



Curbing Drug and Substance Abuse in Secondary Schools in Kenya; The Disconnect in School Community Intervention Strategies

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ABSTRACT

According to United Nations office on drugs and crime UNODC (2011), alcohol and drug abuse poses a great threat to the social economic fabric of nations worldwide. In spite of the governments' effort in the fight against drug and substance abuse in Kenya, the problem remains untamed. The study assessed the effectiveness of the school community in curbing drug and substance abuse (DSA) among secondary school students. Literature relating to various aspects of school community and curbing DSA in schools was reviewed. The study employed descriptive survey design. The study sample consisted of 35 head teachers and 407 students. Questionnaires were used to collect Data from head teachers and students. Content validity and reliability of the research instruments was ascertained. Descriptive statistics were used to analyse data. The findings of the study show that students obtain drugs from the school community. Lack of cooperation from parents and guardians was frustrating DSA intervention efforts in schools. The study concluded that the use of school community was not effective in curbing DSA in schools. The study recommended an integrated approach where different strategies or combination of strategies are used purposively for different DSA cases. Head teachers should collaborate with law enforcers, government agencies; NACADA, NGOs and FBOs to curb the supply and demand of drugs and substances. The Ministry of Education could review its policy on punishment and expulsion as regards to curbing alcohol and drug abuse among students. This paper is an extract of a study conducted in the year 2012 and 2013 in secondary schools in Nairobi County, Kenya.

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Introduction

Alcohol and Drug abuse among the youth is one of the major social problems in Kenya with identifiable manifestations in all strata of the socio - economic environment. Abuse of alcohol and drugs inhibits attainment of the individuals full potential be it in school or at the work place (NACADA, 2012). In England, about 53% of 14- to 15-year-olds are more likely to have been offered and taken drugs (Balding, 2005). In Kenya, alcohol is the most abused mind altering substance with a national prevalence of 13 % among Kenyans of 15-65 years and sometimes starts as early as below 11 years. This implies that long before students enrol into secondary schools, they could be abusing alcohol and drugs.

A drug is any natural or synthetic, licit or illicit substance that is used to produce physiological or psychological effects in human beings or higher order animals. Drug Abuse refers to the administration of any drug in a manner that diverts from approved medical or social patterns within a given culture. Drugs of abuse include alcohol, cigarettes, and bhang, *Miraa*, cocaine, heroine and prescription drugs (UNODC, 2008, 2011). Studies have shown that factors such as prolonged or traumatic parental absence, harsh discipline, and failure to communicate on an emotional level, and parental use of drugs may lead to or intensify drug abuse among young people (WHO, 1993 & Cheloti 2013). The school is the best place for drug abuse intervention and control since it is able to combine

formal classroom teaching and informal peer group influence processes of socialization to control learner behaviour (Khanyisile, 2005).

The community around the school can negatively or positively influence the behaviour of a school. NACADA (2006) and Muma (2006) recorded that the most common source of alcohol consumed by students was the community in the vicinity of the school and that drugs enter schools at the beginning of the term, as students carry them along with their personal effects. Wangai (2001) suggested that strategies should be geared towards community involvement where parents, religious leaders, provincial administration, play an active role in drug prevention programmes. Maithya (2009) emphasized that community members, starting with the family should instil moral values among the youth to help them become useful members of society. This is based on the fact that, in traditional African society, upbringing of children was a communal role and not only that of the immediate family (Maithya, 2009). School heads have power by virtue of their positions to enhance discipline in schools by punishing students caught engaging in drug abuse, enforce school rules, inspect students' belongings regularly and act on information given by the community about drug abusing students (Eshiwani, 1993).

In the United States, the Safe and Drug-Free Schools Program (SDFP) has been used to strengthen DSA preventive programs in and around the nation's schools (Martinez, 2004).

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Nigeria has established a comprehensive drug abuse education and prevention plan, which involves students, teachers, parents, and other members of the community (Odejide, 2006). In Kenya, one of the head teachers' management tasks is to foster good school community relations. Such relations are useful in yielding valuable information on threats such as DSA in the school.

