

**THE CONTRIBUTION OF PARENTAL ALCOHOL ABUSE TO CHILD
MALTREATMENT AND HIV RISK AMONG CHILDREN IN LUWERO
SUBCOUNTY, LUWERO DISTRICT**

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**A DISSERTATION SUBMITTED TO THE SCHOOL OF SOCIAL SCIENCES IN PARTIAL
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**UGANDA CHRISTIAN
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DECLARATION

I declare that this research “*the contribution of parental alcohol abuse to child maltreatment and HIV risk among children in Luwero sub county, Luwero district*” is my work and has not been submitted for any academic award in any institutions of higher learning.

Sign: 

Date: 4/17/2026

Nakato Patience Nakatudde

APPROVAL

I approve that this research “*the contribution of parental alcohol abuse to child maltreatment and HIV risk among children in Luwero sub county, Luwero district*” was written under my guidance as the university supervisor.

Sign:  .

Date: 17/04/2026

Mrs. Mercy Amaniyo

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ABBREVIATIONS

AIDS	Acquired Immune Deficiency Syndrome
HIV	Human Immunodeficiency Virus
MGLSD	Ministry of gender, Labour and Social Development
NGOs	Non-Governmental Organizations
SPSS	Statistical Package for Social Sciences
UBOS	Uganda Bureau of Statistics
UCU	Uganda Christian University
UDHS	Uganda Demographic Health Survey
UNICEF	United Nations Children's Fund
WHO	World Health Organization

ABSTRACT

The study examined the contribution of parental alcohol abuse to child maltreatment and HIV risk among children in Luwero Sub County. The study was guided by social learning theory and ecological system theory. The researcher used a descriptive survey. Information was gathered from 52 respondents including parents, children, social workers, community leaders and health workers through questionnaires and interviews.

Findings revealed that parental alcohol abuse in Luwero sub county is influenced by poverty, stress, social acceptance of drinking alcohol and easy availability of alcohol. The study revealed that alcohol abuse contributes to child neglect, emotional and physical abuse, lack of basic needs and school absenteeism. It further increases children's vulnerability to HIV infection through poor supervision, exposure to sexual exploitation and early sexual activity.

The research concludes that parental alcohol abuse significantly undermines child protection and recommends strengthened alcohol control policies, family counselling and child protection interventions.

CHAPTER ONE

INTRODUCTION

1.0 Introduction

This chapter presented background to the study, problem statement, research purpose, objectives, research questions, scope, justification, significance, conceptual framework and operational definitions.

1.1 Background to the study

Alcohol abuse was recognized as a global social and public health challenges affecting individuals, families and communities. WHO (2022) reported that about 2.3 billion people worldwide consumed alcohol and harmful use of alcohol caused around 3 billion deaths each year. Parental alcohol abuse was identified as one of the leading causes of physical abuse and emotional distress. Children who grew up in alcohol abusing households experienced maltreatment, poor academic performance and exposure to risky sexual behaviors that increased their vulnerability to HIV infection. The UNICEF (2021) reported that children living in unstable and alcohol affected households were more likely to face abuse, neglect and exploitation.

In Africa, alcohol consumption patterns were influenced by social norms, poverty as well as ineffective implementation of alcohol control regulation. Studies conducted in Kenya, South Africa and Uganda have showed that excessive alcohol use among parents contributes to family conflict, domestic violence and poor supervision of children (Nabaggala et al., 2021; Parry & Morojele, 2020). These challenges increased children's chances of abuse, neglect and early sexual exposure making them more susceptible to HIV and other social problems.

In Uganda, alcohol abuse remained a serious problem affecting families and communities. UDHS (2022) reported that 47% of men and 34% of women consume alcohol regularly. In rural areas such as Luwero District, local brews like waragi are easily accessible and affordable making alcohol consumption a common daily activity which led to a rise in child neglect, domestic violence and school dropout cases.

Reports from community based services department in Luwero indicated that many cases of child maltreatment are linked to parental alcohol use (Luwero District Community Development Report, 2023). These conditions exposed children to exploitation, risky behavior and potential HIV infection due to lack of parental care and supervision.

1.2 Problem statement

Ideally, parents were expected to provide love, care, protection and guidance to their children so they can grow in safe and nurturing environments. However, in many homes in Luwero sub county, this expectation was not adequately fulfilled due to parental alcohol abuse.

In reality, parental alcohol abuse was common in the area with many parents spending excessive time and financial resources on alcohol instead of providing for their families. This situation resulted in different types of child maltreatment including neglect, physical abuse and emotional harm, malnutrition and school dropout. Children from alcohol affected families were also exposed to unsafe environments, sexual abuse and risky behaviors that increased their vulnerability to HIV infection.(Kyomuhendo, 2020). Although Uganda had laws and programs promoting responsible parenting and child protection such as the Children Act (2016) and the National Alcohol Policy, their enforcement remained weak at the community level

(Ministry of Gender, Labour and Social Development, 2021). Limited research had been conducted specifically to examine how parental alcohol abuse contributed to child maltreatment and HIV risk among children in Luwero sub county. This study aimed at filling this gap to understand how parental alcohol abuse contributed to child maltreatment and increased HIV risk among children in the study area.

1.3 Research objectives

To examine the contribution of parental alcohol abuse to child maltreatment and HIV risk among children in Luwero Sub County, Luwero District.

1.4 Specific objectives

To identify community and family factors that influenced parental alcohol abuse in Luwero sub county.

To examine the contribution of parental alcohol abuse to child maltreatment in Luwero sub county.

To assess the way in which parental alcohol abuse increased children's vulnerability to HIV infection.

1.5 Research questions

What factors influenced parental alcohol abuse in Luwero sub county?

What is the contribution of parental alcohol abuse to child maltreatment in Luwero sub county?

How does parental alcohol abuse expose children to HIV risk?

1.6 Scope of the study

1.6.1 Content scope

The study focused on analyzing how parental alcohol abuse contributed to child maltreatment and HIV risk among children. It explored issues such as child neglect, physical and emotional abuse, poor supervision and children's exposure to risky environments and sexual behaviors.

