



AN INVESTIGATION OF THE FACTORS CONTRIBUTING TO DRUG AND SUBSTANCE ABUSE AMONG THE YOUTH IN KENYA: A SURVEY OF SELECT REHABILITATION CENTRES IN MOMBASA COUNTY.

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Abstract: Substance abuse continues to be one of the most serious problems facing communities throughout the world. In Kenya, drug abuse is one of the major social problems with common and easily identifiable manifestations in public health. Drug abuse reduction necessitates the use of strategies that are focused at tackling the risk factors. The purpose of the study was to investigate on the causes of drug and substance abuse among the youth in Kenya with a survey of Mombasa County. The study also sought to establish how education standards/levels, government policy, culture, mass media and cost of drugs influence usage on drugs and substance abuse among the youth in Mombasa County. The target population was 298 youth in rehabilitation centers, counselors in rehabilitation centers and government administrators in Mombasa County. This study used a stratified random sampling to select 30% of the target population. The sample size of this study was 89 participants who included 66 youths in rehabilitation centers, 3 counselors and 11 government administrators. Questionnaires comprised of both the open ended and closed ended questions. Quantitative data was analysed by use of Statistical Package for Social Sciences (SPSS) version 21. In addition, descriptive and inferential statistics was used in this study. Descriptive statistics such as percentages, frequencies, mean and standard deviation were used. Data was presented in graphs and tables. Further, a multiple regression analysis was used to establish the relationship between the dependent and the independent variables. The study established that mass media influences drug and substance abuse among the youth in Mombasa County most followed by education standards/level, culture and cost of drugs. However education standards/levels and cost of drugs had an inverse influence on drugs and substance abuse among the youth and culture and mass media had a positive influence on drugs and substance abuse among the youth in Kenya. This study therefore recommends that education standards should be enhanced through cooperation between the government and the NGOs to ensure that many people acquire basic education in the area. Further, the government should come up with programs highlighting the adverse effects of drug use. In addition, the study recommends that local communities should be made aware of the adverse effects of their norms and culture especially when their youths end up engaging in drug use.

Key Words: Drug and Substance Abuse, Education Standards, Culture, Media

Introduction

Drug abuse is one of the top problems confronting the nation today especially among the youth. Incidences of drug and alcohol abuse and related anti-social behavior have tremendously

increased in recent years. This has become a matter of concern to the government, parents, teachers, Non-governmental organizations and all other relevant agencies. It is more prevalent than parents suspect (Ngesu *et al.*, 2008). Parents do not recognize the extent of drug use and as a result, some young people think they can use drugs with impunity. Most parents believe that it is the responsibility of teachers to check drug abuse among school going children and still most of them delude themselves that their children are safe and secure (Botvin, 2006). Drug abuse is not confined to young people in certain geographical areas or from particular social-economic backgrounds. It affects the nation as a whole-both urban and rural areas. The problem cuts across class. It is not only in slums or low income areas where people are poor and unhappy but also with families living under better conditions (rich and calmer) where children are better controlled (Bratter *et al.*, 2003).

According to the National Campaign against Drug Abuse (NACADA) in Kenya, which was initiated in early 2001, the past twenty years has seen drugs and drug abuse soar to an extent that it now cuts across all sectors of life. The level of drug abuse is startling and even more frightening because of the fact that many young people are getting wired on drugs each passing day. Alcohol, bhang and tobacco are increasingly being abused by school going children. Research and seizure statistics show it has a steady upward trend. Those between 16 to 30 years of age, a critical period in one's development are most affected (Mwenesi, 2002). A few years ago the most commonly abused drugs among students were tobacco, alcohol, bhang and "miraa" but today opium, cocaine and heroin have added to the list. Use of sleeping pills, tranquilizer, cough mixture, inhalants such as glue and petrol is now rampant especially among the street youngsters. In Nairobi alone 50% of students have in the past taken drugs (Dubois & Silverthorn, 2004).

According to Mugisha *et al.* (2003) long-term substance abuse of legal and illegal substances causes millions of deaths and costs billions for medical care and substance abuse rehabilitation. Approximately half the world's population consumes alcohol. For most people, it's not a problem, but for far too many, it's an obsession, an addiction and something that robs them of their health, wealth and even their lives. The same macroeconomic environment which has facilitated the growth and development of global legitimate business has also provided the opportunity for drug producers and traffickers to organize themselves on a global scale (UNODC, 2010).

The anti-narcotics squad-a unit within the Kenya police force makes the challenge look more insurmountable. Already, Nairobi has become an important transit point for drugs. Although trafficking of drugs is controlled by adults, the immediate source of drugs for the youth is other youth. Students are supplied with drugs by fellow students. Most of the drugs other than alcohol are purchased in school (Mugisha *et al.*, 2003). A report by the criminal investigations (CID) and the Anti-narcotics Unit of the Kenya police single out Kenyan and Tanzanian coastal towns as conduits for drug trafficking. In the year 2001 a total of 4210 suspects were arrested in the East African region. Out of these 4162 were Kenyans while 48 were foreigners underlining the seriousness of the problem in Kenya. By sex, 3889 of the suspects were male while 289 were female. During the period, a joint regional police swoop netted 52,000 tablets of mandrax, a record 383 tons of cannabis, 355 tons in Mt. Kenya and Gwasi hills and 20 kg of heroine and 200mg of cocaine were seized at Jomo Kenyatta International Airport (JKIA).