Statement of the Problem

Alcohol and drug abuse is not only a dangerous behaviour but a risk factor to a host of other risky behaviours such as sexual violence, high risk sexual activities, suicide, and disruptive behaviours in school such as students' unrest, burning of schools, massive school dropout and dismissal academic performance (Cheloti, 2009 & Republic of Kenya, 2009). Strategies used to curb drug and substance abuse in schools have been found to be ineffective (Cheloti, 2013). This paper explains the role of parents, school boards of management (BOM), parent's teachers association (PTA) and the community living around schools in curbing DSA.

Research Objectives

The purpose of the study was to assess the effectiveness of the school community in curbing DSA among students in public secondary schools in Nairobi County. The objectives were to:

1. Establish the effectiveness of parental involvement in curbing Alcohol and drug and abuse in secondary schools.
2. Determine the effectiveness of school boards of management (BOM) in curbing Alcohol and drug and abuse in secondary schools.
3. Assess the effectiveness of school community in curbing DSA in secondary schools.

Significance of the study

DSA is a multifaceted problem that requires a multifaceted approach to tackle it decisively. Studies have shown that no single strategy however well structured can effectively deal with DSA in secondary schools and institutions of learning as a whole (Cheloti, 2013). The findings and recommendations could help the government restructure the overall policy framework for DSA intervention. The government could, based on this findings set up more DSA intervention and rehabilitation programmes in the country where students could find help. Head teachers may use the findings to strengthen, modify and enforce strategies used to curb DSA and enhance public and school community participation in the fight against DSA.

Literature review

Global and Regional Perspective of drug abuse

Drug use is as old as man. History tells that the Chinese used opium as a cure for dysentery before the 18th century. Britain and Holland exchanged opium grown in their colonies for tea and silk from China (Matzigulu, 2006). The opium war of 1839 between China and Britain was linked to drug trade. Drug control has been on the global agenda for more than a century and dates back to the Hague convention of 1912 (UNODC, 2007). In March 2009, United Nations member states committed to elimination or significant reduction in the global illicit drug supply and demand by 2019 (UNODC, 2010). The Interpol is reported to spend about 60% of its budget fighting drug related crimes (Ndirangu, 2004). Kenya government declared war against DSA in the early 1990's, with the establishment of the Anti-Narcotics police unit in 1983, enactment of stringent laws to counter trade and consumption of illicit drugs (Republic of Kenya, 2008) and establishment of NACADA.

Extent and Effects of Drug Abuse in Secondary Schools in Kenya

Drug and Substance Abuse is one of the major public health problems in Kenya. Its prevalence is estimated to be highest among young adults of ages 15-29 (Republic of Kenya, 2008). However studies have shown that children become drug dependants having suffered exposure to drugs from their abusing parents. Such children have a high propensity to become drug addicts long before their teenage (Munyoki, 2008). Drug abuse cuts across gender, race and Nationality and Kenya is fast becoming a "narcotic state" (Republic of Kenya, 2008). Surveys conducted indicate that there is an increase in the number of addicts especially in Nairobi, Mombasa and Malindi (Republic of Kenya, 2009). The report shows that Kenya is an important transit point for drugs and substances from sources in South America, to export destination in Europe and USA.

The inquiry conducted by the Kenya National Assembly select committee into students unrest found that some of the strikes and riots experienced in Kenyan schools in the year 2008 where school property was destroyed, and students' lives lost were caused by Drug and Substance Abuse among students (Republic of Kenya, 2009 and Ngigi, 2010). Kaguthi (2004) showed that drug abuse was on the increase and the worst affected schools are those in big towns, noting that Nairobi was worst hit. The study further explained that many public secondary schools in Nairobi County are day schools and students and drug peddlers intermingled freely on a daily basis. Students also access drugs during school outings as they are left to interact freely with those from other schools and members of the public (NACADA, 2006). The abuse of drugs causes major health, academic and discipline problems and is one of the greatest challenges for head teachers in public secondary schools that require comprehensive strategies to curb.

