DRUG AND SUBSTANCE ABUSE AMONG SECONDARY SCHOOL STUDENTS, IN EMBAKASI DISTRICT, NAIROBI COUNTY

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DECLARATION

This research project is my original work and has not been presented to any other examining body/institution. No part of research should be reproduced without my consent or that of the University of Nairobi.

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Finally I want to convey my sincere gratitude to all my respondents for taking time out of their busy schedules to give me all the vibrant information that helped me in my research.

DEDICATION

I dedicate this research project to my family members for their love, support, patience, encouragement and understanding. They gave me the will and determination to complete my masters. I also dedicate this to research project to all the students who are fighting against drug and substance abuse in secondary schools especially those in Embakasi District and the country as a whole and, those all over the world.

ABSTRACT

According to the World Drug Report (2005), the use of illicit drugs has increased throughout the world in recent years. The report further states that a major world trend is the increasing availability of many kinds of drugs to an ever widening socioeconomic spectrum of consumers. Findings from a National Survey on Alcohol and Drug Abuse conducted by NACADA in 2012 shows that 13.3% of Kenyans are currently using alcohol, 9.1% tobacco, 4.2% miraa, 1.0% bhang and 0.1% heroin. Overall, bhang is the most easily available illicit drug in the country at 49% followed by cocaine while heroin is the least available illicit drug in the country.

According to a national survey on the Rapid Situation Assessment of Drug and Substance Abuse in Kenya (2012), 11.7% of youth aged 15-24 are current users of alcohol, 6.2% tobacco, 4.7% miraa and 1.5% cannabis. In addition, the median age of initiation among the 10-14 year olds to tobacco and alcohol is 10 years. These statistics are an indication of the grave situation faced by children and the youth who are already burdened by other socio-economic challenges such as unemployment. In the Standard Newspaper of June 26th it was reported that Kenya is alarmed over millions of youth wasted by drugs in the Capital City of Nairobi. That the Statistics showing high rates of alcohol and drug abuse among the youth have forced the Government to take drastic action on the peddlers. It is in this background that this study sought to find out the extent to which drugs are being abused in schools and the level of confidence there is among young Kenyans in school in engaging in drug abuse.

The study objectives were to identify the commonly used drugs among the secondary schools students, find out the sources of the commonly abused substances and their influence on academic performance, establish the extent of substance abuse and analyze the level of self-efficacy among these students. The study was guided by Merton's Goal-Means Gap theory and Cohen's Status Frustration theory. This was a survey with 360 students selected for the study.

The main findings of the study were the commonly abused drug in schools included marijuana, tobacco, Miraa, Khuber, Glue, Cocaine and Heroin. Using the Bandura's self-efficacy scale, the study found out that most students were highly certain that they can solve difficult problems, accomplish their goals, deal efficiently with unexpected events and also handle unexpected or unforeseen situations when using drugs. Centrally to that the same students had a negative opinion towards drugs. This contradiction is explained that there are situations where people are aware of the dangers in their behaviour: the self-harm and para-suicides are this category.

One of the major recommendation made is that the issue of drug abuse among the youth should remain on the agendas of policy makers in the country, especially elected leaders, so as to maintain long-term commitment to solving the drug problem. This could include advocacy, creating awareness, and meet-the-people campaigns.

ACRONYMS

ACK:	Anglican Church of Kenya
ADA:	Alcohol and drug abuse
EADIS/GAP:	Eastern Africa Drug Information System/Global Assessment Programme
ICPA:	International Commission on Prevention of Alcoholism
INCB:	International Narcotics Control Board
M.O.E:	Ministry of Education
NACADA:	National Agency for Campaign against Drug Abuse
NSDUH:	National Survey on Drug Use and Health
PTAs:	Parent-Teacher Associations
STIs:	Sexually Transmitted Infections
UN:	United Nations
UNDCP:	United Nations Drug Control Programme
WHO:	World Health Organization

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CHAPTER ONE: INTRODUCTION

1.1 Background to the Study

According to the World Drug Report (2005), the use of illicit drugs has increased throughout the world in recent years. The report further states that a major world trend is the increasing availability of many kinds of drugs to an ever widening socioeconomic spectrum of consumers. The report argues that the main problem drugs at global level continue to be opiates (notably heroine) followed by cocaine. For example, for most of Europe and Asia, opiates continued to be the main problem drugs, accounting for 62 percent of all treatment in 2003. Reports from a total of 95 countries indicated that drug seizures increased four-fold in 2003, and more than half of these were of cannabis.

