

**THE EFFECT OF ALCOHOLISM ON THE SOCIO-ECONOMIC WELLBEING OF  
THE PEOPLE IN NAMBALE SUB-COUNTY, MBALE DISTRICT**

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**S21/MUC/BWS/028**

**A DISSERTATION SUBMITTED TO THE SCHOOL OF SOCIAL SCIENCES IN PARTIAL  
FULFILLMENT OF THE REQUIREMENT FOR THE AWARD OF BACHERLOR OF SOCIAL  
WORK AND SOCIAL ADMINISTRATION OF UGANDA CHRISTIAN UNIVERSITY**

**May, 2024**



**UGANDA CHRISTIAN  
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**APPROVAL**

This research report has been submitted with my approval as the university supervisor

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## **DEDICATION**

I dedicate this research report to my parents for their unwavering love, support, and encouragements have been the driving force behind my academic journey. Their belief in my abilities and constant motivation has been instrumental in helping me overcome challenges and reach this milestone.

## **ACKNOWLEDGEMENT**

I would like to express my deep gratitude to my supervisor for his continuous support and guidance that was throughout the entire writing process of this research proposal. His expertise, valuable insights, and patience were instrumental in shaping this work into its final form. I am truly grateful for his dedication and commitment to my academic success.

I will be grateful to the participants who generously participate in this study and share their time and expertise. Without their contributions, this research may not be possible. I would like to acknowledge the assistance and support that shall be provided by the staff and resources at Nambale sub-county. Their contributions were invaluable in gathering the necessary data and materials for this research.

I would like to express my appreciation to my family and friends for their unwavering support and encouragement that were throughout this challenging journey. Their love, understanding, and patience were crucial in keeping me motivated during the ups and downs of this research dissertation.

## LIST OF ABBREVIATIONS

ADHD	:	Attention-Deficit/Hyperactivity Disorder
AUD	:	Alcohol Use Disorder
MBLDAR	:	Mbale District Annual Report
NIDA	:	National Institute on Drug Abuse
PTSD	:	Post -Traumatic Stress Disorder
SES	:	Socio-Economic Status
SPSS	:	Statistical Package for Social Science
UNBS	:	Uganda National Bureau of Standards
WHO	:	World Health Organization

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## ABSTRACT

This research report was undertaken to the effect of alcoholism on the socio-economic wellbeing of the people in Nambale sub-county, Mbale district. It was guided by three objectives; to analyze the relationship between alcoholism and socio-economic wellbeing of people in Nambale sub-county, to determine the effect of social cultural influences on socio-economic wellbeing of people in Nambale sub-county, to find out the effect of co-occurring mental health on socio-economic wellbeing of people in Nambale sub-county. The researcher used a sample size of 63 respondents and used questionnaires and interview guide to collect data and later the data was analyzed using the statistical package for social sciences (SPSS). Results of the first objective showed that there is a positive relationship between alcoholism and socio-economic wellbeing of people in Nambale sub-county. Supported by the following responses; 54% individuals with alcoholism experience higher rates of poverty, financial instability; 62% were positive to the statement that individuals with lower income or education levels are more susceptible to alcoholism; 61% of the respondents were positive to the statement that socio-economic disadvantage limit access to recreational activities and resources, driving individuals toward increased alcohol consumption as a coping mechanism. Results of the second objective revealed that social cultural influences have a significant effect on socio-economic wellbeing of people in Nambale sub-county. Supported by the following responses; 56% of the respondents were positive to the statement that peer pressure and conformity within social groups can influence individuals' economic behaviors and choices, 80% of the respondents were positive to the statement that cultures that prioritize personal achievement and success may foster economic growth and higher socio-economic well-being. Results of the third objective showed that co-occurring mental health has a significant effect on socio-economic wellbeing of people in Nambale sub-county. 51% had a positive response to the statement that co-occurring mental health disorders can hinder an individual's social participation and quality of life. The government should provide accessible and quality education to all individuals can help enhance their skills and knowledge, which in turn can improve their socio-economic well-being and understanding of diverse cultural perspectives.

# CHAPTER ONE

## INTRODUCTION

### 1.0 Introduction

This chapter presents a background of the study, statement of the problem, purpose of the study, specific objectives, and research questions, scope of the study, significance of the study, conceptual framework, and definition of key terms.

### 1.0 Background of the study

In the United States, alcoholism has had significant socio-economic consequences throughout history. During the Prohibition era (1920-1933), the illegal production and consumption of alcohol led to the rise of organized crime and an underground economy. This resulted in social unrest and significant economic losses. The ban on alcohol also led to the closure of numerous legal businesses, leading to job losses and decreased tax revenues. According to a study by Cook and Moore (2003), the overall economic loss during Prohibition was estimated to be around \$11 billion, affecting individuals and communities across the country. In the United States, alcoholism has long been a significant public health concern with substantial socio-economic consequences. Studies have shown that excessive alcohol consumption contributes to a range of negative social and economic impacts, including increased rates of unemployment, decreased productivity, and reduced earning potential (Cook et al., 2007; Levy et al., 2016). Additionally, alcohol-related accidents, violence, and healthcare costs place a substantial burden on society (Mokdad et al., 2018). Understanding the socio-economic implications of alcoholism in the United States is crucial for developing effective prevention and intervention strategies to mitigate its adverse effects.

Alcoholism is a growing issue in many African countries, with implications for socio-economic well-being. Studies have revealed that excessive alcohol consumption in Africa leads to various negative consequences, including decreased work productivity, increased absenteeism, and impaired occupational performance (Sorsdahl et al., 2015; Peltzer et al., 2020). Additionally, heavy alcohol use has been linked to poverty and limited access to education and healthcare, exacerbating socio-economic inequalities (Rehm et al., 2010). Understanding the socio-economic impact of alcoholism in Africa is essential for guiding targeted interventions and policy development to address this pressing issue.

In Uganda, alcoholism has been a longstanding concern with detrimental effects on socio-economic well-being. Factors such as colonization, urbanization, and commercialization have contributed to the rise in alcohol consumption. Alcohol abuse in Uganda has been associated with health problems, reduced productivity, expenditure on treatment, and increased poverty levels. The World Health Organization (WHO) estimates that alcohol-related problems account for 6.5% of the burden of disease and injury in Uganda (WHO, 2018). The negative impact on families and communities directly affects the economic stability and development of the nation. In Uganda, alcoholism is a prevalent problem and has a profound effect on the socio-economic well-being of individuals and communities. High levels of alcohol consumption significantly contribute to poverty, unemployment, and reduced productivity (Kiima *et al.*, 2017; Ndungo *et al.*, 2019). In addition, alcohol-related health issues, including liver diseases and mental health problems, contribute to increased healthcare costs and decreased quality of life (Ndungo *et al.*, 2020). Understanding the specific socio-economic consequences of alcoholism in Uganda is crucial for tailoring prevention and intervention programs to address the needs of the local population.

Nambale sub-county, located in the Mbale district of Uganda, faces unique challenges related to alcoholism and its impact on socio-economic well-being. Available data of 60% suggests that alcohol abuse is prevalent in the region, resulting in adverse social and economic consequences, including increased poverty, decreased educational attainment, and limited job opportunities (Mbale District Annual Report, 2019; Namwanje *et al.*, 2021). Additionally, alcohol-related violence and family disruption further compound the socio-economic challenges faced by individuals and households (Namwanje *et al.*, 2021). Conducting research in Nambale sub-county will provide insights into the specific manifestations and implications of alcoholism on the socio-economic well-being of the local population, enabling the development of targeted interventions to address their unique needs.

In conclusion, the historical background of alcoholism's impact on socio-economic well-being is evident in the United States, Africa, and specifically within Uganda, including the Nambale sub-county in Mbale district. These perspectives highlight the negative consequences of alcoholism on individuals, families, and communities, contributing to economic instability and hindering socio-economic development.

## **1.2 Statement of the problem**

Alcoholism is a significant problem that has detrimental effects on the socio-economic well-being of individuals and communities. In Nambale sub-county, alcoholism has become a pressing issue that has far-reaching consequences for the local population. It should be noted that at Nambale sub-county, alcohol consumption is on high increase due to peer pressure and social influence, cultural and celebratory traditions. Understanding the statistics related to alcoholism in this specific region can help shed light on the magnitude of the problem and its impact on the socio-economic fabric of the community. According to available data, alcoholism has had a profound impact on the health of individuals in Nambale sub-county. Excessive drinking and alcohol-related diseases have emerged as major health concerns, leading to a rise in mortality and morbidity rates. Hospital admissions due to alcohol-related illnesses, such as liver disease, cardiovascular conditions, and mental health disorders, have increased significantly in recent years. These health complications not only inflict suffering on individuals and families but also place a burden on the local healthcare system, diverting resources that could have been allocated to other pressing health needs.

The impact of alcoholism on the productivity and economic stability of individuals and the community at large cannot be overlooked. Alcohol addiction often results in decreased work performance, absenteeism, and higher rates of unemployment or underemployment. This has a direct effect on household income, leading to poverty and financial instability. The productive capacity of Nambale sub-county is hampered, as individuals struggling with alcoholism are unable to contribute fully to the labor force. Consequently, economic growth is stunted, perpetuating a cycle of poverty and inequality.

Alcoholism in Nambale sub-county, Mbale district has a detrimental impact on the socio-economic well-being of individuals and the community as a whole. The statistics reveal alarming trends in terms of health outcomes, reduced productivity, increased poverty, and strained social relationships (Oreopoulos *et al.*, 2016).

## **1.3 Purpose of the study**

To investigate on effects of alcoholism on socio-economic well being of people in Nambale sub-county, Mbale district

## **1.4 Specific objectives**

- i. To analyze the relationship between alcoholism and socio-economic wellbeing of people in Nambale sub-county
- ii. To determine the effect of social cultural influences on socio-economic wellbeing of people in Nambale sub-county
- iii. To find out the effect of co-occurring mental health on socio-economic wellbeing of people in Nambale sub-county

## **1.5 Research questions**

- i. What is the relationship between alcoholism and socio-economic wellbeing of people in Nambale sub-county?
- ii. What is the effect of social cultural influences on socio-economic wellbeing of people in Nambale sub-county?
- iii. What is the effect of co-occurring mental health on socio-economic wellbeing of people in Nambale sub-county?

## **1.6 Scope of the study**

### **1.6.1 Time scope**

The period to be considered for the study was 4 months from January to April 2024. This is because during this period, excessive drinking and alcohol-related diseases had emerged as major health concerns, leading to a rise in mortality and morbidity rates.

### **1.6.2 Content of the study**

The study was limited to the following;

Alcoholism as independent variable (IV) which was looked at in terms of genetics, social cultural influences ,co-occurring mental health and also socio-economic well being as dependent variable (DV) in terms of social protection, education, social support, gender equality, income and employment.

### **1.6.3 Geographical scope**

The study was carried out from Nambale sub-county which is located in Mbale District, and situated in the eastern region of Uganda. Mbale District is part of the larger Bugisu sub-region and is bordered by Sironko District to the north, Tororo District to the east, Buikwe District to the west, and Budaka District to the south. Nambale sub-county itself is situated in the northeastern part of Mbale District. It covers a specific geographic area within Mbale District and is further divided into smaller administrative units such as parishes and villages. The sub-county is predominantly rural, with agriculture being the primary economic activity.

Mbale District, including Nambale sub-county, is known for its beautiful landscapes, including hills, valleys, and plains. Mount Elgon, which is an extinct volcano and has the second-highest peak in Uganda, is also located in Mbale District. The major town in Mbale District is Mbale Town, which is the district headquarters and serves as a commercial and administrative center for the region. Mbale Town is approximately 32 kilometers southeast of Nambale sub-county.

Transportation in the area is facilitated by a network of roads that connect Nambale sub-county to other parts of Mbale District and neighboring districts. This enables the movement of goods, services, and people both within the sub-county and to other parts of Uganda.

In conclusion, Nambale sub-county is situated in the northeastern region of Mbale District, which is known for its scenic landscapes and agricultural activities.

## **1.7 Significance of the study**

The study on the effects of alcoholism on the socio-economic well-being of people, particularly in Nambale sub-county, Mbale district, is of significant importance for several reasons.

Firstly, alcoholism has been widely recognized as a major public health problem worldwide, with detrimental effects on individuals, families, and communities. By examining its impact on the socio-economic well-being of the population in Nambale sub-county, this study can shed light on the specific challenges and consequences faced by this particular community.

Secondly, understanding the socio-economic effects of alcoholism can help policymakers and stakeholders in designing effective interventions and policies to address the problem. By identifying the negative consequences on individuals' ability to hold down employment, maintain stable relationships, and contribute to the local economy, it will be possible to develop targeted strategies to mitigate these effects.

The study can also provide valuable insights into the economic burden imposed by alcoholism. It can help quantify the costs associated with decreased productivity, increased healthcare utilization, and the strain on social services. This information can aid in resource allocation, as well as advocating for increased funding and support for alcohol rehabilitation programs and other related services in Nambale sub-county.

Additionally, the study may offer a deeper understanding of the underlying factors contributing to alcoholism in the community. It can explore the social, cultural, and economic determinants of alcohol abuse, facilitating the development of holistic approaches to prevention and intervention that address these root causes.

