

# Determinants of alcohol consumption among the Ghanaian youth: An examination of motivational and socio-demographic drivers

## Authors

Daniel Ampem Darko-Asumadu<sup>1</sup>, \*Solomon Wiredu<sup>1</sup>, Solomon Sika-Bright<sup>1</sup>, William Boateng<sup>1</sup>, Raymond Boasinke<sup>1</sup>, Samuel Ofori Acheampong<sup>1</sup>

## Affiliation

1. Department of Sociology and Anthropology, University of Cape Coast, Ghana

## \*Corresponding author

Solomon Wiredu

Department of Sociology and Anthropology, University of Cape Coast, Ghana

Date submitted: 16<sup>th</sup> October 2025

Date Published: 30<sup>th</sup> December 2025

## ABSTRACT

Despite current laws and health-promoting programs, alcohol consumption among Ghanaian youth has become a major public health concern. This study, supported by the social learning theory and the theory of planned behaviour, investigated the fundamental determinants influencing youth consumption of alcohol, how socio-demographic features shape drinking behaviour, and the extent to which celebrity endorsements contribute to alcohol consumption. A cross-sectional survey design was used to collect data from 1,193 youths aged 15 to 35 years across the 16 regions of Ghana. A questionnaire was developed and administered to respondents via social media sites. The findings revealed that the majority [ $n = 854$  (71.6%)] of the youth curiously consumed alcohol during social gatherings. Age, gender, ethnicity, and occupation were key drivers of alcohol consumption motivations, influencing both exposure and behavioural preference for alcohol. Principal component analysis identified social-behavioural drinking and cultural-coping drinking, which accounted for over 60% of the variance. These findings imply that social exposure, learned practices, and psychological coping strategies all work together to influence youth consumption of alcohol in Ghana. Younger male students were more vulnerable to celebrity-driven alcohol promotion, whereas religious affiliation and educational level reduced susceptibility. The study concludes that youth consumption of alcohol patterns in Ghana is heavily influenced by socio-demographic characteristics, which are reinforced by social learning and behavioural goals. The study recommends that the Ministry of Health establish

psychosocial support programs for young people, while the Food and Drug Authority (FDA) tighten regulations on alcohol marketing.

**Keywords:** *Youth, Alcohol consumption, Motivational drivers, Celebrity advertisement, Socio-demographic drivers, Ghana*

## INTRODUCTION

Youth alcohol consumption has become a major global public health concern. According to the World Health Organization (WHO, 2018), consumption of alcohol causes over three million fatalities each year, with the majority being young people aged 15 to 29 years. Adolescents and early adults generally take risks, making the youth vulnerable to substance abuse (Johnston et al., 2019). Among the reasons why the youth are vulnerable to consume alcohol include peer pressure, media depictions, and advertising campaigns. These frequently occur in many high-income countries despite the existence of severe laws. Again, changes in youth alcohol consumption trends in Africa have been attributed to rapid urbanisation, globalisation, and evolving cultural norms (WHO, 2018). In South Africa, students drink alcohol for recreational purposes, stress relief, and higher self-esteem (Morojele et al., 2022). But alcohol is widely available and socially accepted in Uganda despite statutory bans (Swahn et al., 2020).

Alcohol consumption among Ghana's youth has risen steeply in recent years. Almost 70 percent of the youth have consumed alcohol (WHO, 2018). Their report stated that the youth were first exposed to alcohol consumption during their adolescent years, when they are most vulnerable to peer pressure. Amoateng et al. (2018) revealed that 42 percent of students in the Central Region of Ghana consumed a substantial volume of alcohol during festivals or social gatherings. Comparably, Adjei et al. (2021) reported that 39.5 percent of students in the Hohoe Municipality previously consumed alcohol, while 19.4 percent were current drinkers. According to Osei-Bonsu et al. (2017), peer pressure (30.8%) and media advertising (20.3%) were the primary causes of alcohol consumption among 43 percent of youth in the Volta Region of Ghana. Consumption habits are also influenced by cultural norms, such as the consumption of alcohol in libations and group gatherings. Despite the health risks, locally produced distilled drinks such as apketeshie are widely available and affordable, making them more appealing to the youth (Davoren et al., 2003).

As stated earlier, youth alcohol consumption is influenced by advertising, cultural norms, peer pressure, and curiosity, but these core elements remain understudied empirically. In recent times, curiosity appears to be the primary driving force behind alcohol acceptance, followed by peer pressure and cultural norms. The media's depiction, targeted marketing, and advertising campaigns further influence the youth about alcohol consumption (Smith & Foxcroft, 2020; Osei-Bonsu et al., 2017). Despite these elements, the specific causes

of underage drinking have not been sufficiently addressed by Ghana's National Alcohol Policy or other interventions (Ministry of Health, 2014). Current frameworks tend to focus more on general population control than on variables specific to youth. Attempts to reduce youth consumption of alcohol are likely to fail if these reasons are not fully understood. In order to address the problem, the study attempted to answer the following questions: What are the key factors influencing youth alcohol consumption in Ghana? How do socio-demographic characteristics such as age, gender, education, and religion influence young people's drinking habits? How much do celebrity advertisements influence the youthful populations' drinking habits?

Importantly, the study advances our understanding of the previously understudied social, cultural, and psychological factors influencing alcohol consumption among Ghanaian youth. Policymakers, educators, and public health professionals will benefit from this study by creating focused interventions, including school-based awareness campaigns, peer-led teaching, and stricter advertising regulations.

## Theoretical Framework

The study was guided by theoretical frameworks to place it in a proper context. The theoretical foundations of the study were social learning theory and the theory of planned behaviour.