Substance Abuse and its Toll

Notwithstanding the fact that recent data on illicit drug use in Africa are limited, the most commonly used drug in the region continues to be cannabis, followed by Amphetamine Type Stimulant (ATS). Annual prevalence of cannabis use in Africa, particularly West and Central Africa, is much higher than the global average (5.2-13.5 per cent of the population aged 15-64). The estimated prevalence of the use of ATS and opioids in all African sub-regions remains comparable to the global average; however, cocaine use is reportedly high in West and Central Africa and Southern Africa. In Africa, the increasing use of heroin and drug injecting is also emerging as an alarming trend, particularly in Kenya, Libya, Mauritius, Seychelles and the United Republic of Tanzania.

Globally, the UNODC estimates that between 155 and 250 million people (3.5% - 5.7% of the population aged 15-64) used illicit substances at least once in 2008. Consequently it is estimated that there were between 16 and 38 million 'problem drug users' in the world the same year (Perkinson, 2002). While drug use has stabilized in the developed world, there are signs of an increase in drug use in the developing countries. According to National Authority for Campaign against Alcohol and Drug Abuse (NACADA) 2007 study, 14.2% of the Kenyan population aged 15-65 is currently consuming alcohol, miraa (5.5%), bhang (1%), cocaine (0.2%) and heroin (0.1%) in the country.

Kenya is faced with a serious socio-economic problem occasioned by the high prevalence of alcohol and drug abuse. The effects of this problem include ill-health, disability, low productivity and even death. Use of intoxicants in Kenya can be traced as far back as pre-colonial days when alcohol and other drugs were used and consumed as part of the traditions of the communities (National Campaign against Drug Abuse, NACADA, 2007). The communities had virtues and values that strictly guided the use of intoxicants. Generally the use of alcohol, tobacco and other drugs was a privilege of the elders, more often than not, of the male elders (National Institute on Drug Abuse, 2003).

In Kenya today, especially in the urban set up, drug and substance abuse is rampant and on the rise. Liberal use of drugs and substances especially among the youth and young adults has resulted in increased crime and domestic violence (Ndeti, 2004). The main drugs used in Kenya include alcohol, cigarettes, miraa, marijuana, heroin and cocaine (NACADA, 2004). The drugs are used by people of 15 years and above. This is also the group that is expected to be economically productive. Central region leads in use of alcoholism, while coast region leads in use of hard drugs like cocaine and brown sugar (heroin). The counties that are mostly affected in Coast are Kilifi, Lamu, Mombasa and Kwale.

The main problems associated with drug abuse in the county include unemployment, financial instability, family disintegration and ill-health. It has caused untold suffering to parents and family members as productive members of the society become wasted by drugs (NACADA, 2007). Substance abusers are at greater risk for job instability, long-term unemployment and accidents or injuries at work, often putting their families under tremendous financial pressure (Ibid). This study was therefore to investigate the causes of drugs and substance abuse among the youth in Kenya with case of Mombasa County.

Statement of Problem

Substance abuse continues to be one of the most serious problems facing communities throughout the world. In Kenya, drug abuse is one of the major social problems with common and easily identifiable manifestations in public health. Substance abuse is an endemic problem in parts of the country. Almost every other day the police officers either confiscate or intercept a haul of cannabis in transit. This is a proof that drug peddling and use is thriving in the country. Kenyan youth face the greatest risk of being targets for recruitment into the abuse of drugs by drug barons.

The government, through NACADA, has engaged in many activities regarding drug abuse to mitigate the problem. They have in place an alcohol and drug abuse prevention program, a program on preventive education among the youth and children and a program on coordinated information, education and communication strategy. Muslim Education and Welfare Association, (MEWA) and other rehabilitation centers within Mombasa County have been conducting various drug reduction activities.

Drugs and substance abuse has affected the society socially and economically. Economically, consumption of alcohol and drugs depletes household income, while socially it creates disharmony within the family. The economic standards of Mombasa County remain way below the poverty line. Despite all the interventions by NACADA and other players, there is a worrying trend on the abuse of drugs and the youths continue to sink deeper in drugs and related problems. Drug abuse reduction necessitates the use of strategies that are focused at tackling the risk factors. This study therefore sought to establish the causes of drug and substance abuse among the youth in Kenya with a survey of Mombasa County.

The specific objectives of this study were;

- i. To establish how education standards influence drugs and substance abuse among the youth in Kenya
- ii. To find out how culture has influenced drugs and substance abuse among the youth in Kenya
- iii. To investigate how media influences drugs and substance abuse among the youth in Kenya
- iv. To establish the influence of cost on drugs and substance abuse among the youth in Kenya

Theoretical Literature

This study focused on three theories related to the causes of drug and substance abuse. These theories include social control theory, self-control theory and social learning theory.

Social Control Theory

According to social control theory, what causes drug use, like most or all deviant behavior, is the absence of social controls encouraging conformity. Most of us do not engage in deviant or criminal acts because of strong bonds with or ties to conventional, mainstream persons, beliefs,

activities, and social institutions (Boerim *et al.*, 2006). If these bonds are weak or broken, we will be released from society's rules and free to deviate—and this includes drug use. It is not that drug users' ties to an unconventional subculture attract them to drugs; it is their lack of ties to the conforming, mainstream sectors of society that frees them from the bonds keeping them from using drugs. It is the absence of these bonds that explains illicit, recreational drug use (Spanagel, 2011).

Of course, delinquency, deviance, and criminal behavior—including recreational, nonmedical drug use—are matters of degree. Just as most of us engage in at least one technically illegal act in our lives, a very high proportion of the American population eventually uses at least one drug outside a medical context (Cohen & Rabinovitch, 2005). Social control theory does not assert that persons with strong ties to conventional society will never engage in any deviant action, regardless of how mild, including using a drug recreationally. It would, however, assert that both deviance and control are matters of degree: The more attached we are to conventional society, the lower the likelihood of engaging in behavior that violates its values and norms. A strong attachment does not absolutely insulate us from mildly deviant behavior, but it does make it less likely.