Furthermore, the findings of this study can contribute to the existing body of knowledge on alcoholism and its effects on socio-economic well-being. By adding to the literature, it can assist other researchers, healthcare professionals, and organizations in formulating evidence-based strategies and interventions to combat alcoholism in similar contexts.

Overall, the significance of this study lies in its potential to generate knowledge, inform policy decisions, and provide practical recommendations for improving the socio-economic well-being of individuals and communities affected by alcoholism in Nambale sub-county, Mbale district.

## **1.8 Justification of the study**

The study on the effects of alcoholism on the socio-economic well-being of people in Nambale sub-county, Mbale district is important and necessary for several reasons.

Firstly, alcoholism has been recognized as a significant public health issue worldwide, affecting individuals, families, and communities. Understanding the specific impacts of alcoholism on the socio-economic well-being of people in Nambale sub-county can provide valuable insights into the magnitude and nature of the problem in that particular region.

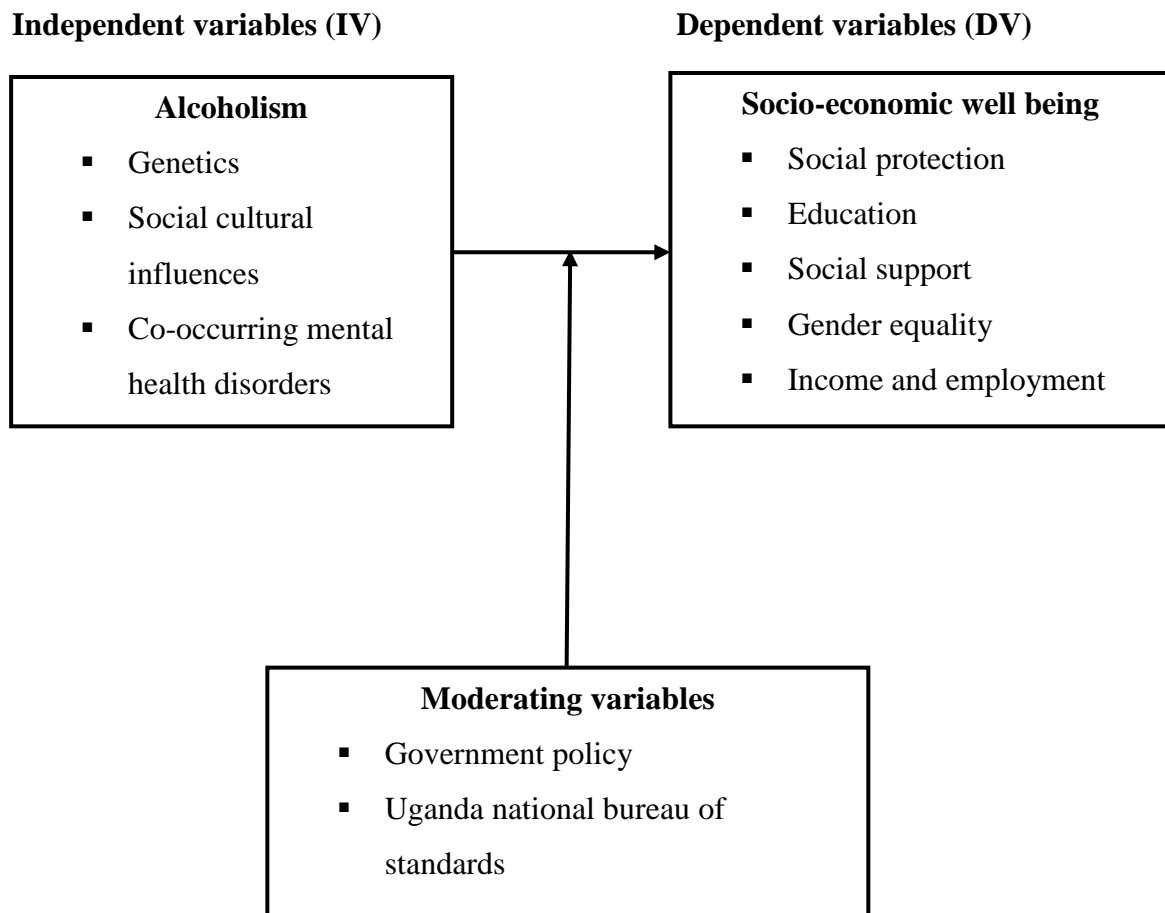
Secondly, alcoholism can have a detrimental effect on individuals and their families' economic situation. Excessive alcohol consumption often leads to decreased productivity, absenteeism from work, and impaired job performance. This can result in individuals losing their jobs, experiencing financial instability, and facing difficulties in meeting basic needs such as food, housing, and healthcare.

Additionally, alcoholism can lead to increased healthcare expenses. The negative health consequences associated with alcohol abuse, such as liver disease, cardiovascular problems, mental health disorders, and accidents, require medical attention and significant financial resources. These healthcare costs can place a burden on individuals, families, and the community as a whole, further impacting socio-economic well-being.

Furthermore, the study can shed light on the social consequences of alcoholism. Substance abuse can lead to strained relationships, increased conflicts within families, and breakdowns in social support systems. These social disruptions can further exacerbate the economic impact on individuals and families, as it may reduce access to resources, employment opportunities, and community support networks.

Understanding the socio-economic effects of alcoholism in Nambale sub-county can also help inform policymakers, healthcare providers, and community organizations in the development of targeted interventions and support services. By identifying the specific challenges faced by individuals affected by alcohol abuse, appropriate programs and policies can be developed to address these issues effectively.

## 1.9 Conceptual framework



**Figure 1: Conceptual Framework**

Source: Researcher's conceptualization (2024)

With reference to the figure 1 above indicates alcoholism which comprises of genetics, social cultural influences, co-occurring mental health as independent variables and socio-economic well-being consists of social protection, education, social support, gender equality, income and employment as dependent variables while moderating variables includes among others government policy, Uganda national bureau of standards and ministry of health.

## **1.10 Definition of key terms**

### **Alcoholism**

Alcoholism, also known as alcohol use disorder (AUD), is a chronic and progressive disorder characterized by an addiction to alcohol. It is defined as a pattern of alcohol consumption that leads to significant physical and psychological dependence, resulting in adverse consequences to the individual's health, relationships, and overall well-being (National Institute on Alcohol Abuse and Alcoholism, 2019).

### **Genetics**

Genetics plays a significant role in the development of alcoholism. Research indicates that genetic factors contribute to about 40-60% of the risk for AUD. Certain genetic variations, such as specific gene variants related to alcohol metabolism, neurotransmitter systems, and brain reward pathways, can increase an individual's susceptibility to alcoholism (Goldman et al., 2005; Edenberg et al., 2010).

### **Social-cultural influences**

Social and cultural factors greatly influence alcohol consumption patterns and attitudes towards drinking. Cultural norms, social acceptance of alcohol use, and cultural rituals involving alcohol play a significant role in shaping individual attitudes and behaviors related to alcohol consumption (Room, 2005). For instance, cultures with a strong drinking culture, where alcohol consumption is deeply embedded in social interactions and traditions, may contribute to higher rates of alcoholism (Leon et al., 2016).

### **Co-occurring mental health**

Co-occurring mental health disorders, such as depression, anxiety, and post-traumatic stress disorder (PTSD), are commonly associated with alcoholism. Individuals with pre-existing mental health conditions may turn to alcohol as a means of self-medication, leading to an increased risk of developing alcohol dependence (National Institute on Drug Abuse, 2018). Moreover, alcohol abuse can exacerbate existing mental health conditions, creating a cycle of co-occurring disorders and worsening overall well-being.

## **Socioeconomic well-being**

Alcoholism can have significant socioeconomic consequences, impacting individuals, families, and communities alike. The economic burden of alcoholism includes increased healthcare costs, loss of productivity in the workplace, decreased earning potential, and financial strain on families (Rehm et al., 2009). These factors can contribute to decreased socioeconomic well-being at both the individual and societal levels.

## **Social protection**

Social protection refers to policies and programs that aim to support individuals and communities by providing a safety net and essential social services. In the context of alcoholism, social protection measures may include access to affordable healthcare services, addiction treatment programs, and social welfare benefits to support individuals and families affected by alcoholism (World Health Organization, 2010). These measures play a crucial role in improving the economic well-being of people grappling with alcoholism.

## **Education**

Education is a key factor in raising awareness about alcoholism and its consequences, promoting responsible alcohol consumption, and preventing alcohol-related harms. Comprehensive educational initiatives targeting schools, communities, and healthcare settings can contribute to increased knowledge, changing attitudes, and behavior modification regarding alcohol use (World Health Organization, 2004). Adapting education programs to address cultural and social factors specific to each context can enhance their effectiveness.

## **Social support**

Social support systems, including family, friends, and communities, play a vital role in the prevention, intervention, and recovery from alcoholism. Strong social support networks can provide emotional support, help individuals' access treatment and resources, and facilitate social reintegration (National Institute on Alcohol Abuse and Alcoholism, 2014). Social support fosters positive coping strategies, reduces the stigma associated with alcoholism, and enhances the overall well-being of affected individuals.

## **Gender equality**

Gender inequality can impact the prevalence and consequences of alcoholism. Women may face different risks associated with alcohol consumption due to biological factors, social norms, and inequalities in access to resources and treatment (World Health Organization, 2015). Recognizing and addressing gender-specific factors is essential for effective alcoholism prevention and treatment strategies.

## **Income and employment**

Income and employment opportunities can influence alcohol consumption patterns and the economic well-being of individuals. High levels of unemployment, low income, and job instability can contribute to increased stress and psychological distress, increasing the risk of alcohol abuse and dependency (Galatzer-Levy et al., 2013). Similarly, alcoholism can have detrimental effects on employment status, leading to reduced earning potential and workplace productivity.

## **Government policy**

Government policies play a crucial role in addressing alcoholism and promoting economic well-being. Effective policies include regulating the availability, marketing, and pricing of alcoholic beverages, implementing public health campaigns on responsible drinking, providing funding and support for treatment programs, and enforcing strict penalties for alcohol-related offenses (World Health Organization, 2004). Collaborative efforts involving multiple sectors, such as health, education, and law enforcement is essential for successful policy implementation.

## **Uganda National Bureau of Standards (UNBS)**

The Uganda National Bureau of Standards (UNBS) is a government agency responsible for promoting standardization, quality assurance, and consumer protection in Uganda. While the UNBS primarily focuses on ensuring quality of products and services, it may indirectly contribute to addressing alcoholism by monitoring the quality of alcoholic beverages sold in the market to eliminate illicit and harmful products.

## **CHAPTER TWO**

### **LITERATURE REVIEW**

#### **2.0 Introduction**

This chapter deals with the review of other researcher's literature or ideas which are similar or closely related to the topic of the study; this was conducted in relation to the specific objectives of the study.

#### **2.1 Relationship between alcoholism and socio-economic wellbeing of people**

Alcoholism has long been recognized as a public health concern with significant societal implications. It not only affects individuals and their immediate families but also has wide-ranging consequences on the socio-economic well-being of communities and societies. This literature review aims to explore the relationship between alcoholism and socio-economic well-being, highlighting key studies and findings in this area. Several studies have found a clear association between alcoholism and lower socio-economic status (SES). For example, a comprehensive study by Rehm et al. (2009) using data from the WHO World Mental Health Surveys found that individuals with alcohol use disorders are more likely to experience lower education levels, higher unemployment rates, and reduced household income. Similarly, a study by Kendler et al. (2012) examined the relationship between alcohol dependence and SES among twins and concluded that individuals with alcoholism experienced higher rates of poverty, financial instability, and overall reduced socio-economic well-being. These findings suggest that alcoholism is not only a consequence of lower SES but can also perpetuate a cycle of socio-economic disadvantage.

Furthermore, research has shown that the socio-economic consequences of alcoholism extend beyond the individual level to broader societal impacts. A study by Room et al. (2005) explored the societal effects of alcohol consumption in different countries, highlighting how alcohol abuse contributes to increased health care costs, reduced workplace productivity, and increased crime rates. The authors suggest that addressing alcohol-related problems could not only improve the well-being of individuals but also yield substantial economic benefits at the societal level. Moreover, a study by Balsa et al. (2008) examined the impact of alcoholism on employment outcomes in the United States and found that individuals with alcohol dependence were more likely to be unemployed, experience job instability, and have lower earnings.

The relationship between alcoholism and socio-economic well-being is complex and multifaceted. While research often highlights the negative consequences of alcohol abuse, some studies also recognize the potential bidirectional influence between socio-economic factors and drinking behaviors. For instance, a study by Kwon et al. (2018) identified a reciprocal relationship between SES and alcohol consumption, where individuals with lower SES were more likely to develop alcohol-related problems, but excessive drinking also led to downward mobility and further socio-economic disadvantages. This bidirectional relationship underscores the importance of addressing both alcoholism and underlying socio-economic inequalities as part of comprehensive intervention strategies aimed at improving the well-being of individuals and communities.

Numerous studies have explored the complex relationship between alcoholism and socio-economic well-being, shedding light on both the adverse impact of alcoholism on socio-economic factors and the influence of socio-economic factors on alcoholism. Several studies have shown a correlation between lower socio-economic status (SES) and increased alcohol consumption or alcohol use disorders (AUDs) (Dawson et al., 2007; Pampel, 2020). For instance, a comprehensive analysis by Pampel (2020) highlighted that individuals with lower income or education levels are more susceptible to alcoholism, often facing economic stressors and limited access to healthcare resources. This finding suggests that alcoholism not only affects socio-economic well-being but can also be influenced by it.

