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Opinion Leaders in Interpersonal Communication and Their Influence on Alcohol Consumption among Students in Government Tertiary Colleges in Kenya

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Abstract: *The study aimed at evaluating the influence of opinion leaders in interpersonal communication on alcohol consumption among students in government tertiary colleges in Kenya. The study was anchored on the two-step flow of communication model. The research used the descriptive cross-sectional survey design and utilized both qualitative and quantitative methods to collect data. From the campuses identified, a representative sample from each campus was chosen. A questionnaire was used to obtain qualitative data from sampled students. An interview guide was instrumental in interviewing key informants, while another guide for focus group discussions was used among the students to gather further qualitative data. Quantitative data was analyzed using descriptive statistics (mainly percentages) and inferential statistics (the chi-square goodness of fit test) with the aid of SPSS. The results were presented using tables and bar graphs. The findings revealed that opinion leaders had a significant influence on the alcohol consumption behavior among college students. Opinion leaders such as peers, family members and celebrities influence behavior. This is an indication that through observation and interpersonal communication, the college students are likely to copy what their opinion leaders are doing, including alcohol consumption.*

Keywords: *opinion leaders; interpersonal communication; alcohol consumption*

I. Introduction

Opinion leaders in interpersonal communication are individuals who command a following or influence how people make decisions based on what they communicate either through actions or verbally. They include role models, celebrities, family members and peers, whose behavior (interpersonal communication) is likely to influence how those who look upon them behave. Interpersonal Communication being a process where people share information, opinion leaders tend to share a lot in terms of communication which their listeners and followers are keen on.

It is generally believed that social interactions with peers comprise the biggest drinking motives among students (Steele, Ding, & Ross, 2019; Moreno & Whitehill, 2014). The authors argue that there is a strong link between attendance at social gatherings and alcohol consumption. A better understanding of college students' reasons for drinking offers the possibility of improving prevention and treatment efforts designed to reduce excessive drinking (Dillard, Li, & Cannava, 2022). Belief in "social lubrication" effect of alcohol is seen to be especially strong among college students, who report more positive than negative consequences of drinking alcohol (ibid). College students' drinking motives are based in social interactions with peers. There is a strong motivating link between attendance at social gatherings with alcohol consumption among peers (ibid). Thus, we may conclude that medical students who consume alcohol are most likely doing so to maximize the social and fun aspects of their experience.

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Social factors play an important role in determining college student alcohol consumption (Carey et al. 2016). Most drinking in college occurs with peers in a social context. The researchers argue that social functions provide the best opportunities for students to drink, with alcohol being viewed as a social lubricant. Indeed, social motives for drinking rank higher than coping motives in the college setting. According to research, norms are propagated in a social system through communication (Rui & Stefanone, 2017). When peers engage in frequent discussions about alcohol consumption and alcohol-related consequences, there is a corresponding increase in the likelihood of excessive alcohol consumption (Dorsey, Scherer, & Real, 1999). Likewise, when friends talk about drinking, there is a positive association with current drinking and future drinking intentions (Real & Rimal, 2007); these relationships are true even when controlling for perceived peer drinking norms. Communication about drinking also moderates the relationship between descriptive norms and drinking, with a stronger relationship of descriptive norms to alcohol consumption when drinking communication is high (Real & Rimal, 2007). Although the studies reveal that interpersonal communication about alcohol results in future drinking intentions, there is need to find out what is the nature of the conversations the students engage in about drinking.

Some studies on the role of peers in influencing alcohol consumption have also looked at the family setting where the adolescent in question comes from. Parents and friends of the same age are the most influential and important people in the lives of college students (Wilks, 1986). In open family settings, majority of adolescents, who include college students, regard their parents as critical in moderating their attitudes, behaviours and beliefs. The adolescents are even quick to deny that peers could influence their change in attitudes or behaviours (Berndt, Miller, & Park, 1989). It should, however, be noted that this happens only in open family communication, where children may share similar attitudes towards alcohol with their parents, subsequently getting less influenced to engage in negative drinking activities by outside factors. A study to examine the relationships among family environment, peer influence, stress, self-efficacy, and adolescent alcohol use (Nash et. Al 2005) found that parental expectations of adolescent alcohol use significantly moderated all structural relationships. Greater parental disapproval of alcohol use was associated with less involvement with friends and peers who use alcohol, less peer influence to use alcohol, greater self-efficacy for avoiding alcohol use, and lower subsequent alcohol use and related problems. Thus parents rank higher in terms of influence against alcohol consumption and their influence on their children may overwhelm that of peers.