Social control theory emphasizes the actor's stake in conformity. The more we have “invested”—with respect to time, emotion, energy, money, and so on—in conventional activities and involvements, the more conventional our behavior is likely to be (Alston & Harley, 2003). A “stake” could be anything we value, such as a loving relationship, good relations with our parents, a family, children, an education, a satisfying job, and/or a career. Someone who has “invested” in these positively valued, reward-laden enterprises is less likely to engage in behavior that threatens or undermines them than is someone who has no such investments. One or more stakes in conformity tend to act to keep us in line, away from the potential clutches of drug abuse.

The more attached we are to conventional others—parents, teachers, clergy, employers—the less likely we are to break society's rules and use drugs. The more committed we are to conventional institutions—family, school, religion, work—the less likely we are to break society's rules and use drugs (White, 2006). The more involved we are in conventional activities—familial, educational, religious, occupational—the less likely we are to break society's rules and use drugs. And the more deeply we believe in the norms of conventional institutions—again, family, school, religion, occupation—the less likely we are to break society's rules and use drugs. Drug use is “contained” by bonds with or adherence to conventional people, institutions, activities, and beliefs. If they are strong, recreational drug use is unlikely. Control theory has a kind of commonsensical flavor to it, and it also has a loyal following in the fields of criminology, the sociology of deviance, and the sociology of drug use.

Empirical Review

Education Standards

Literacy has been described as the ability to read for knowledge and write coherently and think critically about the written word. Literacy can also include the ability to understand all forms of communication, be it body language, pictures, video or sound (reading, speaking, listening and viewing (Mansell & Liu, 2003). Literacy encompasses a complex set of abilities to understand and use the dominant symbol systems of a culture for personal and community development. In a

technological society, the concept of literacy is expanding to include the media and electronic text, in addition to alphabetic and number systems. These abilities vary in different social and cultural contexts according to need and demand (Alston & Harley, 2003).

Education level has been found to have an impact on the risk of drug or alcohol abuse. One particular study from 2004 in Copenhagen included over 30,000 men and women aged 20-93 and measured schooling level, smoking, alcohol use and obesity (Botvin, 2006). This study found that those with the lowest level of schooling were most frequently heavy smokers, heavy drinkers and the most physically inactive. Similarly, it has been reported that nearly half of all clients in treatment for drug or alcohol abuse in 2001 never went to school or only completed primary school. These results suggest that education level may have some influence on those who would abuse alcohol and drugs, but it is not a definite indicator. The majority of people who do not have high levels of education do not go on to abuse drugs and alcohol (Mugisha *et al.*, 2003).

In addition, parents education has been found to have an effect on drug and substance abuse. According to Kiambuthi (2005), incidences of drug abuse are higher among students with mothers who have attained tertiary education (University 83.3%) than those with less education. However, some studies have shown that there is no clear cut correlation between drug abuse and level of education of parents among the boys. But, according to Bratter *et al.* (2003), the correlation is seen among the girls. 14.8% of drug abusing girls are from homes in which neither of parents has attended college compared with 10.6% from homes where at least one parent has attended college. Therefore it could be concluded that educational level of the mother only influences drug abuse by the girls but not the boys.

Although there are some studies that have focused on how education/literacy influences drugs and substance abuse, these studies have got mixed findings. For instance, Mugisha *et al.* (2003) finds that there is an association while Kiambuthi (2005) findings indicate that there is not association. In addition, Kiambuthi (2005) study was limited to *Kiambu District and Mugisha et al.* (2003) findings were limited to urban slum in Nairobi. However, the findings of these studies cannot be generalized to Mombasa County as it has different economic, political, and geographical characteristics as compared to Nairobi County and Kiambu District.

Culture

Socio-cultural beliefs can shape the approach to and behavior regarding substance use and abuse. Culture plays a central role in forming the expectations of individuals about potential problems they may face with drug use. For many social groups, this may provide a protective factor. An example is the use of alcohol by the ancient Aztecs before any contact with white settlers (Ngesu *et al.*, 2008). Their use of alcohol was heavily regulated and was only for ceremonial purposes. Non-ceremonial use of alcohol was strictly forbidden under penalty of death. Another example is the development of the peyote cult in northern Mexico. Peyote was used in a ceremonial setting to treat chronic alcohol addiction. This use later became a central part of the Native American church, which provided important spiritual treatment for chronic alcoholism (Ndeti *et al.*, 2009).

Initiation into excessive substance use may occur during periods of rapid social change, often among cultural groups who have had little exposure to a drug and have not developed protective normative behavior. *Anomie*, or loss of a healthy ethnic or cultural identity, may occur among

native populations whose cultures have been devastated by the extensive and sudden influx of outside influence (Njeru, 2010).

Because of its low availability, few North American Indians had any exposure to alcohol before the arrival of whites. On the western frontier, potent distilled alcoholic beverages became widely available, and the only model Native Americans had was the drunken comportment of the frontiersman (Masese, 2007). Acculturation, the degree to which an individual identifies with his or her native culture, is thought to be related to substance use and abuse. Native American elders believe that many substance abuse problems are related to the loss of traditional culture. Higher rates of substance use have been found in persons who closely identify with non-Native American values and the lowest rates are found in bicultural individuals who are comfortable with both sets of cultural values (Mansell & Liu, 2003).

