

## Report On Status of Treatment and Rehabilitation Centres in Kenya

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### INTRODUCTION

According to the 2022 NACADA National survey on the status of drugs and substance, one in twenty adults between the ages of 15 and 64 abused at least one type of drug. Every year in Kenya misuse of drugs costs the country lots of money and sometimes the misuse has led to deaths. Due to the impact of alcohol and drug abuse on individual's health and the socio-economic consequences, there are several efforts towards alleviating or reducing alcohol and drug abuse in Kenya. Additionally, with all these challenges and strategies put in place by the government and other concerned parties, alcohol drugs and substance abuse in Kenya is still on the rise.

The survey findings show that more than half of the population had ever used a drug or substance of abuse in their lifetime. Fifty-seven percent had used alcohol, drugs and

substances of abuse in their lifetime. This finding reinforces the need for intervention programs targeting different age-set.

Rehabilitation centres play a crucial role in addressing alcohol, drugs and substance abuse that hinders productivity of people living with substance use disorders. Moreover, they offer routines which are full of productive activities such as group work, counselling sessions and also provide clients with a safe and supportive environment which enable growth in clients and ease recovery and integration process. In Kenya there are significant challenges regarding the accessibility and awareness of rehabilitation centres for individuals in need of alcohol drugs and substance use disorder support. They include high cost, uneven distribution of resources, and limited physical access hinder the ability of many Kenya to seek and receive the necessary care and treatment. This has leads to untreated alcohol drugs and substance abuse and related social problems.

### METHODOLOGY

The 2022 national survey used a cross-sectional study design to provide reliable estimates to track the national, regional, urban and rural drugs and substance use indicators. The survey was conducted in selected clusters spread across the 47 counties of the Republic of Kenya. The study sampled Kenyans aged 15 to 65 years. The sample for the survey was obtained from the Kenya Household Master Sample Frame (K-HMSF) maintained by the KNBS. The total number

of individual interviews received was 3,314 translating to an individual response rate of 87%. The data was weighted to compensate for unequal selection probabilities and unit non-response in order to conform to known population distributions and eliminate any possible bias

## FINDINGS

Findings on substance use disorders (SUDs)/dependence including perceptions on counselling, treatment, and rehabilitation. It presents information on the extent of dependence and severity of different substance use disorders for the population aged 15- 65 years. Under Sustainable Development Goals, countries are required to strengthen the prevention and treatment of substance abuse, including narcotic drug abuse and harmful use of alcohol.

### 3.1 Prevalence of depressive disorders among the population aged 15 – 65 years in Kenya

- One in every 3 Kenyans aged 15 – 65 years (8,390,616) had minimal depressive disorders;
- One in every 7 Kenyans aged 15 – 65 years (4,096,209) had mild depressive disorders;
- One in every 43 Kenyans aged 15 – 65 years (633,330) had moderate depressive disorders;
- One in every 125 Kenyans aged 15 – 65 years (209,582) had moderately severe depressive disorders; and
- One in every 250 Kenyans aged 15 – 65 years (104,578) had severe disorders.

### 3.2 Prevalence of severe substance use disorders (addiction) among the population aged 15 – 65 years in Kenya

- One in every 20 Kenyans aged 15 – 65 years (1,357,040) were addicted to alcohol;
- One in every 30 Kenyans aged 15 – 65 years (887,627) were addicted to One in every 125 Kenyans aged 15 – 65 years (227,744) were addicted to khat; and
- One in every 111 Kenyans aged 15 – 65 years (234,855) were addicted to cannabis.

### 3.3 Prevalence of severe substance use disorders (addiction) among the youth aged 15 – 24 years in Kenya

- One in every 45 youths aged 15 – 24 years (153,846) were addicted to alcohol;
- One in every 167 youths aged 15 – 24 years (45,806) were addicted to tobacco;
- One in every 125 youths aged 15 – 24 years (58,819) were addicted to khat; and
- One in every 77 youths aged 15 – 24 years (90,531) were addicted to cannabis;

### 3.4 Prevalence of severe substance use disorders (addiction) among the youth aged 25 – 35 years in Kenya;

- One in every 14 youths aged 25 – 35 years (596,336) were addicted to alcohol;

- One in every 33 youths aged 25 – 35 years (247,139) were addicted to tobacco;
- One in every 71 youths aged 25 – 35 years (112,724) were addicted to khat; and
- One in every 83 youths aged 25 – 35 years (100,468) were addicted to cannabis.

### 3.5 Rate of addiction among current users of alcohol, drugs and substances of abuse

- 42.4% of current users of alcohol were addicted to alcohol use;
- 38.8% of current users of tobacco were addicted to tobacco use;
- 22.2% of current users of khat were addicted to khat use; and
- 47.4% of current users of cannabis were addicted to cannabis use.

### 3.6 The prevalence of depressive disorder by severity.

The results show that one in three persons aged 15 – 65 years had a minimal depressive disorder. Forty-eight percent of the population had no depressive disorder while 52 percent had depressive disorders ranging from minimal (33.0%), mild (15.9%), moderate (2.5%), moderately severe (0.7%), and severe (0.3).

### 3.7 Awareness of treatment and rehabilitation services

The findings show that 14 percent of the

population was aware of a treatment and rehabilitation facility. Nairobi region had the highest awareness level (31.4%) followed by the Central region (20.1%). The western region had the lowest level of awareness (3.1%).

## DISCUSSION

### Health and social- consequences of DSU

The study established the relationship between depressive disorders and drug and substance abuse. Results indicated that use of alcohol, drugs and substances of abuse namely alcohol, tobacco, khat, cannabis, and prescription drugs were associated with depressive disorders. The findings underscored the need for the management of co-occurring substance use disorders as a standard practice in addiction treatment and rehabilitation.

The survey results show that males had a higher prevalence of SUDs compared to female. Therefore, a need to integrate gender-sensitive prevention and treatment approaches for effective programming. The 25 – 35years age group, which represents the most productive population segment, was most affected by drugs and substance use. The vulnerability of this age group calls for tailored interventions.

### Extent of substance use disorders

The survey established that the country is confronted with a high burden of substance use disorder. Data showed

that alcohol use disorders were the most commonly reported disorders followed by tobacco use disorders, khat use disorder, Cocaine use disorder, and Prescribed drugs use disorder. The high burden of substance use disorders requires innovative and cost-effective approaches to meet the ever-increasing demand for addiction treatment and rehabilitation.

### RECOMMENDATION

- i. NACADA in collaboration with the County government should introduce treatment and rehabilitation wing in their level three and four hospitals;
- ii. NACADA to lobby National Health Insurance Fund (NHIF) and private medical insurance institutions to recognize alcohol, drugs and substance use disorders as treatable medical condition covered by insurance; and
- iii. NACADA, Civil Society and Faith-Based Organization should spearhead the introduction of community-based rehabilitation to ensure robust community-based addiction treatment and rehabilitation, leveraging local networks and resources for widespread and impactful support.