Peer communication is also a critical mechanism through which norms are disseminated in social groups. In a study to explore the role of peer communication in social behavior, Real & Rimal (2007) found a significant relationship between peer communication and alcohol drinking behaviors and intentions after controlling for perceived norms. Considering that peers are also critical in influencing behavior, Yanovitzky et al. (2006) also did a study on social distance, perceived drinking by peers, and alcohol use by college students. Their study showed that perceived alcohol use by proximate peers (best friends and friends) was a stronger predictor of students' personal alcohol use than perceived alcohol use by more distant peers (such as students in general), controlling for other strong predictors of alcohol use by college students (age, gender, race, off-campus residency, and sensation-seeking tendencies). There is need to investigate whether any significant relationship exists between peer communication and alcohol drinking behaviors and intentions among medical students in government – tertiary colleges in Kenya. With little attention having been given to the role of communication with peers in medical college students' alcohol use, this study will bridge the gap.

Kenya Government statistics show that alcohol and drug abuse is highest among young adults aged between 15 and 29 and lowest among adults who are 65 years or older. About 16.6 percent of urban dwellers consume alcohol as compared to 11.4 percent of rural

dwellers. The lowest rate of alcohol abuse (below 10 percent) is in North Eastern and Central regions. At 15.7 percent, Nairobi, the capital city, has the highest number of alcohol consumers. Changaa, a traditional local brew, is popular among the masses because it is cheap and readily available. Its highest usage is in Nairobi Province and Western Province at 7.2 and 7.1 percent respectively (NACADA, 2013).

The prevalence of alcohol consumption among the youth in Kenya paints a picture of a nation whose big population is enslaved by alcoholism. The age group (15-29 years) most affected by harmful consumption of alcohol (Ross & DeJong, 2008) include students of KMTC. This category may themselves serve as role models for other youth, since today's medical students will be tomorrow's health care providers and health promoters (Shah et al., 2010). Facts available portray alcohol consumption as one of the major challenges facing the youth in Kenya, with statistics indicating alcohol consumption is on the increase among the youth, including medical college students. The age of initiating alcohol use in Kenya is at a very tender age, between 11 – 20 years (NACADA, 2011), meaning that even College students are not an exception. Government statistics show that alcohol and drug abuse is highest among young adults aged between 15 and 29 and lowest among adults who are 65 years or older (WHO, 2014). Reduction of harmful alcohol consumption is therefore a key strategy for youth empowerment and reduction of crime (Kenya Vision 2030). The drug and alcohol menace has mainly been attributed to inadequate social skills, limited resources and opportunities, increasing social decay and permissiveness towards alcohol and drug consumption and unemployment in the country (Chebukaka, 2014).

1.1 Statement of the Problem

Kenyans aged 15 years and above are heavy drinkers, consuming on average 1.74 litres of pure alcohol annually (WHO, 2004). Alcohol consumption is on the increase among the youth (Ramsoomar & Morojele, 2012), despite Government efforts to address the menace. The age of initiating alcohol use in Kenya is between 11 – 20 years (NACADA, 2011), which includes the college-going age. College students positively view alcohol use and the attendant experience as socially-acceptable within a peer group context (Kinard & Webster, 2011), and younger populations in Kenya are viewed as most likely to engage in excessive alcohol consumption, without considering negative consequences. A study carried out in Kenya found that 33% of respondents were involved in excessive alcohol consumption, and reported engaging in unprotected sex and sexual violence (Kendagor et al., 2018). Peers act as an influential model to other peers by introducing, providing, or pressuring risky activities related to alcohol use (Kinard & Webster, 2010). Despite the fact that statistics of alcohol effects on youth in Kenya prompted the establishment of NACADA in 2012 to address the menace (NACADA, 2012), alcohol use disorders and associated conditions are still on the rise (Kendagor et al., 2018). This study therefore, sought to assess the influence of opinion leaders in interpersonal communication on alcohol consumption among students in government tertiary colleges in Kenya.

1.2 Objectives of the Study

1. To find out the influence of opinion leaders on alcohol consumption among students in government tertiary colleges in Kenya.

1.3 Research Hypotheses

HO: Opinion leaders do not significantly influence alcohol consumption among students in government tertiary colleges in Kenya.

