thought to be a personality trait shared by all persons who suffer from alcohol-use disorders, recent research suggests that denial may be a psychological response to negative feedback people receive about their drinking. Some studies indicate that when approached with objective information about their drinking and its consequences in an empathetic and non confrontational manner; many persons with significant drinking do not demonstrate denial.

The early literature on women with alcoholic husbands outlined a predominantly negative view of these women. Such women were seen as neurotic, poor copers who were obsessed with controlling their husbands' drinking. They were seen to have partnered alcoholic men in order to satisfy their own pathological needs (Kalashian 1959; Whalen 1953).

It was further asserted that some women would sabotage the drinker's attempts to abstain in order to continue meeting needs (Futterman 1953). Edwards, Harvey and Whitehead (1973) termed such notions the disturbed personality theory. They criticized the lack of empirical support for such notions and cite a number of research findings which support the alternative view that it is the stress created by drinking which affects the partner's psychological functioning. Subsequently reviews cite further research supporting the stress model and refuting the disturbed personality model (Finney, Moss, Cronkite and Gamble 1983; Gombert 1989; Watts, Bush and Wilson 1994, O'Farrell, Harrison and Cutter 1981)

When the term chemical dependent emerged as the new label for both alcoholic and drug addicts, the term is dependent was coined to describe their partners (Beattie 1989) Brandshaw 1988; Cermak 1986; Mandenhall 1989; Rothberg 1986; Schaef 1986. Rothberg (1986) articulates the notion that problem drinkers and their partners develop complementary

relationship in which each re-enforces the pathological needs of the other. Such notions were developed from a crude and simplistic adaptation of systems theory incorporating.

2.3 THE PREVALENCE OF ALCOHOLISM

Alcohol dependence affects a broad cross section of society around the world. Statistics show that alcohol dependence touches successful business executives, skilled mechanics, laborers, home-makers, and church members of all domination. Scientists have not identified a typical alcoholic personality and they can not predict with absolute certainty which drinkers will progress to alcohol dependence.

Alcohol use varies depending on an individual's social, culture or religious background. Some individuals do not drink at all, about one third of adults in the United States who are eighteen and older, for example abstain from alcohol, others drink as part of social custom. Still others drink frequently and in substantial amounts.

World health organization estimates that nearly 62 million people world wide suffer from alcohol dependence. The prevalence of the illness varies in different countries. In the United States nearly 125 million people experience problems resulted to their use of alcohol. Of these alcohol dependence affects about 8.12 million men and women, or almost 3 percent of the population. Men are three times more likely than women to become alcoholics while people aged 65 and other older have the lowest rates of alcohol dependence.

Alcohol dependence has reached critical proportions in Russian where 40% of men and 127% of women are alcoholics. Alcoholism is as punishable offense in Russia. Alcoholics who refuse hospitals treatment can be imprisoned in labour camps. After their release, they typically find it difficult to find employment and if caught drinking again, they are returned to prison. Periodic efforts by the

government to control drinking by closing distilleries, breweries and bars have backfired instead of solving the problem, such tactics only created a wide spread black market for liquor-as well as a country of people who hide their drinking problems.

2.4 EXAMINE THE RELATIONSHIP BETWEEN ALCOHOLISM AND DOMESTIC VIOLENCE

Many studies show a high rate of alcohol abuse among men who batter their female partners, yet is there really a link between problems and domestic violence? No evidence supports a cause and effect relationship between the two problems. The relatively high incidence of alcohol abuse among men who batter must be viewed as overlap of two wide spread social problems.

Efforts to link alcohol abuse and domestic violence reflect society's tendency to view battering as an individual deviant behavior moreover, there is a reluctance to believe that domestic violence is a pervasive social problem that happens among all kinds of families. For these reasons, it is essential to emphasize what is known about the relationship between alcohol abuse and domestic violence.

Brian Quigley researcher associate at the research institution on addiction at the state university of New York at Buffalo. Said "Alcohol is not simply used as a way of coping up with violence that already exists Quigley quickly noted, "alcohol use does play some role in the development of marital violence, but patterns of alcohol use are an important part of that role.

In addition" although alcohol use is definitely a risk factor for marital violence we need to keep in mind that not all marital violence that occurs involves alcohol 50% of it is sober violence.

"There is a common perception", concurred Sulic Schumacher, a doctoral candidate in clinical psychology at the state university of New York at stony Brook, "that alcohol is a direct cause of marital violence. This study reveals that the relationship between problem drinking and aggression is more complicated than that. Eliminating domestic violence is not as simple as

getting rid of alcohol, which the common public myth about alcohol and violence might lead you to believe” this study shows that domestic violence is related to problem drinking in conjunction with other factors such as personality, certain demographics and conflict in the relationship. Alcohol is an important factor, but it is one of the several statistics seem to indicate a connection between alcohol and drug abuse and domestic violence but some researchers question the cause and effect relationship. Studies of domestic violence frequently document high rates of alcohol and other drugs (AOD) involvement, and AOD use is known to impair judgment, reduce inhibition and increase aggression. Alcoholism and child abuse, including incest seems connected also. On the surface it seems hard to argue with the numbers. 92% of the domestic abuse assailants reported use of alcohol or other drugs on the day of the assault, according to a recent JAMA report.

Battering is a socially learned behavior and it is not the result of substance abuse or mental illness, advocacy group claim. “Men who batter frequently use alcohol abuse as an excuse for their violence. They attempt to rid them selves of responsibility for the problem by blaming it on the effects f alcohol; they say. Alcohol does not and cannot make a man abuse a woman, but it is frequently used as an excuse. Many men drink and do not abuse any one as a result. On the other hand many men abuse women when they are sober. It can be easier for some men and for some women to believe that the violence would not have happened if a drink had not been taken.