Strategies used by Head Teachers to Curb Drug and Substances Abuse in Schools

The head teacher implements educational systems and procedures in a school, takes care of students' welfare and provides a friendly environment for teaching and learning (Mullins, 2005). They spell out the aims and objectives to be achieved in the school and strategies to direct individual efforts (Kombo, 1998). A strategy is a tactic for doing something, or a plan for achieving a goal (Fowler and Fowler, 1988).

Eneh and Stanley (2004) explained that majority of drugs and substance abuse among the youth starts in school, and therefore the school population is the best place for early detection, prevention and management of Drug and Substance Abuse. Kaguthi (2004) and the NACADA team surveyed drug abuse among the youth aged between 10 and 24 years and found that the majority of the students who abused substances were in secondary schools and universities but did not explore strategies for head teachers to control this problem, hence the need for this study. A survey by preventive health education on youth involvement in drugs and responsibility in prevention showed that 94 percent of respondents believed that DSA is a matter to be dealt with by teachers (Ndirangu, 2004). King'endo (2007) studied the incident and extent of drug abuse among secondary school students in Nairobi, 64 percent of the head teachers interviewed disagreed that drug abuse was rampant in their schools, while 21 percent did not know whether students abuse drugs or not. This shows the disclaimer that compromises strategies used to curb DSA as

some head teachers make no effort to use them while DSA continues to affect learners.

This paper assesses the role of the school community, exploring the use of police, religious organisations, Ministry of Education policies on DSA, local administration, PTA and BOG to curb Drug and Substance Abuse in schools.

Effectiveness of School Community Involvement in Curbing DSA

School community refers to all persons who directly or indirectly interact with the school and who can influence the behaviour or climate of the school. It also includes those whom the school is in contact with. School community includes; school support staff, school board of management (BOM), parent's teachers association PTA and school committees, the community living, working or operating business around the school. NACADA (2006) and Muma (2006) found that the most common source of alcohol was the community around the school supplying about 42 - 55 percent of the total alcohol consumed by students. They further showed that drugs enter schools at the beginning of the term. Some are for personal use while others are sold to fellow students. Drug peddlers also use sick students who leave school to seek treatment to deliver drugs to other students. Other avenues used include students who empty prescription medicine bottles and replace with illicit drugs as indicated in the survey by (NACADA, 2013).

According to Botvin (2000), school heads should adopt strategies geared towards educating learners on dangers of drug abuse to prevent indulgence and enable them avoid high-risk situations where they are likely to experience peer pressure to smoke, drink, or use drugs. Wangai (2001) called for concerted efforts between the police, local provincial administration, the community around the school and parents to eliminate drugs from the school environment. The study further called on Head teachers to use parents' day, annual general meetings, and prize giving days to sensitise parents on dangers of DSA and elicit their support in curbing the menace. They should involve respected persons and role models in the community to discuss ADA during such occasions. Odejide (2006) explained that drug policies that are skewed towards formal control measures may not encourage community participation and recommended well-coordinated civil society participation in the control of drug problems.

The Disconnect Within school community ADA Preventive Strategies in Kenya

Intervention strategies targeting Alcohol and Drug abuse are carried out by various sectors of society. Efforts to curb DSA in schools are fairly known to the public. They are documented in syllabuses, thematic drama and music, guidance and counselling and school rules. Strategies used by Faith Based Organisation are enormous, prolonged and sometimes indirect. They start as early as before school. Teaching of morality, values, norms and positive attitudes sometimes exclude the mere mention of DSA. Such faith based classes are so informal and easily disrupted that follow up on the learners is near impossible. These strategies remain unknown to the schools that receive the children into a formal curriculum. Hence the continuity of such programmes is hampered. The transition of learners from one level of education to the other (primary to secondary to university) does not provide level administrators with a forum to share critical information on the learner's DSA status. School leaving certificates are the only documents that describe learner characteristics to the next receiving school; they are