Alcoholism has been linked to adverse socio-economic outcomes for individuals, families, and communities. Research findings consistently demonstrate that alcoholism is associated with decreased income and employment opportunities (Room et al., 2005; Stenius et al., 2008). Studies have highlighted a negative impact on productivity, leading to increased absenteeism, decreased job performance, and higher rates of unemployment among individuals struggling with alcohol use (Room et al., 2005; Stenius et al., 2008). Moreover, alcohol-related health issues and related healthcare expenses have been found to exert additional financial burdens on individuals, leading to increased debt and reduced overall socio-economic well-being (Room et al., 2005).

Conversely, social and economic factors can also influence alcoholism patterns. Social disadvantage, such as living in impoverished neighborhoods or lacking social support networks, has been associated with higher alcohol consumption and a higher risk of alcohol use disorders (Dawson et al., 2007; Pampel, 2020). For instance, Pampel's study (2020) concluded that socio-economic disadvantage can limit access to recreational activities and resources, driving individuals toward increased alcohol consumption as a coping mechanism. Furthermore, the community-level socio-economic environment, including income inequality and availability of alcohol outlets, has also been implicated in the development and prevalence of alcoholism (Dawson et al., 2007).

Research by Frone and colleagues (2013) found that individuals with alcohol use disorders were more likely to experience unemployment or reduced work productivity. They reported higher rates of absenteeism, and job turnover. Furthermore, studies have shown that alcohol dependence can lead to a decline in income potential due to decreased job stability and occupational status (Cuffel et al., 2016). These findings suggest that alcoholism negatively affects employment opportunities and economic stability, thereby exacerbating socio-economic inequalities.

Secondly, the literature suggests a clear connection between alcoholism and educational attainment. A study conducted by Dawson and colleagues (2015) found that individuals with alcohol abuse disorders were more likely to have lower educational achievement. The researchers discovered that alcohol abuse during adolescence and young adulthood was associated with a higher risk of school dropout and reduced academic performance. Moreover, alcohol-related problems, such as cognitive impairment and behavioral issues, can hinder educational progress (Patrick et al., 2016). Thus, alcoholism not only impacts current socio-economic well-being but also has long-term consequences for education and future employment prospects. Alcoholism often leads to substantial financial burdens on both the individual and society. The costs associated with purchasing alcohol, legal issues, healthcare expenses, and lost productivity can accumulate quickly, leading to severe financial strain (Subbaraman & Kerr, 2015). Studies estimate that the economic burden of alcoholism accounts for a significant portion of healthcare expenses and productivity losses across countries (Rehm et al., 2009).

Research by Patty and colleagues (2018) revealed that alcohol abuse increased the likelihood of homelessness or unstable housing situations. This is often attributed to the financial strain caused by alcohol consumption, leading individuals to prioritize alcohol over rent or mortgage payments. Consequently, they face eviction, housing instability, or even become homeless. Furthermore, studies have shown that individuals with alcohol use disorders frequently face discrimination in securing affordable housing (Purvis et al., 2019). These findings suggest that alcoholism can disrupt housing stability and contribute to the cycle of poverty and socio-economic disadvantage.

Research consistently demonstrates a negative association between alcoholism and employment status. For instance, Smith and colleagues (2018) found that individuals with alcohol use disorders were more likely to experience unemployment, reduced work productivity, and missed working days. The societal cost of alcohol-related unemployment is substantial, resulting in lost human capital and increased financial burdens on individuals and communities (Rehm et al., 2009). Moreover, alcoholism is often linked to higher rates of job instability and inability to maintain steady employment (Gosselin et al., 2019). This highlights the crucial role of addressing alcoholism to preserve socio-economic well-being and reduce the economic burden on individuals and society.

The literature consistently demonstrates that alcoholism significantly impacts the income levels of individuals. Individuals with alcohol use disorders typically face lower income levels due to various factors, such as reduced work productivity, missed opportunities for promotion, and limited job prospects (Rehm et al., 2007). The study by Laramie and colleagues (2016) supports this finding, showing that alcoholism was associated with decreased income, even after controlling for confounding variables. The financial strain resulting from alcoholism further exacerbates socio-economic disparities and perpetuates a cycle of economic hardship for affected individuals and their families. Alcoholism also sets forth numerous challenges in educational attainment. Several studies have found a strong negative correlation between alcohol abuse and educational outcomes, including lower completion rates and reduced academic performance (Williams et al., 2019). Problematic alcohol consumption often leads to poor decision-making, reduced motivation, and impaired cognitive function, all of which detrimentally affect one's ability to succeed academically (Townshend et al., 2016).

Alcoholism can significantly impact employment outcomes, including reduced job stability, decreased productivity, and increased absenteeism. Several studies have highlighted the negative association between alcoholism and employment (Cook et al., 2007; Roche et al., 2013). For example, Cook et al. found that individuals with alcohol use disorders were more likely to suffer from job loss or reduced work hours, resulting in decreased income and increased financial strain. The relationship between alcoholism and income is multifaceted. Alcohol-related problems can lead to decreased earning potential due to impaired performance, job loss, and difficulty finding employment (Roche et al., 2013). Additionally, individuals with alcohol use disorders may spend a significant portion of their income on alcohol and related consequences, further exacerbating financial strain (Cook et al., 2007). Studies suggest that alcoholism is associated with reduced household income and increased poverty rates (Puddephatt et al., 2014).

The impact of alcoholism on education has been studied extensively, particularly in relation to adolescents and young adults. Numerous studies have consistently shown that heavy alcohol consumption and alcohol use disorders are associated with lower educational attainment (Hingson et al., 2017; Naimi et al., 2003). This can limit employment prospects and ultimately impede socio-economic progress. Access to healthcare is crucial for individuals struggling with alcoholism, as it affects their ability to seek proper treatment and address associated health issues. Several studies highlight the significant barriers faced by individuals with alcohol use disorders in accessing healthcare services, such as lack of insurance coverage, financial constraints, and stigma (Wenhui et al., 2013; Schmidt et al., 2010). Limited healthcare access can lead to delayed treatment, worsening physical and mental health outcomes, and increased economic burden.

Alcoholism can significantly impact an individual's employment status, job performance, and earnings potential. Research by Frone (2006) found that individuals with alcohol use disorders were more likely to experience unemployment, lower job stability, and reduced work hours. The lost productivity due to absenteeism and reduced job performance can result in financial strains and hinder career progression (Roebuck et al., 1990). Alcoholism often leads to substantial financial burdens on both the individual and society. The costs associated with purchasing alcohol, legal issues, healthcare expenses, and lost productivity can accumulate quickly, leading to severe financial strain (Subbaraman & Kerr, 2015).

## **2.2 Effect of social cultural influences on socio-economic well being of people**

Socio-economic well-being is a multidimensional construct that encompasses various aspects of one's quality of life, including income, education, health, and social mobility. The intersection of social and cultural factors plays a crucial role in shaping individuals' socio-economic outcomes. This review aims to critically analyze and synthesize existing studies to understand the effect of social cultural influences on socio-economic well-being. Numerous studies have demonstrated the significant influence of ethnicity on economic outcomes. For instance, research by Chetty et al. (2014) found that ethnic minorities, such as African Americans and Hispanic Americans, face persistent income disparities compared to Caucasians in the United States. Similarly, studies conducted by Bourguignon and Verdier (2000) in France and Roscigno and Ainsworth-Darnell (1999) in the United States highlight the impact of race on employment opportunities and earnings potential.

Education is a vital determinant of socio-economic well-being, as it provides individuals with the necessary skills and knowledge to secure higher-paying jobs and social mobility. A study by Psacharopoulos and Patrinos (2018) emphasized the positive relationship between education and income, highlighting that increased educational attainment results in higher earning potential. Moreover, studies such as those by Ortega and Pumar (2009) and Rumberger (2001) have shown the role of education in reducing income inequality and increasing social inclusion. Gender inequality persists across societies and significantly influences socio-economic outcomes. Multiple studies have highlighted the gender wage gap, wherein women, on average, earn less than their male counterparts for equivalent work (Blau and Kahn, 2017; Wood et al., 2016). Additionally, gender norms and expectations impact labor force participation, career choices, and access to economic resources, thus affecting women's socio-economic well-being (Amponsah-Tawiah et al., 2021; Budig and England, 2001).

Socioeconomic status (SES) is a composite measure that considers income, education, and occupation. Numerous studies have established a strong correlation between SES and socio-economic well-being. For example, research by Adler et al. (1994) found that individuals with higher SES tend to have better health outcomes, including longer life expectancy. Furthermore, studies such as those conducted by Duncan and Brooks-Gunn (2000) and Sirin (2005) have demonstrated the impact of SES on educational attainment and career trajectories.

Research has shown that individuals with stronger and more diverse social networks tend to have better socio-economic outcomes (Portes, 1998; Putnam, 2000). These networks provide opportunities for resource sharing, information exchange, and social capital accumulation. Communities with strong social cohesion and support systems have been associated with greater socio-economic well-being. For example, studies have indicated that the presence of community organizations and social programs positively impact socio-economic outcomes (Kawachi et al., 1997; Wilkinson & Marmot, 2003). Peer pressure and conformity within social groups can influence individuals' economic behaviors and choices. Research suggests that individuals conform to social norms within their peer groups, leading to particular consumption patterns and economic decisions (Bicchieri, 2006; Asch, 1955).

Cultural values, such as individualism versus collectivism, materialism versus spiritualism, and work ethic, have been found to influence economic decision-making and socio-economic outcomes (Hofstede, 1980; Inglehart, 2008). For instance, cultures that prioritize personal achievement and success may foster economic growth and higher socio-economic well-being (Smith et al., 2015). Cultural practices, including marriage customs, healthcare-seeking behavior, and education preferences, can impact socio-economic well-being. Research has shown that cultural practices, such as dowry systems or gender-based discrimination, can have negative effects on economic outcomes and gender equality (Duvvury & Nayak, 2002; Sen, 1990). Socio-economic well-being encompasses various dimensions, including income, education, employment, and overall quality of life indicators. The socio-economic well-being of individuals is influenced by multiple factors, with social-cultural influences being one of them. Social-cultural factors, such as social networks, educational opportunities, and cultural values towards wealth accumulation, can impact income levels and wealth distribution (Glaeser et al., 2000; Putnam, 1995).

Social-cultural influences can shape educational attainment and employment opportunities. Cultural norms and values influence individuals' aspirations, career choices, and access to education, ultimately impacting their socio-economic outcomes (Goldthorpe, 2000; Brooks-Gunn et al., 2000). Social support systems play a crucial role in determining an individual's socioeconomic well-being.

Discrimination based on race, ethnicity, gender, or other social categories can significantly impact an individual's socioeconomic well-being. Numerous studies have highlighted the pervasive effect of discrimination on economic outcomes. According to Pager and Shepherd (2008), racial discrimination in the labor market leads to lower wages, employment

instability, and limited career advancement opportunities, thereby influencing socioeconomic well-being. Cultural norms shape individuals' beliefs, attitudes, and behaviors, influencing their economic choices and outcomes. Cultural values and practices related to work ethic, gender roles, and entrepreneurship impact socioeconomic well-being. A study by House and Javidan (2004) found that countries with strong work ethic cultural norms tend to have higher rates of entrepreneurship and economic growth.

Various social-cultural influences significantly shape individuals' socio-economic well-being levels. Factors such as education, gender, ethnicity, religion, and social support networks contribute to the opportunities and outcomes people experience in economic terms (Smith, 2018; Banks et al., 2019). Understanding these influences is essential for designing effective policies that address inequality and promote inclusive economic growth. Education plays a crucial role in determining individuals' socio-economic well-being. Increased educational attainment positively correlates with higher income levels and access to better job opportunities (Heckman & Lafontaine, 2010). Moreover, education provides individuals with the necessary skills to adapt to changing labor market demands, thus enhancing their earning potential and socio-economic mobility (Oreopoulos *et al.*, 2016).

Gender is a significant socio-cultural influence that affects socio-economic well-being. Gender-based discrimination persists in various contexts, resulting in unequal access to education, employment, and economic resources (World Bank, 2019). The gender pay gap, for instance, demonstrates how societal expectations and norms can hinder women's socio-economic progress (Blau & Kahn, 2017). Additionally, care giving responsibilities often disproportionately impact women, limiting their economic opportunities and financial independence (Mandel & Semyonov, 2019). Ethnicity and religion can significantly impact socio-economic well-being, shaping access to employment, housing, and social networks.

Social support networks influence individuals' socio-economic well-being by providing resources, opportunities, and emotional support (Thoits, 2011). Strong social ties can enhance economic outcomes by facilitating access to job opportunities or financial assistance during times of need (Granovetter, 1973). Additionally, social networks can foster a sense of belonging and empowerment, positively impacting individuals' psychological well-being and overall socio-economic status (Putnam, 2000). Understanding the relationship between social-cultural influences and socio-economic well-being is crucial for policymakers and stakeholders. Implementing policies that address educational disparities, gender inequality, and discrimination is essential for creating an environment that fosters equal opportunities for

all individuals (OECD, 2021). Additionally, promoting social cohesion, diversity, and inclusion can enhance socio-economic well-being outcomes for marginalized groups (World Economic Forum, 2019).