Its part of the denial process. Alcoholism and battering do share some similar characteristics. Both may be passed from generation to generation both involved denial or minimization of the problem both involves isolation of the family.

So, why do batterers do it? How can you tell if you are at risk? If you are in an abusive relationship what can you do?

At the same time alcohol is strongly influenced by gender. There are known differences between men and women in how much and how they drink and the type and extent of resulting health and social consequences. (Rehm et al-- in

pressa). Men typically drink more than women are more violent after drinking and have more acute and chronic problems related to alcohol. In addition, women are more likely than men to suffer not only from their own drinking behavior but also from their partners drinking behavior are.

Room R, et al (2002), A major limitation of international comparative analyses on men's and women's drinking behavior has been the limited set of comparable questions and measures available in existing data sets. There is a clear need for comparative research and coordinated analysis of data from new surveys using the similar questions or variables about drinking, drinking problems and their possible correlates such a multi-national approach can greatly improve our understanding of how individual and societal characteristics influence women's and men's drinking behavior, and the development of gender sensitive alcohol measurement and alcohol policies.

The report states that more than: one third of problem drinkers receiving treatment cite marital conflicts as one of the main problems by drinking. In the UK, the divorce rate is twice as high in marriages complicated by alcohol problems as in those without alcohol problems. Marital conflicts may take a violent form and there is much evidence to show that domestic violence and alcohol is often associated. Many men and women who commit domestic violence are either problem drinkers or drunk when the assault occurs. Of course, problem drinking is not an essential component of violence in the home. Equally high proportion of victims of violence are also under the influence of alcohol at the time of the assault.

In the section on families as a cause of alcohol problems, the report says "A UK study found that higher levels of alcohol consumption heavy drinking and problem drinking were found for those who had experienced parental divorce in childhood. The increased risk became apparent between the ages of 23 and 33. The same effects were not found for later parental divorce or parental death. The potential significance of these findings is clear given that if present trends

continue, almost one in three marriages in the European Union will end in divorce. There are also fewer marriages.

According to a recent Meta analysis by Bushman (1997), the indirect cause model offers an alternative explanation of the relationship between alcohol and violence. According to this model, alcohol consumption has a psychopharmacological effect on behavior. Under this theory, alcohol causes physiological, emotional and cognitive changes that may lead to aggressive behavior such as partner abuse. To clarify, while disinhibition theory holds that alcohol stimulates such behaviors. Again as described in the introduction to this literature review, there may be other factors which influence the choice to drink, as well as the potential to perpetrate partner abuse.

Both alcohol use and violence are common in our society, and there are many associations between the two understanding the nature of these associations including the environmental and biological antecedents of each and the ways in which they may be related, is essential to developing effective strategies to prevent alcohol related violence as well as social problems such as domestic violence, sexual assault and childhood abuse and neglect. Because no area of science stands apart from another, understanding more about alcohol related violence also will shed light on violence in general and produce information that may be useful to reducing it.

Bushman (1997) puts up several theories regarding the nature of the relationship between alcohol and violence which may be applied specifically to the link between partner abuse and alcohol. For example according to disinhibition theory, alcohol interfered with the brain's normal tendency to suppress violent behavior. In other words, when the brain is inhibited/blocked, alcohol may "disinhibit" or remove the block against aggressive behavior.

According to recent Meta-analysis by Bushmans (1997) the direct cause model offers an alternative explanation on the relationship between alcohol and violence. According to this model, alcohol consumption has a

“psychopharmacological effect” on behavior. Under this theory, alcohol causes physiological, emotional and cognitive changes that may lead to aggressive behavior such as partner abuse.

Parker (1995), talks about selective disinhibition theory which holds that disinhibition occurs only at certain times, depending on the interaction between alcohol use and a complex set of social and psychological circumstances. Under this theory, some one who normally suppresses violent behavior might abuse their intimate partner after consuming alcohol depending on the drinkers’ social and psychological circumstances.

2.5 EFFECTS OF ALCOHOL DRINKING

Alcohol use is seen as less important factor in the a etiology of life threatening diseases but about 15% of the annual incident of causes of coronary heart diseases in this country (between 250,000 and 375,000 cases) is alcohol related.

(Acheson 1988) and perhaps a total of 8,000 premature deaths can also be laid at the door of the brewers (stay dry campaign 1985).

There are about a million “problem drinkers” in this country (stay dry campaign 1985)

Saunders (1984) in a parasuicides, 62% of serious head injuries in males, 50% of murder and 50% of murder victims and about one-third of all the following domestic accidents non traffic accidents fatalities and drowning. Other problems of a less obviously medical nature are associated with tobacco and alcohol use:10,000 domestic and industrial fires believed caused by cigarettes/matches a quarter of hospital admissions, one third of divorce petitions and 80% of the 5000 deaths on the roads in 1988 either the driver or pedestrian involved had over the legal limit of alcohol in their bloodstream (Acheson 1988) amongst fatal accidents of 16-18 years olds the proportion was about half. The cost to the economy of alcohol related problems is around 1,500m

The question has then put itself to social planners of various sorts, how to get people to give up or reduce their consumption of tobacco and alcohol. However most review suggest that public information campaigns are extremely ineffective in changing public use of tobacco or alcohol (e.g. Gatherer et al 1979) in spite of the good penetration of messages e.g. the link between heavy smoking and later appearance of lung cancer. This may be due to the number of factors but one idea amongst these that has gained some currency is that it is very difficult once smoking cigarettes has started to bring about its cessation given the addictive nature of the principle active ingredient of cigarette smoke, nicotine. The invocation of addiction is invoked when discussing alcohol use as well e.g. Jackson (1989) on teenage drinking.