however too limited and public hence cannot carry sensitive information such as students' DSA status. This leads to transfer of DSA cases from one level of education to another, further complicating the prevention process. Local communities' through the provincial administration also play preventive role in curbing DSA. However their role is more disharmonious and more skewed towards adult abusers and suppliers. There is no known deliberate effort towards curbing activities that fuel child Alcoholism like night clubs, funeral vigils in some communities and child participation in the alcohol and drug production process. NACADA is and has done a lot in prevention of DSA in Kenya but the authority is not in control of strategies used at school and by FBOs. This sought of an independent approach to a rather common problem is a major setback in the war against DSA. It is a case of fighting a common enemy while the right hand is unaware of strategies of the left hand.

Theoretical Framework

The study is based on the social resistance skills theory as proposed by Gilbert Botvin in (1970) and the drug and alcohol theories of aggression by Geen (1990) and Berkowitz (1993). The social resistance skills theory argues that social and psychological factors are central in promoting the onset of cigarette smoking and later, drug and substance abuse. The social resistance theory holds that drug abuse result from pro-drug social influences from peers, persuasive advertising appeals, and media portrayals encouraging drug use, along with exposure to drug-using role models. Based on this theory, head teachers need to adopt strategies that help students recognize and deal with social influences to use drugs from peers and the media in order to control the DSA problem. The drug and alcohol theories of aggression by Geen (1990) and Berkowitz (1993) argue that alcohol consumption produces aggressive behaviour in the abusers. The alcohol theories may be used to explain aggressive behaviour of students witnessed in secondary schools in Kenya where DSA has been listed as one of the major causes of violence and strikes as recorded in studies by (Kinyanjui, 1976; Mungai, 2007; Kin'gendo, 2007; and Cheloti, 2009).

Research Design

Kombo and Tromp (2006) define a research design as the structure of the research or the "glue" that hold all the elements in a research project together. The study adopted a descriptive survey design the naturalistic survey design. Mugenda (2008) explains that descriptive design studies are used when examining social issues that exist in communities. This design was deemed appropriate for this study since Drug and Substance Abuse is a social problem which has permeated the society and all students are at a potential risk.

Findings

Factors Contributing to Drug and Substance Abuse in Schools

World Health Organization (1993) showed that factors such as prolonged or traumatic parental absence, harsh discipline, failure to communicate, and parental use of drugs may lead to or enhance drug abuse among young people. However students in their adolescent stage may take drugs due to peer pressure or for fun. Head teachers were asked to list the main causes of drug abuse among students in Nairobi County. The findings are presented in Table 1.

The results show that ease of access and availability of drugs and substance is the main cause of DSA as indicated by majority of the head teachers (87.1%).

Table 1. Head Teachers Responses on Factors Contributing To Drug and Substance Abuse

Cause	Frequency	Percentage
Peer pressure	26	83.9
Poor parenting	17	54.8
Large amounts of pocket monies	8	25.9
Ease of access to drugs and substances /Availability	27	87.1
Lack of awareness	9	29.0
They know they will get away with it	13	41.9

This is of great concern as the country continues to record increase in the rate at which drugs and substances are peddled in the country and as such infiltrating school going youth. Peer pressure was cited by 83.9% of the head teachers as leading to DSA among students; 54.8% of the head teachers cited poor parenting as another major cause of DSA; 41.9% of the head teachers indicated that students know that they will get away with DSA since the head teachers have been barred from expelling students and corporal punishment is prohibited by the children's Act (2001). Other causes were said to include lack of awareness as indicated by 29% of the head teachers and large amounts of pocket monies as indicated by 26% of the head teachers. These findings agree with Maithya (2009) that peer pressure is one of the leading factors that contribute to DSA in schools.

Similarly, the students were asked the causes of drug abuse and the results are shown in Table 2.