II. Review of Literature

2.1 Theoretical Framework

The study was anchored on two step-step flow of communication model by Lazarsfeld et al. (1944). The model posits that most people form opinions as a result of the influence of opinion leaders, who are in turn influenced by the mass media (Lazarsfeld, 1944; Katz & Lazarsfeld, 1955). The theory says that ideas flow from mass media to opinion leaders first, then from the opinion leaders to a wider population. According to the theory, opinion leaders pass on their own interpretation of information in addition to the actual media content. Opinion leaders are people who are initially exposed to a given media content, and who give it an interpretation based on their own opinion. The opinion leaders then begin to share their opinions with the general public who become their "opinion followers", and also share the same opinion with others. In this process, social influence is created and adjusted by the ideals and opinions of each specific "elite media" group, and by these media group's opposing ideals and opinions and in combination with popular mass media sources. Therefore, the leading influence in these opinions is primarily a social persuasion (Staubhaar, Larose, & Davenport (2009).

In the context of this study, opinion leaders emerge to be people with more knowledge resources, and might be more engaged in producing content than those who are not opinion leaders. In addition, because opinion leaders are regarded as those positioned at the strategic location of the network into which useful information and resources flow, their remarks are likely to be worthy of gaining attention. The perception of, and frequent discussion with, opinion leaders mostly leads to their greater influence. Velasquez (2012) also found that the expertise cue in postings increases feedback from others in online public discussions. In this regard, opinion leaders' messages might be distributed more than the messages of individuals who are not opinion leaders. This theory was used to expound on the role of opinion leaders in influencing alcohol consumption behavior among the students.

2.2 Conceptual Framework

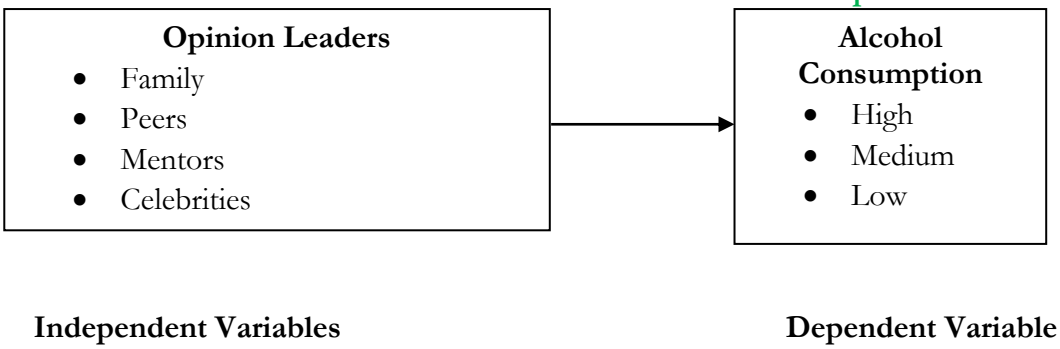

Figure 1. *Conceptual framework*

2.3 Opinion Leaders and Alcohol Consumption

Sismondo (2013) observes that opinion leaders are key influencers in the society whose views and perceptions influence the decision made by the society members especially the youth. The information shared by these individual who vary from the older family members, celebrities, leaders and mentors is capable of transforming the behaviour of their followers. Sarathy and Patro (2013) analysed the influence of opinion leaders on the behavioral change. The scholars sought to establish the role played by the key societal opinion leaders on the decisions made by individuals and how their opinions and perceptions affect the change of behavior. The study reviewed empirical studies in Pakistan. The findings

revealed that the opinion leaders had a significant influence on the behaviors of individuals especially those who had trust in them. The opinion leaders as indicated by Sarathy and Patro (2013) are the influential persons who the society perceive to be more experienced and informed on particular aspects. Through this perception, the opinion leaders are able to manipulate and influence the behavior of individuals towards their preferences.

Chakrabarti (2013) studied the influence of opinion leadership and associated measures among alcohol consumers in India. The study sought to determine the influence of opinion leaders on the consumption of alcohol and how they prevented drug use. The study utilised a correlation research design and had a sample of 117 respondents drawn from both young and old alcohol consumers in India. The study established that the opinion leaders such as parents and society leaders had a key influence on alcohol consumption especially among the youth. According to Chakrabarti (2013), young persons are more likely to be influenced by opinion leaders to abuse drug as compared to older persons. This explains the observation by Howell, Shaw, and Alvarez (2015) that children raised up in families whose any member is an alcohol consumer are more likely to consume alcohol in future as compared to those that have not member consuming alcohol. According to Howell et al. (2015) and Chakrabarti (2013), opinion leaders are more likely to be followed by those that they mentor in that they consider them as heroes who know what they are doing.