### *i. Social Learning Theory*

Albert Bandura invented social learning theory in 1977. This psychological theory describes how people learn new actions, attitudes, and values by observing others. According to this theory, people learn by observing and imitating the actions of others, especially when those actions are rewarded. This is particularly true for young children and teenagers. It underlines how important modelling, imitation, and observation are for learning. This revealed that learning can be accomplished merely by observing rather than making mistakes. According to Bandura's social learning theory, humans learn behaviours through modelling, imitation, and observation.

The youth are more likely to participate in these behaviours if they are exposed to drinking habits in their environment, whether through friends, parents, or the media. This visibility has grown as a result of celebrities and influencers endorsing alcohol on television, radio, and social media platforms like Facebook, X, Instagram, and TikTok, among others. Thus, the youth consume alcohol based on what they observe in these platforms (Kuntsche et al., 2005). This is intrinsically connected to their exposure to hip-hop music and urban culture, which often depicts alcohol consumption in their videos. Although social learning theory (SLT) does a good job of explaining behavioural learning, it ignores structural impacts

like unemployment or poverty, as well as internal decision-making processes in explaining alcohol consumption. It places too much emphasis on copying, ignoring a child's autonomy or opposition.

#### *ii. Theory of Planned Behaviour*

Icek Ajzen introduced the concept of planned behaviour in 1991. It describes how people decide whether or not to participate in a specific activity based on their intentions, which are influenced by their attitudes, perceived control over their conduct, and social pressure. According to the theory of planned behaviour, a person's behavioural intent is the best predictor of whether or not they will carry it out. This idea is especially relevant to understanding the youth who consciously choose to consume alcohol because they believe it is socially acceptable or will earn them approval. Empirical evidence supports the concept of planned behavior in relation to youth alcohol consumption. In Ghana, where peer influence is strong in urban areas, subjective criteria of masculinity and social success are frequently linked to drinking behavior. Because of its emphasis on logical decision-making, planned behavior theory may fail to account for impulsivity, emotional triggers, or unconscious urges. Additionally, it disregards environmental and structural restrictions. This research is crucial because the link between trauma and behavior might oversimplify complex circumstances.

### **Conceptual Issues**

#### **Peer Influence**

Borsari and Carey (2001) characterize peer influence on consumption of alcohol as a combination of "overt offers of alcohol," "modelling of others' drinking," and "perceived drinking norms," emphasizing both direct and indirect effects depending on what peers do or appear to do. Ennett and Bauman (1994) differentiate between socialization, in which youths adopt drinking habits to fit in with their group, and selection, in which children choose peers who consume alcohol.

Youth "affiliate with peers who consume alcohol and are later urged to use alcohol," they claim, demonstrating a mutually reinforcing process. Akers et al. (1979) use differential association theory to describe peer influence as the process of acquiring "definitions, techniques, rationalisations, and motives for deviant behaviour" through continuous encounters, emphasizing peers' critical role in forming favourable attitudes toward alcohol. When considered together, these hypotheses reveal peer influence as a multifaceted process combining normative pressure, direct offering, observational learning, and cognitive justification.

## Media and Advertising Influence

According to Cultivation Theory (Gerbner, 1995), long-term media exposure influences viewers' perceptions of reality, particularly when images of alcohol usage are repeated, which encourage thoughts that drinking is frequent and pleasant. Advertising Expectancy Theory, by Anderson (2009), explains how advertising generates expectations for outcomes, leading the youth to feel that drinking alcohol brings status, happiness, and social satisfaction. According to the American Academy of Pediatrics (2007), nonverbal cues, such as appealing environments and cheerful groups, implicitly link alcohol intake to success, maturity, and attractiveness, which has a substantial impact on adolescent attitudes. These frameworks demonstrate how, in addition to delivering knowledge, the media shapes internal frameworks and expectations around alcohol.

## Stress, Coping, and Socio-Economic Drivers

Coping is described as "constantly changing cognitive and behavioural efforts to manage specific internal and external demands that are appraised as taxing or exceeding the resources of the person" (Lazarus & Folkman, 1984, p. 141). From this definition, coping is a dynamic and adaptive process used to control the effects of stressors. Coping mechanisms can be either maladaptive, leading to actions that temporarily alleviate vulnerability but eventually perpetuate it, or encouraging adjustment and resilience, making alcohol consumption one example of a maladaptive coping strategy. According to Wills and Shiffman (1985), "drinking to cope" refers to using alcohol to alleviate unpleasant emotional states, including stress, worry, and despair. Although alcohol may have harmful long-term consequences, this activity is motivated by its short-term ability to decrease stress. When more appropriate coping skills are unavailable, using alcohol or drugs serves as a means of emotional control.

Hobfoll's (1989) conservation of resources (COR) theory gives insight into the relationship between stress, coping mechanisms, and maladaptive behaviours. According to the COR framework, stress is caused by the actual loss of valuable resources, the possibility of such loss, or the incapacity to regain resources following a significant expenditure. In this sense, resources encompass both intangible advantages such as opportunity, social standing, and psychological health, as well as tangible assets such as money, employment, and material possessions. People are more likely to experience stress when they believe their resources are limited or insufficient, which leads to coping techniques designed to alleviate the burden. However, these attempts may not always be beneficial; acts such as drinking excessively may turn out to be detrimental coping mechanisms.

## Empirical Review

### Factors Influencing Alcohol Consumption among the Youth in Ghana

Peer, family, cultural, media, and psychological variables are all factors that influence youth's alcohol consumption in Ghana. According to Aboagye (2021) and Osei-Bonsu et al., peer pressure has been a persistent problem. Given that Hagan et al. (2018) discovered a significant link between parental drinking and youth consumption of alcohol, supporting the intergenerational nature of alcohol behaviour and parental modelling as equally important. Ghanaian youth are frequently exposed to alcohol through cultural events such as funerals and libation ceremonies, which normalizes its use from a young age, as opposed to Europe or the United States of America, where initiation is frequently associated with curiosity.