Every country in the world, developed or developing, incurs substantial costs as a result of damages caused by substance abuse (World Drug Report, 2005). The World Health Organization (WHO) estimates that 1.1 billion people, representing a third of the world population above the age of 15 years, use tobacco, principally in the form of the cigarettes. Of the 800 million smokers, 700 million of them are males in developing countries (WHO, 2004). While smoking rates have been declining in the developed world, they have increased in the developing countries by as much as 50 percent, especially in Asia and in the Pacific region, over the last decade. Addiction to tobacco is therefore a major problem in the developing countries. According to the same report, tobacco Sources four million deaths annually, not including prenatal morbidity and mortality. This figure is projected to rise to 1.6 million by the year

2025, 70 percent of which will occur in the developing world if current trends continue (INCB, 2003).

According to the African Union Ministerial Conference on Drug Control in Africa report (2004), at least 16 countries in Africa have reported abuse of opiates, with prevalence rates ranging from 0.01 to 0.8 percent for the population aged 15 and above. Twelve countries reported cocaine abuse with prevalence ranging from 0.01 to 1.1 percent for this age bracket. Concurrently, the age of those initiated to drug use is diminishing with large numbers of in-school and out-of-school youth consuming drugs. This phenomenon is even more acute in conflict and post conflict countries, with populations experiencing high stress levels while child soldiers are provided with drugs to enable them to fight.

All the while, Africa's role in the global drugs supply chain is increasing. Already the continent is the second largest region for cannabis production, trafficking and consumption, accounting for 26 percent of global seizures of this drug in 2001 (UNODC, 2004). By country, the largest hauls in this period were in Kenya, Nigeria, and the Republic of South Africa, while Morocco is said to be one of the main producers of Cannabis resin.

According to a report by the International Narcotics Control Board (INCB, 2006), the East African region has become the fallback for drug dealers following increased control of traditional routes through the Netherlands and Spain. The warning followed the discovery of cocaine worth 6.4 billion Kenya shillings in Malindi and Nairobi on December 14, 2004 (Daily Nation, March 2, 2006).

The situation described above is true in developed countries that have been experimenting with such drugs for a long period. However, developing countries are not exempt from the dangers. All countries, Kenya included, are vulnerable. It has been noted that Kenya is one of the developing countries in Africa that has lately been experiencing rapid increase in production, distribution and consumption of multiple drugs of dependence (Acuda and Yambo 1983; World Health Organization, 1995; Daily Nation, March 2, 2006). In the face of this challenge, a broad spectrum of the world community has demonstrated intense concern about the problem. It is in the best interests of every nation, including Kenya, to take a firm stand in combating all aspects of drug abuse.

In 1990, the United Nations General Assembly created the United Nations Drug Control Programme (UNDCP). The creation of UNDCP will be based on the recognition of the need for an organization that would foster concerted international action against illicit drug production, trafficking and abuse. Its formation is evidence of the determination of the governments of the world, working through the United Nations (UN) to put an end to these transnational phenomena.

The Kenya government has ratified two major United UN conventions on narcotic drugs and psychotropic substances in its quest to protect its citizens from the ravages of the global drug abuse menace. These include the Single Convention on Narcotic Drugs (1961) and the Convention against Illicit Trafficking on Narcotic Drugs and Psychotropic Substances (1988). The government is currently working towards the ratification of the Convention on Psychotropic Substances (1971). In 1994, the government enacted a new anti-drug law, the Narcotics and Psychotropic Substances Control Act, as well as forming the Kenya Anti-Narcotic Unit.