1.6.2 Time scope

The research reviewed literature published between 2015 and 2024 to capture recent information related to alcohol abuse, child maltreatment and HIV risk among children.

1.6.3 Geographical scope

The research was carried out in Luwero Sub County, Luwero District. The area was largely rural with most residents engaged in small scale trade and subsistence farming. It had several local brewing sites and bars making alcohol easily accessible. The area was selected because of reported cases of parental alcohol abuse, domestic violence and child neglect (Luwero District Local Government, 2023).

1.7 Justification of the study

The research was important because parental alcohol abuse was recognized as a major contributor to child maltreatment and increased HIV risk among children (WHO, 2022; Nabaggala et al., 2021). The finding of the study provided important information on how how parental alcohol abuse contributed to child neglect, abuse and exposure to HIV risk.

The study also helped social workers, policy makers and community leaders to understand the challenges faced by children living in alcohol affected families. The findings supported the development of appropriate interventions such as counselling services, family support programs and alcohol control strategies to protect children

1.8 Significance of the study

To researchers and academicians. The study contributed to existing knowledge on parental alcohol abuse, child maltreatment and HIV risk. It also provided a reference for future researchers interested in child protection and family welfare.

To the community. The study raised awareness about harmful effects of parental alcohol abuse on children.

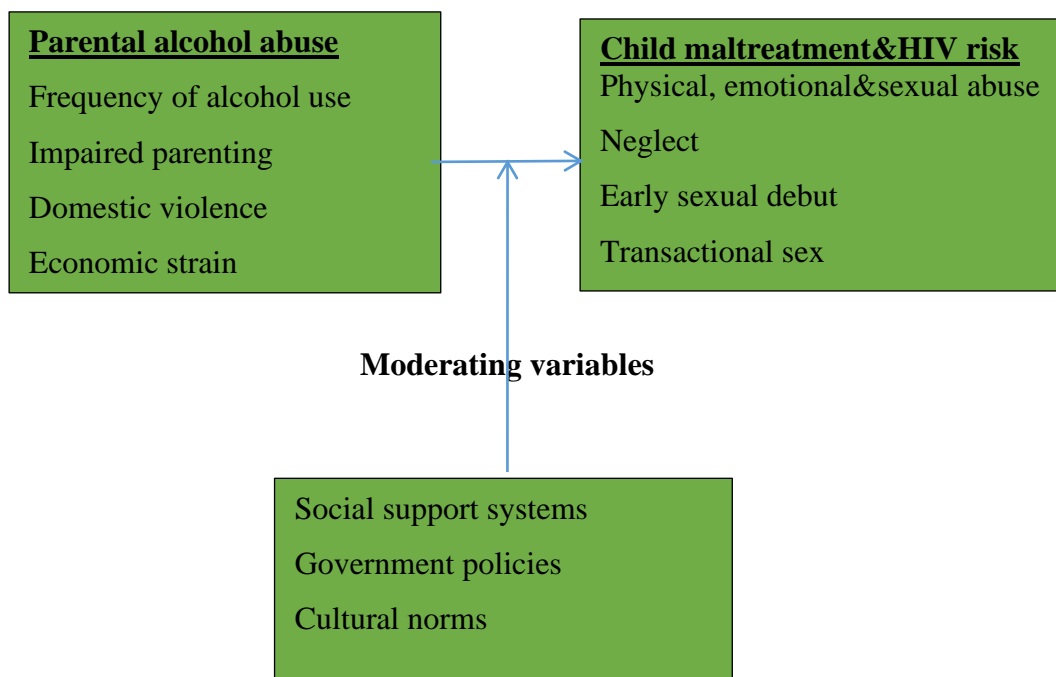
To practitioners and social workers. The study provided important information for designing community based programs such as counseling, family therapy and rehabilitation for alcohol affected families.

To policy makers. The study supported government agencies like MGLSD and NGOs in strengthening policies and programs aimed at protecting children and controlling alcohol abuse.

1.9 Conceptual framework

Independent variables

Dependent variables



(Source: Researcher, 2025)

NB

The conceptual framework illustrated how parental alcohol abuse influenced child maltreatment and HIV risk. This relationship was influenced by moderating factors such as social support systems, government policies and cultural norms.

Parental alcohol abuse led to neglect, poor supervision and family conflict which increased children's vulnerability to abuse, exploitation and HIV infection. Social support systems and effective policies helped to reduce these risks.

1.10 operational definitions

Parental alcohol abuse. This referred to excessive and regular consumption of alcohol by parents that negatively affected their ability to care for and protect their children.

Child maltreatment. This referred to any act of abuse or neglect that negatively affected a child's physical, emotional and psychological well being.

HIV risk. Referred to likelihood of being exposed to circumstances to circumstances that increased the chances of HIV infection.

Neglect. Failure of parents or guardians to provide basic needs such as food, shelter, education and emotional support.

Early sexual debut. This referred to engaging in sexual activity at an early age before reaching 15 years.

CHAPTER TWO

LITERATURE REVIEW

2.0 Introduction

The purpose of this study was to examine contribution of parental alcohol abuse to child maltreatment and HIV risk among children in Luwero sub county, Luwero district. literature were reviewed according to objectives of the study.

2.1 Theoretical framework

This study was guided by social learning theory developed by Albert Bandura and Ecological systems theory by Urie Bronfenbrenner in 1994.

Social learning theory states that individuals acquire behavior through observing others, imitation and interaction with their environment. According to this theory, children learn behaviors by observing the actions of their parents and other people around them.

In families where parents abused alcohol, children were exposed to negative behaviors such as violence, neglect and poor emotional control. As a result, children were more likely to experience stress, trauma and may adopt risky behaviors such as substance use and early involvement in sexual activity. Such behaviors increased children's vulnerability to abuse, exploitation and HIV infection.

The theory also explains that parents who misuse alcohol may use harmful disciplinary methods such as shouting, beating or neglect because of the influence of impaired judgment. Studies showed that substance using parents are more likely to model aggressive behavior and emotional instability which contributes to child maltreatment (Kumpfer & Alvarado, 2020).