The media and advertising industry also contribute to alcohol consumption among the youth. Osei-Bonsu et al. (2017) and UNICEF (2016) have noted that, in spite of regulatory limitations, unregulated celebrity advertising continues to have an impact on youth. Despite this, the studies frequently look at media alone, ignoring how it interacts with identity formation or peer acceptance. Another factor is psychological stress, particularly stress and academic difficulties (Hagan, 2018; Aboagye, 2021). This indicates that many students use alcohol as a coping strategy, which is consistent with findings from other countries but is frequently linked to socioeconomic difficulty in Ghana. Lastly, street sales and sachet alcohol undermine legal age restrictions, and availability and affordability continue to be structural issues (Aboagye et al., 2021).

## METHODOLOGY

### Study Area

The study was carried out in Ghana, a West African country on the Gulf of Guinea, bordered by Côte d'Ivoire to the west, Burkina Faso to the north, and Togo to the east. Ghana has a population of approximately 33 million people, with a significant proportion under the age of 35 (Ghana Statistical Service [GSS], 2021). The country has relevance to this study because of increased concerns about alcohol use among the youth, despite regulatory measures such as the Liquor Licensing Act of 1970 (Act 331) and public health initiatives that discourage underage drinking. The study focused on urban and peri-urban communities, where youth alcohol use is higher due to factors such as peer influence, media exposure, unemployment, and the availability of low-cost alcoholic beverages (Amoateng et al., 2018; Adjei et al., 2021).

### Design

This study used a descriptive cross-sectional survey approach to investigate the factors influencing youth alcohol consumption in Ghana. A descriptive approach was chosen because it allows for the systematic representation of characteristics of a specific population

or phenomenon without the manipulation of variables (Kumar, 2019). This is consistent with the study's goal of documenting the prevalence of alcohol use among teenagers, the motivational and sociocultural factors that influence consumption, and the perceived public health consequences. The cross-sectional strategy enabled data collection at a single point in time, capturing young alcohol-related behaviours, perceptions, and experiences. Cross-sectional studies, according to Bryman (2016), are highly effective at identifying connections and trends when long-term research is not achievable.

## **Population and Sampling Procedures**

The research population included 11.7 million Ghanaian youth aged 15 to 35 years (GSS, 2024). Given the lack of a thorough sampling frame for this vast and dispersed population, a non-probability convenience and snowball sampling approach was used. A structured questionnaire was created using Google Forms and sent via WhatsApp between June 2024 and September 2025. The survey link was initially distributed to the researcher's contacts and selected youth-focused WhatsApp groups, with participants urged to pass it to additional eligible persons, allowing for chain-referral recruitment. Before proceeding to the questionnaire, respondents' eligibility was checked using self-reported age and domicile. The data collection period yielded a total of 1,193 completed replies.

## **Data Collection, Analysis, and Presentations**

A standardized questionnaire was utilized to collect data from 1,193 youths in both urban and rural settings, reflecting variances in attitudes and behaviours. Electronic distribution with Google Forms provided efficient participation. The data were coded, cleaned, and analysed using descriptive (frequencies, graphs, and cross-tabulations) and inferential statistics (chi-square test, principal component analysis, and ordinal logistic regression), yielding precise insights into the prevalence and determinants of alcohol use among Ghanaian youth. The study examines respondents' socio-demographic features, factors influencing alcohol use, socio-demographic predictors of consumption, and celebrity endorsements that contribute to alcohol consumption. Descriptive and inferential statistics were used to demonstrate major trends, correlations, and group differences.

## **Ethical Considerations**

Throughout the study, strong ethical standards were followed to protect respondents' rights, dignity, and well-being, considering the delicate nature of youth alcohol consumption. Participation was fully voluntary, with all respondents providing informed consent. They were told of the study's goal, procedures, potential risks and benefits, and their freedom to withdraw at any time without penalty, reflecting the principle of autonomy (Bryman, 2016). To ensure confidentiality and anonymity, no personal identifiers were collected, and all

data were securely stored in password-protected files, building confidence and encouraging honest responses (Saunders, Lewis, & Thornhill, 2019).

## Limitation of the Study

Data was collected electronically using Google Forms and WhatsApp, which may have introduced selection bias by focusing on youth with stable internet access and digital literacy, potentially excluding highly vulnerable, low-income, or rural youth who may be the most frequent alcohol consumers.

## RESULTS

### Socio-Demographic Characteristics of the Respondents

The socio-demographic characteristics (Table 1) show that, out of 1193 respondents, the majority were males (703; 58.9%) as compared to females (490; 41.1%). The highest age categories were 21-25 years (389; 32.6%) and 31-35 years (424; 35.5%), indicating a primarily youthful sample. In terms of occupation, most of the youth were students (533; 44.7%) and public-sector employees (465; 39.0%), with a few [84 (7.0%)] of them being unemployed. The majority of the youth (841; 70.5%) had graduated from the university, while 241(20.2%) had completed Senior Secondary School. The study revealed that 366 (30.7%) earned between 100 and 1000 Ghana cedis, with only 51 (4.3%) earning more than 10,000 Ghana cedis as many of the youth were still schooling or in their early career development stages. As far as ethnicity was concerned, the study depicted that most of the youth belonged to the Akan (651; 54.5%) and Ewe (182; 15.3%) ethnic groups, with a few Ga-Adangbes and Guans. The majority of the sampled youth were Christians. Specifically, we had Pentecostals/Charismatics (397; 33.3%), Protestants (273; 22.9%), Catholics (192; 16.1%), and other Christians (178; 14.9%), Muslims (97; 8.1%), traditionalists (10; 0.8%), and those who did not practice any religion (21; 1.8%).

### Factors Influencing Alcohol Consumption among Youth in Ghana

The lifetime consumption of alcohol was relatively high among the youth (Figure 1), with 854 respondents (71.6%) reporting that they had consumed alcohol, compared to 339 respondents (28.4%) who said they had never consumed alcohol. The high frequency of lifetime alcohol intake among youth emphasizes the significance of investigating the underlying causes of this behaviour. The youth were asked to identify the causes for alcohol usage. This is shown in Table 2.