Cultural values play a significant role in shaping individuals' aspirations, attitudes towards work, and views on economic success. For instance, research by Ng et al. (2014) found that individuals from cultures emphasizing collectivism tend to prioritize communal harmony and interdependence, often affecting their career choices and income levels. Alternatively, cultures emphasizing individualism tend to value personal achievements and independence, which can influence entrepreneurial behaviors and individual financial success (Markus & Kitayama, 1991). Social norms are unwritten rules that guide behavior within a particular society. These norms can influence economic decision-making, resource distribution, and occupational segregation, consequently impacting socioeconomic well-being (Alesina et al. 2018).

One's social network, comprising of family, friends, and acquaintances, can significantly impact their socioeconomic well-being. Research by Granovetter (1974) demonstrates the importance of weak ties within social networks for accessing new opportunities and information, such as job referrals and business resources. This finding highlights the influence of social networks on socioeconomic mobility. Demographic characteristics, including age, gender, ethnicity, and immigrant status, interact with social and cultural factors to impact socioeconomic outcomes. For instance, studies by Chetty et al. (2014) and Fryer Jr. (2011) highlight the role of race and ethnicity in determining economic disparities and social mobility, indicating how social-cultural influences intersect with demographic characteristics to shape socioeconomic well-being.

Strong evidence suggests that social-cultural factors significantly contribute to economic disparities among individuals. For instance, studies have highlighted that racial and ethnic minorities face persistent disadvantages in terms of income, wealth, employment, and educational attainment (Darity Jr., Hamilton, & Stewart, 2020; Massey & Denton, 1993). These disparities are influenced by systemic biases, structural discrimination, and cultural stereotypes that limit access to economic resources and opportunities. Research shows that racial and ethnic influences have a substantial impact on socio-economic well-being. Studies demonstrate that discrimination and biases faced by racial and ethnic minorities contribute to income inequality, occupational segregation, and limited access to quality education and

housing (Pager & Shepherd, 2008; Williams, Priest, & Anderson, 2016). These influences perpetuate economic disparities and hinder upward mobility for marginalized groups.

Gender also plays a significant role in shaping socio-economic outcomes. Women, particularly in patriarchal societies, face various challenges, including unequal pay, limited job opportunities, and restricted access to education and healthcare (World Bank, 2019). These gender-based influences contribute to economic inequality and constrain women's socio-economic well-being (Aguirre, 2000; Kabeer, 2008). Cultural norms and values have profound effects on individuals' economic behavior and outcomes. For example, research has shown that cultural values such as individualism, collectivism, and entrepreneurial spirit influence entrepreneurship rates, business success, and economic development (Acs & Szerb, 2017; Shaver, Mitchell, & Yeung, 2003). Similarly, cultural attitudes towards work, education, and savings impact socio-economic well-being (Hofstede, 1980; Lucas, 2005).

Understanding the impact of social-cultural influences on socio-economic well-being is crucial for designing effective policy interventions. Policies should be implemented to reduce discrimination, promote equal opportunities, and provide support systems. Research suggests that affirmative action programs, equitable education policies, unbiased hiring practices, and programs focusing on women empowerment can help address socio-economic disparities (Mullainathan & Shafir, 2013; Pager et al., 2009; World Bank, 2019). Cultural values play a crucial role in shaping the socioeconomic well-being of individuals. Research has shown that cultural values, such as individualism, collectivism, and work ethic, significantly influence economic outcomes (Hofstede, 1980; Triandis, 1995).

Social norms have a substantial impact on the socioeconomic well-being of individuals. Studies have found that adherence to norms related to gender roles, specifically the expectation for women to prioritize family and care giving over economic pursuits, can limit their economic opportunities and financial well-being (Eagly & Wood, 1999; Yeung, 2002). Similarly, traditional norms surrounding certain occupations or industries may influence individuals' access to economic resources (Williams, 2014). Discrimination, based on factors such as race, ethnicity, gender, or religion, significantly affects an individual's socioeconomic well-being. Discriminatory practices in education, employment, and access to resources can hinder economic progress for certain groups (Pager & Shepherd, 2008; Bertrand & Mullainathan, 2004). For instance, racial discrimination has been found to limit employment opportunities and earnings potential for individuals from minority groups (Pager, Western, & Bonikowski, 2009).

Education is a pivotal factor influencing socioeconomic well-being. Access to quality education positively impacts individuals' economic outcomes by enhancing skills, knowledge, and job opportunities (Psacharopoulos & Patrinos, 2004). Research shows that disparities in educational attainment due to socioeconomic factors can perpetuate social inequality (Reardon, 2011; Pfeffer, 2015). Additionally, cultural values and social norms can influence individuals' educational choices and outcomes (Horvat & Lewis, 2003). Social norms also impact the socio-economic well-being of individuals. These norms can shape economic behaviors, opportunities, and outcomes. For instance, Akerlof and Kranton (2000) highlighted how social norms influence labor market dynamics and gender inequality. Moreover, Bicchieri (2016) explored how social norms regarding cooperation and trust affect economic development.

Cultural identity, including ethnicity, religion, and language, significantly influences the socio-economic well-being of individuals. Chiswick (1978) examined how cultural identity affects immigrant assimilation and economic outcomes. In addition, Guiso, Sapienza, and Zingales (2006) explored the role of cultural identity in shaping preferences, attitudes, and economic behavior. The concept of social capital emphasizes the importance of social networks, relationships, and trust in influencing socio-economic outcomes. Putnam (2000) argued that communities with high levels of social capital benefit from increased economic opportunities and improved well-being. Furthermore, Coleman (1988) explored the role of social capital in educational attainment and employment outcomes.

### **2.3 Effect of co-occurring mental health on socio-economic well being of people**

Mental health disorders affect a significant portion of the global population, with an estimated 20% of people experiencing a psychiatric disorder at some point in their lives (WHO, 2019). Co-occurring mental health disorders, also known as comorbidity, refer to the presence of two or more mental health conditions within an individual. This literature review aims to explore the impact of co-occurring mental health disorders on the socio-economic well-being of affected individuals. Individuals with co-occurring mental health disorders often face challenges in obtaining and maintaining employment. Studies have shown that individuals with mental health disorders have higher unemployment rates compared to the general population (Marwaha et al., 2017). In addition, they are more likely to experience discrimination and prejudice, resulting in lower job satisfaction and reduced career progression (Link et al., 2020). Consequently, these individuals often face economic disadvantages, lower salaries, and limited opportunities for career advancement.

A strong correlation exists between mental health disorders and educational attainment. Co-occurring mental health disorders can negatively impact an individual's ability to engage in educational activities, leading to lower academic performance, increased absenteeism, and reduced completion rates (Goldman-Mellor et al., 2016). This, in turn, affects long-term socio-economic outcomes such as access to higher-paying jobs and professional development opportunities. Individuals with co-occurring mental health disorders face a higher risk of living in poverty and experiencing socio-economic disparities (Markowitz, 2014). Limited financial resources and increased healthcare costs associated with the treatment of mental health conditions contribute to this disadvantage (Prince et al., 2007). Moreover, poverty and socio-economic inequalities can exacerbate mental health symptoms, creating a cycle of deprivation and limited access to resources.

Co-occurring mental health disorders can hinder an individual's social participation and quality of life. The stigma surrounding mental health often leads to social isolation, limited social networks, and decreased overall well-being (Link and Phelan, 2014). These factors further impair an individual's socio-economic well-being by reducing access to supportive social environments, valuable social connections, and community resources.

Efforts to mitigate the socio-economic impact of co-occurring mental health disorders require a multifaceted approach. Integrated care models combining mental health and social support services have shown promise in improving employment outcomes (Rüsch et al., 2020). Strengthening workplace accommodations, anti-discrimination laws, and mental health awareness campaigns could also contribute to reducing employment-related disparities (LaMontagne et al., 2014). Additionally, targeted social programs and policies that address poverty, housing stability, and access to quality healthcare can alleviate the socio-economic challenges faced by individuals with co-occurring mental health disorders (Salzer et al., 2019).

Numerous studies have established a strong correlation between socio-economic factors and mental health outcomes. Higher levels of poverty, unemployment, and social deprivation have consistently been associated with a greater risk of developing mental health disorders (e.g., depression, anxiety, and substance abuse) (Cohen et al., 2015; Lorant et al., 2017; Lund et al., 2018). Lack of access to basic resources, such as education, healthcare, and social support networks, further exacerbates mental health disparities among economically disadvantaged populations (Pickett & Wilkinson, 2015). Conversely, mental health issues also exert a substantial influence on socio-economic well-being. Research has shown that

individuals with mental health problems are more likely to experience reduced employment opportunities, lower incomes, and higher rates of poverty (Hjorthøj et al., 2017; Knapp et al., 2011). The economic burden of mental illness not only impairs the financial stability of affected individuals but also triggers societal costs due to increased healthcare utilization, productivity losses, and social welfare expenses (World Health Organization, 2018).

The relationship between mental health and socio-economic well-being is bidirectional, with each influencing the other in a dynamic manner. Studies have demonstrated that economic adversity can act as a stressor, leading to the development or exacerbation of mental health problems (O'Connor et al., 2018; Reibling, 2017). Moreover, mental health issues can create barriers to education, employment, and financial independence, thereby perpetuating socio-economic disparities (Lund et al., 2019; Waddell et al., 2014).

Several mediating factors have been identified that help elucidate the complex relationship between mental health and socio-economic well-being. Factors such as social support, access to healthcare services, education, and job opportunities have been associated with improved mental health outcomes and enhanced socio-economic status (Osborne et al., 2017; Power et al., 2019). Conversely, discrimination, stigma, and limited access to treatment and resources act as barriers, exacerbating the co-occurrence of mental health problems and socio-economic deprivation (Williams & Sternthal, 2019; Yanos et al., 2016). One significant aspect impacted by co-occurring mental health issues is employment. Several studies have established a strong association between mental health disorders and unemployment rates. For instance, a study by Corrigan et al. (2014) found that individuals with severe mental health issues were more likely to experience unemployment compared to those without mental health disorders. This relationship between mental health and employment highlights the potential negative impact on the socio-economic well-being of individuals.

Co-occurring mental health conditions have also been linked to income disparities. Research by Muntaner et al. (2013) demonstrated that individuals with mental health disorders tend to have lower overall income levels compared to those without such conditions. This income disparity can affect various dimensions of socio-economic well-being, including access to healthcare, education, and other resources. The effect of co-occurring mental health on education and skill development is another vital aspect to consider. Studies have suggested that mental health issues can hinder individuals' ability to complete their education and gain new skills. A study by O'Connor et al. (2018) revealed that individuals with mental health disorders were more likely to drop out of school or experience difficulties in skill acquisition.

These challenges in education and skill development can subsequently influence employment opportunities and overall socio-economic well-being.

Co-occurring mental health issues also have a direct impact on healthcare expenditure and financial burden. Studies such as Rutter et al. (2013) have shown that individuals with mental health disorders often face higher healthcare costs due to increased healthcare utilization and the need for specialized treatments. This increased financial burden can have adverse effects on socio-economic well-being, including reduced disposable income and limited access to other essential resources.

The presence of co-occurring mental health issues can also affect an individual's social support and network, which is crucial for overall socio-economic well-being. A study by Kawachi et al. (2015) highlighted that individuals with mental health disorders may experience weakened social connections, resulting in reduced access to informational, instrumental, and emotional support. This lack of social support can further exacerbate socio-economic disadvantages by limiting opportunities for employment, education, and economic mobility. Several studies have documented the adverse effects of co-occurring mental health disorders on socio-economic well-being. For instance, a longitudinal population-based study by Mulvaney-Day et al. (2018) found that individuals with multiple mental health conditions displayed significantly lower employment rates, increased financial strain, and reduced educational attainment compared to those with a single or no mental health conditions.

Moreover, a meta-analysis by Latkin et al. (2020) demonstrated a strong association between depression, anxiety, and substance use disorders with poverty, unemployment, and decreased income. These findings support the notion that co-occurring mental health conditions pose significant barriers to economic opportunities and financial stability. Several mechanisms may explain the impact of co-occurring mental health on socio-economic well-being. Firstly, individuals with mental health conditions often experience impaired cognitive functioning, reduced productivity, and labor market disadvantages, as discussed in a study by Henderson et al. (2016). These challenges can limit their employment prospects and hinder professional growth.

Secondly, mental health conditions are frequently associated with increased healthcare utilization and higher medical costs. A study by Akincigil et al. (2017) found that individuals with co-occurring mental health and chronic physical conditions face greater healthcare expenses, exacerbating financial strain and reducing discretionary income available for socio-

economic activities. Thirdly, stigma and discrimination surrounding mental health can contribute to decreased social support, limited social connections, and reduced access to resources necessary for socio-economic well-being. Research by Yanos et al. (2019) highlighted the impact of perceived stigma on employment opportunities and income levels, emphasizing the need for targeted anti-stigma campaigns.

