

# Policy Brief: Addressing drug and substance use among university students in Kenya

## Authors

<sup>1</sup>Kirwa Lelei and <sup>1</sup>Adrian Njenga

## Corresponding Author

<sup>1</sup>Kirwa Lelei

Email: [kirwa@nacada.go.ke](mailto:kirwa@nacada.go.ke)

## Affiliation

<sup>1</sup>National authority for the Campaign  
Against Alcohol and Drug  
Abuse(NACADA)

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## EXECUTIVE SUMMARY

Drug and substance use among university students in Kenya is a growing public health crisis, with studies indicating alarming prevalence rates. A recent study has shown that **45.6%** of students reported lifetime use of drugs and substances of abuse; **25%** were current users; and another **1 in every 12 students** were struggling with addiction. Alcohol, tobacco, cannabis, and prescription drugs (e.g., codeine, morphine) were the most commonly abused substances, with ease of accessibility both on and off campuses exacerbating the problem. Risk factors included peer pressure, stress, financial freedom, and prolonged waiting periods before university admission.

This policy brief highlights key findings, identifies gaps in current interventions, and proposes evidence-based recommendations to mitigate substance abuse among Kenyan university students.

## KEY FINDINGS

### 1. High Prevalence of Substance Use

- i. **Lifetime use:** 45.6% of university students had used drugs or alcohol at least once in their lifetime;
- ii. **Current use:** 25% were active users, with **alcohol (22%)**, **cannabis (8%)**, and **tobacco (7%)** being the substances with the highest prevalence of current use;
- iii. **Poly-substance use:** 13% of the students engaged in multiple substance or drug combinations (e.g., alcohol, cannabis, and tobacco); and
- iv. **Gender trends:** Male students historically dominate substance use, but female usage was on the rise, particularly for alcohol, cannabis and novel tobacco products including shisha.

### 2. Risk Factors and Consequences

- i. **Peer pressure and social influences** (e.g., sports team culture) contribute to initiation;
- ii. **Mental health links:** Substance abuse correlates with **depression, anxiety, and poor academic performance**;
- iii. **Academic decline:** Users were

more likely to **skip classes, fail exams, and face disciplinary actions; and**

- iv. **Socioeconomic factors:** Students from affluent backgrounds (often in private universities) reported higher use of expensive drugs like cocaine and heroin.

## GAPS IN CURRENT INTERVENTIONS

1. **Reliance on Self-Reporting:** Many studies depend on self-reported data, which may underreport due to social desirability bias;
2. **Weak Enforcement of Campus Policies:** Despite university prohibitions, students easily access substances near campuses;
3. **Limited Mental Health Support:** Counseling services are underfunded and underutilized; and
4. **Lack of Early Intervention:** Most programs target existing users rather than preventing initiation.

## POLICY RECOMMENDATIONS

### 1. Strengthen Prevention and Awareness Programs

- i. **Peer education:** Train student leaders to promote drug-free lifestyles;
- ii. **Mandatory first-year orientation:** Include substance abuse awareness and coping strategies; and

- iii. **Public health campaigns:** Partner with NACADA to debunk myths (e.g., “cannabis improves concentration”).

### 2. Enhance Campus Regulations and Enforcement

- i. **Strict monitoring of vendors:** Restrict alcohol and drug sales near universities;
- ii. **Random drug testing:** Implement testing for high-risk groups (e.g., athletes, repeat offenders);
- iii. **Clear disciplinary measures:** Enforce penalties for on-campus substance use.

### 3. Improve Mental Health and Counseling Services

- i. **Expand counseling centers:** Increase funding for mental health professionals in universities;
- ii. **Stress management programs:** Introduce workshops on coping mechanisms for academic pressure; and
- iii. **Screening for depression:** Integrate mental health checks during routine university health services.

### 4. Research and Data-Driven Interventions

- i. Track substance uses trends and intervention effectiveness.

## 5. Community and Government Collaboration

- i. **County-level policies:** Engage County governments in regulating drug accessibility;
- ii. **Parental involvement:** Educate parents on early signs of substance abuse; and
- iii. **NACADA partnerships:** Strengthen enforcement of drug laws near universities.

## CONCLUSION

Substance abuse among Kenyan university students is a multifaceted issue requiring **integrated interventions** combining **prevention, enforcement, mental health support, and research**. Immediate action is needed to curb rising addiction rates and safeguard students' academic and psychological well-being.