Within Kenya itself, drug abuse is becoming an increasing problem Masita (2004), almost every Kenyan youngster at one time or another experiments with drugs, especially with beer and cigarettes. Although the regular users of hardcore drugs are much fewer than those of cigarette and alcohol, the study argues that the major cause of concern is that a high proportion of these young people eventually become addicted threatening their own health and safety, and causing difficulties for their families and friends.

Findings from a National Survey on Alcohol and Drug Abuse conducted by NACADA in 2012 shows that 13.3% of Kenyans are currently using alcohol, 9.1% tobacco, 4.2% miraa, 1.0% bhang and 0.1% heroin. Overall, bhang is the most easily available illicit drug in the country at 49% followed by cocaine while heroin is the least available illicit drug in the country. Alcohol is the most commonly abused substance in the country and poses the greatest harm to Kenyans as evidenced by the numerous calamities associated with excessive consumption and adulteration of illicit brews. Among the different types of alcoholic drinks, traditional liquor is the most easily accessible type of alcohol followed by wines and spirits and lastly chang'aa a local brew. 30 % of Kenyans aged 15-65 have ever consumed alcohol in their life;

13.3% of Kenyans currently consume alcohol that means that at least 4 million people. Worrying, though is that the median age of first use of all drugs has gone as low as 10 years.

1.2 Statement of the problem

Drug use is a worldwide phenomenon, and drug use occurs in almost every country. The specific drug or drugs used varies from country to country and from region to region. Worldwide, the three main drugs of use are cannabis (such as marijuana), opiates (such as heroin), and cocaine. Although individual countries have their own drug laws, in general, drug possession, sale, and use are illegal. Unfortunately, laws are not always equally enforced in countries around the world.

Drug abuse [especially among the youth and young adults] is responsible for lost wages, destruction of property in schools, soaring health care costs and broken families. It is a problem which affects us all as parents, children, teachers, government officials, taxpayers and workers. Despite eradication efforts in countries in Africa, the region still remains a major supplier of some drugs such as cannabis, which is one of the most widely abused drugs. Since the early nineteen eighties, Africa has been experiencing an escalating problem with drug abuse and trafficking. Although reliable information is scarce, data collected under the Eastern Africa Drug Information System/Global Assessment Programme (EADIS/GAP), country mission reports coupled and small-scaled research activities conducted by governments and non-governmental organizations all attest to this (Abdool, 2004).

According to World Drug report (2012), the extent of global illicit drug use over the five years up to and including 2010, is at between 3.4 and 6.6 per cent of the adult population (persons aged 15-64). However, some 10-13 per cent of drug users continue to be problem users with drug dependence and/or drug-use disorders, the prevalence of HIV (estimated at approximately 20 per cent), hepatitis C (46.7 per cent) and hepatitis B (14.6 per cent) among injecting drug users continues to add to the global burden of disease, and, last but not least, approximately 1 in every 100 deaths among adults is attributed to illicit drug use. With estimated annual prevalence ranging from 0.6 to 0.8 per cent of the population aged 15-64, the use of opioids (mainly heroin, morphine and non-medical use of prescription opioids) is stable in all of the main markets. Worrisome is that drug consumption has developed some key characteristics over the last few decades, against a backdrop of rapid socioeconomic transitions in a number of countries. Illicit drug use is now characterized by a concentration among youth. Global estimates suggest that prevalence of tobacco use (25 per cent of the population aged 15 and above).

In China it is reported that drug use is going up while the age of new users is going down. A survey in the Czech Republic showed that 37 percent of new drug users were teenagers between 15 and 19 years old. Drug use in particular heroin is becoming a serious problem in Egypt, where around 6 percent of a sample of secondary school students admitted to having experimented with drugs. Cannabis accounted for 85 percent of use and opium for 10 percent, as reported by UNDCP. Drug abuse amongst the youth in Kenya has become a serious problem affecting all the people of the

country. Addiction leads many people, young people prominent amongst them, into downward spiral of hopelessness that in some cases ends fatally. They range from glue- sniffing street children and teenage ecstasy users, to hardcore heroin and cocaine addicts (NACADA, 2005).