## Reasons for Drinking Alcohol

Table 2 shows a five-point Likert scale (Strongly Disagree, Disagree, Neutral, Agree and Strongly Agree) of the youths' motivations for consuming alcohol. The average mean score was 2.31, indicating that the majority of the youth disagreed or were neutral on all of the listed reasons. However, some factors were more influential than others. The main reason for alcohol consumption was curiosity ( $m=2.72$ ). That is, over one-third (1/3) of the youth admitted to drinking alcohol out of curiosity. It was also found that social events ( $m=2.62$ ) influenced alcohol consumption, underscoring the role of alcohol usage on such events. In contrast, cultural influence on alcohol consumption appeared modest with more than half ( $m=1.82$ ) of the youths firmly disputing the role of customs and traditions in their drinking habits. Similarly, the youth pointed out that family-related factors ( $m=2.02$ ) and the difficulty in refusing offers ( $M = 1.95$ ) were not major reasons for drinking alcohol, suggesting that alcohol use is less a matter of inherited habit or social compliance. Almost one-quarter (1/4) of the youth articulated that they took alcohol because of peer pressure. A small fraction of the youth reported advertising alcoholic beverages ( $m=2.05$ ) and celebrity endorsements ( $m=2.09$ ) were less significant, implying that external promotions of alcoholic beverages have less influence on youth alcohol consumption than personal and social motives. Relaxation ( $m=2.40$ ), coping with challenging situations ( $m=2.34$ ), and mood regulation ( $m=2.24$ ) all indicated that some youth consumed alcohol as a stress reliever or tactic. The youth ( $m=2.12$ ) mentioned that they did not consume alcohol for medical purposes.

While Table 2 provides data on the strength of individual factors impacting alcohol use, it falls short of describing how these factors relate with each other. Using their means as point of reference, curiosity, event celebration, and psychological coping mechanisms scored high rate whereas cultural and family-related characteristics scored low rate. However, these mean comparisons do not show the impact of each underlying factor on drinking patterns.

The principal component analysis (PCA) was used to identify the latent factors that influence the consumption of alcohol among the youth (in Table 3). The principal component analysis (PCA) was employed on the 12 items that measured the reasons for consuming alcohol. Table 3 shows that the Kaiser-Meyer-Olkin (KMO) measure of sample adequacy was 0.889, and Bartlett's Test of Sphericity was significant ( $\chi^2 (66) = 7089.63, p < .001$ ), indicating that the data is suitable for factor analysis. PCA produced two components with eigenvalues larger than one, which explained 59.73 percent of the total variance. The first component explained 46.05% of the variation, whereas the second accounted for 13.68%. To improve interpretability, a Varimax rotation was performed, and items with factor loadings greater than 0.50 were identified as important indications of the underlying constructs.

The first component, labelled social Influence and habitual drinking, included high loadings for “I simply can’t say no when I am offered” (0.870), “I learnt drinking alcohol from the family” (0.847), “I saw a celebrity advertise it” (0.882), “I used it for health reasons” (0.799), “I wanted to change my mood” (0.732), “It is because of peer pressure” (0.722), and “It is the adverts on TV and radio that influenced me” (0.692). These findings suggest that youth consumption of alcohol is heavily influenced by social exposure, learning behaviours, peer pressure, and media or celebrity influence. The second component, labelled coping and cultural drinking, had high loadings for “I drink alcohol to relax after a busy day” (0.685), “It helps me deal with difficult situations” (0.768), “It is a way of celebrating my event” (0.728), and “I use alcohol because my customs and traditions require it” (0.684). This implies that consumption of alcohol also works as a coping mechanism for stress and mood management, while being linked to cultural rituals and social celebrations.

### **Socio-Demographic Characteristics and the Reasons for Drinking Alcohol**

To accomplish such an objective, a chi-square test was used to investigate the relationship between sociodemographic factors and reasons for alcohol consumption (see Table 4). Socio-demographic characteristics and motivations of alcohol use are strongly linked. Drinking “out of curiosity” was significantly correlated with age ( $\chi^2 = 69.642$ ,  $p < 0.001$ ). Younger teenagers (16-20 and 21-25 years old) were more likely to drink alcohol out of curiosity than older groups, indicating that curiosity is a powerful motivator for introducing adolescents and emerging adults to alcohol consumption. Drinking “to celebrate an event” was significantly influenced by ethnicity ( $\chi^2 = 22.726$ ,  $p < 0.001$ ). Youth from the Akan ethnic background claimed that cultural or communal norms surrounding festivities influence drinking practices. Similarly, occupation was substantially associated with consuming alcohol “to deal with difficult situations” ( $\chi^2 = 43.702$ ,  $p < 0.001$ ). Public employees and students were more inclined to support alcohol intake as a coping method than jobless or private-sector workers. Peer pressure was significantly associated with age ( $\chi^2 = 22.600$ ,  $p = 0.031$ ), with younger individuals (16-25 years) being more likely to be pressured to consume alcohol in early adulthood.