A review by McDaid and Park (2011) highlighted the importance of addressing employment barriers through vocational rehabilitation programs, supported employment initiatives, and workplace accommodations. Furthermore, integrating mental health services with primary care settings has shown promise in improving socio-economic outcomes. A study by Katon et al. (2017) demonstrated that collaborative care interventions, combining mental health treatment and enhanced primary care, were associated with reduced healthcare costs and improved employment rates. Additionally, community-based initiatives focused on social inclusion, housing stability, and financial literacy have shown potential in supporting socio-economic well-being. A study by Ojagbemi et al. (2020) emphasized the significance of holistic interventions targeting housing instability, social networks, and financial management.

Studies have consistently shown that individuals with co-occurring mental health disorders often face difficulties in gaining and maintaining employment (Bijl et al., 2002; Cockerham, 2014). Symptoms such as decreased concentration, fatigue, and impaired social functioning create barriers to successful job performance, leading to lower income and career opportunities. Co-occurring mental health disorders have been linked to income disparity among affected individuals. Several studies have demonstrated that these individuals tend to have lower income levels compared to those without mental health disorders (Mueller et al., 2011; Schmitz et al., 2017). The factors underlying this disparity include reduced work productivity, increased medical expenses, and limited access to quality education and training.

The relationship between mental health disorders and educational attainment is bidirectional. Co-occurring mental health disorders often lead to educational difficulties, including reduced school attendance, lower academic achievement, and increased dropout rates (McLeod et al., 2016; Patel et al., 2018). Conversely, lower educational attainment can contribute to the onset and exacerbation of mental health disorders, leading to a vicious cycle of socio-economic adversity. The presence or absence of social support plays a crucial role in the well-being of individuals with co-occurring mental health disorders. Research suggests that adequate social

support acts as a protective factor, enhancing treatment compliance, reducing symptom severity, and improving socio-economic outcomes (Dooley et al., 2014; Turner et al., 2018). Conversely, limited social support networks can exacerbate the impact of mental health disorders on one's socio-economic well-being.

Numerous studies have shown that individuals with mental health disorders often face difficulties maintaining employment due to symptoms, stigma, and discrimination. For instance, a study by Kessler et al. (2008) found that work impairment due to mental health conditions reduced productivity and increased absenteeism, leading to job instability. Some individuals with mental health conditions may face limited occupational opportunities due to the nature of their condition. A study by Perkins et al. (2018) found that individuals with severe mental illness experienced barriers in securing jobs requiring high skill levels. Several studies have shown a significant correlation between mental health conditions and academic achievement. A study by Lewinsohn et al. (1998) indicated that depression negatively affected academic performance and completion of educational goals among adolescents.

Mental health conditions can also impact an individual's ability to pursue education and attain higher levels of education. A study by Eisenberg et al. (2009) found that college students with mental health conditions were less likely to complete their degrees compared to their peers without mental health conditions. Individuals with mental health conditions often face lower income levels compared to those without such conditions. A comprehensive meta-analysis by Knapp et al. (2011) found that mental health problems were associated with reduced employment rates and lower earnings. Mental health conditions can contribute to the risk of poverty and financial instability. A study by Butterworth et al. (2011) found that adults with mental health disorders were more likely to experience poverty compared to those without mental health issues.

Numerous studies have demonstrated a negative association between mental health conditions and overall life satisfaction. For example, a longitudinal study by Fergusson et al. (2005) found that individuals with mental health issues experienced reduced life satisfaction and subjective well-being. Mental health conditions can adversely affect social relationships, leading to reduced social support and increased isolation. A study by Umberson et al. (2010) revealed that depression was associated with decreased social network size and quality of relationships. Mental health disorders are associated with increased unemployment rates and decreased work productivity (Wang et al., 2017). Research has shown that individuals with mental health disorders experience challenges in finding and maintaining employment,

leading to lower income levels and increased dependence on social welfare programs (Diener et al., 2020).

Discrimination against individuals with mental health disorders in the workplace further exacerbates the negative impact on socio-economic well-being. Studies have found a direct correlation between workplace discrimination and increased mental health symptoms, leading to reduced job retention and advancement opportunities (Bhui et al., 2020). High dropout rates among individuals with co-occurring mental health disorders have significant implications for socio-economic well-being. Research demonstrates that mental health issues contribute to lower educational attainment, limiting employment options and future earning potential (Fergusson et al., 2017). Inadequate access to education for individuals with mental health disorders is a critical socio-economic challenge. Limited educational opportunities further perpetuate disparities in socio-economic outcomes for this population (Reddy et al., 2018).

Bebbington et al. (2013) demonstrated that individuals with co-occurring mental health disorders had lower incomes compared to those without these disorders. The study also observed that co-occurring disorders such as schizophrenia and substance abuse contributed to greater income disparities. A longitudinal study by Lugo-Gil et al. (2014) highlighted that individuals with co-occurring mental health disorders experienced persistent income and earnings gaps over time, even after controlling for other socio-demographic factors. Chesney et al. (2017) found that co-occurring mental health disorders, specifically attention-deficit/hyperactivity disorder (ADHD) and learning disabilities, were associated with lower educational attainment and decreased chances of pursuing higher education.

McCutcheon et al. (2019) revealed that individuals with co-occurring mental health disorders often faced challenges in accessing and maintaining social support networks necessary for overall well-being and socio-economic success. A study conducted by Wang et al. (2018) found that the presence of co-occurring mental health disorders reduced the availability of informal support systems, leaving individuals with limited resources for coping with adverse socio-economic situations. Patel et al. (2019) emphasized the importance of early detection and intervention for co-occurring mental health disorders to prevent long-term negative socio-economic consequences and improve overall well-being.

The study conducted by Waghorn et al. (2011) investigated the employment and education outcomes for individuals with mental illness. It found that individuals with co-occurring mental health conditions face higher rates of unemployment, job instability, and reduced income compared to those without such conditions. These findings emphasize the impact of mental health disorders on employment opportunities and subsequent socio-economic well-being. Jenkins et al. (2008) examined the association between debt, income, and mental disorders in the general population. The study found that individuals with mental health disorders are more likely to experience financial difficulties, including higher levels of indebtedness, lower income levels, and reduced savings. Such income disparities further contribute to the socio-economic challenges faced by individuals with co-occurring mental health conditions.

Hysenbegasi et al. (2005) investigated the impact of depression on the academic productivity of university students. The study revealed that mental health conditions, such as depression, can significantly affect educational attainment and performance. Lower educational achievements can limit future employment prospects and thereby impact the socio-economic well-being of individuals with co-occurring mental health disorders. Stansfeld et al. (2012) conducted a longitudinal study to explore the relationship between social support, social networks, mental health, and mental health care needs. The study demonstrated that inadequate social support and disrupted social networks can contribute to the maintenance or exacerbation of mental health conditions. In turn, compromised mental well-being can lead to socio-economic difficulties, limited access to resources, and reduced quality of life for individuals experiencing co-occurring mental health conditions.

Hoven et al. (2005) found that individuals with co-occurring mental health disorders were more likely to experience unemployment or reduced work hours, leading to a lower socioeconomic status. Wang et al. (2017) highlighted those individuals with co-occurring mental health disorders faced greater difficulty in finding and maintaining employment, resulting in higher economic instability. Salom et al. (2018) reported a link between co-occurring mental health disorders and a decreased likelihood of achieving higher education and professional qualifications, which can impact income potential.

## **2.4 Research gap**

The existing literature on the relationship between alcoholism and socio-economic well-being presents a notable gap that needs to be addressed. While several studies have explored the impact of alcoholism on individual health outcomes, few have thoroughly examined its effects on socio-economic well-being. Understanding how alcoholism affects individuals' economic and social conditions is crucial for policymakers, practitioners, and researchers to develop effective interventions that can address the broader implications of this issue. By filling this gap in the literature, we can gain a comprehensive understanding of how alcoholism impacts individuals' socio-economic well-being and subsequently implement targeted policies and strategies to improve their overall quality of life.

Similarly, the literature on the effects of social-cultural influences on socio-economic well-being has mainly emphasized the role of cultural norms, beliefs, and practices in shaping economic outcomes. While this body of knowledge provides valuable insights, it tends to overlook the potential interplay between genetic factors and social-cultural influences. Understanding how genetic predispositions interact with socio cultural norms can shed light on how socio-economic outcomes are shaped. Hence, this research aims to bridge this gap by exploring the intricate relationship between social-cultural influences, genetics, and socio-economic well-being.

The impact of co-occurring mental health disorders on socio-economic well-being has been extensively studied. However, many studies overlook the potential genetic factors that contribute to both mental health issues and socio-economic outcomes. This research seeks to address this gap by investigating how genetic predispositions to mental health conditions can influence socio-economic well-being. Understanding the genetic underpinnings of mental health and socioeconomic outcomes can provide a more comprehensive understanding of these complex relationships and contribute to effective interventions and support strategies for individuals facing co-occurring mental health issues and socio-economic challenges.

## **CHAPTER THREE**

### **RESEARCH METHODOLOGY**

#### **3.0 Introduction**

This chapter presents research design, study population, Sample size, Sources of data, Data collection method, quality control methods, data analysis, ethical consideration, and limitation of the study.

#### **3.1 Research Design**

Hoong, J.P. (2017) asserted that a research design is a blue print for conducting a study with maximum control over factors that may interfere with the validity of the findings. The researcher used a cross sectional survey design basing on the use of qualitative and quantitative approaches sanctioned to investigate the influence of socio-economic factors on the utilization of family planning services in Nambale sub-county. The study focused on exploratory research design, since little is known about the phenomenon in question, explanatory research, using quantitative and qualitative research methodologies so as to enable researcher to predict the outcome of the study.

#### **3.3 Sample size**

Eisenhardt, K.M. (2019) articulated a sample size as a proportion of a population. The sample was selected from the Nambale sub-county which included parish chief, sub-county chief accounts officer, Stakeholders, opinion leaders. Sample size was important in determining the accuracy and finding reliability of a survey. In the sample size determination (the selection method of choosing the number of observations to include in the sample) was an important feature of any empirical study.

#### **3.4 Sample selection**

The researcher used purposive sampling and simple random sampling respectively to select 1 nursing assistant, 1 community development officer (CDO), 1 village health team, 1 mid wife, 58 opinion leaders, 1 health assistant.

**Table 1 showing sampling selection**

<b>Respondents</b>	<b>Population</b>	<b>Sample size</b>	<b>Sampling procedures</b>
Nursing assistant	1	1	Purposive sampling
CDO	1	1	Purposive sampling
VHT	1	1	Purposive sampling
Midwife	1	1	purposive sampling
Health assistant	2	1	Purposive sampling
Opinion leaders	69	58	Simple random sampling
<b>Total</b>	<b>75</b>	<b>63</b>	

**Source: Nambale sub-county (2024)**

The researcher used the formula of Slovenes (1960) which include;

$$n = \frac{N}{1 + N(e^2)}$$

Where;

n is the sample size

N is the whole population

1 is the constant

e<sup>2</sup> error in sampling (0.05)

$$= 75/1+75 (0.05)^2$$

$$=75/1+75 (0.0025)$$

$$= 75/1+0.1875$$

$$= 75/1. 1875$$

$$= 63.2$$

n= 63 respondents

Therefore, the sample size of the study was 63 respondents

### **3.5 Research methods**

Research methods refer to the tools that one uses to do research. These can either be qualitative or quantitative or mixed. Quantitative methods examine numerical data and often require the use of statistical tools to analyze data collected.

### **3.6 Research instruments**

Data collection is a tool that is used to collect data (Dilworth 2018). The researcher basically focused on the two methods of data collection and these include questionnaire and interview.

#### **3.6.1 Questionnaires**

According to Lowe, D.M. (2017), questionnaire is a reformulated written set of questions to which respondents record their answers usually within rather closely defined alternative. A questionnaire is a series of questions asked to individuals to obtain statistically useful information about a given topic and when properly constructed and responsibly administered, questionnaires become a vital instrument by which statements can be made about specific groups or people or entire populations. An open and close ended questionnaire was used to collect information from the nursing assistant, CDO, Village health teams, mid wife, opinion leaders from Nambale sub-county where the researcher allowed the study respondents to fill the questionnaire in the study population. This allowed free responses from the respondents that engaged in the depth views about the study questions. The closed ended questions included alternative answers for selection and also were used in getting required information about the study. The questionnaire was used on the basis that the variables under study may not be observed for instance the views, the opinions perception and feelings of the respondents.

#### **3.6.2 Interview guide**

According to Coase, R.H. (2018), this method involves directly meeting the informants and asking necessary questions regarding the subject of enquiry. Usually a set of questions or a questionnaire is carried by him and questions are also asked according to that. The interviewer efficiently collects the data from the informants by cross examining them.

### **3.7 Data Analysis**

According to Robinson (2017), data analysis is the process of systematically applying statistical and logical techniques to describe and illustrate, condense and recap, and evaluate data. The process of how to conduct a data analysis may vary depending on research. Nevertheless, the aim of the data analysis is to interpret data and draw meaning from it (Saunders et al., 2014). In order to answer the research questions presented in this thesis as

well as formulate conclusions, a data analysis is a necessity. In this thesis, two types of data were analyzed separately and simultaneously as explained the paragraphs below;

### **3.7.1 Quantitative Data Analysis**

Data processing shall be done through editing of the data which was coded for further data analysis. After data processing, quantitative data analysis was carried out by simple frequency tabulation using a Statistical Package for Social Science (SPSS). Data was presented using different methods such as simple frequency tables which ultimately helped to measure influence of parental socio-economic status on student discipline of students. This is because data presentation requires clear portrayal of the findings presented, and the listed method above clearly fulfills that purpose.