According to a national survey on the Rapid Situation Assessment of Drug and Substance Abuse in Kenya (2012), 11.7% of youth aged 15-24 are current users of alcohol, 6.2% tobacco, 4.7% miraa and 1.5% cannabis. In addition, the median age of initiation among the 10-14 year olds to tobacco and alcohol is 10 years. These statistics are an indication of the grave situation faced by children and the youth who are already burdened by other socio-economic challenges such as unemployment. In the Standard Newspaper of June 26th it was reported that Kenya is alarmed over millions of youth wasted by drugs in the Capital City of Nairobi. That the Statistics showing high rates of alcohol and drug abuse among the youth have forced the Government to take drastic action on the peddlers.

The above evidence show an increase of drug abuse by young Kenyans. Psychologically it can be argued that young Kenyans who are of school age have acquired a taste for illicit drug which is in itself a worrying trend. In other words it can be said that young Kenyans have been and are being socialized into drugs. It is in this background that this study sought to find out the extent to which drugs are being abused in schools and the level of confidence there is among young Kenyans in school in engaging in drug abuse.

1.3 Research Questions

The specific research questions for this study are:

- 1. Is drug abuse affecting the academic program of the students in secondary schools?
- 2. Which drugs are commonly abused by the students?
- 3. How confident are students in abusing drugs?

By answering the questions the research will be able to gather information on commonly abused drugs, the impact of drug abuse on performance and assess strategies that the Ministry of Education (M.O.E.) is using to eradicate the problem of drug and substance among secondary schools.

1.4 Objectives of the study

1.4.1 Broad Objective

The overall objective of this study is to find out the impact of substance abuse on the academic performance of secondary school students in Embakasi district, Nairobi County.

1.4.2 Specific Objectives

- 1. To identify the commonly used drugs among the secondary schools students.
- 2. To find out the sources of the commonly abused substances and their influence on academic performance.
- 3. To establish the extent of substance abuse.
- 4. To analyze the level of self-efficacy among these students.

1.5 Scope and limitation of the study

The focuses of the study was to first establish the commonly abused drugs in these schools. The study limited itself to available records in school in the period of five years (2007-2012). As for sources of the abused drugs in the study gathered information from the students who have been on the record for the same with specific focus on who the suppliers both within and outside school

In considering the extent of substance abuse the study relied heavily on secondary data in the schools with focus on the frequency of drugs abused as captured by the records which these schools have. The study also analyzed the level of self-efficacy among these students by the aid of the interview schedule questions by the use of self-efficacy scale and an opinion scale which was used to capture the students' general opinion on drugs.

1.6 Significance of the Study

The proposed study could help the Ministry of Education (M.O.E.) to better understand the current situation and accordingly make changes to address the factors that contribute to substance abuse in secondary schools. Kenya, like many other developing countries, is faced with the social problem of high rates of substance abuse. To make matters worse, the percentage of substance abusers in schools increases yearly despite the efforts to eradicate the problem. Failure to solve this problem not only threatens the life of individuals, but also the economic and social development of the country as a whole. The current study is useful in contributing to the general body of knowledge in this area. Beyond that, however, it also explores the potential of schools to curb the drug problem.

The study should help to make policy makers, administrators and teachers aware of the factors hindering the effectiveness of the approaches which attempt to curb drug abuse and, where possible, create opportunities to eradicate the problem. The proposed programme would be useful in educating all Kenyans, youth and adults, on the risks of substance consumption. Thus, this study would play an important role in reducing, or even preventing high rates of substance use and abuse. Based on the findings, recommendations are made. If followed, these recommendations would be useful to administrators and policy makers in curbing substance abuse in schools through improving existing educational programmes, and striving to develop ones that are even more efficient. The study would also help in promoting a drug-free school environment and better academic performance, thus improving the standards of education in the country. In the absence of specific policies on substance abuse in schools this study makes important recommendations on the way forward.