Mass Media

Although parents, schools, and the federal government are trying to get children and teenagers to “just say no” to drugs, more than \$25 billion worth of cigarette, alcohol, and prescription drug advertising is effectively working to get them to “just say yes” to smoking, drinking, and other drugs (Mansell & Liu, 2003). In addition, television programs and movies contain appreciable amounts of substance use. Unlike traditional advertising, media depictions of legal drugs are generally positive and invite no criticism, because they are not viewed as advertising. The result is that young people receive mixed messages about substance use, and the media contribute significantly to the risk that young people will engage in substance use (Vardavas, 2010).

The power of advertising to influence children and adolescents (and adults, for that matter) is incontrovertible (Vardavas, 2010). Advertising works; otherwise, companies would not spend billions of dollars on it. Many ads use celebrity endorsers, humor, rock music, or attractive young models, all of which have been shown to be effective with children and adolescents. Advertising makes smoking and drinking seem like normative activities and may function as a “super-peer” in subtly pressuring teenagers to experiment. Research has revealed that advertising may be responsible for up to 30% of adolescent tobacco and alcohol use (White, 2006). Scenes with smoking remain common in movies and, to a lesser extent, on prime-time television. Hollywood seems to use smoking as a shorthand for troubled or antiestablishment characters, but the smoking status of the actors themselves is also influential in whether their characters will smoke on-screen. On prime-time television, 19% of shows portray tobacco use, and approximately one-fourth of them depict negative statements about smoking (Tsitsi & Simbarashe, 2010). Alcohol remains the number one drug portrayed on American television: 1(one) drinking scene is shown every 22 minutes, compared with one smoking scene every 57 minutes and one illicit drug use scene every 112 minutes. On Music Television (MTV), teenagers can see alcohol use every 14 minutes (Sullivan *et al.*, 2006).

Cost of Drugs

In the United States, the average inflation- and purity-adjusted prices of heroin, cocaine, and cannabis decreased by 81%, 80% and 86% respectively between 1990, 2007 and 2010, whereas average purity increased by 60%, 11%, and 161% respectively (Ngesu *et al.*, 2008). Similar trends were observed in Europe, where during the same period the average inflation-adjusted price of opiates and cocaine decreased by 74% and 51% respectively. In Australia, the average inflation-adjusted price of cocaine decreased 14%, while the inflation-adjusted price of heroin

and cannabis both decreased 49% between 2000 and 2010. During this time, seizures of these drugs in major production regions and major domestic markets generally increased (Mweu, 2010).

Prices for cocaine and methamphetamine have risen for the fourth quarter in a row, a trend law enforcement officials say indicates supply has dropped. A gram of pure cocaine was costing about \$137 in September 2010, up from \$93 in October 2006, according to a DEA database that analyzes seized illegal drugs. A gram of pure methamphetamine was costing \$245 in September 2010, up from \$133 in October 2006. The DEA uses the database to gauge illegal drug markets. High prices and low purity generally indicate a short supply. Dealers often use filler ingredients to stretch a drug supply (Okonza *et al.*, 2009).

Various illegal drugs such as cocaine, heroin and marijuana have become cheaper and stronger over the past two decades, despite increases in drug seizures by authorities fighting the global illegal drug market (Oteyo & Kariuki, 2009).

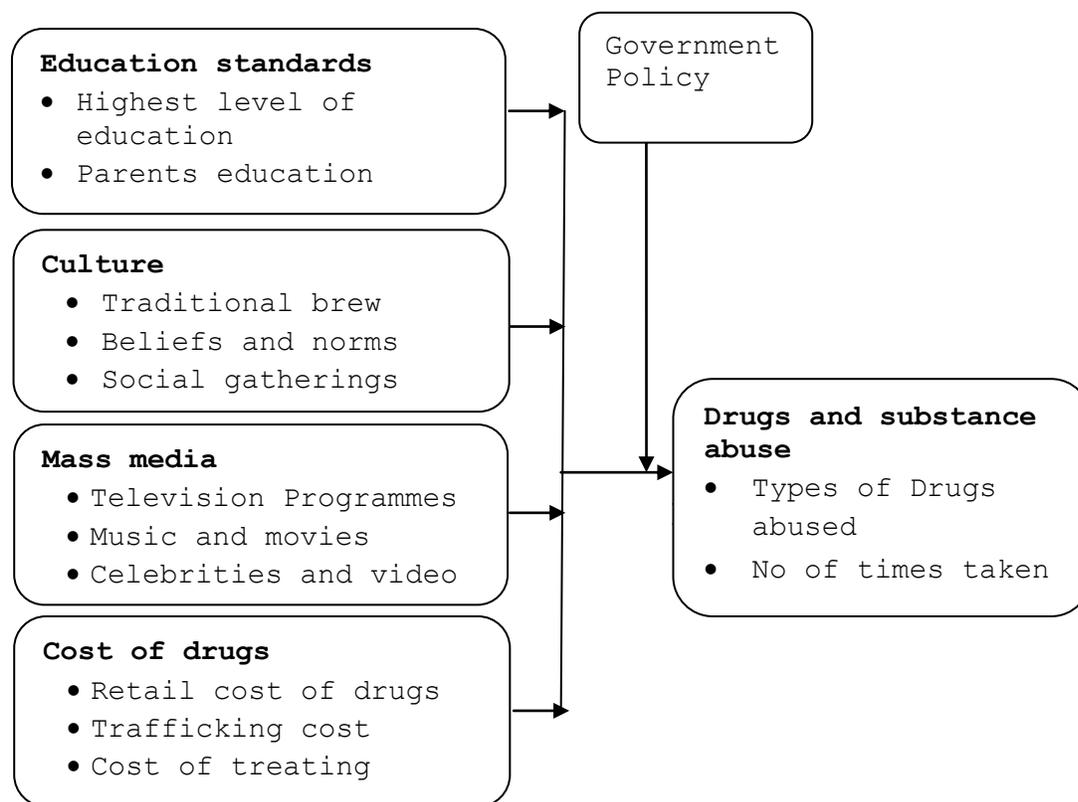
Narcotics in Kenya are highly pure (usually above 80 percent), readily available, and relatively inexpensive. A quarter gram of heroin costs between 100 and 200 Ksh (\$1.25-\$2.50). Even at these low prices, however, most addicts quickly have to turn to crime to support their habits (Otieno & Ofulla, 2009).