“This startling observation of the real addiction problem hitting the younger generation”.

2.6 STRATEGIES BY FAMILIES TO ADDRESS THE PROBLEM OF ALCOHOLISM

Andrew McNeil of the institute of alcohol studies said “it quickly became clear that this was a very difficult job, largely because of the shortage of hard information. It is known that alcohol is involved in a range of social and family problems such as domestic violence, divorce and family break up, and behavioral problems in children but the contribution of alcohol to these problems is not normally ascertained or recovered in official statistics.

Adults raised in families affected by parental problems drinking were also labeled co-dependents. It was argued that living in such a family results in the person learning the dysfunctional coping responses seen in the partners of alcoholic and developing a similar personality profile (Cermak 1986)

The central theme of the vast literature on co-dependency is that all members of any family in which one member has a drinking problem are psychologically disturbed and in need of treatment. There is no doubt expressed by any of the proponents of the co-dependency model that there exists a distinct syndrome of

maladjustive coping behavior and that this can be observed within every family in which a drinking problem exists. Some writers are explicit in describing co dependency as a personality disorder (for example Cermak 1986) and others go so far as to describe it as a disease (for example Schaef 1986; young 1987). The term has been further generalized to also refer to the partners of any one with any form of major behavior problem excessive gamblers, violent and abusive men. Work alcoholics, psychiatrically disturbed individuals, etc who had grown up in a family affected by any major disturbance.

Bridshaw (1988); Schaef (1986); Subby and Friel (1984) treatment programmes for co-dependents have been developed and hundreds of self-help books on co-dependency have been published. Typically these books comprised discussions of the characteristics of the co-dependent person, disclosures of personal experience, case histories of co-dependents, explanation of why long term therapy is seen to be required and advice on self change strategies such books sell extremely well and an entire industry has developed around them.

Leading writers tour the world conducting work shop and seminars, the rapists advertise that they provide treatment for co-dependency and numerous support groups and family counseling services have developed programmes such developments have all taken place in the absence of any research support and the lack of an accepted formal definition for the proposed syndrome.

(Gierymski & Williams 1986; Gomberg 1989, Haaken 1990, Hands and Dear 1994), states that odds with the research on family coping in that it promotes the notion that most family members adopt ineffective and pathological coping responses (Gomberg 1989; Haaken 1990; Hands and Dear 1994; Raven 1994; Watts et al 1994) describe socially sanctioned feminine role behaviors as evidence of personal inadequacy and dysfunction (Appel 1991; Haaken 1990; Hagan; Hands and Dear 1994; Krestan and Bepko 1990).

As Roxburgh (1991) explains, blaming the victim; reinforces the abused woman's low self esteem.....; can contradict her interpretation of the violent situation and distort her version of what is happening; can weaken her resolve to act because she feels responsible for and therefore deserving of the violence makes her feel under serving of other assistance; diminishes the capacity of the service provider to offer assistance which will be of real benefit to the woman and is untrue.

Victims of domestic violence need to have their feelings of fear and trauma legitimized (Queens land domestic violence task force 1988) they need clear message which counter the myth that they are in any way responsible for being abused. They need to be able to explore their fears and anxieties and discuss the difficulty they experience in removing /protecting themselves without feeling that this indicates there is anything wrong with them. It is questionable whether a model, which employs notion of personal inadequacy, can be made consistent with such aims.

Counseling programmes for survivors of family violence need to help participants understand that they are coping as best they can under difficult circumstances and that with appropriate support, and an opportunity to learn more effective coping strategies they can minimize the trauma they experience and improve the quality of their future life.

2.7 A LESSON FOR VICTIMOLOGISTS

The immense popularity that the co-dependency model had gained over the past decade carries an important lesson for victimologists, as it does for all applied behavioral scientists.

Victimologists need to be vigilant in relation to the various conceptual model which emerge in the popular literature in concentrating on our theoretical models it is easy to lack an awareness of the degree of influence which popular models can exert despite their lack of rigour and empiricism. We need to remember that a crucial aspect of the academic role is to monitor and

investigate those models that emerge from the lay movement such endeavours are needed not only to safe guard the public from suspect theories but also to persue those ideas, which may prove to be useful or which highlight the limitations of our own perspectives.

It is important not only to investigate emerging conceptual frame work from an empirical perspective but also to reliably determine whether a given model ill appropriately serve the victims or will generate responses which could be regarded as a disservice. It is crucial to ensure that we do not revictimise our clients. The co-dependency model (with its inherent victims blaming attributes) is therefore not appropriate for use within domestic violence services as it is virtually guaranteed to revictimise clients.

CHAPTER THREE

METHODOLOGY

3.1 INTRODUCTION

This chapter explains how the study was developed. Section 3.1 explains the research design; section 3.1.2 gives the areas and population of study. This is followed by the sample size and selection in section 3.1.3 while section 3.1.4 gives the method of data collection, how the data will be processed and analyzed is given in section 3.1.5.

During the study qualitative method to collect and process information was used in order to come up with a relatively accurate complete and uniform data, the researcher used a number of methods of data collection, snowball sampling, questionnaire, observation and group discussion. It involved both men and women who share the responsibility or both affected in one way or the other. Respondents were selected irrespective of the social economic status and their level of education.

3.1.1 RESEARCH DESIGN

During the study, qualitative methods to collect and process information were used in order to come up with a relatively accurate, complete, and uniform data, the researcher used a number of methods of data collection, snowball sampling, questionnaire, observation and group discussions. It involved both men and women who share the responsibility or both affected in one way or the other. Respondents are selected irrespective of the social-economic status and their level of education.