1.7 Definition of Key Words

Drug: Any product other than food or water that affects the way people feel, think, see, and behave. It is a substance that due to its chemical nature affects physical, mental and emotional functioning. It can enter the body through chewing, inhaling, smoking, drinking, rubbing on the skin or injection.

Drug abuse: Use of drugs for purposes other than medical reasons. It refers to misuse of any psychotropic substances resulting in changes in bodily functions, thus affecting the individual in a negative way socially, cognitively or physically. Social effects may be reflected in an individual's enhanced tendency to engage in conflicts with friends, teachers, and school authorities. Cognitive effects relate to the individual's lack of concentration on academic work and memory loss such as "blackouts.

Drug addiction: Addiction to drugs or alcohol means that a person's body can no longer function without these substances. The addictive substances usually have negative effects, for example, they can alter mental state and behaviour to a point where the individual becomes a threat to himself and others. Once a person becomes addicted, it is hard to stop using drugs.

According to Bawkin and Bawkin (1972), an addicted person may show a decline in academic performance, frequently fails to attend classes, loses interest in school work and displays weakened motor coordination, poor health, and lack of interest in old friendships. Addiction by its nature distorts thinking processes giving prominence to thoughts which justify continuing addictive behaviour, and minimizing or excluding consideration of reasons for ceasing it.

Drug related problems: This term is used to describe all negative effects associated with drug abuse such as violence, conflicts with friends or school authorities, destruction of school property and academic underperformance.

Drug policy: A brief statement outlining a school stand or position on procedures for dealing with drug-related issues. It may be reflected in the school rules and guidelines, and is also often a reflection of the laws of Kenya. In Kenya, drug trafficking and abuse is considered a criminal offence under the Narcotics Drugs and Psychotropic Substances Control Act of 1994.

Illegal/legal drugs: In this study illegal drugs refer to the substances that the government regards as harmful to the mental and physical well-being of the individual, hence controlling or discouraging their consumption by law. Legal drugs refer to those such as alcohol and tobacco that are potentially dangerous but whose consumption the government allows.

Strategies: This term refers to the methods or approaches that schools have put in place to address drug related problems in the institutions. They are also measures that have been put in place by the Kenyan schools with the aim of curbing drug abuse and controlling its negative effects.

Substance abuse: Refers to the use of all chemicals, drugs and industrial solvents that produce dependence (psychological and physical) in a percentage of individuals who take them. It can also be used to refer to repeated non-medical use of potentially additive chemical and organic substances. According to WHO (2000), substance abuse includes the use of chemicals in excess of normally prescribed treatment dosage and frequency, even with knowledge that they may cause serious problems and eventually lead to addition.

Youth: Refers to young people between 13 and 25 years or their activities and their characteristics. The majority of students in Kenyan secondary schools are between 13 and 19 years, a stage referred to as adolescence. The term youth therefore includes this age bracket of students.

CHAPTER TWO: LITERATURE REVIEW

2.1 Introduction

This section presents a review of literature by various authors and researchers who have conducted studies on the impact of drug abuse on the academic performance of secondary school students. It presents the review of related literature, empirical review of the variables, summary of research gaps, theoretical and the conceptual frame work.

2.2 History of drug abuse among students in Kenya

In an attempt to fight drug abuse among students in Kenya, about 4000 head teachers gathered in Mombasa in June 2005 (Daily Nation, June 20, 2005). They supported the government's proposed ban on billboard and television advertising of alcohol and cigarettes. The Secondary Schools Principals Association also supported a plan by the government to ban smoking in public. So far the Association has started a campaign project aimed at fighting drug abuse amongst student and has made efforts to have programmes on the fight against drug abuse featured in the electronic media, specifically targeting teachers and students. Also the chairman of the Kenya Schools Heads Association Mr.Muthaithai has urged the Government to implement the ban on alcohol and tobacco advertisements, saying they target the youth. He argued that we must do everything possible to protect the youth, the leaders of tomorrow.