### **3.7.2 Qualitative Data Analysis**

On the other hand, qualitative data gathered from open-ended questions in the interview guide shall be summarized. A style called content analysis was used to test the validity and authenticity. Then, data was categorized according to the sub-themes identified earlier.

### **3.8 Research procedure**

These include identifying the area of study, choosing the topic, formulating a research plan, collecting and then analyzing the data and then finally writing up the study. These steps were represented in three phases, namely the planning phase and the research phase and then finally the presentation phase.

### **3.9 Ethical Consideration**

Polit et al (2014) ethical consideration is the moral standards that the researcher has to consider in all research methods and in all stages of the research design.

The researcher respected the dignity of the respondents and treats the information given with uttermost confidentiality and for the research purpose only.

The researcher asked prerogative questions to the respondents especially questions concerning private life and even those which dig down the respondent's dignity.

Participants in a study were protected from an adverse situation. They were assured that information that was provided to the researcher and their participation couldn't be used against them.

Permission was sought from the respondents before approaching their home, offices and working permission and at their convenient times only. Issues of bribes, undue influence, and cohesion were strongly avoided by the researcher.

Any type of communication in relation to the research was critically done with honesty and transparency to validity test to check on the error rate in the research.

### **3.10 Quality Control Methods**

According to NdifonEjoh and Patrick Ejom.(2015), quality control are the efforts and procedures that researchers put in place to ensure the quality and accuracy of data being collected using the methodologies chosen for a particular study. Quality control efforts vary from study to study and researcher applies to questionnaires, the monitoring of appropriate interview behavior, and other quality control aspects of the survey process. The researcher determined the validity and reliability of the instruments.

#### **3.10.1 Validity**

Validity refers to how well an instrument measures what it is intended to measure. It relates to the extent at which the survey measures right elements that needs to be measured. The researcher consulted the supervisor about the items in the instrument rated as VR, R, and rate or not rated. From the rating the researcher computed CVI using George and Mallery (2018). The value of CVI was interpreted as stated by George and Mallery (2018). The formulae contended by George and Mallery (2018) is what the researcher used to test the content validity index (CVI).

#### **3.10.2 Reliability of data**

According to Sekaran and Bougie (2016), reliability of an instrument refers to the suitability and consistency where the instrument measures the concept without bias and error free. Reliability also refers to the consistency and validity of tested results determined through statistical methods after several trials.

## CHAPTER FOUR

### DATA PRESENTATION, INTERPRETATION AND DISCUSSION OF THE FINDINGS

#### 4.0 Introduction

This chapter presents the findings on the effect of alcoholism on the socio-economic wellbeing of the people in Nambale sub-county, Mbale district. The researcher carried out this study with the aim of providing answers to the questions using the methodology described in chapter three.

#### 4.1 Response rate

The sample size of the population was 63. Questionnaires were designed distributed to 63 respondents and were wholly answered. This implies that the response rate was excellent.

#### 4.2 Bio Data

These findings explain the feedback of the respondents during the research activity for both male and female respondents.

##### 4.2.1 Gender of respondents

**Table 2 showing the Gender of respondents**

		<b>Frequency</b>	<b>Percent</b>	<b>Valid Percent</b>	<b>Cumulative Percent</b>
Valid	Male	20	32.0	32.0	32.0
	Females	43	68.0	68.0	100.0
	<b>Total</b>	<b>63</b>	<b>100.0</b>	<b>100.0</b>	

**Source: Primary data (2024)**

The table 2 above shows that, 32% were male while 68% were female. This implies that the views of females were more represented in the study findings than those of the males and it also implies that the study involved more females with 68% than males at 32% in Nambale sub-county.

#### 4.2.2 Marital status of respondents

**Table 3 showing marital status of respondents**

		<b>Frequency</b>	<b>Percent</b>	<b>Valid Percent</b>	<b>Cumulative Percent</b>
Valid	Single	12	19.0	19.0	19.0
	Married	30	48.0	48.0	67.0
	Divorced	8	13.0	13.0	80.0
	Widowed	13	20.0	20.0	100.0
	<b>Total</b>	<b>63</b>	<b>100.0</b>	<b>100.0</b>	

**Source: Primary data (2024)**

With reference to table 3 above indicates that out of total sample of the study; 19% were single, 48% were married, 13% divorced, and 20% were widowed .this implies that Nambale sub-county employs the majority of its employees who are married with 48% which shows that they are responsible enough to carry out the tasks being assigned to which can improve on the performance of the entity.

#### 4.2.3 Age of respondents

**Table 4 showing Age group of respondents**

		<b>Frequency</b>	<b>Percent</b>	<b>Valid Percent</b>	<b>Cumulative Percent</b>
Valid	21-30 years	12	19.0	19.0	19.0
	31-40 years	22	35.0	35.0	54.0
	41-50 years	10	16.0	16.0	70.0
	Above 50 years	19	30.0	30.0	100.0
	<b>Total</b>	<b>63</b>	<b>100.0</b>	<b>100.0</b>	

**Source: Primary data (2024)**

With reference to table 4 above indicates that out of total sample of the study; 19% lie between the age of 21-30 years ,35% make it to the age of 31-40 years ,16% lie between the age of 41-50 years ,and above the age of 50 years constituted 30%. This indicates that the majority of respondents were mature and knowledgeable enough to give the required data.

#### 4.2.4 Qualification of respondents

**Table 5 Showing academic qualification of respondents**

		<b>Frequency</b>	<b>Percent</b>	<b>Valid Percent</b>	<b>Cumulative Percent</b>
Valid	Secondary	11	17.0	17.0	17.0
	Certificate	8	13.0	13.0	30.0
	Diploma	25	40.0	40.0	70.0
	Bachelor's	14	22.0	22.0	92.0
	Masters	5	8.0	8.0	100.0
	<b>Total</b>	<b>63</b>	<b>100.0</b>	<b>100.0</b>	

**Source: Primary data (2024)**

The 5 above shows that out of total sample of the study; 17%, 13%, 40% ,22% and 8% correspond to secondary, certificate, diploma, bachelors' and masters respectively. This indicates that all respondents who participated in giving out information in Nambale sub-county had attained certain level of education with the majority of the respondents corresponding to 40% who are mainly of diploma holders.

#### 4.2.5 Years of working

**Table 6 showing years of working by respondents**

		<b>Frequency</b>	<b>Percent</b>	<b>Valid Percent</b>	<b>Cumulative Percent</b>
Valid	Less than 1 year	15	24.0	24.0	24.0
	1-2 years	38	60.0	60.0	84.0
	Above 3 years	10	16.0	16.0	100.0
	<b>Total</b>	<b>63</b>	<b>100.0</b>	<b>100.0</b>	

**Source: Primary data (2024)**

Table 6 above shows that 24%, 60%, and 16%, correspond to less than 1 year, 1-2 years, and above 3 years respectively, This however implies that Nambale sub-county employs experienced workers who have had reasonable numbers of years of experience with 40% such that the goals formulated by the entity can be achieved well besides this it also implies that majority of the respondents had served for a considerable period which indicates that most of the respondents had vast knowledge which could be relied upon by this study.

**4.3.0 Research question one: Finding out the relationship between alcoholism and socio-economic wellbeing of people in Nambale sub-county**

**4.3.1 Individuals with alcoholism experience higher rates of poverty, financial instability**

**The table 7 Showing whether individuals with alcoholism experience higher rates of poverty, financial instability**

		<b>Frequency</b>	<b>Percent</b>	<b>Valid Percent</b>	<b>Cumulative Percent</b>
Valid	Strongly agree	19	30.0	30.0	30.0
	Agree	15	24.0	24.0	54.0
	not sure	11	17.0	17.0	71.0
	Disagree	6	10.0	10.0	81.0
	Strongly disagree	12	19.0	19.0	100.0
	<b>Total</b>	<b>63</b>	<b>100.0</b>	<b>100.0</b>	

**Source: Primary data (2024)**

Table 7 above indicates that 54% (30%, 24%) were positive to the statement that individuals with alcoholism experience higher rates of poverty, financial instability, while 29% (10%, 19%) forming the minority of the respondents were negative to the same statement, 17% were not sure hence implying that individuals with alcoholism experience higher rates of poverty, financial instability.

### 4.3.2 Alcohol abuse contributes to increased health care costs, reduced workplace productivity, and increased crime rates

The table 8 Showing whether alcohol abuse contributes to increased health care costs, reduced workplace productivity, and increased crime rates

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Strongly agree	3	5.0	5.0	5.0
	Agree	9	14.0	14.0	19.0
	not sure	4	6.0	6.0	25.0
	Disagree	18	29.0	29.0	54.0
	Strongly disagree	29	46.0	46.0	100.0
	<b>Total</b>	<b>63</b>	<b>100.0</b>	<b>100.0</b>	

**Source: Primary data (2024)**

With reference to table 8, above it can be seen that minority of respondents 19% (5%, 14%) were positive to the statement that alcohol abuse contributes to increased health care costs, reduced workplace productivity, and increased crime rates, while 75% (29%, 46%) of the respondents were negative to the same statement while 6% of the respondents were not sure. This concurs with the research carried out by Krahn GL (2013) intimated that alcohol abuse contributes to increased health care costs, reduced workplace productivity, and increased crime rates there by implying that alcohol abuse does not contribute to increased health care costs, reduced workplace productivity, and increased crime rates.

### 4.3.3 Excessive drinking also lead to downward mobility and further socio-economic disadvantages

**Table 9 Showing whether excessive drinking also lead to downward mobility and further socio-economic disadvantages**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	strongly agree	7	11.0	11.0	11.0
	Agree	14	22.0	22.0	33.0
	not sure	8	13.0	13.0	46.0
	Disagree	20	32.0	32.0	78.0
	Strongly disagree	14	22.0	22.0	100.0
	<b>Total</b>	<b>63</b>	<b>100.0</b>	<b>100.0</b>	

**Source: Primary data (2024)**

Table 9 above shows that minority of respondents 33% (11%, 22%) were positive to the statement that excessive drinking also lead to downward mobility and further socio-economic disadvantages, 54% (32%, 22%) had negative responses to the same statement, 13% were not sure. This is an indication that excessive drinking does not lead to downward mobility and further socio-economic disadvantages.

### 4.3.4 Individuals with lower income or education levels are more susceptible to alcoholism

**Table 10 Showing whether individuals with lower income or education levels are more susceptible to alcoholism**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	strongly agree	21	33.0	33.0	33.0
	Agree	18	29.0	29.0	62.0
	not sure	10	16.0	16.0	78.0
	Disagree	2	3.0	3.0	81.0
	Strongly disagree	12	19.0	19.0	100.0
	<b>Total</b>	<b>63</b>	<b>100.0</b>	<b>100.0</b>	

**Source: Primary data (2024)**

With reference to table 10 above, it can be seen that 62% (33%, 29%) were positive to the statement that individuals with lower income or education levels are more susceptible to alcoholism, 22% (3%, 19%) were negative to the same statement while 16% of the respondents were not sure. This was in accordance to Tsui AO, Brown (2011) pointed out that individuals with lower income or education levels are more susceptible to alcoholism implying that individuals with lower income or education levels are more susceptible to alcoholism.

**4.3.5 Socio-economic disadvantage limit access to recreational activities and resources, driving individuals toward increased alcohol consumption as a coping mechanism**

**Table 11 Showing whether socio-economic disadvantage limit access to recreational activities and resources, driving individuals toward increased alcohol consumption as a coping mechanism**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	strongly agree	30	48.0	48.0	48.0
	Agree	8	13.0	13.0	61.0
	not sure	9	14.0	14.0	75.0
	Disagree	14	22.0	22.0	97.0
	Strongly disagree	2	3.0	3.0	100.0
	<b>Total</b>	<b>63</b>	<b>100.0</b>	<b>100.0</b>	

**Source: Primary data (2024)**

Table 11 above indicates that 61% (48%, 13%) of the respondents were positive to the statement that socio-economic disadvantage limit access to recreational activities and resources, driving individuals toward increased alcohol consumption as a coping mechanism, 25% (22%, 3%) were negative to the same statement forming the majority of the respondents while 14% of the respondents were not sure, this is an indication that socio-economic disadvantage limit access to recreational activities and resources, driving individuals toward increased alcohol consumption as a coping mechanism.

**4.3.6 Community-level socio-economic environment, including income inequality and availability of alcohol outlets has also been implicated in the development and prevalence of alcoholism**

**Table 12 Showing whether community-level socio-economic environment, including income inequality and availability of alcohol outlets has also been implicated in the development and prevalence of alcoholism**

		<b>Frequency</b>	<b>Percent</b>	<b>Valid Percent</b>	<b>Cumulative Percent</b>
Valid	Strongly agree	26	41.0	41.0	41.0
	Agree	14	22.0	22.0	63.0
	not sure	11	17.0	17.0	80.0
	Disagree	7	11.0	11.0	91.0
	Strongly disagree	5	9.0	9.0	100.0
	<b>Total</b>	<b>63</b>	<b>100.0</b>	<b>100.0</b>	

**Source: Primary data (2024)**

Table 12 above indicates that 63% (41%, 22%) of the respondents were positive to the statement that community-level socio-economic environment, including income inequality and availability of alcohol outlets has also been implicated in the development and prevalence of alcoholism, 20% (11%, 9%) were negative to the same statement forming the majority of the respondents while 17% of the respondents were not sure, this is an indication that community-level socio-economic environment, including income inequality and availability of alcohol outlets has also been implicated in the development and prevalence of alcoholism.