3.1.2 STUDY POPULATION

The study was conducted in Kyabanati village found in Hoima district. This area was chosen because it is believed that very big catchments are for brewing. This is also accompanied by the smell, which is the first to welcome anyone to that place.

3.1.3 SAMPLE SIZE AND SELECTION

The researcher used age groups, religion and community leaders. A figure of 50 people will be covered. The sample will include both male and female who are affected and not affected by problem drinking in relation to domestic violence.

3.1.4 DATA COLLECTION METHOD

The researcher carried out the research study using the following data collection methods;

Questionnaire

A total of 55 questionnaires were administered to respondents, they were written in English. Respondents who know how to read and write are going to fill in the questionnaires themselves. For those who do not know how to read and write the researcher shall translate the questionnaires in the local language used in the area and later fill the response into the questionnaire in English.

Focus group discussions

This was orally conducted. The researcher organized groups and interviewed them. The interview is carried out separately to avoid respondents not giving the correct answers as they fear to be reprimanded.

Observation

Some of the data collection is through observation of what is going out and how people live together. This helped me to confirm some of the responses given to me by the respondents.

3.1.5 DATA COLLECTION PROCEDURE

The data procedure was carried out by using the procedure editing, coding and tabulation. This was aimed at reducing manageable proportions. After the data is collected, the filled in schedules were edited on a daily basis. Editing was done to examine whether all informants interpreted the questions in the same way this will mainly be aimed at completeness of the work.

CHAPTER FOUR

PRESENTATION, ANALYSIS INTERPRETATION AND DISCUSSION OF FINDINGS

4.0 INTRODUCTION (PURPOSE OF THE CHAPTER)

This chapter presents the findings of the study whose major objective was to investigate and analyze the relationship between problem drinking and domestic violence in Kyabanati village Hoima district.

Beginning with general findings in section 4.1, the findings are presented with specific objectives concurrently done with data analysis, section 4.1.1 presents characteristics of respondent face to face interview; 4.1.2 presents self administered questionnaire;

4.1.3 presents government involvement in problem drinking in relation to domestic violence, 4.1.4 presents prevalence of domestic violence, 4.1.5 presents the prevalence of alcoholism; 4.1.6 presents the relationship between problem drinking and domestic violence, 4.2 presents interpretation and discussion of results; 4.2.1 suggestion on how government can improve the problem drinking in relation to domestic violence status of home.

A discussion of the findings flows tables; graphs; pie charts have been used in the presentation of data.

4.1 DATA PRESENTATION AND ANALYSIS. (face to face interview)

TABLE 1

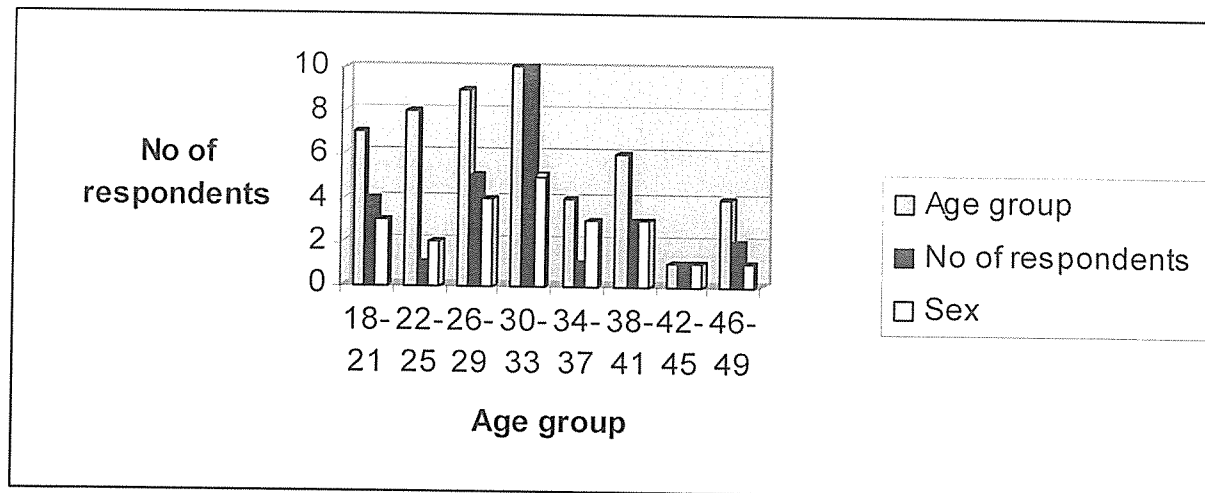
NO	AGE GROUP IN YEARS	NO. OF RESPONDENTS	SEX	
			F	M
1.				
2.	18-21	7	4	3
3.	22-25	8	1	2
4.	26-29	9	5	4
5.	30-33	10	10	5
6.	34-37	4	1	3
7.	38-41	6	3	3
8.	42-45	1	1	1
9.	46-49	4	2	1
		Sum -49	27	22

Source: Primary data

4.1.1 TABLE: CHARACTERISTICS OF RESPONDENTS (FACE TO FACE INTERVIEW)

The table shows that there were more female respondents than the male and majority of the respondents were adult (22-33).

Below is the graphical presentation of respondents' denomination.



Source: Primary data

Figure 2

4.1.2 SELF ADMINISTERED QUESTIONNAIRE

Characteristics of respondents who were given self-administered questionnaire are shown in the table below;

The table shows that the respondents comprised mainly of men; civil servants; outnumbering the rest followed by politicians and farmers. They are all people of responsibility that actually know what is on the ground. Their information can be relied on.