Table 2. Students Responses on Factors Contributing to Drug and Substance

Cause	Frequency	Percentage
Peer pressure	393	96.6
Family background	122	30.0
Poverty	7	1.7
Large amounts of pocket monies	224	55.0
Lack of proper guidance	156	38.3
Indiscipline and youthful rebellion	137	33.7
Stress and depression	18	4.4
Lack of information/ignorance	81	19.9

The results show that peer pressure is the main cause of DSA as indicated by majority (96.6%) of the students. This shows that students need information that could help them resist peer pressure. This may come in terms of lessons or guidance and counselling sessions. Large amounts of pocket monies was cited by 55.0% of the students as leading to DSA among students; 38.3% of the students cited lack of proper guidance as a factor contributing to DSA. This calls on parent's cooperation to give students moderate pocket money that caters for their basic school needs; 33.7% of the students indicated that indiscipline and youth rebellion contributed to DSA and 30.0% of the students indicated that family background contributed to DSA. Other causes were said to include lack of Information/Ignorance as indicated by 19.9% of the students; Stress and Depression as indicated by 4.4% of the students and poverty as indicated by 1.7% of the students.

The head teachers and students were of the view that peer pressure was a leading cause of drug abuse; other key contributing factors were large amount of pocket money, indiscipline and rebellion and poor parenting. The findings of this study disagree with Makokha (1994) which stated that ease of availability was the leading cause of DSA in secondary schools in Nairobi County.

The students were asked whether they had ever taken drugs and from the sampled schools, majority of them (326) representing 80.1% indicated that they have never taken drugs while 81 representing 19.9% of the students indicated that

they had taken drugs. The students who indicated that they had taken drugs were asked to state their reasons for engaging in drug abuse. The responses are shown in Table 3.

Table 3. Students Responses on Reasons why they Take Drugs and Substances

Drug	Frequency	Percentage
Experimenting and Curiosity	76	93.8
Influence from friends	25	30.8
Fun	12	14.8

Table 1 shows that majority of the students (93.8%) indicated that they started taking drugs and substances so as to experiment and out of curiosity; 30.8% indicated that they took drugs due to influence from their friends, while 14.8% indicated that they started taking drugs for fun. This shows that lack of information on dangers of drugs is leading cause of DSA among students and head teachers should endeavour to empower students with this information.

Commonly Abused Drugs and Substances

Kaguthi (2004) and Kin'endo (2007) explained that drugs and substances are abused because they are cheap and readily available. They identified alcohol, cigarettes, *Miraa* and *hang* as the most abused drugs due to their availability. Head teachers were asked to name the drugs commonly abused by students in the schools. The results are shown in Table 4

Table 4. Head Teachers' Responses on Commonly Abused in the Schools

Drug	Frequency	Percentage
Bhang	21	67.7
Alcohol	18	58.1
<i>Miraa</i>	19	61.2
Capsules	6	19.4
Cigarettes	24	77.4
Tobacco	8	25.9

The head teachers indicated that the most commonly abused drugs and substances were cigarettes as indicated by 77.4% of the head teachers followed by *hang* as indicated by 67.7% of the head teachers, then *miraa* as indicated by 61.2% of the head teachers and alcohol as indicated by 58.1% of the head teachers. Other drugs and substances abused include: tobacco as indicated by 25.9% of the head teachers and capsules as indicated by 19.4% of the head teachers. Similarly, the students were asked to name the drugs that were commonly abused by students in the schools. Table 5 show the results.

Table 5. Students' Responses on Commonly Abused in the Schools

Drug	Frequency	Percentage
Bhang	356	87.5
Alcohol	313	76.9
<i>Miraa</i>	318	78.1
Cigarette	247	60.7
Tobacco	25	6.1
Ethanol	21	5.2
Cocaine (<i>Unga</i>)	18	4.4
Heroin	11	2.7

The students indicated that the most commonly abused drug was *hang* as indicated by 87.5% of the students; followed by *miraa* as indicated by 78.1% of the students, then alcohol as indicated by 76.9% of the students and cigarettes as indicated by 60.7% of the students. Other drugs and substances abused include: tobacco as indicated by 6.1% of the students; ethanol as indicated by 5.2% of the students; cocaine as indicated by 4.4% of the students and heroin as indicated by 2.7% of the students. Cocaine and heroin are

very expensive drugs and this could explain the reason why a small percentage, (4.4% and 2.7%) were abusing them. Findings from the head teachers and students show that the most abused drugs were cigarettes, bhang, alcohol and *Miraa*. On the variation in the responses, the researcher observed that some students may have been camouflaging bhang in cigarettes or some head teachers could not distinguish bhang from cigarettes. These findings agree with the findings of a baseline survey conducted by Kaguthi (2004) and Kin'gendo (2007) that further explained that commonly abused drugs were bhang, cigarettes and alcohol and to explain that these substances were cheap and readily available.