Ecological systems theory further helped to explain how different levels of the environment influence parental behavior and child outcomes. The theory argued that individuals were affected by multiple systems including the family, peers, community, culture and government policies (Bronfenbrenner, 1994). Parental alcohol abuse was therefore shaped not only by personal choices but also by factors such as poverty, social norms, availability of alcohol, stress and weak enforcement of alcohol control laws. When these environmental factors were unfavorable, children became more vulnerable to neglect, abuse and risky situations that exposed them to HIV infection. For example, a community with many bars and drinking sites increased parents' access to alcohol which reduced supervision and protection of children. Studies also showed that children living in unstable family environments tend to experience emotional distress, poor developmental outcomes and risky adolescent behaviors (UNICEF, 2021).

Social workers applied this theory by promoting positive parenting practices, counselling parents struggling with alcohol abuse and protecting children from harmful family environments. Therefore, the theories were important to this study because it explained how parental alcohol abuse influenced child maltreatment and increased HIV risk among children.

2.2 Empirical evidence

According to the World Health Organization (2022), alcohol misuse weakened parental judgement and reduced their ability to offer care and protection to children.

In the United states, Smith and Wilson (2020) conducted a study which found that households where both parents misused alcohol recorded higher cases of child neglect, malnutrition and school dropout compared to household without alcohol abuse.

In South Africa, Parry and Morojele (2020) reported that parental alcohol abuse contributed to domestic violence, child neglect and broken family relationships. The researchers found out that alcohol misuse increased family conflict and reduced parental participation in children's education and well being.

In Kenya, Akinyi et al. (2019) found that excessive drinking among parents was linked to high rates of child emotional abuse, exposure to unsafe environment and risk of early sexual activity among adolescents.

Nabaggala et al. (2021) established that parental alcohol abuse in rural districts weakened family functioning and reduced the supervision children receive. The study noted that many children from such homes suffered domestic violence, food insecurity, poor school attendance and exposure to sexual abuse. Kyomuhendo (2020) also reported that excessive drinking contributed to emotional stress and social vulnerability among children especially when parents failed to meet their responsibilities.

2.3 Community and family factors that influence parental alcohol abuse

Globally, factors such as stress, unemployment, cultural acceptance of alcohol and availability of cheap alcohol increased the likelihood of excessive drinking among parents (WHO, 2022). In many African communities, alcohol consumption was socially accepted and used during ceremonies, social gatherings and as a means of coping with stress and poverty. This cultural acceptance sometimes made it difficult for parents to regulate their drinking habits.

In Uganda, studies showed that many rural communities have high levels of poverty and unemployment which increased emotional stress among parents and make them more likely to use alcohol as a coping mechanism (MGLSD, (2021). Luwero District Community Development Report (2023) indicated that many families in the area suffered from financial problems, domestic violence and weak family support structures all of which encouraged alcohol abuse among adults.

Homes affected by conflict, divorce, financial instability and lack of emotional support were more likely to experience alcohol abuse (Nabaggala et., 2021). Parents who grew up in families where alcohol abuse was common were also more likely to repeat similar patterns. Studies also showed that low levels of parental education, weak community enforcement of alcohol laws and limited access to counselling services increased the risk of alcohol abuse among parents (Parry & Morojele, 2020).

2.4 Contribution of parental alcohol abuse to child maltreatment

Research has shown that parental alcohol misuse directly contributed to different types of child maltreatment including physical abuse, neglect, emotional abuse and abandonment. Alcohol affected the brain's ability to make sound decisions, control anger and maintain responsibility. This made parents less capable of providing proper care to their children. The WHO (2022) found that alcohol impaired parents forget to feed children, fail to provide medical care or leave children unattended for long hours.

Research conducted in Uganda showed that drunk parents frequently engage in domestic violence which children may witness or directly experience (UBOS, 2022). Kyomuhendo (2020) found that alcohol abuse led to increased aggression, irritability and harsh punishment toward children. Emotional abuse is also common because intoxicated parents may insult, shout or show no affection to their children. A study conducted by MGLSD (2021) reported that children living with alcohol dependent parents experienced high levels of psychological distress and insecurity.

Neglect was one of the most common forms of maltreatment linked to alcohol abuse. Parents spent most of their time in drinking places leaving children unsupervised. This exposed children to accidents, malnutrition, school absenteeism and early involvement in child labor. Luwero District Community Development Report (2023) highlighted cases where children were found sleeping in bars late at night or wandering in the community without any adult supervision because their parents were drinking.

2.5 Parental alcohol abuse and children's exposure to HIV risk

Lack of supervision made children to engage in early sexual activity or spend time with peers who influenced them to participate in risky behaviors. UNICEF (2021) reported that children from unstable homes were more likely to experience sexual exploitation especially in communities with high poverty levels.

Alcohol related domestic violence exposed children to trauma which was linked to risky adolescent behaviors such as unprotected sex, substance use and early relationships (Smith & Wilson, 2020). Children who escaped from abusive homes also ran away and ended up living on the streets where they faced an increased risk of sexual abuse sexual abuse and HIV infection. Studies in Kenya by Akinyi et al. (2019) states that children from alcohol dependent households were more likely to experience defilement and coercive sexual encounters due to lack of parental protection.

Some intoxicated parents directly exposed children to sexual abuse because alcohol impaired judgment and reduced self control. In Uganda, several reports from Child and Family Protection Units indicated that many defilement cases involved alcohol related circumstances (MGLSD, 2021). In Luwero district, local leaders have reported increasing cases of child sexual abuse occurring when parents left children alone or when intoxicated adults took advantage of vulnerable children (Luwero District Local Government, 2023).

2.5 Literature gap

A lot of study was conducted to examine alcohol abuse and its effects on families. However, limited research had specifically examined the contribution of parental alcohol abuse to child maltreatment and HIV risk among children in Luwero sub county, Luwero district

Most studies focused on alcohol abuse among adults without examining its specific impact on children's safety and vulnerability to HIV infection. In addition, limited research had examined the combined effects of parental alcohol abuse, child maltreatment and HIV risk among children at the community level.