TABLE 2

NO.	TITLE	AGE	SEX	EDUCATION LEVEL	MARITAL STATUS
1.	Teacher	28	M	Grade V	Single
2.	Electrician	39	F	Diploma	Married
3.	Nurse	33	F	Certificate	Divorced
4.	Nurse	45	M	Certificate	Single
5.	Teacher	39	M	Degree	Married
6.	Teacher	30	M	Grade III	Divorced
7.	Administrator	35	M	Degree	Married
8.	Taso	23	M	Diploma	Single
9.	Farmer	24	F	Certificate	Single
10.	Police officer	23	F	Certificate	Married
11.	Teacher	30	F	Grade V	Separated
12.	Teacher	29	M	Grade III	Single

Source: Primary data

4.1.3 GOVERNMENT INVOLVEMENT IN THE PROBLEM OF ALCOHOL DRINKING IN RELATION TO DOMESTIC VIOLENCE

Here below is a summary of the responses on the role played by government in the fight against problem drinking in relation to domestic violence.

Government involvement	Very low	Low	High	Very high
	5	8	31	6

Source: Primary data

Very low	Low	High	Very high
5	8	31	6

Source: Primary data

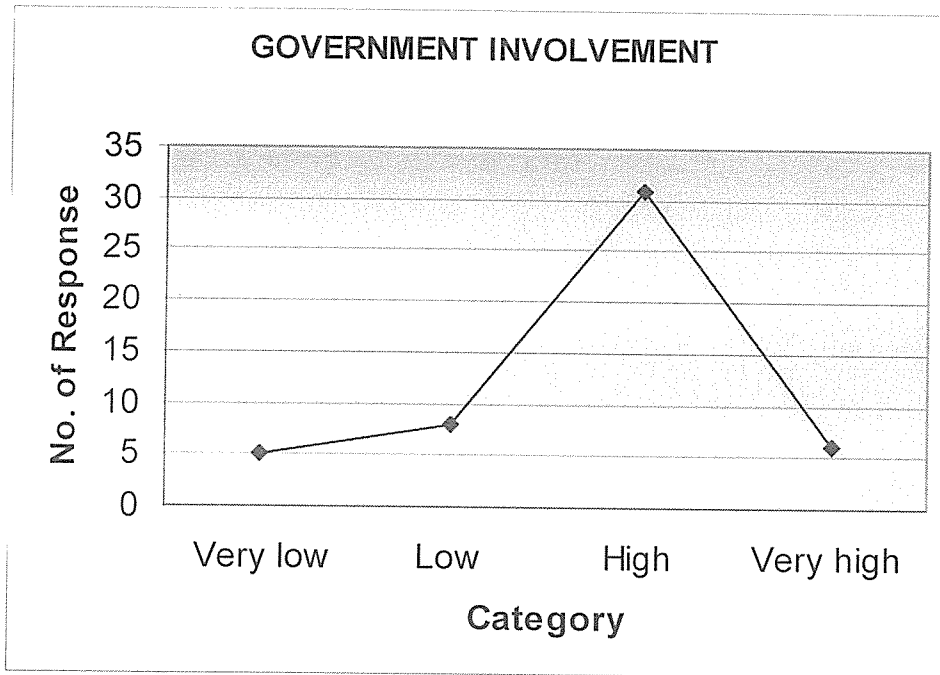


Figure 3 Source: primary data.

4.1.4 PREVALENCE OF DOMESTIC VIOLENCE

TABLE 3

Prevalence	Very low	Low	High	Very high
Level of domestic violence in the area.	1	4	15	28
Relationship between drinking and domestic violence.	1	5	22	21
Elderly involvement in domestic violence as a result of alcohol drinking.	3	30	11	7
The young involvement of domestic violence as a result of alcohol drinking.	5	8	22	13

Source: Primary data

	Very low	Low	High	Very high
Level of domestic violence	1	4	15	28
Relationship	1	5	22	21
Elderly involvement	3	30	11	7
Young involvement	5	8	22	13

Source: Primary data

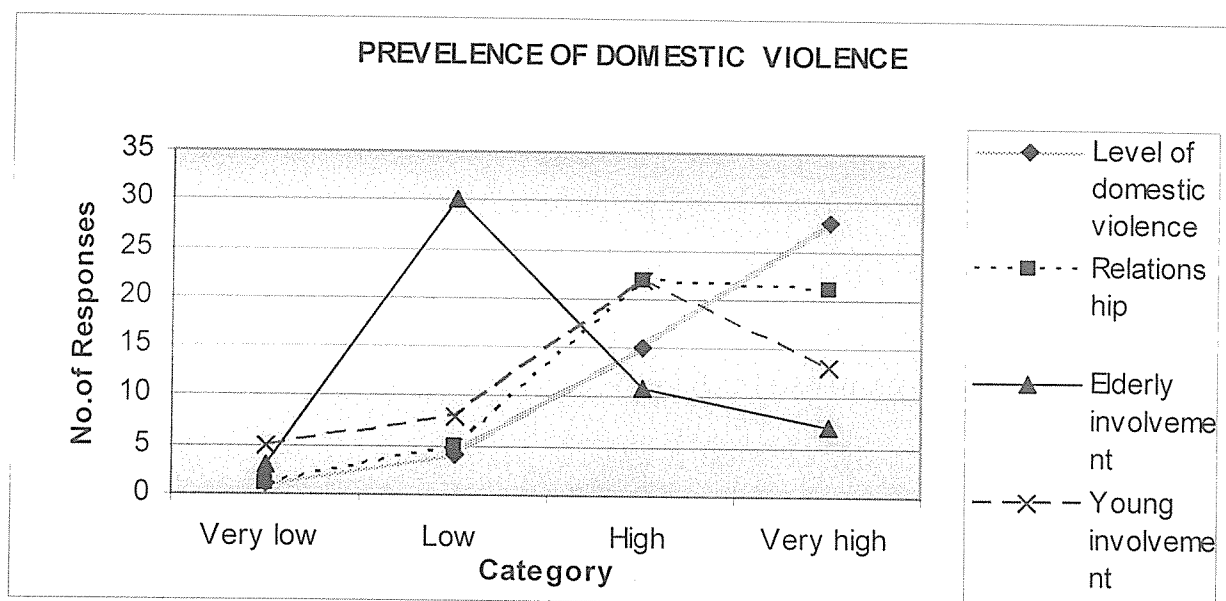


Figure 4

Source: primary data.