Carey, Lust, Reid, Kalichman, and Carey (2016) analysed how mandated college students talk about alcohol. Their study sought to assess the peer communication factors associated with drinking among college students. The study surveyed 273 students and 31 college staff and experts on drug and substance use. The study established that the communication among the college students influenced their uptake to drug and substance use. Carey et al. (2016) indicated that most of the drug users in the colleges cited their influence to be from either information obtained from other students and peers or from their opinion leaders. This reveals the influence of opinion leaders on alcohol consumption where they are more capable to influence the decisions by the young students who mainly perceive them as mentors. This concurs with the observations by Kingsland, Tremain, and Bennett (2018) who indicated that owing to the influence of opinion leaders on the decisions made by young people especially the youth and the young adults, it is essential for the opinion leaders to be at the forefront of influencing their decision against alcohol and drug abuse.

III. Research Method

3.1 Research Design

The research used a cross-sectional survey design and utilized both qualitative and quantitative methods to collect data. According to Nachmias and Nachmias (2006), cross-sectional studies allow researchers to make statistical references to broader populations and generalize their results to real-life situations, thus increasing the study's external validity. Cross sectional studies are also conducted in their natural settings while allowing researchers to employ random probability samples.

3.2 Target Population

The target population for the study was all the students in government tertiary colleges in Kenya, which is KMTC. As at December 2019, the College had 71 campuses spread across 43 counties out of the 47 counties in Kenya (KMTC, 2019). The study targeted 46,750 students in the 71 the college's campuses. The key informants targeted in the study were the students' counselors in the 71 campuses. Each campus had one counselor, and so there were 71 counselors targeted.

3.3 Sampling

The sample size was determined by using the following formula by Fisher *et al.* (1991) and Cochran (1977) formulae that are designed for large populations. According to Fischer, any population of more than 10,000 people is considered infinite, and the sample size is calculated using the formula:

$$n = \frac{z^2 p (1-p)}{e^2}$$

z = is the Z value for the corresponding confidence level (i.e., 1.96 for 95% confidence);
e = is the margin of error (i.e., 0.05 = ± 5%) and
p = is the estimated value for the proportion of a sample that have the condition of interest. P= 50% (the most conservative estimate)

$$N = \frac{1.96^2 p(1-p)}{e^2}$$

$$n = \frac{1.96 \times 1.96 \times 0.5 (1- 0.5)}{0.05 \times 0.05} = 384$$

Stratified random sampling was used to pick the 384 respondents from 15% of the campuses. This was informed by Kothari (2014) who argues that between 10% and 30% of the units of analysis is adequate for a study. This study used 15% of the 71 campuses hence 11 campuses were selected. These campuses were selected based on Creswell (2013) argument that in a target population where there are autonomous groups, it is appropriate to prioritize the groups with the high number of members since this is most likely to have the characteristics of the entire population. For the qualitative sample, counselors were purposively picked from the 11 campuses where one counselor was selected from each campus. These were the key informants for interviews. In addition, 12 students were engaged in two focus group discussions. As such the total qualitative sample size was 23 (11 counselors and 12 students) and this according to Scholar (Year) was an acceptable number of qualitative sample.

3.4 Data Collection Procedures

A structured questionnaire was used to collect data from the 384 student respondents using a self-administered questionnaire. The questionnaires were administered through drop and pick method and online means through Google forms.

Interview guide was used to collect data from the 11 key informants, who comprised of Counselors (one from each of the eleven KMTC Campuses), were contacted a day before to book an appointment.

Two focus group discussions were conducted with students to probe and elicit discussions among students so as to gather further qualitative data not fully covered by the structured questionnaires. Each focus group comprising of six students (3 males and 3 females) was convened by informing the respondents two days before.

3.5 Data Analysis

Quantitative data from the questionnaires were taken through a coding scheme to classify responses. All data was cleaned to minimize data entry errors. The data was entered in Statistical Package for Social Scientists (SPSS). It was then be analyzed using descriptive statistics including mean, mode, percentages and cross tabulations, which, according to (Nachmias & Nachmias, 2006) enable researchers to summarize and organize data in an effective and meaningful way. Data was also analyzed using inferential statistics (correlation

coefficient, regression analysis and ANOVA). Qualitative data from in-depth interviews with administrators and focus group discussions with the students was transcribed and coded as per the emerging themes, based on the outlined study objectives and the research questions. Key themes were then isolated and merged with the quantitative data to further explain the phenomena emerging from the research study.