Therefore, this study was conducted to address this research gap by examining the contribution of parental alcohol abuse to child maltreatment and HIV risk among children in Luwero sub county, Luwero district.

CHAPTER THREE

METHODOLOGY

3.0 Introduction

The chapter outlined the research design, study approach, area of study, study population, sampling procedures, data collection methods and instruments, data quality control, data processing and analysis, ethical considerations and anticipated challenges.

3.1 Research design

The study employed a descriptive survey research design. According to Jain (2023), a research design refers to the overall strategy that directs the research process including the procedures for collecting and analyzing data. The design was selected because it enabled the researcher to collect as much information as possible about parental alcohol abuse, forms of child maltreatment and HIV risk exposure among children.

3.2 Study approach

The research applied mixed method approaches which combined quantitative and qualitative methodologies. The quantitative approach measured patterns of alcohol use, frequency of child maltreatment and exposure to HIV risk behaviors. Quantitative data also included background information such as age, gender and household characteristics. The qualitative approach provided in depth understanding of participants' experiences, perceptions and the social context of parental alcohol abuse. According to Creswell and Creswell (2018), mixed method research allows triangulation of data which will strengthen the reliability and credibility of the findings.

3.3 Area of study

The study was carried out in Luwero sub county, Luwero district. Luwero was a rural community with most residents engaged in subsistence farming and small-scale trade. This area was selected because of high reported levels of alcohol consumption among adults and documented cases of child neglect, domestic violence and school drop outs (Luwero District Local Government, 2023).

3.4 Study population

The research population included parents with history of alcohol misuse and children aged 10-17 years living in households affected by alcohol abuse in Luwero Sub County. According to records from the Community Development Office (Luwero District Local Government, 2023), approximately 120 households in the selected parishes reported cases related to alcohol abuse and child neglect. Therefore, the estimated target population for the study was 120 respondents.

3.5 Sample size and sample determination

A total sample of 52 respondents was obtained from the field drawn proportionally from the total study population to ensure representativeness. The sample included 22 parents, 17 children, 5 social workers, 5 community leaders and 5 health workers. The study used Krejcie and Morgan table (1970) as indicated below,

Table 1. Sample size, Sampling techniques and Data collection methods

Respondents	Population	Sample size	Sampling technique
Parents	25	22	Simple random sampling
Children	20	17	Simple random sampling
Social workers	5	5	Purposive sampling
Community leaders	5	4	Purposive sampling

Health workers	5	4	Purposive sampling
Total	60	52	

Table 2. Showing sample size determination methods

<i>Table for Determining Sample Size of a Known Population</i>									
N	S	N	S	N	S	N	S	N	S
10	10	100	80	280	162	800	260	2800	338
15	14	110	86	290	165	850	265	3000	341
20	19	120	92	300	169	900	269	3500	346
25	24	130	97	320	175	950	274	4000	351
30	28	140	103	340	181	1000	278	4500	354
35	32	150	108	360	186	1100	285	5000	357
40	36	160	113	380	191	1200	291	6000	361
45	40	170	118	400	196	1300	297	7000	364
50	44	180	123	420	201	1400	302	8000	367
55	48	190	127	440	205	1500	306	9000	368
60	52	200	132	460	210	1600	310	10000	370
65	56	210	136	480	214	1700	313	15000	375
70	59	220	140	500	217	1800	317	20000	377
75	63	230	144	550	226	1900	320	30000	379
80	66	240	148	600	234	2000	322	40000	380
85	70	250	152	650	242	2200	327	50000	381
90	73	260	155	700	248	2400	331	75000	382
95	76	270	159	750	254	2600	335	100000	384

Note: N is Population Size; S is Sample Size *Source: Krejcie & Morgan, 1970*

3.6 Sampling techniques

3.6.1 Simple random sampling

Simple random sampling is a probability sampling method in which every member of the population has an equal chance of being selected. It ensures that selection is unbiased and respondents are selected randomly from the entire population. List of parents and children were obtained from community records and respondents were selected randomly using a lottery method.

3.6.2 Purposive sampling

Purposive sampling is a non probability sampling method where respondents are deliberately selected based on their knowledge, expertise and position related to the study (Etikan et al., 2016). this technique was used to select social workers, community leaders and health workers because they had specialized knowledge and experience relevant to the study.

3.7 Data collection methods

3.7.1 Questionnaire

Survey was used to collect quantitative data on alcohol use, maltreatment and HIV exposure while using structured questionnaires to collect data from parents and children. Surveys refers to the method of data collection that involves asking a series of question to get peoples information.

3.7.2 Interview guide

Interview guides were used to obtain qualitative data from social workers, community leaders and health workers. According to Purl (2024), interviews are formal conversations designed to obtain detailed information, perception and insights from participants.

3.8 Data collection

The main data collection instrument included questionnaire and interview guides. According to Bhandari (2021), questionnaires are tools with a list of questions that gather information on attitudes, behaviors and experiences. Questionnaire contained close ended questions data while interview guides contained open ended questions to facilitate in depth discussions about house alcohol use, child protection and risk behaviors.

3.9 Data quality and error control

3.9.1 Validity

According to Drost (2011), validity is the degree which a measurement accurately represents the concept it is intended to measure. Validity was ensured by designing questionnaires and interview guide that addressed the objectives of the research. The research instruments were reviewed by the research supervisor to ensure accuracy and relevance.

3.9.2 Reliability

Reliability according to Baingan and Watson (2009), refers to the consistency and stability to minimize measurement errors. Reliability was ensured by using standardized questionnaires for all respondents. The researcher also carried out a pilot test the research instruments and made necessary corrections.

3.10 Data processing and analysis

3.10.1 Quantitative data analysis

Quantitative data were analyzed using descriptive statistics such as frequencies and percentages.

3.10.2 Qualitative data analysis

Qualitative data obtained from interviews were analyzed using thematic analysis. The researcher familiarized with transcripts, generated codes, identified patterns, developed themes and related these to the research objectives (Braun & Clarke, 2006)

Responses were organized into themes and direct quotations from respondents were used to support the findings.

3.11 Ethical consideration

Informed consent was obtained from all respondents before data collection. confidentiality was ensured by not recording names of the respondents, participation was voluntary and respondents were free to withdraw from the study at any time.