Although the cost of drugs and substance has been fluctuating, there is no empirical evidence of studies showing how it influences drugs and substance abuse. For instance, it would be expected that when the prices of drugs and substance go down their consumption would increase.

Conceptual Framework

This study sought to investigate the causes of drugs and substance abuse in Mombasa County. The dependent variable in this study was drugs and substance abuse while the independent variables were education standards/levels, culture, mass media and cost of drugs.

Intervening Variable



Independent Variables

Figure 1 Conceptual Framework

Research Methodology

This study used descriptive research design. Since this study sought to establish the causes of drug and substance abuse among the youth in Mombasa County, descriptive research design was the best design. The target population for this study was all the youth in rehabilitation centers in Mombasa. The target population was therefore 298. This study used a stratified random sampling to select 30% of the target population. According to Cooper and Schindler (2006) a sample size of between 10 and 30% is a good representation of the target population. The sample size was 89 participants who included 66 youths in rehabilitation centers, 3 counselors and 20 National Administrators.

Table 1 Sample Size

Institutions	Rehabilitation centers	Target Population	Sample size	Percent
Rehabilitation Centers	Reach Out Rehabilitation Center	42	13	14.61
	Mewa Rehabilitation Centre	87	26	29.21
	Coast General Hospital	91	27	30.34
Government	Counselors	11	3	3.37
	National Administration	67	20	22.47
	Total	298	89	100.00

This study used primary data. Semi-structured questionnaires were used in this study to collect data. The questionnaires comprised of both the open ended and closed ended questions. The open ended questions gave the respondents an opportunity to express their feelings and behavior in relation to the research questions. On the other hand, interviewing involves asking questions and getting answers from participants in a study. This study conducted face to face interviews.

Quantitative data was analysed by use of Statistical Package for Social Sciences (SPSS) version 21. In addition, descriptive and inferential statistics were used in this study. Descriptive statistics such as percentages, frequencies, measures of central tendencies (mean) and measures of dispersion (standard deviation and co-efficient of variation) were used to describe the characteristics of the target population. Data was then presented in graphs and tables. Further, a multiple regression analysis was used to establish the relationship between the dependent and the independent variables.

The multivariate regression model was;

$$Y = \beta_0 + \beta_1X_1 + \beta_2X_2 + \beta_3X_3 + \beta_4X_4 + \epsilon$$

Where: Y = drugs and substance abuse among the youth; β_0 = Constant Term; β_1 , β_2 , β_3 , β_4 and β_5 = Beta coefficients; X1= education standards; X2= culture; X3= mass media; X4= cost of drugs ; ε = Error term

Research Findings

The study had a sample size of 89 but managed to receive 68 responses. This makes a response rate of 76.40%. According to Babbie (2007) any response of 50% and above is adequate for analysis thus 76.40% formed an acceptable basis for drawing conclusions.

Level of Education and Drug and Substance Abuse

The counselors and government officers were further asked to indicate how the level of education influences drug and substance abuse among the youth. They reported that through education, the youths get to know that drugs are not good because they are harmful to their health and their brain. They also indicated that indulging in drugs at early level of education leads to dropping out, not being able to pursue high levels, which contributes to drugs and substances abuse and that majority of those affected are illiterate and they believe that joblessness and hopeless of life have led them to that menace. They also indicated that anyone at whichever level of education can fall prey but an educated youth is aware of the outcome of the substance abuse but uneducated youth is not aware of the side effects of drug and substance abuse. They further argued that the influence is of very great extent since it affects class 8 and form 4 exam results. In addition, a knowledgeable person has an idea of the side effects of those drugs and so they abuse them when they know what they gain from them and that students at the university level become addicts somehow despite high level of education they have got. The counselors and government officers further indicated that it all depends on individual behavior to adapt to social behavior.

Aspects of Education Level and Drug and Substance Abuse

The respondents were in addition asked to indicate the extent to which they agreed with the following statements in relation to education level and drug and substance abuse. The responses were as follows.

Table 1 Aspects of Education Level and Drug and Substance Abuse

	Mean	Std. Deviation
Low education is a risk factor to drug and substance abuse	4.1765	.90355
Individuals with the lowest level of schooling are most of the times heavy smokers and heavy drinkers	3.618	1.0735
Parents education has an effect on drug and substance abuse	3.1471	1.07682
Training on the effect of drug and substance abuse reduces abuse	3.7059	1.31494

According to findings, the respondents indicated with a mean of 4.1765 and a standard deviation of 1.90355 that low education is a risk factor to drug and substance abuse. They further indicated with a mean of 3.7059 and a standard deviation of 1.31494 that training on the effect of drug and substance abuse reduces abuse. In addition, the respondents indicated with a mean of 3.618 and a standard deviation of 1.0735 that individuals with the lowest level of schooling are most of the times heavy smokers and heavy drinkers. Moreover, the respondents indicated with a mean of 3.1471 and a standard deviation of 1.07682 that parents' education has an effect on drug and substance abuse.