IV. Results and Discussion

4.1 Response Rate

The study sought to find out the rate at which the targeted respondents participated in the study. This determined whether the study attained a reliable number of respondents to make conclusions and recommendations. The study had a sample of 384 respondents who were surveyed using a structured questionnaire. A response rate of 70.6% (271 respondents) was achieved and the data used for analysis. This therefore makes the study appropriate to make conclusions and recommendations since according to Creswell (2005) and Kingslay (2012) a response rate of 30-60% in a study is adequate for making conclusions and recommendations.

4.2 Opinion Leaders and Alcohol Consumption

The study assessed the influence of opinion leaders on alcohol consumption among college students in Kenya Medical Training College. The study sought to establish the role played by family members, peers, mentors and celebrities as the major opinion leaders on opinion leaders on alcohol consumption among college students in Kenya Medical Training College. The respondents were asked to indicate their level of agreement or disagreement on specific statements on the opinion leaders. Table 1 summarizes the findings. The findings are in line with those by Edwards, Banyard, Waterman, Hopfauf, Shin, Simon, and Valente (2022), who established that opinion leaders such as family members are integral in influencing how people perceive things and their behaviour in general.

The findings further revealed that majority of the respondents agreed that they felt comfortable following the footsteps of their peers no matter the behaviour they depicted (Mean = 3.86; standard deviation = 1.01). The findings concur with those by Aghaei, Mohraz, and Shamshirband (2020) who indicated that the celebrities and mentors are key opinion leaders who influence the behaviour of those they mentor. This is corroborated by Jungnickel (2018) who established that most of the youth who engaged in alcohol and drug abuse had mainly copied it from celebrities or from people who they adored.

Table 1. Descriptive Results on Opinion Leaders

Statements	Mean	Std. Dev.
I have a member of my family that consumes alcohol	4.01	0.88
I always adhere to any information shared to me by my family members	3.84	1.02
I share all kinds of information including drug related with my family members	3.64	1.08
I always listen and adhere to what my peers say or do	3.77	1.02
I feel comfortable following the footsteps of my peers no matter the behaviour they depict	3.86	1.01
My peers share any information with me including issues on alcohol and drug abuse	3.67	1.03
I have mentors who consume alcohol with my knowledge	3.97	0.95
I feel obliged to do what my mentors do regardless of whether its right or wrong	3.83	1.05

My certain behaviours have been influenced by those of my mentors	3.75	1.04
I know celebrities who consume alcohol and drugs	3.91	0.96
I perceive what celebrities do to be right for them and their status	3.79	1.03
It is considered valuable to copy the behaviours of the celebrities by my mates	3.77	1.06

The key informants also weighed into the matter on the role played by opinion leaders in influencing alcohol consumption. All the counsellors interviewed said that opinion leaders had a major role to play in influencing the alcohol consumption behavior among students. The findings imply that opinion leaders have a major role to play in influencing behaviours. According to Hendriks, van den Putte, de Bruijn, and de Vreese (2014), the continued uptake of alcohol has been mainly influenced by how people perceived as opinion leaders portray alcohol to those whom they mentor. When one praises alcohol and is seen taking it as a form of entertainment, it encourages those that look-up to them to also try taking alcohol in order to have a similar experience (Dong, Hung & Cheng, 2016).

a. Alcohol Consumption

The study sought to establish the respondents' opinions on alcohol consumption. The respondents were asked to indicate their level of agreement or disagreement with specific statements addressing alcohol consumption in terms of high levels of consumption, medium consumption levels and low consumption levels. As the findings on Table 2 portray, it can be depicted that alcohol consumption among college students is rampant and on the rise, as majority of the respondents agreed that they were frequent consumers of alcohol. According to Bazrafshan, Akbari, Rahmati, and Ghadakpour (2017), alcohol consumption among college students remains to be one of the factors that have continued affected the educational output and the success of the students in courses they undertake. This is seconded by Banerjee *et al.* (2015) who argued that as the number of university and college students involved in alcohol consumption continues to surge, and so has been the rise in the number of dropouts and failure to complete within the set timelines.