Introductory letter was obtained from school of Social Sciences, Uganda Christian University and permission was sought from Luwero district authorities. Participants was informed about the research objectives, potential risk and benefits.

3.12 Anticipated challenges

Some respondents feared to provide accurate information because of sensitivity of alcohol abuse issues, this was addressed by assuring confidentiality.

CHAPTER FOUR
PRESENTATION AND INTERPRETATION

4.0 Introduction

This chapter presents the raw findings collected from the field. The research was carried out to identify community and family factors that influence parental alcohol abuse, to examine contribution of parental alcohol abuse to child maltreatment and to assess the way in which parental alcohol abuse increases children's vulnerability to HIV infection in Luwero sub county, Luwero district.

4.1 Rate of response

The rate of the response was 100% as all the 52 questionnaires distributed were completed and returned and all the 5 key informants participated in the interviews.

4.2 Background characteristics of respondents

4.2.1. Age of respondents

Table 3. Age of respondents

Age	Frequency	Percentage (%)	Cumulative percentage (%)
10-13	9	17.3%	17.3%
14-17	13	25%	42.3
18-25	17	32.7%	75%
26 and above	13	25%	100%
Total	52	100%	100%

The results in table 4.1 show that 32.7% of respondents were between the age of 18-25 years followed by 25% aged between 14-17 years and 26 years and above

respectively. The least number of respondents (17.3%) were between 10-13 years. This show that most respondents were mature enough to understand the effects of parental alcohol abuse and give reliable information according to their experiences and observations.

4.2.2 Sex of respondents

Table 4. Sex of respondents

Sex	Frequency	Percentage (%)	Cumulative percentage (%)
Male	21	40.4%	40.4%
Female	31	59.6%	100%
Total	52	100%	100%

The results in this table show that the majority of respondents were female (59.6%) while males were 40.4%. This show that females were more involved in child care and family matters and were available to give information regarding parental alcohol abuse and child welfare.

4.2.3 Category of respondents

Table 5. Category of respondents

Category	Frequency	Percentage (%)	Cumulative percentage (%)
Parent/Guardian	22	42.3%	42.3%
Child	18	34.6%	76.9%
Community leader	12	23.1%	100%
Total	52	100%	100%

The findings show that the largest group of respondents were parents/guardians (42.3%) followed by children (34.6%) and community leaders (23.1%). this ensured balanced information from those directly affected by alcohol abuse and those observing the effects in the community.

4.3.4 Education level

Table 6. Education level

Education level	Frequency	Percentage (%)	Cumulative percentage (%)
None	6	11.5%	11.5%
Primary	18	34.6%	46.1%
Secondary	17	32.7%	78.8%
Tertiary	11	21.2%	100%
Total	52	100%	100%

The findings indicate that majority of respondents had primary education (34.6%) followed by secondary education (32.7%), tertiary education (21.2%) and none (11.5%). This indicates that the majority of respondents had attained some level of education and were capable of understanding family and community issues.

4.3 Community and family factors influencing parental alcohol abuse

Table 7. Showing community and family factors influencing parental alcohol abuse

NO	STATEMENT	ITEM	A	SA	N	D	SD	TOTAL
6	Poverty pushes many parents to drink alcohol	(F) (%)	(20) 38.5	(23) 44.2	(5) 9.6	(2) 3.8	(2) 3.8	(52) 100
7	Stress and family problems lead parents to alcohol use	(F) (%)	(18) 34.6	(23) 44.2	(6) 11.5	(2) 3.8	(3) 5.8	(52) 100
8	Alcohol is easily available in this community	(F) (%)	(17) 32.7	(28) 53.8	(3) 5.8	(2) 3.8	(2) 3.8	(52) 100
9	Drinking alcohol is socially accepted in this community	(F) (%)	(19) 36.5	(19) 36.5	(7) 13.5	(3) 5.7	(4) 7.7	(52) 100
10	Parents copy alcohol drinking behavior from others	(F) (%)	(18) 34.6	(18) 34.6	(8) 15.4	(4) 7.7	(4) 7.7	(52) 100
11	Lack of strong laws encourages alcohol use	(F) (%)	(20) 38.5	(20) 38.5	(6) 11.5	(3) 5.8	(3) 5.8	(52) 100

The results indicates that 86.5% agreed that alcohol is easily available in the community while 82.7% agreed that poverty pushes many parents to drink alcohol. This calls for immediate intervention including community sensitization, family therapy, counselling and advocacy.

78.8% agreed that stress and family problems contribute to alcohol abuse and 76.9% agreed that lack of strong laws encourages alcohol use.

These findings show that both economic and social factors contribute significantly to parental alcohol abuse as reported by key informants” *Many parents drink*

because of poverty and stress, they use alcohol as a way of coping with their problems” KII-01-2026

Another respondent said*“Alcohol is everywhere in the trading centres and there is little control over its sale.” KII-03-2026*

This shows that environmental and social conditions contribute greatly to alcohol abuse.

4.4 Contribution of parental alcohol abuse to child maltreatment

Table 8. Showing contribution of parental alcohol to child maltreatment

NO	STATEMENTS	ITEM	A	SA	N	D	SD	TOTAL
12	Parents who drink alcohol often neglect their children	(F) (%)	(18) 34.6	(26) 50	(4) 7.7	(2) 3.8	(2) 3.8	(52) 100
13	Alcohol abuse increases beating and violence at home	(F) (%)	(19) 36.5	(22) 42.3	(5) 9.6	(3) 5.8	(3) 5.8	(52) 100
14	Children from drinking homes lack basic needs	(F) (%)	(20) 38.5	(22) 42.3	(6) 11.5	(2) 3.8	(2) 3.8	(52) 100
15	Alcohol makes parents irresponsible towards children	(F) (%)	(18) 34.6	(25) 48.1	(5) 9.6	(2) 3.8	(2) 3.8	(52) 100
16	Children from such homes often miss school	(F) (%)	(20) 38.5	(20) 38.5	(6) 11.5	(3) 5.8	(3) 5.8	(52) 100
17	Alcohol abuse causes emotional suffering to		(17) 32.7	(29) 55.8	(3) 5.8	(2) 3.8	(1) 1.9	(52) 100

children								
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The results indicates that 88.5% agreed that alcohol abuse causes emotional suffering to children while 84.6% agreed that parents neglect children because of alcohol abuse. This also calls for immediate intervention. In addition, 82.7% agreed that alcohol makes parents irresponsible and 80.8% agreed that children lack basic needs.