Culture and Drugs and Substance Abuse

The counselors and government officers were further requested to indicate how culture influences drug and substance abuse among the youth. They indicated that during ceremonies like burials, circumcision, wedding and others, drinking is part of culture and youths have to practice their cultures. They further reported that some youths believe that if one is not among those who abuse drugs then they are losers. The counselors and government officers further indicated that in some cultures, these drugs are allowed for consumption as it is legalized while others indicated that the culture of friend that one is involved with influences one's use of drugs. In addition, other counselors and government officers indicated that youths will want to be identified with their culture so if their culture allows, they will use drugs. If their culture does not allow it, most youths will not indulge in drug and substance abuse. Other counselors and government officers stated that no culture encourages the youth to use drugs but the modern culture glorifies the use of drugs. They also stated that funeral gatherings and cultural dances where there is use of traditional brews and tobacco sniffs influences drug and substance abuse among the youth. The counselors and government officers also indicated that among the mijikendas during the customary weddings, youth should celebrate with liquor and in such activities they continue to use alcohol and later on they change to other brews. Further, the counselors and government officers indicated that Mombasa County holds weddings more often during the holiday season. The counselors and government officers also stated that some communities smoke bhang or cigarettes to play drums and this exposes the children to drugs.

Aspects of Culture Influencing Drug and Substance Abuse

The respondents were also asked to indicate the extent to which the stated factors influence drug and substance abuse. The results are shown below.

Table 2 Aspects of culture influencing drug and substance abuse

	Mean	Std. Deviation
Traditional brew	3.5000	1.05169
Traditional social gatherings	3.6471	.91725
Community beliefs and norms	3.0294	1.14111

According to the findings, the respondents indicated with a mean of 3.6471 and a standard deviation of 1.91725 that traditional social gatherings influence drug and substance abuse to a great extent. Further, the respondents indicated with a mean of 3.5000 and a standard deviation

of 1.05169 that traditional brew influences drug and substance abuse to a great extent as well. In addition, the respondents indicated with a mean of 3.0294 and a standard deviation of 1.14111 that community beliefs and norms influence drug and substance abuse to a moderate extent.

Mass Media and Drugs and Substance Abuse

The counselors and government officers were asked to indicate how mass media influences drug and substance abuse among the youth. The positive influences of the mass media that were cited include creating awareness to understand the effect of drugs, exposing the experiences of others and how they work/ uses and lack of prescriptions, and it is a platform for giving detailed and more information relating to drug issue and publicly talking on drug effects. Other counselors and government officers indicated that by advertising some of the brands at each commercial break make the youth develop the urge of wanting to find out maybe the taste and smell and strength over the other. In addition, youths who do not know how to inject or how to sniff learn from the media, and specifically movies involving drug activities influence youths into this menace very much. The counselors and government officers also stated that the media was advertising the drugs through television with colorful wallpapers even though they print the age limit using celebrities' actions and alcohol brands they use. They added that the media should teach the effects of drugs in the places of worship, schools and madrassa. The media affects drug and substance abuse through advertising, in styling and promotions whereby they use strong young men showing that drugs have no effect on people. . They also cited that mass media influences the youths in terms of accessibility to drugs and they get direct communication with the sellers.

Aspects of Mass Media and Drugs and Substance

The respondents were further requested to indicate the extent to which they agreed with various statements in relation to mass media and drugs and substance. The results were as shown in the table below.

Table 3 Aspects of Mass Media and Drugs and Substance Abuse

	Mean	Std. Deviation
Advertisements of alcohol or cigarettes in the mass media lead to drug and substance abuse	3.5294	1.37588
watching movies is a risk factor to drug and substance abuse	3.7647	.81868
television programs and movies contain appreciable amounts of substance use	3.8235	.99911
unlike traditional advertising, media depictions of legal drugs are generally positive and invite no criticism because they are not viewed as advertising	3.9118	.86577
many adverts on drugs use celebrity endorsers, humor, rock music or attractive young models	4.1765	.93649
video characters using alcohol and cigarettes have the potential to influence the attitude concerning acceptability of the use of drugs	4.3824	.65202

According to the findings tabled above, the respondents indicated with a mean of 4.3824 and a standard deviation of 1.65202 that video characters using alcohol and cigarettes have the

potential to influence the attitude concerning acceptability of the use of drugs. The respondents further indicated with a mean of 4.1765 and a standard deviation of 1.93649 that many adverts on drugs use celebrity endorsers, humor, rock music or attractive young models. Further, the respondents indicated with a mean of 3.9118 and a standard deviation of 1.86577 that unlike traditional advertising, media depictions of legal drugs are generally positive and invite no criticism because they are not viewed as advertising. Additionally, the respondents indicated with a mean of 3.8235 and a standard deviation of 1.99911 that television programs and movies contain appreciable amounts of substance use. Further, the respondents indicated with a mean of 3.7647 and a standard deviation of 1.81868 that watching movies with drug habits is a risk factor to drug and substance abuse. The respondents further indicated with a mean of 3.5294 and a standard deviation of 1.37588 that advertisements of alcohol or cigarettes in the mass media lead to drug and substance abuse.

Cost of Drugs and Usage on Drugs and Substance Abuse

The counselors and government officers were requested to indicate how the cost of drugs influences drug and substance abuse among the youth. They indicated that if the price is too low the youth can afford to buy it especially substances like bhang, mogokaa (miraa), local brews which are sold at a cheaper price thus making them easily affordable. In addition, cheaper drugs are being abused most and that selling small units of drugs makes it affordable to the abusers. The counselors and government officers further added that the cost of purchasing drugs is a little bit higher thus resulting to stealing and other vices. Others indicated that since many of the drug users are unemployed they tend to turn to theft and burglary to sustain their addiction to drugs and that change in cost influences addicts to criminal acts due to the high cost of drugs. The counselors and government officers added that scarcity push the cost high thus influencing the need to find them.