Table 2. Descriptive Results on Alcohol Consumption

Statements	Mean	Std. Dev.
I frequently consume alcohol	3.77	1.23
I have never taken alcohol but would wish to try someday	3.87	1.23
I take small amount of alcohol but frequently	3.80	1.20
I take alcohol because my friends are also taking	3.68	1.15
I have set limits on the amount of alcohol I can take at a go	2.25	1.56

4.3 Correlation Analysis

Correlation analysis was carried out to establish the correlation between opinion leaders and alcohol consumption. The findings as shown in Table 3 revealed that opinion Leaders had a Pearson correlation coefficient of 0.655 when correlated with alcohol consumption among college students. The correlation was significant at $0.000<0.05$. This implies that there is a significant and strong positive correlation between opinion leaders and alcohol consumption among college students. It also implies that with increase in role played by opinion leaders such as family members, celebrities, peers and friends, the alcohol consumption among college students will increase.

Table 3. Correlation Results for Opinion Leaders

		Alcohol Consumption	Opinion Leaders
Alcohol Consumption	Pearson Correlation	1	
	Sig. (2-tailed)		
	N	271	
Opinion Leaders	Pearson Correlation	.655**	1
	Sig. (2-tailed)	.000	
	N	271	271

**. Correlation is significant at the 0.01 level (2-tailed).

4.4 Hypothesis Testing

The study hypothesis was tested using a regression model. The model was as shown:

$$\mathbf{Y = \beta_0 + \beta X}$$

Where; Y = dependent variable and X = independent variable, and β = the coefficient/constant. The results as shown in Table 5 revealed that opinion leaders had a significant influence on alcohol consumption. The results revealed that the β value for variable opinion leaders was 0.705 and the model equation now becomes:

$$\mathbf{Y = 0.970 + 0.705X}$$

This implies that a unit change in the opinion leaders, could lead to up to 70.5% increase in the Alcohol Consumption. The P-value for the variable was 0.000<0.05 again implying that the opinion leaders significantly influenced the Alcohol Consumption.

Table 5. Hypothesis Testing Results

Model		Unstandardized Coefficients		Standardized Coefficients	t	Sig.
		B	Std. Error	Beta		
1	(Constant)	.970	.178		5.455	.000
	Opinion Leaders	.705	.050	.655	14.213	.000

a. Dependent Variable: Alcohol Consumption

The study findings revealed that the major opinion leaders upheld by the college students surveyed included the family members, their peers, the mentors and the celebrities. These are key persons that they looked up to; whose behavior and their roles in their lives influenced their behavior. The respondents agreed that members in their family taking alcohol influenced them to consume alcohol, since they adhered to the information shared by the family. The findings further revealed that the information shared among the peers such as alcohol consumption behavior influenced the students to consume alcohol. The mentors and celebrities also influenced the students to copy their behavior including alcohol consumption (Jungnickel, 2018). Many youths and adolescents embrace the alcohol consumption behavior through the influence of their peers, role models, mentors and celebrities. The information these opinion leaders share with them often shape their behavior, thus making them embrace what they do. The inferential analysis results confirmed this by revealing that the opinion leaders had a significant influence on alcohol consumption among college students. The findings imply that with increased change in behaviors such as alcohol consumption of the opinion leaders and showing this to those that look onto them, medical students in government tertiary colleges were influenced and embraced the behavior as well (Koketso, Calvin, & Prudence, 2019).

V. Conclusion

5.1 Conclusion of the Study

The study concluded that opinion leaders had a significant influence on alcohol consumption among students in government tertiary colleges in Kenya. Through the influence by the peers such as the classmates and friends, the students often found themselves copying their behavior including alcohol consumption. The exchange of ideas between the family members and the students also influenced the way they (students) behaved, which shows how the relatives who are alcoholic can easily influence the students to consume alcohol. The study further concluded that through the mentors and the celebrities especially those that the youths including the students look-up to influence the students' behavior and their perception towards alcohol consumption.

5.2 Recommendations

The opinion leaders are critical in determining the behavior of the students particular the young students in College. It is the duty of the school management to ensure there are vigorous seminars and sessions to talk to the students on the need to independently choose their behavior based on what is morally acceptable without blindly following the opinion leaders. The key opinion leaders such as the family members, mentors, celebrities and national leaders should impact positive and beneficial behavior to the followers and to those that look unto them. They should practice morally accepted behavior that do not promote alcoholism and other bad behavior so as not to influence young people in such behaviors.

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