Some churches have also established anti-drug programmes. One such is the Lavington United Church whose outreach ministry helps in training and teaching about the dangers of drug abuse in schools, s and universities. The youth are taught how to reach others through peer counseling (The Standard, June 2, 2003). The Anglican Church of Kenya (ACK) has also launched preventive-drug programmes for the youth and adults in each diocese and has organized spiritual crusades to fight drug abuse in schools and s. In addition, the church has established treatment and rehabilitation centers to create awareness, and bring about physical and inner healing for drug users and addicts (Githinji, 2004).

While addressing a church seminar on the drug problem in Kenya, Bishop Nzimbi (ACK, 2004) emphasized that the church has a biblical mandate, an obligation and commitment to be involved in the war against drugs and against the vices affecting society. The Bishop went on to say that the drug problem has shaken family foundations and the community at large and that although a lot has been done to address the issue of drug abuse among the youth, the root cause of the problem must be addressed. The drug problems, he said, reflect a bigger problem and are a direct product of how children are socialized in relation to social values.

2.3 Substance Abuse among Secondary School Students in Kenya

At the school level, the Ministry of Education (MOE) has integrated drug education components into the existing school curricula, in Social Studies at the primary level, and in Religious Education at secondary level (Kenya Institute of Education Syllabus, 2004). The MOE has also emphasized provision of training in drug education to heads of schools, teachers and school inspectors through in-service courses.

The main objective is to create awareness of the dangers of drug abuse and its consequences, and to mobilize school children to participate and take a leading role in drug and alcohol issues. In addition, it also aims at encouraging teachers to be knowledgeable about drug dangers, to increase their capacity to intervene including through counseling and to prepare materials for drug education (UNDCP, 2002). The government, through the MOE has emphasized provision of guidance and counseling services in schools to help curb drug abuse and other problems that face students. This is in line with the recommendations of the Ominde Report (1964) and the Gachathi Report (1976).

Realizing that drug abuse is becoming a problem in Kenya, NACADA has drawn up an action plan the main areas of focus of which are public awareness, liaison activities and support service. It targets youth in and out of learning institutions. Developing programmes through the mass media, passing messages through public barazas and incorporating drug preventive education in the education curriculum are some of the modes of fighting drug abuse that have been outlined in the action plan (NACADA, 2004). The plans some of which are so far only on paper appear promising and one can only hope that the implementation phase will be successful.

Studies carried out locally and elsewhere (Gitahi and Mwangi, Daily Nation April 2, 2007) indicate a strong linkage between alcohol/drug abuse by young people and the breakdown in family values. The cultures of indigenous society restricted the use of alcohol to senior age groups and special occasions. Even then, alcohol will be consumed under strict conditions and drunkenness will be discouraged. That child as young as 10 years are abusing alcohol (Daily Nation, April 8, 2007) spells danger not only to themselves and their families, but also to the well-being of the nation because children represent the future. The family and society as whole have the obligation to ensure that children grow up in an environment that promotes moral values and a more disciplined way of life. Lack of a proper value system in the society is likely to lead to drug abuse, which in turn would ruin the family life even further.

2.4 Nature and Extent of Drugs Abused by Learners

Drug abuse among young people is a global phenomenon and it affects almost every country. Although it is difficult to authenticate the actual extent and nature of drug abuse amongst learners, research indicates that most adolescents experiment with alcohol or other drugs prior at school. It is estimated that about 25 percent of male adolescents and 10 percent of female adolescents abuse alcohol at least once a week (Gillis, 1996:107). A study in 1998 conducted by University of Massachusetts researchers on the smoking habits of 681 teenagers between 12 and 13 years revealed that several of them were addicted to cigarette smoking (BBC News, September 2000). Symptoms that indicated addiction included craving for more nicotine, withdrawal symptoms and loss of control over tobacco intake. The study established that 63 percent of the teenagers had one or more symptoms of nicotine addiction, while some children could smoke up to five cigarettes a day without showing any signs of addiction. The Forum on Child and Family Statistics (2000:1) report says

that, seven percent of male learners in grade 8 smoke daily while 16 percent of tenth and 24 percent of twelfth-grade males do so. For females, the rates were 8, 16, and 22 percent for learners in grades 8, 10 and 12, respectively. On alcohol abuse, the Institute for Social Research at the University of Michigan (1997) points out that by the time learners in the US reach grade 12, approximately 8 in 10 will have consumed alcohol at some time in their lives. Of these, 60 percent will have consumed it to the point of intoxication. Some of the problems associated with youth drinking include violence, suicidal behaviour, and high-risk sexual activity (Cookson, 1992:360).