School Community Participation in Curbing DSA

The head teachers and students were given a number of statements seeking to establish how the school community participates in curbing DSA among students in secondary schools.

Table 6. Head Teachers' Views on the Role of School Community in curbing DSA

Statement	Strongly Agree		Agree		Neutral		Disagree		Strongly Disagree		Mean Score
	f	%	f	%	f	%	f	%	f	%	
Students obtain drug supplies from community around the school	22	71	7	23	0	0	2	6	0	0	4.58
The local community know drug abusing students	7	23	23	74	1	3	0	0	0	0	4.19
Drug peddlers are known by local community	12	39	17	55	0	0	2	6	0	0	4.26
Poor parenting contributes to DSA in schools	13	42	17	55	0	0	1	3	0	0	4.35
PTA and BOG are involved in tackling DSA problems in the school	9	29	15	48	2	6	5	16	5	0	3.90
Local community is involved in tackling DSA problems in the school	1		3		6		16		5		2.32

A rating of "Strongly Agree" had a score of 5 assigned to it; "Agree" was assigned a score of 4; "Neutral" was assigned a score of 3; "Disagree" had a score of 2 assigned to it; "Strongly Disagree" was assigned a score of 1. A weighted mean score was used to interpret the results. A mean score of

5-3.5 was taken to mean that the students agreed with the statement. A mean score of 3.4 to 2.6 was taken to mean that the students were not sure or neutral. A mean score of 2.5 to 1 was taken to mean the students did not agree with the statement.

The results are analysed, discussed and interpreted beginning with findings from the head teachers followed by those of the students. Table 6 show the responses from the head teachers.

The results show that the students obtain drug supplies from the community around the school as indicated by a mean score of 4.58. The head teachers were affirmative that the local community knows the students abusing drugs and substances. There was agreement that the drug peddlers are known by local community as indicated by a mean score of 4.26. Poor parenting was also blamed for DSA cases in schools as a score of 4.35 was posted. The statement regarding whether the PTA and BOG are involved in tackling DSA problems in the school elicited mixed reactions as indicated by a mean score of 3.26.

Table 7. Students' Views on the Role of School Community in Curbing DSA

Statement	Strongly Agree		Agree		Neutral		Disagree		Strongly Disagree		Mean Score
	f	%	f	%	f	%	f	%	f	%	
Students obtain drug supplies from the community around the school	225	55	110	27	33	8	3	1	36	9	3.35
The local community know drug abusing students	161	40	103	25	29	7	60	15	54	13	2.97
Drug peddlers are known by local community	231	57	137	34	17	4	8	2	14	3	2.29
Poor parenting contributes to DSA in schools	255	63	109	27	25	6	9	2	9	2	4.06
PTA and BOG are involved in tackling DSA problems in the school	93	23	82	20	136	33	29	7	67	16	4.81
Local community is involved in tackling DSA problems in the school	22	5	44	11	36	9	206	51	99	24	4.48

The students were given a number of statements seeking to establish how the school community participates in curbing DSA among students in secondary schools. The results are shown in Table 7.

The results show that the students were neutral on whether student drug abusers obtain drug supplies from the community around the school as indicated by a mean score of 3.35. They further disagreed that the local community knows

the students abusing drugs and substances and that the drug peddlers are known by local community as indicated by a mean score of 2.97 and 2.29 respectively. The head teachers on the other hand agreed that Students obtain drug supplies from the community, the local community know drug abusing students and Drug peddlers are known by local community. This divergent of views implied that students go to a great length to conceal information on DSA. This, the researcher observed could compromise the fight against DSA.