### **Celebrity Advertising and Socio-Demographic Predictors of Alcohol Use**

We conducted an ordinal logistic regression analysis to investigate how celebrity advertisement and socio-demographics influence alcohol consumption (in Table 5). The ordinal logistic regression model predicting triggers for consuming alcohol based on celebrity advertisement is statistically significant (Chi-Square = 118.984, df = 23,  $p < 0.001$ ). Pseudo R<sup>2</sup> values (Cox and Snell = 0.095, Nagelkerke = 0.102, McFadden = 0.038) imply that 3.8% and 10.2% of the socio-demographic factors contribute to the likelihood of Ghanaians consuming alcohol based on celebrity advertisements. However, many factors are likely to

explain a significant percentage of the variation, which may have gone unaccounted for in the model. Regarding the variables, religious affiliation ( $B = -0.652, p = 0.002$ ) was a significant negative predictor, implying that people with stronger religious affiliations are less likely to consume alcohol advocated by celebrities than those with weaker or no religious affiliation. Age ( $B = 0.134, p = 0.010$ ) had a positive and significant effect, indicating that as people get older, they are more likely to report celebrity advertisements as a motivation for consuming alcohol. Gender ( $B = 0.431, p = 0.021$ ) also showed a significant effect, demonstrating that males are more likely than females to be affected by celebrity advertisements promoting alcohol consumption. Finally, education ( $B = -0.212, p = 0.031$ ) was inversely connected to the outcome, implying that people with higher educational attainment are less likely to report celebrity advertisements for alcoholic beverages, which leads to consuming alcohol.

## DISCUSSION

This study looked into the determinants of youth alcohol consumption in Ghana, with a focus on the interplay of social, cultural, psychological, and demographic factors. The data (Tables 2, 3, 4, and 5) show that curiosity, peer and societal influences, celebratory norms, coping techniques, and cultural traditions all have a significant impact on youth alcohol consumption. When compared to theoretical frameworks and earlier research, the findings show both convergences and divergences with current evidence. The descriptive analysis (Table 2) demonstrated that curiosity and social festivities were the most important reasons for consuming alcohol, which is consistent with the Theory of Planned Behaviour (Ajzen, 1991), which emphasizes that attitudes and perceived social norms drive behaviour. Curiosity suggests a favourable attitude toward experimenting, but celebratory drinking demonstrates the influence of societal norms that legitimize alcohol consumption in communal situations. This is consistent with Ghanaian research by Aboagye (2021) and Osei-Bonsu et al. (2017), who discovered curiosity and peer/social situations to be primary motivators. However, cultural traditions and familial influence received the lowest scores, contradicting previous accounts (Akyeampong, 1996) that depicted alcohol as a vital part of Ghanaian rites and festivities. This shows a shift away from cultural explanations for drinking and toward modern, socially driven motivations.

The chi-square analysis (Table 3) identified further robust correlations between socio-demographic characteristics and drinking motivations. Younger respondents (16-25 years old) were considerably more likely to drink because of curiosity and peer pressure, supporting Bandura's (1977) Social Learning Theory, which holds that youngsters model behaviours witnessed in their social context. This is consistent with global studies (Patrick & Schulenberg, 2014; Kuntsche et al., 2005), which identify peer imitation during adolescence and emerging adulthood as a primary driver of alcohol initiation. Ethnic background affects celebration drinking, with Akans expressing higher agreement, which is consistent with local

research (Hagan et al., 2018) demonstrating the relevance of cultural norms in maintaining drinking patterns.

The principal component analysis (Table 4) found two key characteristics impacting youth alcohol consumption: social influence and habitual drinking, and coping and cultural drinking, which together account for over 60% of the variance. The first element emphasizes the importance of social learning and environmental influences, citing celebrity advertising, familial influence, and peer pressure as significant drivers, which is consistent with Social Learning Theory. This finding is consistent with research conducted in Nigeria (Adeyemo & Olatunji, 2019) and South Africa (Peltzer et al., 2011), which likewise identified social and peer dynamics as significant motivators for youth drinking. The second aspect, though less significant, focuses on coping and cultural drinking, highlighting alcohol's function in stress relief, mood management, and cultural or celebratory activities. This supports stress and coping frameworks and is consistent with studies from Ghana (Hagan et al., 2018), but differs from European environments, where enhancing reasons such as excitement and pleasure frequently predominate (Kuntsche et al., 2005).

The ordinal logistic regression (Table 5) revealed new predictors of vulnerability to celebrity advertising. Religious affiliation and education were found to be negative predictors of celebrity endorsement, but age and gender (male) were positive predictors. These findings are consistent with the theory of planned behaviour (Ajzen, 1991), as education and religious identification provide counter-norms that discourage alcohol consumption, but males and older teens are more socially exposed to advertising. This is consistent with UNICEF's (2016) study, which indicated that media marketing had a disproportionate impact on younger males in African contexts, but it contradicts Patrick and Schulenberg's (2014) finding that media influence was smaller in the United States of America than peer and family dynamics. Thus, while celebrity advertising may be less prevalent globally, it emerges as a more significant factor in Ghana, where regulatory enforcement is poor.

## CONCLUSIONS

Based on the study findings and discussion, it is obvious that youth alcohol consumption in Ghana is influenced by socio-demographic variables, which are reinforced by social learning and behavioural factors, thereby considerably impacting youth drinking patterns in Ghana. Modern pressures, peer approval, social gatherings, stress alleviation, and targeted advertising promote alcohol consumption more than tradition. The prevalence of social and environmental variables demonstrates the long-lasting power of social learning, whilst the presence of coping reasons exposes alcohol's significance as a maladaptive response to the stresses of youth life. What emerges most clearly is that young Ghanaians' alcohol consumption parallels broader societal transformations: the decline of cultural traditions, the rise of media and celebrity influence, and the increasing psychological constraints on

students and young adults. As a result, the study recommends that the Ministry of Youth Development and Empowerment, in collaboration with the Food and Drugs Authority and the National Media Commission, tighten alcohol marketing regulations, strengthen psychosocial interventions, and promote positive peer influence and healthier coping strategies among youth.

### **Acknowledgements**

The authors wish to express their gratitude to all participants in the study and to the field research team whose efforts made this work possible.