This shows that parental alcohol abuse contributes to child maltreatment. A caregiver reported” *sometimes children go without food because parents spend money on alcohol*” *KII-05-2026*

4.5 Parental alcohol abuse and children's vulnerability to HIV infection

Table 9. Showing parental alcohol abuse and HIV risk

NO	STATEMENT	ITE M	A	SA	N	D	SD	TOTA L
18	Lack of supervision when parents go drinking exposes children to risky sexual situations that may increase their vulnerability to HIV	(F) (%)	(18) 34.6	(25) 48.1	(5) 9.6	(2) 3.8	(2) 3.8	(52) 100
19	Lack of supervision by drunken parents exposes children to sexual abuse, increasing risk of exposure to HIV	(F) (%)	(20) 38.5	(22) 42.3	(6) 11.5	(2) 3.8	(2) 3.8	(52) 100
20	Children from alcohol affected	(F)	(19)	(22)	(6)	(2)	(3)	(52)

	homes are more likely to engage in unprotected sexual activity due to lack of parental guidance	(%)	36.5	42.3	11.5	3.9	5.8	100
21	Alcohol abuse by parents increases children's chances of early sex	(F) (%)	(20) 38.5	(20) 38.5	(7) 13.5	(2) 3.8	(3) 5.8	(52) 100
22	Children who run away from alcohol affected homes become vulnerable to sexual exploitation and HIV infection	(F) (%)	(18) 34.6	(26) 50	(4) 7.7	(2) 3.8	(2) 3.8	(52) 100
23	Parental alcohol abuse increases risk of sexual molestation by parent, increasing children's risk of HIV	(F) (%)	(19) 36.5	(19) 36.5	(8) 15.4	(3) 5.8	(3) 5.8	(52) 100

The findings show that 84.6% agreed that children who run away from alcohol affected homes become vulnerable to sexual exploitation and HIV infection. 82.7% agreed that lack of supervision when parents go drinking exposes children to risky sexual situations that may increase their vulnerability to HIV. A health worker reported” *Children from alcohol abusing homes are vulnerable to sexual exploitation”* *KII-04-2026*

The finding shows that parental alcohol abuse increases children's vulnerability to HIV infection.

CHAPTER FIVE

DISCUSSION OF FINDINGS

5.0 Introduction

This chapter discusses the findings in relation to the literature reviewed in chapter two. The discussion compares what this study found with what previous researchers found, identifies agreements and contradictions and highlights any new contributions.

5.1 Community and family factors influencing parental alcohol abuse

Objective one sought to identify community and family factors that influence parental alcohol abuse in Luwero sub county.

The findings from this study showed that the majority of respondents 86.5% agreed that alcohol is easily available in the community and 82.7% agreed that that poverty pushes many parents to drink alcohol. These findings are strongly supported by the WHO (2022) which reported that alcohol abuse is associated with socioeconomic stress, poverty and easy availability of alcohol. The findings also agree with Nabaggala et al. (2021) who established that parental alcohol abuse in rural districts is linked to financial hardship and weak family functioning.

The study further found that 78.8% of respondents agreed that stress and family problems contribute to alcohol abuse. These findings are in consistence with Parry and Morojele (2020) who reported that in many African communities, weak enforcement of alcohol control laws and high levels of poverty increase excessive drinking among parents. However, this study found a higher percentage 76.9% for lack of strong laws compared to previous studies in urban areas which may suggest that rural areas like Luwero experience even weaker law enforcement.

The finding that 73.1% agreed that drinking alcohol is socially accepted in community supports the work of MGLSD (2021) which noted that in many Ugandan

rural communities, alcohol consumption is normalized during ceremonies and social gatherings. This social acceptance makes it difficult for parents to recognize when their drinking become harmful.

What is new from this study is the finding that 69.2% of respondents agreed that parents copy drinking behavior from others. This specific finding was not strongly emphasized in earlier Ugandan studies but supports Bandura's social learning theory (1977) which states that individuals learn behaviors through observing others. This suggest that interventions should target not only individual parents but also the broader social environment where drinking is modelled.

Therefore, the findings for objective one agree with most existing literature while adding new evidence about the the role of social copying of drinking behaviour in rural Uganda.

5.2 Contribution of parental alcohol abuse to child maltreatment

Objective two sought to examine how parental alcohol abuse contributes to child maltreatment in Luwero sub county. The study found that 88.5% of respondents agreed that alcohol abuse causes emotional suffering to children and 84.6% agreed that parents who drinks often neglect their children. These findings are strongly supported by WHO (2022) which found that alcohol impairs parents ability to make sound decisions, control anger and maintain responsibility towards children. The findings also agree with Kyomuhendo (2020) who reported that alcohol abuse leads to increased aggression and harsh punishment towards children in Uganda.

The study found that 82.7% of respondents agreed that alcohol makes parents irresponsible and 80.8% agreed that children from drinking homes lack basic needs. The results are consistent with the Luwero District Community Report (2023) which highlighted cases where children went without food because parents spent money on

alcohol. The finding also supports Smith and Wilson (2020) who found in the United States that households with parental alcohol misuse recorded higher cases of child neglect and malnutrition.

The finding that 76.9% of respondents agreed that children from alcohol abusing homes often miss school aligns with the UBOS (2022) which reported that alcohol abuse is linked to poor school attendance. However, this study found a slightly higher percentage compared to national averages which suggest that school dropout related to alcohol abuse is more severe in Luwero sub county than in other parts of Uganda.

