

# Policy Brief: Addressing emerging drugs and substance abuse 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)

*Date submitted: May 26<sup>th</sup> 2025*

*Date Published: June 30<sup>th</sup> 2025*

## EXECUTIVE SUMMARY

The availability and accessibility of emerging drugs including **cannabis edibles**, **vaping products**, and **prescription opioids** among Kenyan university students have reached alarming levels. The study on the status of drugs and substance abuse among university students in Kenya explored the students' perception on availability and accessibility of emerging trends. Findings revealed that **47.6%** of students can access cannabis edibles, while **61.7%** reported that smoked cannabis was readily available. Alcohol (87.3%) and cigarettes (64.4%) were the most accessible substances, but emerging trends in the abuse of **morphine** and **nicotine pouches** (30.7%) are gaining traction.

This brief examines the drivers of this crisis, analyzes gaps in current policies, and

proposes evidence-based interventions to curb the proliferation of these substances in the institutions of higher learning.

## KEY FINDINGS

### 1. High Accessibility of Emerging Substances

- i. **Cannabis edibles:** Disguised as cookies, lollipops, and drinks, edibles are used by **47.6%** of students due to their discreet nature;
- ii. **Vaping and shisha:** **41.2%** of students use shisha, while **31%** access e-cigarettes, often perceived as “safer” alternatives;
- iii. **Prescription drugs:** **13.9%** of students' misuse psychoactive medications like morphine and codeine, with **15.1%** reporting cocaine accessibility; and
- iv. **Online drug markets:** **39.4%** of students procure substances through social media and encrypted platforms.

### 2. Drivers of Abuse

- i. **Peer influence:** **66.4%** of students obtain drugs through friends, while **7%** involve lecturers or staff;
- ii. **Stress and mental health:** Depression and anxiety drive self-medication, with one (1) in

**seventeen (17)** students reporting moderate-to-severe depression; and;

- iii. **Cultural normalization:** Substances like shisha are gendered—preferred by female students—while cannabis is linked to youth subcultures.

### 3. Consequences

- i. **Academic decline:** Substance users are more likely to skip classes, fail exams, and face disciplinary actions; and
- ii. **Health risks:** Edibles delay intoxication, increasing overdose risks, while vaping is tied to lung injuries.

### Gaps in Current Policies

- 1. **Weak Enforcement:** Despite bans, vendors near campuses sell substances like *kuber* (23%) and *snuff* (22.1%) with impunity;
- 2. **Outdated Laws:** Cannabis edibles and vaping products are not explicitly regulated under Kenya's Narcotic Drugs and Psychotropic Substances (Control) Act 1994 and the Tobacco Control Act 2007; and
- 3. **Limited Surveillance:** No real-time monitoring of online drug markets or emerging substances.

## POLICY RECOMMENDATIONS

### 1. Regulatory Reforms

- i. **Amend the Narcotic Drugs Act:** Explicitly ban cannabis edibles, vaping products, and designer drugs; and
- ii. **Crackdown on vendors:** Enforce stricter penalties for sales near universities and institutions of higher learning, including license revocations.

### 2. Campus-Based Interventions

- i. **Drug-free zones:** Partner with county governments to prohibit substance sales within 300m of institutions of higher learning; and
- ii. **Anonymous reporting systems:** Enable students to report dealers via secure apps linked to NACADA.

### 3. Public Health Strategies

- i. **Awareness campaigns:** Debunk myths (e.g., “edibles are harmless, with female appeal and less potent”) through NACADA-led workshops; and
- ii. **Mental health integration:** Screen for depression during university health check-ups and expand counseling services.

## CONCLUSION

The rise of cannabis edibles and other emerging substances demands **urgent**,

**multi-sectoral action.** By combining **legal reforms; enforcement; collaboration** with students and university management; and **mental health support**, Kenya can mitigate this crisis before it escalates out of control.