4.1.5 PREVELENCE OF ALCOHOLISM

TABLE 4

Prevalence	Very low	Low	High	Very high
Level of Alcoholism in the area.	3	2	13	32
The extent to which the area admits alcoholism.	2	16	26	5
Leaders and elderly involvement alcoholism.	3	12	18	18
The young involvement in alcoholism.	1	7	22	21
Extent alcoholism is an major behaviour	2	6	11	30

Source: Primary data

	Very low	Low	High	Very high
Level of Alcoholism	3	2	13	32
Extent the area admits	2	16	26	5
Leaders and elderly involvement	3	12	18	18
The young involvement	1	7	22	21
Alcoholism is an major behaviour	2	6	11	30

Source: Primary data

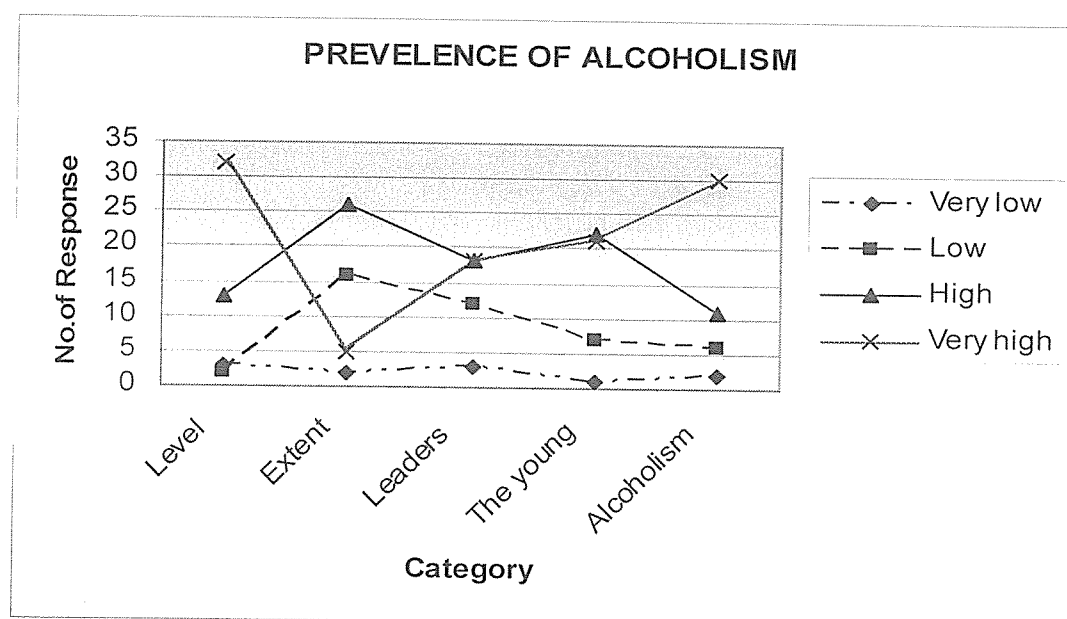


Figure 5 Source: Primary data.

4.1.6 RELATIONSHIP BETWEEN ALCOHOL DRINKING & DOMESTIC VIOLENCE

TABLE 5

No	Yes	No
	42	8

Source: Primary data

No	Yes	No
	42	8

Source: Primary data

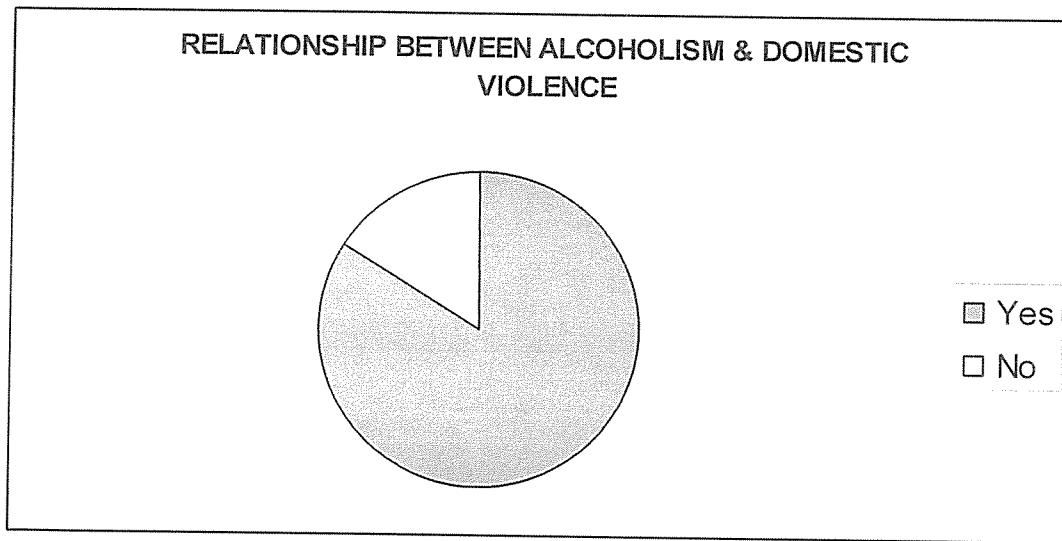


Figure 6 Source primary data.