The study found that emotional suffering 88.5% and neglect 84.6% were reported even more frequently than physical beating and violence 78.8%. This suggests that in Luwero sub county, neglect and emotional harm may be even more common consequences of parental alcohol abuse than physical violence. This contradicts with existing literature while some studies for example, (Foran & O'Leary, 2008) emphasize physical abuse as the primary form of maltreatment from alcohol abuse.

Therefore, the finding for objective two strongly agrees with existing literature while revealing that neglect and emotional suffering may be the most dominant forms of child maltreatment in Luwero sub county.

5.3 Parental alcohol abuse and children's vulnerability to HIV infection

Objective three sought to assess how parental alcohol abuse increases children's vulnerability to HIV infection in Luwero sub county.

The study found that 84.6% agreed that children who run away from alcohol abusing homes become vulnerable to sexual exploitation and HIV infection. This finding is strongly supported by UNICEF (2021) which reported that children from unstable homes are more likely to experience sexual exploitation especially in communities with high poverty levels. The finding also agrees with Akinyi et al. (2019) in Kenya who stated that children from alcohol dependent households are more likely to experience defilement and cover coercive sexual encounters due to lack of parental protection.

The study found that 82.7% of respondents agreed that lack of supervision when parents go drinking exposes children to risky sexual situations and 80.8% agreed that lack of supervision exposes children to sexual abuse. These findings are in consistent with MGLSD (2021) which reported that many defilement cases in Uganda involve alcohol related circumstances where children were left unsupervised.

the finding that 78.8% agreed that children from alcohol affected homes may engage in un protected sex due to lack of parental guidance aligns with Smith and Wilson (2020) who found that alcohol related domestic violence exposes children to trauma which is linked to risky adolescent behaviors such as unprotected sex and early relationships. However, this study contributes new knowledge by specifically quantifying the risk in a rural Uganda setting which previous studies had not done.

The finding that 73.1% agreed that parental alcohol abuse increases the risk of sexual molestation by a parent is particularly concerning. This finding is supported by Luwero Local Government report (2023) which indicated that local leaders have

reported increasing cases of child sexual abuse occurring when intoxicated adults take advantage of vulnerable children. However, this specific finding was not strongly emphasized in national studies like the UDHS (2022) suggesting that under reporting of parental sexual abuse may be a problem in larger national surveys.

What is new from this study is the finding that 84.6% of respondents identified running away from home as a major pathway to HIV risk. This specific pathway has been mentioned in literature for example, (Widom et al, 2008) but not previously quantified in Uganda. This study provides original evidence that children escaping alcohol affected homes in Luwero sub county become highly vulnerable to sexual exploitation and HIV infection.

Therefore, the findings for objective three strongly agree with existing international and regional literature and provide new quantitative evidence about specific pathways through which parental alcohol abuse increases children's HIV vulnerability in rural Uganda.

CHAPTER SIX

SUMMARY, CONCLUSION AND RECOMMENDATIONS

5.0 Introduction

This chapter presents a summary of the findings obtained from the field, conclusions and provides recommendations for practice, policy and further research.

5.1 Summary of the findings

5.1.1 Community and family factors influencing parental alcohol abuse

The findings from the study stated that parental alcohol abuse in Luwero sub county was strongly influenced by social, economic and environmental factors. Most respondents, 86.5% agreed alcohol was easily accessible in the community while 82.7% identified poverty as a major reason for parental alcohol use. Stress and family problems 78.8%, lack of strong laws on alcohol 76.9%, social acceptance of alcohol use 73.1% and parents copying drinking behaviors from others 69.2%. these were also reported as contributing factors.

Community leaders emphasized that most parents use alcohol as a copying mechanism for financial and emotional stress and that poor regulation of alcohol sales exposes community to alcohol use. Therefore, the findings states that alcohol abuse is not only a personal choice but is strongly influenced by social surrounding, cultural and economic status.

5.1.2 Contribution of parental alcohol abuse to child maltreatment

The found that parental alcohol abuse significantly contributed to child maltreatment. Majority of respondents, 88.5% of the respondents indicated that alcohol abuse caused emotional suffering, 84.6% indicated neglect, 82.7% indicated irresponsibility, 80.8% of the respondents indicated lack of basic needs for children, 78.8% increased domestic violence and school absenteeism 76.9%.

Interview with community leaders such as social workers and probation officers confirmed that children from alcohol abusing homes frequently experience neglect, trauma and unsafe home environments. The findings are in line with WHO, 2020 showing that substance abuse in parents impairs care giving, reduces supervision and increases both emotional and physical risks for children.

5.1.3 Parental alcohol abuse and children's vulnerability to HIV infection

The study also found that parental alcohol abuse indirectly increased children's vulnerability to HIV infection. 82.7% of the respondents indicated that lack of parental supervision exposed children to risky sexual situations, 80.0% of respondents indicated sexual abuse, 76.9% of respondents indicated early sexual activity, unprotected sex 78.8%, running away from alcohol abusing homes 84.6% and 73.1% indicated risk of sexual molestation.

Health workers emphasized that children from alcohol abusing homes are more likely to be exploited and lack guidance on reproductive health. This finding shows that parental alcohol abuse compromises the supervision and protective role of the family which leaves children exposed to unsafe environments and high risk behaviors that increase HIV vulnerability.

5.2 Conclusion

Parental alcohol abuse in Luwero sub county is largely influenced by poverty, stress, social norms and easy access to alcohol.

Financial hardship and weak law enforcement on alcohol normalizes excessive consumption of alcohol.

Parental alcohol abuse leads to lack of supervision, unsafe environments, early sexual activity and expose children to sexual exploitation.

5.3 Recommendations

5.3.1 For government and policy makers

Regulatory bodies should monitor and control the sale of alcohol especially local brewed alcohol to reduce accessibility in communities.

Implement programs offering financial support, counselling and education for families affected by alcohol abuse to reduce stress and improve child welfare.

Develop HIV intervention strategies to focus on children from alcohol abusing homes and reproductive health education.

5.3.2 For social workers and practitioners

Community leaders and social workers should collaborate to identify vulnerable children and provide timely support.

Social workers should offer both parental and child focused counselling to address substance abuse, family conflict and trauma.