Cost of Drugs in Kenya

The respondents were further asked to indicate the cost of the following drugs in Kenya shillings. The findings are tabled below.

Table 4 Cost of drugs in Kenya

	Mean (Ksh)	Std. Deviation
mandrax	419.4118	145.30931
miraa	623.5294	366.22466
tobacco	61.0294	69.21398
alcohol	137.6471	127.54224
heroin	201.7647	57.60211
cocaine	3478.5294	2050.54484
glue	22.0588	10.59714
petrol	82.5882	30.46221

According to the findings, the respondents indicated the cost of cocaine is Ksh3478.5294 on average. Also, the respondents indicated the cost of miraa is Ksh 623.5294 on average. Further, the respondents indicated the cost of Mandrax is Ksh 419.4118 on average. Additionally, the cost of heroin is Ksh 201.7647, cost of alcohol is Ksh 137.6471, cost of petrol is Ksh 82.5882, cost of tobacco is Ksh 61.0294 and cost of glue is Ksh 22.0588 on average.

Cost of Treating Effects of Drugs and Substances

The counselors and government officers were requested to indicate how the cost of treating adverse effects of drugs and substances is. They indicated that the cost is very high and that treatment is expensive thus making it a challenge to combat the drug menace. They also indicated that when victims are sent to rehabilitation centers, they are not given enough care and that this is made worse by the fact that costs are expensive as it takes about a year to rehabilitate drug addiction. They also added that the cost of treating adverse effects of drugs are very high considering a youth who has been using drugs and happens to contract cancer which is not only a dreadful disease but an expensive one to treat.

Drugs and Substance Abused

The respondents were also asked to indicate which of the following drugs they have ever abused. The results are indicated in the table below.

Table 5 Drugs and substances abused

Drug	Frequency		Percent	
	Yes	No	Yes	No
Mandrax	4	30	11.8	88.2
Miraa	25	9	73.5	26.5
Tobacco	22	12	64.7	35.3
Alcohol	28	6	82.4	17.6
Heroin	20	14	58.8	41.2
Cocaine	6	28	17.6	82.4
Glue	5	29	14.7	85.3
Petrol	4	30	11.8	88.2

From the findings tabled above, 88.2% of the respondents indicated that they had never taken Mandrax, 73.5% indicated they had ever taken Miraa, 64.7% indicated they had ever taken Tobacco, 82.4% indicated they had ever taken Alcohol, 58.8% indicated they had ever taken Heroin, 82.4% indicated they had never taken Cocaine, 85.3% indicated they had never taken Glue while 88.2% indicated they had never taken Petrol. From these results, we can deduce that the youths in Mombasa had taken Miraa, Tobacco, Alcohol and Heroin but a few of them had taken Glue, Petrol, Cocaine and Mandrax.

Number of Times of Taking Drugs in a Day

The respondents were also asked to indicate the number of times they were taking drugs or substances above in a day. From the findings, 50% of the respondents indicated that they were taking drugs or substances 3 to 4 times in a day, 29.4% indicated they were taking drugs or substances 1 to 2 times in a day, 17.6% indicated they were taking drugs or substances 4 to 6 times in a day while 2.9% indicated they were taking drugs and substances more than 6 times in a day. From these findings, we can infer that youths in Mombasa were taking drugs or substances 3 to 4 times in a day depending with the type of drug.

Measures for Dealing With Drug and Substance Abuse

The counselors and government officers were requested to outline the measures that can be put in place to deal with drug and substance abuse. They indicated that the youth should be sent to the rehab centers, should be given some employments to keep them busy, should be counseled, should be encouraged to form youth groups and help them to self-employ themselves by starting small scale business and should be invited to talks concerning drugs and how to avoid them. They also indicated that there should be more rehabs constructed, education of the youth on drug abuse effects should be enhanced, introduction of youth centers where they will be training in activities and sports and public awareness about drug and substance abuse effect through media/ social media.

Further, the counselors and government officers indicated that parents and family members should be responsible for the upbringing the youth, little children should not have access to expensive cellphones that lead to their exposure to drugs and bad companies. In addition, forums which should involve youth themselves should be organized where the youth who have succeeded in life (role models) talk to the affected youths. The counselors and government officers, additionally, indicated that all the loopholes or routes which are used by drug dealers should be sealed; dealers should be traced and arrested, the supply and demand channel should be cut and that a high penalty should be put for all drug dealers. The counselors and government officers further indicated that gardens and museums/ meeting points should be banned, constant raids on drug dens to identify the dealers and arrest them should be carried out, and that efforts should be done to those not affected.

Regression Analysis

A multivariate regression analysis was used to establish the relationship between the dependent and the independent variables. The multivariate regression model was;

$$Y = \beta_0 + \beta_1X_1 + \beta_2X_2 + \beta_3X_3 + \beta_4X_4 + \varepsilon$$

Where: Y = drugs and substance abuse among the youth; β_0 = Constant Term; β_1 , β_2 , β_3 , β_4 and β_5 = Beta coefficients; X1= education standards; X2= culture; X3= mass media; X4= cost of drugs ; ε = Error term

Table 7 Model Summary

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
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1	.998 ^a	.995	.994	.03247
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The four independent variables that were studied, explain a variation 99.4% of drug and substance abuse among the youth in Mombasa County as represented by the R^2 . This therefore means that other factors not studied in this research contribute 0.6% of drug and substance abuse among the youth in Mombasa County. This shows that there are other factors that influence drug and substance abuse among the youth but the four factors that were studied had the highest influence.