Both head teachers and students agreed that poor parenting contributes to increase in levels of DSA in schools with head teachers posting a mean score of 4.35 while students posted a mean score of 4.06. Regarding whether the PTA and BOG are involved in tackling DSA problems in the school, both head teachers and students agreed as indicated by a mean score of 3.90 for head teachers and 4.81 for students. They further indicated that the local community is involved in tackling DSA problems in the school as indicated by a mean score of 4.48 but head teachers disagreed with the statement and further indicated that the local community was rarely involved in tackling DSA problems in the school as indicated by a mean score of 2.32. The researcher observed that Government policy on community policing requires that members of the public should report elements of lawlessness sited in their community to enable police and provincial administrators deal with the problem.

Given that the BOG and PTA are key stake holders in the management of schools, there is need for them to be actively involved in finding solutions to problems affecting the proper functioning of the schools. These findings disagree with Ogachi (2002), who found that the community was very instrumental and supportive in assisting the school management in all matters relating to resource mobilization, discipline and financing school programmes. However Ogachi did his study in Kajjado and Kisii counties which are in a rural set up as opposed to this study conducted in the capital city of Nairobi.

The students were asked about how they thought the school community could minimize DSA in schools. Of the students' responses, 76% indicated that the school community and the Government should work together to ensure that drugs and substances are eradicated from the society. The students indicated that this should be the main objective of the school community because by removing the supply of the drugs and substances the schools will be ridded of drugs. Students indicated that school administrators, parents, BOG, church leaders, Government agencies and the provincial administrators need to liaise and work towards this objective.

The students were asked to indicate how parents could assist in curbing DSA in schools. From the responses, 64% indicated that parents need to be more actively involved in the upbringing of the students and follow up on them in school, at home and in the society. This would go a long way in monitoring; guiding and ensuring students get to know the dangers of DSA. This would also ensure the parents are informed on the drugs issues among students. However, 23% reported that parents need to stop taking sides with their children when they are caught being involved in DSA. They further explained that this attitude encourages students to engage in DSA as they have the backing of their parents. The head teachers also indicated that parents should assist in curbing DSA in schools. All the head teachers stated that there is need for parents to seek information on DSA and discuss with their children. They also stated that the parents should

stop antagonising school administrators with regard to DSA problem among students.

The study also sought the views of the students on how PTA and BOG could be involved in curbing DSA in schools. Of the total sampled students 63% indicated that the PTA and BOG could encourage and incorporate other stakeholders in the schools community especially parents and Governmental agencies in curbing DSA. They could use parents meetings and open days to sensitize parents on the dangers of DSA and encourage them to cooperate with school authorities as opposed blaming them whenever cases of DSA were cited in the school. They could also support the school to identify and invite drug abuse experts to speak during parents meetings to ensure that parents are knowledgeable in DSA matters. Another 10% of the students indicated that the BOG and PTA should authorise severe punishment to students caught in DSA in the schools.

On the other hand, the head teachers indicated that the BOG and PTA should attend meetings and encourage all parents to attend meetings to foster interactions between the school administrators and the parents. In so doing, the parents may use such forums to suggest strategies and critique existing ones with an aim of improving them. Of the head teachers who responded, 63% indicated that the PTA and BOG should persuade, encourage and mobilise other stakeholders in the schools community especially parents and Governmental agencies to participate in tackling the Drug and Substance Abuse problem. The head teachers also indicated that the BOG should help identify experts to facilitate drug abuse awareness campaigns in schools. The head teachers were also asked about how they thought the school community could assist in minimizing DSA among students. All the head teachers indicated that the school community should work towards eliminating the supply of drugs to students since drug suppliers were known by members of the community.

Head teachers were asked to name the challenges they encountered in fighting drug abuse in schools. They highlighted the presence of drug barons in the school community indicating that this was complicating their efforts to curb DSA. One head teacher; Nelson said, "The flashy lifestyles enjoyed by the drug barons made it hard to persuade and convince the students that drugs were dangerous; as some students viewed it as a lucrative business." Another head teacher; Jonah said, "Some students were associated with powerful drug barons, who used them as drug suppliers."