Social workers should raise awareness to inform parents and communities about the impact of alcohol abuse on children's health, education and vulnerability to HIV

5.3.3 For further research

Further research should be carried out to examine the long term effects of parental alcohol abuse on children's education and social impact

Conduct studies to investigate the effectiveness of community based interventions and family support programme in reducing child maltreatment and HIV risk.

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APPENDIX I: QUESTIONNAIRE

(For community members, parents and children)

Dear Respondent,

My name is Nakato Patience Nakatudde, a student at Uganda Christian University, Mukono, pursuing a Bachelor of Social Work and Social Administration. I am conducting a study on *the contribution of parental alcohol abuse to child maltreatment and HIV risk among children in Luwero Sub county, Luwero District.*

This questionnaire is for academic purposes only. You are kindly requested to provide information by answering the questions. Your responses will be kept confidential.

The questionnaire is divided into Sections A, B, C and D. In Sections B, C and D, please tick (✓) one response that best represents your opinion

Strongly Agree (SA), Agree (A), Neutral (N), Disagree (D), Strongly Disagree (SD)

SECTION A

Demographic information

1. Age

10–13 14–17 18–25 26 and above

2. Sex

Male Female

3. You are

Parent/Guardian Child Community leader

4. Education level

None Primary Secondary Tertiary

SECTION B

To identify community and family factors that influence parental alcohol abuse in Luwero sub county.

Tick one answer in each row

NO	STATEMENT	A	SA	N	D	SD
6	Poverty pushes many parents to drink alcohol					
7	Stress and family problems lead parents to alcohol use					
8	Alcohol is easily available in this community					
9	Drinking alcohol is socially accepted in this community					
10	Parents copy alcohol drinking behavior from others					
11	Lack of strong laws encourages alcohol use					

SECTION C

To examine the contribution of parental alcohol abuse to child maltreatment in Luwero sub county.

NO	STATEMENTS	A	SA	N	D	SD
12	Parents who drink alcohol often neglect their children					
13	Alcohol abuse increases beating and violence at home					

14	Children from drinking homes lack basic needs					
15	Alcohol makes parents irresponsible towards children					
16	Children from such homes often miss school					
17	Alcohol abuse causes emotional suffering to children					

SECTION D

To assess the ways in which parental alcohol abuse increases children's vulnerability to HIV infection.

NO	STATEMENT	A	SA	N	D	SA
18	Lack of supervision when parents go drinking exposes children to risky sexual situations that may increase their vulnerability to HIV					
19	Lack of supervision by drunken parents exposes children to sexual abuse, increasing risk of exposure to HIV					
20	Children from alcohol affected homes are more likely to					

	engage in unprotected sexual activity due to lack of parental guidance					
21	Alcohol abuse by parents increases children's chances of early sex					
22	Children who run away from alcohol affected homes become vulnerable to sexual exploitation and HIV infection					
23	Parental alcohol abuse increases risk of sexual molestation by parent, increasing children's risk of HIV					

APPENDIX II: INTERVIEW CHECKLIST

(For community leaders, social workers and health workers)

Demographic information

- 1. Age:
- 2. Position:
- 3. Years of experience:

SECTION A

To identify community and family factors that influence parental alcohol abuse in Luwero sub county.

- 4. What do you understand by parental alcohol abuse?
.....
.....
- 5. How common is alcohol drinking among parents in this community?
.....
.....
- 6. What are the main reasons why parents drink alcohol here?
.....
.....
- 7. How does poverty or stress contribute to alcohol abuse?
.....
.....

8. How does the community view alcohol drinking? Is it accepted?

.....
.....

9. What can be done to reduce alcohol abuse among parents?

.....
.....

SECTION B

To examine the contribution of parental alcohol abuse to child maltreatment in Luwero sub county.

10. What types of child abuse or neglect are common in families where parents drink?

.....
.....

11. In what ways does alcohol abuse affect how parents treat their children?

.....
.....

12. How does parental alcohol abuse affect access to food, school fees or adequate child care?

.....
.....

13. How does alcohol use cause violence or conflict at home?

.....
.....

14. How do children feel when they grow up in such homes?

.....
.....

SECTION C

To assess the ways in which parental alcohol abuse increases children’s vulnerability to HIV infection.

15. How does parental alcohol abuse affect supervision of children in the home, and how can this increase their risk of HIV infection?

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

16. In families where parents abuse alcohol, what sexual risks do children face (such as sexual abuse, early sexual relationships, or exploitation)?

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

17. In what ways does parental alcohol abuse contribute to early sexual debut or unprotected sex among children?

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

18. From your experience, how does alcohol abuse by parents increase children’s vulnerability to sexual violence or exploitation that may lead to HIV infection?

.....

.....
.....

19. What measures can be put in place to reduce HIV vulnerability among children living in alcohol affected families?

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

APPENDIX III: RESEARCH BUDGET

ITEM	ESTIMATED COST(UGX)
Transport	120,000
Printing	50,000
Stationery	30,000
Research assistant	100,000
Refreshments during data collection	50,000
Aitime and internet bundle	30,000
Typing and printing final report	70,000
Emergency	20,000
TOTAL	470,000

APPENDIX IV: INTRODUCTORY LETTER



**UGANDA CHRISTIAN
UNIVERSITY**

A Centre of Excellence in the Heart of Africa

February 9th, 2026

TO WHOM IT MAY CONCERN

Dear Sir/Madam

Re: INTRODUCTORY LETTER FOR RESEARCH

This is to introduce to you Nakato Patience Nakatudde Registration number M23B15/092, a student of Uganda Christian University, pursuing Bachelor's degree in Social Work and Administration. She is expected to carry out research in the final year under the guidance of a university supervisor in partial fulfillment for the requirements of the above-mentioned award.

Topic: "The contribution of parental alcohol abuse to child maltreatment and HIV risk among children in Luwero Sub- Country, Luwero District "

The purpose of this communication is to request your office to allow her collect data from your organization. Any assistance rendered to her will be highly appreciated.

Yours faithfully,



Doreen Kukugiza
Coordinator, Research & Fieldwork Programmes
Tel: 0773395349
Email: dkukugiza@ucu.ac.ug

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