### **Funding**

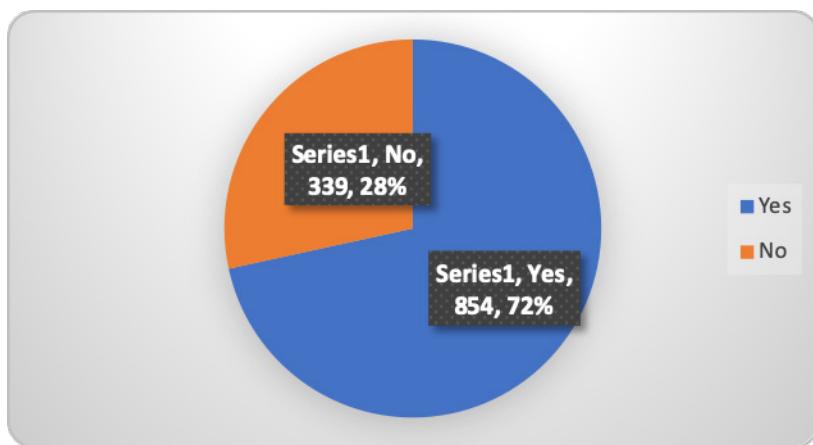
No funding was received for the preparation of this manuscript.

### **Conflict of Interest**

The authors declare no conflict of interest.

## **FIGURE AND TABLES**

### **FIGURE**



Yes = 845(72%); No = 339(28%)

**Figure 1: Lifetime Alcohol Consumption**

Source: Fieldwork, 2025

**TABLES****Table 1: Socio-Demographic Information of the Respondents**

	<b>Frequency(n=1193)</b>	<b>Percent (%)</b>
<b>Sex</b>		
Male	703	58.9
Female	490	41.1
<b>Age group</b>		
16-20	145	12.2
21-25	389	32.6
26-30	236	19.8
31-35	432	35.5
<b>Occupation</b>		
Employed by the private sector	111	9.3
Employed by the public sector	465	39.0
Students	533	44.7
Unemployed	84	7.0
<b>Level of Education</b>		
Middle School/JHS	6	0.5
No formal education	3	0.3
Post-graduate	102	8.5
Senior Secondary School/SHS	241	20.2
Tertiary (Diploma or 1st degree)	841	70.5
<b>Income Level</b>		
Less than 100gh	140	11.7
100-1000gh	366	30.7
1001-2000gh	165	13.8
2001-3000gh	129	10.8
3001-4000gh	129	10.8
4001-5000gh	96	8.0
5001-6000gh	33	2.8
6001-7000gh	30	2.5

<u>7001-8000gh</u>	21	1.8
<u>8001-9000gh</u>	3	0.3
<u>9001-10000gh</u>	30	2.5
<u>More than 10000gh</u>	51	4.3

Source: Fieldwork, 2025

**Table 2: Reasons Influencing the Decision to Start Drinking Alcohol**

Reason for Drinking Alcohol	SD	D	N	A	SA	(N)	Mean
	n (%)	n (%)					
To relax after a busy day	430 (36.0)	229 (19.2)	231 (19.4)	231 (19.4)	72 (6.0)	1193	2.40
To deal with difficult situations	495 (41.5)	186 (15.6)	139 (11.7)	361 (30.3)	12 (1.0)	1193	2.34
To celebrate an event	254 (21.3)	296 (24.8)	332 (27.8)	272 (22.8)	39 (3.3)	1193	2.62
Because of customs/traditions	667 (55.9)	217 (18.2)	175 (14.7)	125 (10.5)	9 (0.8)	1193	1.82
Because of peer pressure	466 (39.1)	230 (19.3)	155 (13.0)	330 (27.7)	12 (1.0)	1193	2.32
Because of adverts (TV/radio)	514 (43.1)	291 (24.4)	218 (18.3)	152 (12.7)	18 (1.5)	1193	2.05
Could not say no when offered	589 (49.4)	307 (25.7)	72 (6.0)	213 (17.9)	12 (1.0)	1193	1.95
Learned drinking from family	556 (46.6)	295 (24.7)	120 (10.1)	207 (17.4)	15 (1.3)	1193	2.02
For health reasons	487 (40.8)	358 (30.0)	102 (8.5)	207 (17.4)	39 (3.3)	1193	2.12
To change mood	481 (40.3)	280 (23.5)	123 (10.3)	285 (23.9)	24 (2.0)	1193	2.24
Saw a celebrity advertise it	484 (40.6)	367 (30.8)	99 (8.3)	231 (19.4)	9 (0.8)	1193	2.09
Out of curiosity	345 (28.9)	207 (17.4)	192 (16.1)	326 (27.3)	123 (10.3)	1193	2.72

**Source: Fieldwork, 2025 Average mean = 2.31**

**Table 3: Principal Component Analysis Results for Reasons for Drinking Alcohol**

Analysis Aspect	Results
KMO Measure of Sampling Adequacy	0.889
Bartlett's Test of Sphericity	$\chi^2 (66) = 7089.63, p < .001$
Number of Components Extracted	2 Components
Total Variance Explained	59.73% (Component 1 = 46.05%, Component 2 = 13.68%)
Rotated Component Matrix (Loadings $> .50$ )	Component 1: Social Influence and Habitual Drinking Component 2: Coping and Cultural Drinking
I simply can't say no when I am offered	0.870
I learnt drinking alcohol from the family	0.847
I saw a celebrity advertise it	0.882
I used it for health reasons	0.799
I wanted to change my mood	0.732
It is because of peer pressure	0.722
It is the adverts on TV and radio that influenced me	0.692
I drink alcohol to relax after a busy day.	0.685
It helps me deal with difficult situations.	0.768
It is a way of celebrating my event.	0.728
I use alcohol because my customs and traditions require it.	0.684