The head teachers blamed the Government for failing to decisively deal with the drug problem in the society. These findings agrees with Khanyisile (2005) who argues that there is official ambivalence towards substance use in Kenya citing the example of alcohol and tobacco being a cause of deadly diseases, yet remain legal with the two substances being a source of tax-income; the brewing and use of indigenous alcoholic drinks is mainly illegal, yet the production and use of alcoholic drinks on an industrial scale is extensive and legal. It is such contradictions that further complicate the fight against drug abuse in learning institutions.

The KIPPRA (2006) shares similar sentiments when they found that most drugs are taken in other places other than school. The study showed that alcohol is taken in a pub, while tobacco, *miraa* and inhalants are taken at home. Illicit drugs like bhang, cocaine are either taken in private places 27% or in the bush, 24%. All these areas, the study notes, are outside the jurisdiction of the school. With these findings, there is need

for an in-depth study on the strategies the Government may use to curb DSA in schools.

On interview with G/C teachers, they also indicated that it was part of the trend in the community for young people to go partying and this was celebrated even on national radio, television, newspapers and magazines which devoted substantial coverage to such events where drugs and substances were abused. Such stories were accompanied with photographs of youths smoking or being inebriated. Such activities send confusing signals to the youths and further frustrate the efforts to effectively deal with the problem.

One of the HODs of guidance and counselling in a school whom the study chose to call Mary indicated that "most of the drugs abused by students were sourced from their school surrounding and that good community relations were important in curbing DSA." She said that their head teacher sometimes used police, provincial administrators and church leaders to fight drug problems in the school. She further said that the head teacher called the police whenever he felt that the DSA case was more of a criminal activity and not an issue of discipline.

Summary of findings

The study found that students obtain drug supplies from the community around the school and that the local community knows the peddlers and students who abuse drugs and substances but could not divulge the information to head teachers or members of school management. The study also found that poor parenting was responsible for increase in ADA cases in schools while the PTA and BOM in some schools were not involved in tackling ADA problems. Head teachers further indicated that the local community was indifferent as regards to tackling ADA in the schools. From the study findings, the drug abuse problem is tied to other social problems and evils in society that heads of schools cannot solve without collaborating with parents, law enforcers, Government agencies, NGOs and FBOs to fight drug abuse from the supply and demand side. The study further found that each of the named organizations fights against ADA independently hence the gains cannot be consolidated for the common good.

Conclusions

The study concluded that although Head teachers involved members of the school community in dealing with drug abuse problems, lack of cooperation especially from parents frustrated the head teachers' strategies to curb ADA. Some parents withdraw students before the counselling process is over or use other forms of antagonistic measures to threaten school heads. Some members of the community sell drugs to students and sometimes protect drug dealers. Since drug abuse problem is tied to other social problems and evils in society that are beyond the head teachers abilities, the school community as a strategy used to curb ADA is not effective.

Recommendations

- i) Parents should participate in the fight against ADA in schools by supporting counselling and rehabilitation programmes instituted to help the drug abusing student.
- ii) Head teachers should invite respected community leaders as guest speakers to talk to students in the school and to ensure reduction in drug supply.
- iii) There should be an integrated approach in the fight against ADA by NACADA, NGOs, FBOs and schools for continuity and follow up. Data on gains made and areas that call for

urgent attention should be shared. This may reduce the overall cost of curbing ADA.

iv) The Government should facilitate public forums where researchers, educators and medics can give talks, and distribute materials posters and pamphlets that educate youth on dangers of Drug and Substance Abuse. It should also set up more government rehabilitation facilities and ensure their affordability.

v) The judicial system should deal with the runaway problem of alcohol and drug supply and abuse in Kenya by apprehending dealers and slapping stiff penalties to them. They should also ensure that laws meant to curb ADA like the alcoholic drinks control act (2010) are enforced.

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