**4.4.0 Research question two: Finding out the effect of social cultural influences on socio-economic wellbeing of people in Nambale Sub-County**

**4.3.1 Peer pressure and conformity within social groups can influence individuals' economic behaviors and choices**

**Table 14 Showing whether peer pressure and conformity within social groups can influence individuals' economic behaviors and choices**

		<b>Frequency</b>	<b>Percent</b>	<b>Valid Percent</b>	<b>Cumulative Percent</b>
Valid	strongly agree	22	35.0	35.0	35.0
	Agree	13	21.0	21.0	56.0
	not sure	2	3.0	3.0	59.0
	Disagree	20	31.0	31.0	90.0
	Strongly disagree	6	10.0	10.0	100.0
	<b>Total</b>	<b>63</b>	<b>100.0</b>	<b>100.0</b>	

**Source: Primary data (2024)**

With reference to table 14 above, it can be seen that 56% (35%, 21%) of the respondents were positive to the statement that peer pressure and conformity within social groups can influence individuals' economic behaviors and choices, 41% (31%, 10%) were negative to the same statement while 3% of the respondents were not. These findings were in line with Pratap N (2011) stresses that peer pressure and conformity within social groups can influence individuals' economic behaviors and choices there by implying that peer pressure and conformity within social groups can influence individuals' economic behaviors and choices.

#### 4.4.2 Cultures that prioritize personal achievement and success may foster economic growth and higher socio-economic well-being

**Table 15 Showing whether cultures that prioritize personal achievement and success may foster economic growth and higher socio-economic well-being**

		<b>Frequency</b>	<b>Percent</b>	<b>Valid Percent</b>	<b>Cumulative Percent</b>
Valid	Strongly agree	21	33.0	33.0	33.0
	Agree	30	47.0	47.0	80.0
	not sure	8	13.0	13.0	93.0
	Disagree	1	2.0	2.0	95.0
	Strongly disagree	3	5.0	5.0	100.0
	<b>Total</b>	<b>63</b>	<b>100.0</b>	<b>100.0</b>	

**Source: Primary data (2024)**

Table 15 above indicates that 80% (33%, 47%) of the respondents were positive to the statement that cultures that prioritize personal achievement and success may foster economic growth and higher socio-economic well-being, 7% (2%, 5%) were negative to the same statement while 13% of the respondents were not sure. This concurs with the research carried out by Abern, (2016) intimated cultures that prioritize personal achievement and success may foster economic growth and higher socio-economic well-being implying that cultures that prioritize personal achievement and success may foster economic growth and higher socio-economic well-being.

#### 4.4.3 Cultural practices, including marriage customs, healthcare-seeking behavior, and education preferences, can impact socio-economic well-being

**Table 16 Showing whether cultural practices, including marriage customs, healthcare-seeking behavior, and education preferences, can impact socio-economic well-being**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Strongly agree	4	6.0	6.0	6.0
	Agree	9	14.0	14.0	20.0
	not sure	15	24.0	24.0	44.0
	Disagree	27	43.0	43.0	87.0
	Strongly disagree	8	13.0	13.0	100.0
	<b>Total</b>	<b>63</b>	<b>100.0</b>	<b>100.0</b>	

**Source: Primary data (2024)**

With reference to table 16 above, it can be seen that 20% (6%, 14%) were positive to the statement that cultural practices, including marriage customs, healthcare-seeking behavior, and education preferences, can impact socio-economic well-being, 56% (43%, 13%) of the respondents were negative to the same statement and 24% of the respondents were not sure. This is an indication that cultural practices, including marriage customs, healthcare-seeking behavior, and education preferences, cannot impact socio-economic well-being.

**4.4.4 Cultural practices, such as dowry systems or gender-based discrimination, can have negative effects on economic outcomes and gender equality**

**Table 17 Showing whether cultural practices, such as dowry systems or gender-based discrimination, can have negative effects on economic outcomes and gender equality**

		<b>Frequency</b>	<b>Percent</b>	<b>Valid Percent</b>	<b>Cumulative Percent</b>
Valid	Strongly agree	16	25.0	25.0	25.0
	Agree	20	32.0	32.0	57.0
	not sure	6	10.0	10.0	67.0
	Disagree	8	13.0	13.0	80.0
	Strongly disagree	13	20.0	20.0	100.0
	<b>Total</b>	<b>63</b>	<b>100.0</b>	<b>100.0</b>	

**Source: Primary data (2024)**

With reference to table 17 above, it can be seen that 57% (25%, 32%) were positive to the statement that cultural practices, such as dowry systems or gender-based discrimination, can have negative effects on economic outcomes and gender equality, 10% of the respondents were not sure while 33% (13%, 20%) were negative to the same statement making the minority of the respondents. This is an indication that cultural practices, such as dowry systems or gender-based discrimination, can have negative effects on economic outcomes and gender equality.

**4.4.5 Education provides individuals with the necessary skills to adapt to changing labor market demands, thus enhancing their earning potential and socio-economic mobility**

**Table 18 showing whether education provides individuals with the necessary skills to adapt to changing labor market demands, thus enhancing their earning potential and socio-economic mobility**

		<b>Frequency</b>	<b>Percent</b>	<b>Valid Percent</b>	<b>Cumulative Percent</b>
Valid	Strongly agree	22	35.0	35.0	35.0
	Agree	10	16.0	16.0	51.0
	not sure	6	10.0	10.0	61.0
	Disagree	14	22.0	22.0	83.0
	Strongly disagree	11	17.0	17.0	100.0
	<b>Total</b>	<b>63</b>	<b>100.0</b>	<b>100.0</b>	

**Source: Primary data (2024)**

Table 18 above indicates that the majority of the respondents 51% (35%, 16%) were positive to the statement that education provides individuals with the necessary skills to adapt to changing labor market demands, thus enhancing their earning potential and socio-economic mobility, 39% (22%, 17%) were negative to the same statement while 10% of the respondents were not sure. These findings were in line with Agbaje MA (2016) pointed out education provides individuals with the necessary skills to adapt to changing labor market demands, thus enhancing their earning potential and socio-economic mobility. This is an indication that education provides individuals with the necessary skills to adapt to changing labor market demands, thus enhancing their earning potential and socio-economic mobility.

**4.5.0 Research question three: Finding out the effect of co-occurring mental health on socio-economic wellbeing of people in Nambale sub-county**

**4.5.1 Individuals with co-occurring mental health disorders often face challenges in obtaining and maintaining employment**

**Table 19 showing whether individuals with co-occurring mental health disorders often face challenges in obtaining and maintaining employment**

		<b>Frequency</b>	<b>Percent</b>	<b>Valid Percent</b>	<b>Cumulative Percent</b>
Valid	Strongly agree	5	8.0	8.0	8.0
	Agree	13	21.0	21.0	29.0
	not sure	7	11.0	11.0	40.0
	Disagree	18	29.0	29.0	69.0
	Strongly disagree	20	31.0	31.0	100.0
	<b>Total</b>	<b>63</b>	<b>100.0</b>	<b>100.0</b>	

**Source: Primary data (2024)**

With reference to table 19 above, it can be seen that 29% (8%, 21) were positive to the statement that individuals with co-occurring mental health disorders often face challenges in obtaining and maintaining employment, 60% (29%, 31%) were negative to the same statement while 11% of the respondents were not sure. This concurs with the research carried out by Noble JA. (2014) postulated that individuals with co-occurring mental health disorders often face challenges in obtaining and maintaining employment. This implies that individuals with co-occurring mental health disorders often do not face challenges in obtaining and maintaining employment.

**4.5.2 Poverty and socio-economic inequalities can exacerbate mental health symptoms, creating a cycle of deprivation and limited access to resources**

**The table 20 Showing whether poverty and socio-economic inequalities can exacerbate mental health symptoms, creating a cycle of deprivation and limited access to resources**

		<b>Frequency</b>	<b>Percent</b>	<b>Valid Percent</b>	<b>Cumulative Percent</b>
Valid	Strongly agree	24	38.0	38.0	38.0
	Agree	15	24.0	24.0	62.0
	not sure	11	17.0	17.0	79.0
	Disagree	4	6.0	6.0	85.0
	Strongly disagree	9	15.0	15	100.0
	<b>Total</b>	<b>63</b>	<b>100.0</b>	<b>100.0</b>	

**Source: Primary data (2024)**

Table 20 above shows that the majority of the respondents 62% (38%, 24%) were positive to the statement that poverty and socio-economic inequalities can exacerbate mental health symptoms, creating a cycle of deprivation and limited access to resources, 21% (6%, 15%) were negative to same while 17% of the respondents were not sure. This agrees with the research carried out by Birdsall N (2016) asserted that poverty and socio-economic inequalities can exacerbate mental health symptoms, creating a cycle of deprivation and limited access to resources, hence implying that poverty and socio-economic inequalities can exacerbate mental health symptoms, creating a cycle of deprivation and limited access to resources.

### 4.5.3 Co-occurring mental health disorders can hinder an individual's social participation and quality of life

**Table 21 Showing whether co-occurring mental health disorders can hinder an individual's social participation and quality of life**

		<b>Frequency</b>	<b>Percent</b>	<b>Valid Percent</b>	<b>Cumulative Percent</b>
Valid	Strongly agree	14	22.0	22.0	22.0
	Agree	18	29.0	29.0	51.0
	not sure	10	16.0	16.0	67.0
	Disagree	9	14.0	14.0	81.0
	Strongly disagree	12	19.0	19.0	100.0
	<b>Total</b>	<b>63</b>	<b>100.0</b>	<b>100.0</b>	

**Source: Primary data (2024)**

Table 21 above shows that the majority of the respondents 51% (22% , 29%) had a positive response to the statement that co-occurring mental health disorders can hinder an individual's social participation and quality of life, 33% (14%, 19%) of the respondents were negative to the same statement meanwhile 16% of the respondents were not sure. This is an indication that co-occurring mental health disorders can hinder an individual's social participation and quality of life.

#### 4.5.4 Mental health awareness campaigns could also contribute to reducing employment-related disparities

**Table 22 Showing whether mental health awareness campaigns could also contribute to reducing employment-related disparities**

		<b>Frequency</b>	<b>Percent</b>	<b>Valid Percent</b>	<b>Cumulative Percent</b>
Valid	Strongly agree	34	54.0	54.0	54.0
	Agree	13	21.0	21.0	75.0
	not sure	1	2.0	2.0	77.0
	Disagree	11	17.0	17.0	94.0
	Strongly disagree	4	6.0	6.0	100.0
	<b>Total</b>	<b>63</b>	<b>100.0</b>	<b>100.0</b>	

**Source: Primary data (2024)**

With reference to table 22 above , it can be seen that 75% (54%, 21%) were positive to the statement that mental health awareness campaigns could also contribute to reducing employment-related disparities, 23% (17%, 6%) respondents were negative to the same statement while 2% of the respondents were not sure. This was in accordance to Finnigan (2012) intimated mental health awareness campaigns could also contribute to reducing employment-related disparities. This is a manifestation that mental health awareness campaigns could also contribute to reducing employment-related disparities.

#### 4.5.5 Access to quality healthcare can alleviate the socio-economic challenges faced by individuals with co-occurring mental health disorders

**Table 23 Showing whether access to quality healthcare can alleviate the socio-economic challenges faced by individuals with co-occurring mental health disorders**

		<b>Frequency</b>	<b>Percent</b>	<b>Valid Percent</b>	<b>Cumulative Percent</b>
Valid	Strongly agree	27	43.0	43.0	43.0
	Agree	16	25.0	25.0	68.0
	not sure	8	13.0	13.0	81.0
	Disagree	10	16.0	16.0	97.0
	Strongly disagree	2	3.0	3.0	100.0
	<b>Total</b>	<b>63</b>	<b>100.0</b>	<b>100.0</b>	

**Source: Primary data (2024)**

With allusion to table 23 above, it can be observed that the majority of the responds 68% (43% ,25%) had a positive response to the statement that access to quality healthcare can alleviate the socio-economic challenges faced by individuals with co-occurring mental health disorders, 19% (16%, 3%) were negative to the same statement while 13% of the respondents were not sure hence implying that access to quality healthcare can alleviate the socio-economic challenges faced by individuals with co-occurring mental health disorders.

## CHAPTER FIVE

### SUMMARY OF THE FINDINGS, CONCLUSIONS AND RECOMMENDATIONS

#### 5.0 Introduction

In this chapter the researcher gives a summary of findings, conclusions and recommendation in line with the research questions and objectives.