**Source: Fieldwork, 2025**

**Table 4: Socio-demographic Characteristics and Reasons for Alcohol Consumption**

Variable	Category	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Total	Chi-Square Test
Age vs I was curious	16-20	21	18	21	39	24	123	$\chi^2 (12, N=1136) = 69.642, p<0.001$
	21-25	97	42	78	97	55	369	
	26-30	78	45	38	56	11	228	
	31-35	133	93	46	117	27	416	
Ethnic Group vs Celebrating Event	Akan	146	146	189	160	9	650	$\chi^2 (5, N=1193) = 22.726, p<0.001$
	Ewe	39	41	48	49	6	183	
	Ga-Adangbe	27	23	31	21	6	108	
	Guans	3	9	8	7	6	33	
	Mole-Dagbane	6	24	20	4	3	57	
	Others	33	53	36	31	9	162	
Occupation vs helps me deal with difficult situations	Private Sector	62	6	15	28	0	111	$\chi^2 (12, N=1193) = 43.702, p<0.001$
	Public Service	163	103	51	142	6	465	
	Student	238	69	58	162	6	533	
	Unemployed	32	8	15	29	0	84	
Age vs Peer pressure	16-20	36	34	23	52	0	145	$\chi^2 (12, N=1193) = 22.600, p=0.031$
	21-25	154	71	58	100	6	389	
	26-30	100	49	24	60	3	236	
	31-35	176	76	50	118	3	423	

**Source: Fieldwork, 2025**

**Table 5: Ordinal Logistic Regression Predicting Reasons for Alcohol Consumption Based on Celebrity Advertisement**

Variable	B	Std. Error	Wald	df	Sig.
Constant	1.245	0.321	15.04	1	0.000
Religious Affiliation	-0.652	0.210	9.62	1	0.002
Age	0.134	0.052	6.64	1	0.010
Gender	0.431	0.187	5.31	1	0.021
Education	-0.212	0.098	4.67	1	0.031

**Source: Fieldwork, 2025**

## REFERENCES

Aboagye, R. G., Kugbey, N., Ahinkorah, B. O., Seidu, A. A., Cadri, A., & Akonor, P. Y. (2021). Alcohol consumption among tertiary students in the Hohoe Municipality, Ghana: Analysis of prevalence, effects, and associated factors from a cross-sectional study. *BMC Psychiatry*, 21(431). <https://doi.org/10.1186/s12888-021-03447-0>

Aboagye, R. G., Obiri-Yeboah, D., & Oti-Boadi, M. (2021). Alcohol use and associated risk behaviours among university students in Ghana: Implications for health promotion. *Journal of Substance Use*, 26(3), 1-8. <https://doi.org/10.1080/14659891.2020.1868594>

Akyeampong, E. (1996). *Drink, power, and cultural change: A social history of alcohol in Ghana, c.1800 to recent times*. Portsmouth, NH: Heinemann.

Adeyemo, F. O., & Olatunji, A. O. (2019). Predictors of alcohol use among Nigerian University students: The roles of gender, religiosity, and academic stress. *Journal of Psychology and Psychotherapy*, 9(1), 1–7. <https://doi.org/10.4172/2161-0487.1000 340>

Adjei, N. A., Armah, R. Y., & Owusu-Ansah, M. (2021). Peer influence and alcohol consumption among tertiary students in Hohoe Municipality, Ghana. *Journal of Public Health and Epidemiology*, 13(2), 90–98. <https://doi.org/10.5897/JPHE2021.1314>

Ajzen, I. (1991). The theory of planned behaviour. *Organizational Behaviour and Human Decision Processes*, 50(2), 179–211. [https://doi.org/10.1016/0749-5978\(91\)90020-T](https://doi.org/10.1016/0749-5978(91)90020-T)

Akers, R. L., Krohn, M. D., Lanza-Kaduce, L., & Radosevich, M. (1979). Adult social learning theory and delinquency: Differential association–reinforcement theory. *Criminology*, 17(2), 183–212. <https://doi.org/10.1111/j.1745-9125.1979.tb00300.x>

American Academy of Paediatrics. (2007). Policy statement: Media education. *Paediatrics*, 120(4), 821–824. <https://doi.org/10.1542/peds.2007-2683>

American Academy of Paediatrics. (2007). Children, adolescents, and advertising. *Paediatrics*, 118(6), 2563–2569. <https://doi.org/10.1542/peds.2006-2698>

Amoateng, A. Y., & Kalule-Sabiti, I. (2018). Socio-demographic correlates of risky health behaviours among Ghanaian and South African youth. *African Population Studies*, 32(1), 3937–3950. <https://doi.org/10.11564/32-1-1171>

Amoateng, A. Y., Biney, A. A. E., & Awusabo-Asare, K. (2018). Alcohol consumption among in-school adolescents in the Central Region of Ghana. *Journal of Child and Adolescent Behaviour*, 6(2), 1000353. <https://doi.org/10.4172/2375-4494.1000353>

Anderson, P. (2009). Alcohol advertising and youth consumption: A review of research. *Alcohol and Alcoholism*, 44(1), 17–27. <https://doi.org/10.1093/alcalc/agn075>

Anderson, A. & Baumberg, B. (2006). *Alcohol in Europe: A public health perspective*. Institute of Alcohol Studies.

Bandura, A. (1977). *Social learning theory*. Prentice-Hall.

Borsari, B., & Carey, K. B. (2001). Peer influences on college drinking: A review of the research. *Journal of Substance Abuse*, 13(4), 391–424.

Bryman, A. (2016). *Social research methods* (5th ed.). Oxford University Press.

Creswell, J. W., & Creswell, J. D. (2018). *Research design: Qualitative, quantitative, and mixed methods approaches* (5th ed.). Sage Publications.

Davoren, M. P., Shiely, F., Byrne, M., & Perry, I. J. (2003). Hazardous alcohol consumption among university students in Ireland: A cross-sectional study. *BMJ Open*, 3(1), e002356. <https://doi.org/10.1136/bmjopen-2012-002356>

Ennett, S. T., & Bauman, K. E. (1994). Peer influence processes among adolescents and alcohol use: Selection, socialization, and projection. *Journal of Research on Adolescence*, 4(3), 321–356. [https://doi.org/10.1207/s15327795jra0403\\_1](https://doi.org/10.1207/s15327795jra0403_1)

Gerbner, G. (1995). The role of television in American culture. *Psychiatry*, 65(4), 317–331.