Table 8: Analysis of Variance

Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	6.267	4	1.567	1485.977	.000 ^b
	Residual	.063	63	.001		
	Total	6.333	67			

The table 4.9 shows the analysis of variance. The results indicated that the model was significant since the p-value is 0.000 which is less than 0.05 thus the model is statistically significant in predicting how cost of drugs, education standards/levels, mass media and culture influence drug and substance abuse among the youth in Mombasa County. The F critical at 5% level of significance was 2.51. Since F calculated (1485.977) is greater than the F critical, the overall model is significant.

Table 9: Regression Coefficients

	Unstandardized Coefficients		Standardized Coefficients	t	Sig.
	B	Std. Error	Beta		
(Constant)	0.052	0.059		0.881	0.39
Education standards/levels	-0.321	0.09	-0.325	-3.567	0.012
Culture	0.102	0.049	0.111	2.082	0.024
Mass media	0.407	0.114	0.410	3.570	0.000
Cost of drugs	-0.033	0.016	-0.0038	-2.063	0.041

The regression equation was;

$$Y = 0.052 + 0.321 X_1 + 0.102 X_2 - 0.407 X_3 - 0.033 X_4 + \epsilon$$

The regression equation above has established that taking all factors into account (cost of drugs, education standards/levels, mass media and culture) constant at zero the drug and substance

abuse among the youth in Mombasa County will be 0.052 units. The findings presented also show that there is an inverse significant relationship between education standards/ levels and drug and substance abuse among the youth in Mombasa County as shown by a coefficient of 0.0321 (p-value=0.012). This shows that a unit increase in education level would lead to a 0.0321 reduction in drug and substance abuse among the youth in Mombasa County. In addition, there is a positive significant relationship between culture drug and substance abuse among the youth in Mombasa County in Kenya as shown by a coefficient of 0.102 (p-value=0.024). A unit increase in culture leads to a 0.102 increase in drug and substance abuse among the youth in Mombasa County.

Further, the findings show that there is a significant positive relationship between mass media and drug and substance abuse among the youth in Mombasa County as shown by a coefficient of 0.407 (p-value = 0.000). A unit increase in mass media would lead to a 0.334 increase in drug and substance abuse among the youth in Mombasa County. Lastly, there is an inverse significant relationship between cost of drugs and drug and substance abuse among the youth in Mombasa County as indicated by a coefficient of 0.033 (p-value = 0.041). This infers that mass media influences drug and substance abuse among the youth in Mombasa County most followed by education standards/level, culture and cost of drugs.

Conclusion

This study concludes that there is an inverse relationship between education standards/levels and drugs and substance abuse among the youth. Further, the study concludes that low education is a risk factor to drug and substance abuse. Training on the effect of drug and substance abuse reduces abuse. Individuals with the lowest level of schooling are most of the times heavy smokers and heavy drinkers.

This study also concludes that there is a positive relationship between culture and drugs and substance abuse among the youth. Traditional social gatherings and traditional brew influence drug and substance abuse to a great extent. The study additionally concludes that there are cultural practices that lead to drug and substance abuse among the youth. These include weddings, cultural dances, circumcisions, birth of a child among others.

This study further concludes that there is a positive relationship between the mass media and drugs and substance abuse among the youth in Kenya. The study also concludes that advertisements of alcohol or cigarettes in the mass media lead to drug and substance abuse. The study concludes also that mass media influences drug and substance abuse among the youth through negative publicity. However, mass media can be used to bring about public awareness on the adverse effects of various types of drugs.

Lastly, the study concludes that there is an inverse relationship between cost of drugs and drug and substance abuse among the youth in Kenya. The study also concludes that the cost of drugs like cocaine, miraa, Mandrax, heroin, alcohol and petrol is high and has been increasing. The study further concludes that the cost of treating adverse effects of drugs and substances is very high. Many of the drug users are unemployed and hence they tend to turn to theft and burglary to sustain their addiction to drugs and that change in cost influences addicts to criminal acts due to the high cost of drugs.

Recommendations

The study established that low education is a risk factor to drug and substance abuse. Therefore, this study recommends that education standards should be enhanced through cooperation between the government and the NGOs to ensure that many people acquire basic education in the area. Further, the government should come up with programs highlighting the adverse effects of drug use.

The study established that community beliefs and norms influence drug and substance abuse. This study recommends that local communities should be made aware of the adverse effects of their norms and culture especially when their youths end up engaging in drug use. There should be campaigns enlightening people in these communities about the adverse effects of drugs and substance abuse.

The study also established that the mass media influences drug and substance abuse among the youth to a very great extent. The study therefore recommends that strict policies be enforced to ensure that each broadcaster adequately informs the public on adverse effect of drug and substance abuse. This will help to dispel the wrong ideas people have of drug use.

The study established that cost of drugs influences drug and substance abuse among the youth to a very great extent. Therefore, the study recommends that the prices of all drugs be put at an all high to discourage consumption of these drugs. The high cost on legal drugs will also earn the country more tax revenue which can be used to campaign against drug use.

Areas for Further Research

This study sought to establish the causes of drug and substance abuse among the youth in Mombasa County. Being a case study, the findings of this study cannot be generalized to other counties in Kenya since various counties have different cultures and level of economy and hence further studies should be conducted in other parts of the country, both in the urban and rural areas. The study also recommends further studies on the role of peer pressure in drug and substance abuse among the youth in Kenya.

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