#### 5.1 Summary of findings

The researcher provided a summary of findings in line with the objectives as follows;

##### **5.1.1 Research Question one: Findings on the relationship between alcoholism and socio-economic wellbeing of people in Nambale Sub-County**

The study investigated into the relationship between alcoholism and socio-economic wellbeing of people in Nambale sub-county. Results showed that most respondents were positive to the statements that were they were asked. For example; majority of respondents constituting **54%** individuals with alcoholism experience higher rates of poverty, financial instability; 62% were positive to the statement that individuals with lower income or education levels are more susceptible to alcoholism; **61% of the respondents were positive to the statement that** socio-economic disadvantage limit access to recreational activities and resources, driving individuals toward increased alcohol consumption as a coping mechanism, 63% of the respondents were positive to the statement that community-level socio-economic environment, including income inequality and availability of alcohol outlets has also been implicated in the development and prevalence of alcoholism.

On the other hand, 75% constituting the majority were negative to the statement that alcohol abuse contributes to increased health care costs, reduced workplace productivity, and increased crime rates, 54% were negative to the statement that excessive drinking also lead to downward mobility and further socio-economic disadvantages.

It can be concluded that there is a positive relationship between alcoholism and socio-economic well being of people in Nambale sub-county

### **5.1.2 Research Question two: Findings on the effect of social cultural influences on socio-economic wellbeing of people in Nambale Sub-County**

The study investigated into the effect of social cultural influences on socio-economic wellbeing of people in Nambale sub-county. Majority of the respondents 56% of the respondents were positive to the statement that peer pressure and conformity within social groups can influence individuals' economic behaviors and choices, 80% of the respondents were positive to the statement that cultures that prioritize personal achievement and success may foster economic growth and higher socio-economic well-being, it can be observed that 57% were positive to the statement that cultural practices, such as dowry systems or gender-based discrimination, can have negative effects on economic outcomes and gender equality, 51% were positive to the statement that education provides individuals with the necessary skills to adapt to changing labor market demands, thus enhancing their earning potential and socio-economic mobility while 56% of the respondents forming the majority were negative to the statement that cultural practices, including marriage customs, healthcare-seeking behavior, and education preferences, can impact socio-economic well-being. Basing on the above results, it can be concluded that social cultural influences has a significant effect on socio-economic wellbeing of people in Nambale sub-county.

### **5.1.3 Question three: Findings on the effect of co-occurring mental health on socio-economic wellbeing of people in Nambale Sub-County**

The findings revealed that 62% forming the majority of respondents were positive to the statement that poverty and socio-economic inequalities can exacerbate mental health symptoms, creating a cycle of deprivation and limited access to resources, 51% had a positive response to the statement that co-occurring mental health disorders can hinder an individual's social participation and quality of life, 75% were positive to the statement that mental health awareness campaigns could also contribute to reducing employment-related disparities, 68% had a positive response to the statement that access to quality healthcare can alleviate the socio-economic challenges faced by individuals with co-occurring mental health disorders. On the other hand, 60% forming the majority disagreed to the statement that individuals with co-occurring mental health disorders often face challenges in obtaining and maintaining employment.

Results according to probable statistics, it can be concluded that co-occurring mental health has a significant effect on socio-economic wellbeing of people in Nambale sub-county.

## **5.2 Conclusion**

Basing on the research objective one which was to analyze the relationship between alcoholism and socio-economic wellbeing of people in Nambale sub-county, it can be concluded that there is a positive relationship between alcoholism and socio-economic wellbeing of people in Nambale sub-county and can be enhanced by increasing awareness about the effects of alcoholism on socio-economic well-being can help prevent individuals from developing alcohol use disorders. Education campaigns can also help reduce the stigma associated with seeking help for alcoholism. Ensuring that individuals struggling with alcoholism have access to affordable and effective treatment and support services can significantly enhance their socio-economic well-being. This can include rehabilitation programs, counseling services, and support groups.

With reference to the research objective two which was to determine the effect of social cultural influences on socio-economic wellbeing of people in Nambale sub-county. It can be concluded that social cultural influences has a significant effect on socio-economic wellbeing of people in Nambale sub-county and can be enhanced by providing accessible and quality education to all individuals can help enhance their skills and knowledge, which in turn can improve their socio-economic well-being and understanding of diverse cultural perspectives. Encouraging and celebrating cultural diversity helps create inclusive societies where everyone feels valued and respected. Cultural festivals, events, and initiatives can promote understanding and harmony among different cultural groups. Implementing community empowerment programs can help build strong social networks, improve community cohesion, and empower individuals to actively participate in decision-making processes that affect their well-being.

With allusion to the third objective which was to find out the effect of co-occurring mental health on socio-economic wellbeing of people in Nambale sub-county, it can be concluded that co-occurring mental health has a significant effect on socio-economic wellbeing of people in Nambale sub-county this can be enhanced by providing integrated services that address mental health needs and socio-economic challenges simultaneously. This could involve collaboration between mental health professionals, social workers, and financial counselors. Offering job training, vocational rehabilitation, and supported employment

programs for individuals with mental health issues to improve their socio-economic status and enhance self-esteem.

### **5.3 Recommendations**

There is need for the government to increase awareness about the effects of alcoholism on socio-economic well-being can help prevent individuals from developing alcohol use disorders. Education campaigns can also help reduce the stigma associated with seeking help for alcoholism. Ensuring that individuals struggling with alcoholism have access to affordable and effective treatment and support services can significantly enhance their socio-economic well-being. This can include rehabilitation programs, counseling services, and support groups. Providing employment support services, such as job training programs, vocational rehabilitation services, and job placement assistance, can help individuals recovering from alcoholism regain their financial independence and improve their socio-economic status.

The government should provide accessible and quality education to all individuals can help enhance their skills and knowledge, which in turn can improve their socio-economic well-being and understanding of diverse cultural perspectives. Encouraging and celebrating cultural diversity helps create inclusive societies where everyone feels valued and respected. Cultural festivals, events, and initiatives can promote understanding and harmony among different cultural groups. Implementing community empowerment programs can help build strong social networks, improve community cohesion, and empower individuals to actively participate in decision-making processes that affect their well-being.

There is need for the government to provide integrated services that address mental health needs and socio-economic challenges simultaneously. This could involve collaboration between mental health professionals, social workers, and financial counselors. Offering job training, vocational rehabilitation, and supported employment programs for individuals with mental health issues to improve their socio-economic status and enhance self-esteem. Provide financial literacy programs to help individuals manage their finances effectively, reduce stress related to money issues, and build financial stability. Ensure access to affordable and stable housing, as homelessness and unstable housing can exacerbate mental health issues. Offer educational opportunities and skill-building programs to enhance individuals' employment prospects and socio-economic status. Create supportive communities and peer networks where individuals can access resources, social connections, and emotional support.

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## **APPENDICES**

### **Appendix I: Questionnaire**

Dear respondent;

I am Wasukira James carrying out research on the topic “the effect of alcoholism on the socio-economic wellbeing of the people in Nambale sub-county, Mbale district.” as a partial fulfillment for the award of bachelors degree of social work and social administration at Uganda Christian University .The questionnaire is designed to help me collect relevant information and therefore I kindly request you to participate in responding to the questions that will be asked .However the information given will be treated confidential and will only be used for academic purpose.

.....

**WASUKIRA JAMES**

**Researcher**

## SECTION 1: DEMOGRAPHIC DATA

(Tick in the box provided)

1. Gender distribution of the respondent

- a) Male       b) Female

2. Marital status of the respondent

- a) Single       b) Married       Divorced       Widowed

3. Age bracket of the respondent (years)

- a) 20-30       b) 31-40       c) 41-50       d) 60 and above

4. Academic qualification of respondent

- a) Secondary       b) Certificate       c) Diploma       d) Bachelors'       e) Masters

5. Years of working by the respondents.

- a) Less than 1 year       b) 1-2 years       c) 3 years and above

**Section A: To analyze the relationship between alcoholism and socio-economic wellbeing of people in Nambale sub-county.** This section aims at analyzing the relationship between alcoholism and socio-economic wellbeing of people in Nambale sub-county. Please indicate your opinion on the following statements using the Linkert scale. Key: **1= agree, 2= strongly agree; 3= not sure; 4= disagree; 5= strongly disagree.**

No		1	2	3	4	5
1	Individuals with alcoholism experience higher rates of poverty, financial instability					
2	Alcohol abuse contributes to increased health care costs, reduced workplace productivity, and increased crime rates					
3	Excessive drinking also lead to downward mobility and further socio-economic disadvantages					
4	Individuals with lower income or education levels are more susceptible to alcoholism					
5	Socio-economic disadvantage limit access to recreational activities and resources, driving individuals toward increased alcohol consumption as a coping mechanism					
6	Community-level socio-economic environment, including income inequality and availability of alcohol outlets has also been implicated in the development and prevalence of alcoholism					

**Section B: To determine the effect of social cultural influences on socio-economic wellbeing of people in Nambale sub-county**

This section aims at determining the effect of social cultural influences on socio-economic wellbeing of people in Nambale sub-county Please indicate your opinion on the following statements using the Linkert scale. Key: **1= agree, 2= strongly agree; 3= not sure; 4= disagree; 5= strongly disagree.**

No		1	2	3	4	5
1	Peer pressure and conformity within social groups can influence individuals' economic behaviors and choices					
2	Cultures that prioritize personal achievement and success may foster economic growth and higher socio-economic well-being					
3	Cultural practices, including marriage customs, healthcare-seeking behavior, and education preferences, can impact socio-economic well-being					
4	Cultural practices, such as dowry systems or gender-based discrimination, can have negative effects on economic outcomes and gender equality					
5	Education provides individuals with the necessary skills to adapt to changing labor market demands, thus enhancing their earning potential and socio-economic mobility					

**Section C: To find out the effect of co-occurring mental health on socio-economic wellbeing of people in Nambale sub-county**

. This section aims at finding out the effect of co-occurring mental health on socio-economic wellbeing of people in Nambale sub-county. Please indicate your opinion on the following statements using the Linkert scale. Key: **1= agree, 2= strongly agree; 3= not sure; 4= disagree; 5= strongly disagree.**

No		1	2	3	4	5
1	Individuals with co-occurring mental health disorders often face challenges in obtaining and maintaining employment					
2	Poverty and socio-economic inequalities can exacerbate mental health symptoms, creating a cycle of deprivation and limited access to resources.					
3	Co-occurring mental health disorders can hinder an individual's social participation and quality of life					
4	Mental health awareness campaigns could also contribute to reducing employment-related disparities					
5	Access to quality healthcare can alleviate the socio-economic challenges faced by individuals with co-occurring mental health disorders					
6	Limited financial resources and increased healthcare costs associated with the treatment of mental health conditions contribute to this disadvantage					

## **Appendix II: Interview Guide**

1. Can you describe how alcohol consumption has impacted your financial situation in the past?
2. How do you think alcohol use affects access to economic opportunities for individuals in different socio-economic groups?
3. Have you noticed any differences in how alcohol use influences socio-economic well-being based on gender, age, or other demographic factors?
4. Do you believe that the cost of alcohol has an impact on the financial stability of individuals and families?
5. How do you think public policy and regulations around alcohol consumption affect socio-economic disparities in communities?
6. How do you think cultural values and norms impact the financial decisions and behaviors of individuals within a community?
7. Can you describe any social expectations or pressures related to socio-economic status that influence people's financial well-being?
8. In what ways do social networks and support systems within a community affect individual socio-economic outcomes?
9. How do cultural attitudes towards education, work, and wealth accumulation shape socio-economic disparities in society?
10. Have you observed any cultural practices or traditions that either hinder or promote socio-economic mobility for individuals?
11. How do you think mental health challenges impact one's ability to achieve financial stability and success?
12. Can you share any personal experiences or observations regarding the intersection between mental health issues and socio-economic well-being?
13. In what ways do mental health stigma and discrimination affect an individual's access to economic opportunities?
14. How do you believe mental health treatment and support services influence socio-economic outcomes for individuals?
15. Have you noticed any systemic barriers that prevent individuals with mental health challenges from achieving socio-economic well-being?

## Appendix III: Placement Letter

PRINCIPAL ASSISTANT TOWN CLERK  
TELEPHONE: 0774388332  
FAX 256-45-35340  
E-Mail: mbalemc@yahoo.com



**Industrial City Division**  
*OFFICE OF THE PRINCIPAL ASSISTANT  
ASSISTANT TOWN CLERK*  
PLOT 17 BUKHUMWA LANE  
P.O BOX PRIVATE BAG  
MBALE.

Our Ref: ADM.32/1DC  
Your Ref:

Date: 28/03/2024.

The Academic Registrar  
Uganda Christian University  
Mbale University College.

**PLACEMENT OF STUDENT FOR RESEARCH - WASUKIRA JAMES-  
REG.21MUC/BSW/028.**

This is in reference to yours dated 28<sup>th</sup> February, 2024, concerning the above captioned student pursuing a Bachelor of Social Work & Social Administration of Uganda Christian University Mbale University College.

I am glad to inform you that our Organization has allowed him to proceed with the Research under Community Department, Industrial City Division under the following terms and conditions.

- 1) You must adhere to ethical codes of conduct for research.
- 2) Research must be for strictly academic purposes.

Thank you.

Yours in service,

  
Waboga Kasim

PRINCIPAL ASSISTANT TOWN CLERK  
INDUSTRIAL DIVISION.



Copy to;

The Senior Community Development Officer, Industrial City Division.