Ghana Statistical Service. (2024). *2024 population estimates and demographic trends report*. GSS.

Ghana Statistical Service. (2021). *2021 Population and Housing Census: General report*. GSS.

Hagan, J. E., Poku, A. A., & Kyei-Frimpong, J. (2018). Alcohol consumption patterns and beliefs among the Akan ethnic group in Ghana. *Journal of Ethnicity in Substance Abuse*, 17(3), 287–302. <https://doi.org/10.1080/15332640.2017.1300551>

Hagan, J. E. (2018). Alcohol use and associated factors among Ghanaian youth: A review. *Journal of Substance Use*, 23(6), 589–596.

Hobfoll, S. E. (1989). Conservation of resources: A new attempt at conceptualizing stress. *American Psychologist*, 44(3), 513–524. <https://doi.org/10.1037/0003-066X.44.3.513>

Israel, G. D. (2013). *Determining sample size*. University of Florida, IFAS Extension. <https://edis.ifas.ufl.edu/pd006>

Johnston, L. D., Miech, R. A., O'Malley, P. M., Bachman, J. G., Schulenberg, J. E., & Patrick, M. E. (2019). *Monitoring the Future national survey results on drug use, 1975–2018: Overview, key findings*, 2018. Institute for Social Research, University of Michigan.

Kumar, R. (2019). *Research methodology: A step-by-step guide for beginners* (5<sup>th</sup> ed.). Sage Publications.

Kuntsche, E., Knibbe, R., Gmel, G., & Engels, R. (2005). Why do young people drink? A review of drinking motives. *Clinical Psychology Review*, 25(7), 841–861. <https://doi.org/10.1016/j.cpr.2005.06.002>

Lazarus, R. S., & Folkman, S. (1984). *Stress, appraisal, and coping*. Springer.

Mathibe, M., Cele, L., & Modjadji, P. (2022). Alcohol use among high school learners in the peri-urban areas, South Africa: a descriptive study on accessibility, motivations and effects. *Children*, 9(9), 13-42.

Ministry of Health. (2014). *Ghana National Alcohol Policy*. Ministry of Health, Republic of Ghana.

Morojele, N. K., Dumbili, E. W., Obot, I. S., & Parry, C. D. H. (2022). Alcohol consumption, harms and policy responses in Africa: A scoping review. *Journal of Substance Use*, 27(3), 215–225. <https://doi.org/10.1080/14659891.2021.1873825>

Norman, P., Bennett, P., & Lewis, H. (2007). Understanding alcohol consumption in university students: A theory of planned behaviour perspective. *Health Education Research*, 22(8), 437–448. <https://doi.org/10.1093/her/cyl123>

Osei-Bonsu, E., Appiah, P. K., Norman, I. D., Asalu, G. A., Kweku, M., Ahiabor, S. Y., ... & Boadu, S. (2017). Prevalence of alcohol consumption and factors influencing alcohol use among the youth in Tokorni-Hohoe, Volta region of Ghana. *Science Journal of Public Health*, 5(3), 205-214.

Patrick, M. E., & Schulenberg, J. E. (2014). Prevalence and predictors of adolescent alcohol use in the United States. *Substance Use & Misuse*, 49(13), 1640–1650. <https://doi.org/10.3109/10826084.2014.940575>

Peltzer, K., Davids, A., & Njuho, P. (2011). Alcohol use and problem drinking in South Africa: Findings from a national population-based survey. *African Journal of Psychiatry*, 14(1), 30–37. <https://doi.org/10.4314/ajpsy.v14i1.65466>

Peltzer, K., Ramlagan, S., & Satepe, K. (2012). Prevalence and associated factors of alcohol use among adolescents in South Africa. *African Journal of Psychiatry*, 15(5), 356–363. <https://doi.org/10.4314/ajpsy.v15i5.44>

Saunders, M., Lewis, P., & Thornhill, A. (2019). *Research methods for business students* (8th ed.). Pearson Education.

Smith, L. A., & Foxcroft, D. R. (2020). Drinking motives and adolescent alcohol use: A systematic review. *Journal of Substance Use*, 25(3), 267–277. <https://doi.org/10.1080/14659891.2019.1687723>

Smith, L. A., & Foxcroft, D. R. (2009). The effect of alcohol advertising, marketing and portrayal on drinking behaviour in young people: Systematic review of prospective cohort studies. *BMC Public Health*, 9(51), 1-11. <https://doi.org/10.1186/1471-2458-9-51>.

Ssewanyana, D., Mwangala, P. N., & Maposa, I. (2021). Alcohol use among adolescents in Kenya: The moderating role of parental monitoring. *Substance Abuse Treatment, Prevention, and Policy*, 16(1), 24-36. <https://doi.org/10.1186/s13011-021-00365-4>

Swahn, M. H., Culbreth, R., Salazar, L. F., Tumwesigye, N. M., Jernigan, D. H., & Kasirye, R. (2020). The prevalence and context of alcohol use, problem drinking, and alcohol-related harm among youth living in the slums of Kampala, Uganda. *Int J Environ Res Public Health*. 17(7), 24-51.

Wills, T. A., & Shiffman, S. (1985). Coping and substance use: A conceptual framework. In S. Shiffman & T. A. Wills (Eds.), *Coping and substance use* (pp. 3–24). Academic Press.

World Health Organization. (2018). *Global status report on alcohol and health 2018*. World Health Organization.

UNICEF. (2016). *The impact of alcohol marketing on youth drinking behaviour in Africa*. United Nations Children's Fund.