4.2 INTERPRETATION AND DISCUSSION OF RESULTS

The results show that there were more female respondents than the male. Evidence shows that there is a very close relationship between alcoholism and domestic violence. 90% of the residents are alcoholics this is especially among the youths. The rate at which the prevalence of alcoholism is very high; just as the level of domestic violence.

The involvement of the elderly domestic violence is very high in the area. The young involvement in the domestic violence is high this is coupled with their involvement in alcoholism evidenced with the level of alcoholism which is very high in this area.

4.2.1 SUGGESTION ON HOW THE GOVERNMENT CAN IMPROVE THE PROBLEM OF ALCOHOL DRINKING IN RELATION TO DOMESTIC VIOLENCE STATUS OF HOMES.

The Hypnosis CD Programmes.

These programmes includes testimonial of these who were once drug addict and how they went about healing themselves from the addiction. "If you are ready to just forget about drinking".

If you wish you could just stop thinking about alcohol.....

If you want to stop the pain and sadness that leads you to drink.....

Or maybe you would like to cut down, enjoy and stop.....

This unique approach will stop the cravings and create a solid belief that you are a non drinker.

Imagine how good your life will feel when you end the struggle and create the life you want.

You can dwell on the past and struggle with your addiction forever.

OR

“You can focus on your future, and feel the freedom to thrive”.

Everyone recovers in his or her own personal way. Success rates in many rehab environments are extremely low. If one is ready for an approach that is focused on his/her power, and their strength.

This is a CD programme that you can be used in even their homes an experience that will take them from helpless to happy, and in control of their thoughts, habits and emotions.

They will learn and understand why it is dangerous to affirm that they are an alcoholic for the rest of their life.

They will breathe of fresh air when they learn that alcoholism is not a disease but it is an addiction; and it can be a thing of the past.

You had an addiction; you are no longer an addict.

Society should accept them:

In doing so, they will permanently cement the values and emotional strength that will make them easily realize that they don't drink. They will not be diseased, powerless or have to tell their story about being a recovering alcoholic. They will want to associate with people who make their life happen on purpose.

They will not feed off of the need to be pitied, nor will they want to be praised for not drinking, but they will simply be a non-drinker, some one who used to drink. They will stop the addictive patterns in their subconscious mind. They will create layer of values that determine who they are now, that support the absolute belief that they are anon drinker.

Positive action:

This is the world positive action is trying to create through a system that increase positive behaviours and decreases negative behaviours; imagine a world were everyone treats each other with respect and kindness. Consider what it would be like to be part of a place where all are successful and happy, where all achieve and do their best.

Its reach includes individuals, schools, families, and communities with all their members and subgroups, and it addresses this physical, intellectual, social and emotional domains to teach and reinforce a coherent and comprehensive system of intuitive, universal ideas aimed at achieving success and happiness.

The Breakthrough Method.

This breakthrough method answers all physiological, emotional and spiritual needs. But the big breakthroughs happen when one learns how to dissolve all of the underlying issues that are the contributing factors to your challenging habit. “ I had a ton of invisible baggage that kept me chained to addiction.....” such things like the addict can expect thinks like you can enjoy a wonderful like with your partner of your dreams, you can have an exciting job that pays well, you can possess great supportive friends, you can be closer with your family than ever been before.

Addiction treatment centre

Recognized throughout the country as the leader in residential of alcohol and drug addiction. Addiction rehabilitation and addiction treatment programmes use an alternative to traditional drug rehab programmes.

A holistic approach to drug rehab is maintained to help people learn to live productive; sober lives.

Emphasis is placed on the unique withdrawal programme, the new life sauna detoxification, programme, which eliminates cravings and the series of 8 life skills studies and training. This has proven to be an effective addition treatment for drug rehabilitation alcoholism is believed to be a learned behaviour that is making a person emotional or physical pain, and is not recognized as a disease or mental illness. We use this attitude to provide the most effective drug rehab treatment programme available.

Rehabilitation centres

A societal misconception about addiction and how it even begins. Too often, it is believed that “all addicts or substance abuser needs is a little encouragement, some willingness to change, a few behavioural changes and addiction problem solved”.

Unfortunately for the addict; its just not that easy. Society, as a whole, most generally holds several misconceptions about addiction and the reality it plays in many lives.

CHAPTER FIVE

SUMMARY, CONCLUSIONS, RECOMMENDATION, AREAS FOR FURTHER RESEARCH

5.0 INTRODUCTION

The major objectives of the study were to investigate and analyze the relation between alcohol drinking and domestic violence in Kyabanati village Hoima district.

The purpose of study was;

- i. To investigate the causes of domestic violence in Kyabanati.
- ii. To investigate the causes of alcoholism.
- iii. Examine the prevalence of domestic violence.
- iv. Examine the relationship between alcoholism and violence.
- v. Examine the prevalence of alcoholism.
- vi. Examine how the affected families are addressing the problem of alcoholism.

5.1 SUMMARIES

The summary findings were that 88% were affected and 12% not affected by domestic violence which clearly shows that the level of domestic violence was very high; it also shows that there were more female respondents than male. There is a close relationship between alcoholism and domestic violence, 90% of the residents are alcoholists this is especially among the youth. The rate at which the prevalence of alcoholism is very high is just as the level of domestic violence. The involvement of the elderly domestic violence is very high in the area and the young involvement in domestic violence is also very high coupled with their involvement in alcoholism which is also very high in the area.

5.2 CONCLUSIONS

Drinking alcohol socially and even beyond normal amounts is a regular part of life.

Some individuals however, go beyond just drinking leading onto the path of alcoholism.

If heavy alcohol dependency continues over an extended period, the alcohol drinker may contract a disease such as cirrhosis of the liver, pancreatitis, heart disease, hypertension and more. In addition, alcoholism withdrawal can cause severe biophysical relations in the afflicted. If you suspect a friend of alcoholism talk to them about the problem or try and get help from a health professional. Treating alcoholism usually involves going to a detox programme and attending support groups like Alcoholics Anonymous. While battling alcoholism is a long road, alcohol abuse can be overcome with the possibility to live a normal life.

According to the finding of the study; there is a very close relationship between problem drinking and domestic violence in Kyabanati village. The group most affected are women and the young children. This shows that 90% of the household are affected.

5.3 RECOMMENDATIONS FOR ACTION

To avoid alcohol drinking and domestic violence in Kyabanati / Nyakaihura village Hoima district, the government should address all the above mentioned factors, in light of this, the following should be done:

Probation:

The probation office should strengthen its rules and regulation in regard of domestic affairs.

Family and child department in police:

The family department in police should strengthen its rules and regulations concerning behaviours in family. Such people who are victims should be strongly punished to serve as a lesson to others.

Church:

The church should put in more effort to help its flock and the community at large. This should be through bible studies, scripture unions. In doing so it will reduce on the level of problems associated with alcohol drinking in relation to domestic violence.

5.2 Areas for further research

- Domestic violence in relation to the level of education.
- Problem of alcohol drinking in relation to the level of education

APPENDICES

RESEARCH INSTRUMENT USED (QUESTIONNAIRES).

Dear respondent,

Good morning / afternoon / evening. I am Atugonza Esther, a student of Kampala International University.

I am carrying out an research entitled “Alcohol drinking in relation to domestic violence. The case of Kyabanati village, Hoima district. The purpose of this study is to acquire information about the relationship between the problem of alcoholism and domestic violence. Your consent to participate in this study will highly be appreciated and it is quite uduntary. The researcher shall preserve privacy and confidentiality. The purpose of this research is to obtain information that can be used to help minimize the problem of alcoholism in relation to domestic violence in Uganda today.

Thanks.

SECTION I

PERSONAL PROFILE

Encircle or tick in the relevant responses

1. Sex: (i) Male ☐ (ii) Female ☐
2. Level of education
 - (i) Ordinary level
 - (ii) Advanced level
 - (iii) Tertiary (Specify)
 - (iv) University
3. Occupation
4. Age
5. Marital status
 - (i) Married
 - (ii) Separated
 - (iii) Divorced
 - (iv) Single

SECTION II

Encircle only one out of the four options given per number (questionnaire)

		PREVALENCE OF ALCOHOLISM			
		Very low	Low	High	Very high
1.	To what extent is alcoholism in this area.				
2.	To what extent does your area admit alcoholism.				
3.	To what extent do leaders and elder people in this area involve in alcoholism.				
4.	To what extent do young people involve in alcoholism.				
5.	To what extent is alcoholism a major behaviour in this area.				

		PREVALENCE OF DOMESTIC VIOLENCE			
6.	To what extent is the level of domestic violence in this area?				
7.	To what extent does alcoholism involve in domestic violence				
8.	To what extent do the elderly alcoholics involve in domestic violence.				
9.	To what extent do the young alcoholics involve in domestic violence.				

SECTION III

1. What are the causes for alcoholism in this area?
.....
.....
2. What are the age groups commonly involved in alcoholism in this area?
.....
.....
3. What is your community doing to address the problem of alcoholism?
.....
.....
4. Do the values and culture in your area oppose alcoholism?
.....
.....
5. At what time does domestic violence take place?
.....
.....
6. State the education level of people commonly involved in domestic violence (especially to alcoholism).
.....
.....
.....
7. Does your community have negative attitude towards domestic violence?
.....
.....
8. Which age group is commonly in violence in this area?
.....
.....
9. What is your community doing to address the problem of domestic violence?
.....
.....

10. In your view, do you think alcohol is the major cause of domestic violence?
Yes/No. If No, give reasons.

.....
.....

11. Are you a victim of domestic violence as a result of alcoholism? Yes /No. If
Yes, how is the society helping to address the problem?

.....
.....
.....

12. Do you agree that battering is a socially learned behaviour? And men who
batter frequently use alcohol abuse as an excuse for violence. Yes/No.
Give reasons

.....
.....

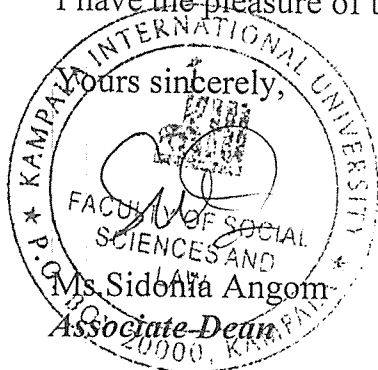
Thank your for your time

FACULTY OF SOCIAL SCIENCES

To.....THE RESPONDENTS.....**IN** KYABAHATI
.....VILLAGE - KYABIGAMBULE.....SUB-COUNTY
.....HOIMA DISTRICT.....WESTERN UGANDA.....

This is to introduce to you Mr/Miss **ATUOGONZA ESTHER LIHUNA** who is a bonafide student of Kampala International University. He/She is working on a research project for a dissertation, which is a partial requirement for the award of a degree. I here by request you, in the name of the University, to accord him/her all the necessary assistance he/she may require for this work.

I have the pleasure of thanking you in advance for your cooperation!



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