The National Survey on Drug Use and Health (NSDUH, 2002:19) revealed that 8.3 percent of the American population roughly 19.5 million people were current users of an illegal drug, while countless more individuals used and abused legal drugs. Moreover almost one half of the US population (46 percent) of 12 years age and older had used an illegal drug at least once at some point in their lives. This is evidence that the country continues to be deeply affected by substance abuse. The most commonly abused drugs were found to be marijuana, cocaine, heroin, inhalants, alcohol and tobacco. The projected economic cost of illicit drug use to US society in 2002 will be estimated at \$160.7 billion.

Though federal spending on the drug war increased from 1.65b US dollars in 1982 to 17.7b in 1999, more than half of the students in the U.S in 1999 had tried an illegal drug before they graduated from high school. Additionally, 65 percent had tried cigarettes by 12th grade, while 62 percent of 12th grade and 25 percent were reported to have been drunk at least once (Bachman, 2000: 135). In Brazil, it is estimated that 36 million (22%) of the total population of 170 million inhabitants are adolescents between 10 and 24 years, 70 percent dropping out of school before completing the basic 8 years of their education. Drugs are an important feature of social imbalance in Brazil during the adolescent years, and are associated with the high mortality rates attributable to external Sources like homicides, fatal injuries or firearms-related deaths.

A study carried out at the City Emergency Hospital Miguel Couto in the month of May, 1996, found 435 (16%) of all 2737 "external violent cases treated were related to drugs: alcohol in 88 percent of cases, cocaine in 3 percent, marijuana in 2 percent and other drugs in 4.1 percent of the cases. Most of the 32 overdoses occurred among youth victims and 6.4 percent of all patients were adolescents between 15 and 19 years, followed by 19.2 percent of young adults between 20 and 24 years of age (Minayo and Deslanders, 1998; in Eisenstein, 2005).

The prevalence of alcohol and other drugs among adolescents in Brazil has been increasing for the last twenty years. Obot (2005) highlights that 70 percent of the teenagers have used alcohol at least once in their lifetime, followed by marijuana at 5 percent, and by cocaine, at 2 percent. He adds that lifetime prevalence for overall illegal drug use varies from 18 to 26 percent for adolescents throughout Brazil and that a major concern has been not only the widespread use of illegal drugs but the decreasing mean age for the first-time use of drugs which in 1997 will be 12 to 13 years.

The World Drug Report by UNDCP (2001) reports that there are about 141 million drug abusers globally, including 8 million heroin addicts, 30 million amphetamine users and 13 million cocaine users. The report shows that in the United States and Canada there where 360,000 heroin abusers in 1991, and 600,000 in 2000. In the UK, Ireland, Denmark and Italy, 2 percent of 16 and 17 year-olds had used heroin. Six percent of American young people including students had used cocaine, in the Bahamas 6.4 percent, and 4.5 percent in Kenya. Some 8.3 percent of all young people in the UK and 9 percent in Ireland had used amphetamine drugs (UNDCP, 2001).A report issued by the White House on educational excellence for Hispanic Americans in 2000 (http://www.yic.gov/drug.free/a/cabuse.html) showed that of all the substances used, alcohol Sources the most problems among students. In addition, the survey revealed that 32.3 percent cocaine and 3.6 percent designer drugs such as ecstasy. Such illicit drugs have been factors in many tragedies, including date rape hospitalizations for overdoses, and deaths.

It is not only those who engage in high-risk drinking or other drug use that are affected. Students, who do not drink legally and moderately, frequently suffer second hand effects from the behavior of other students who drink too much. For example, 60.5 percent of the students interviewed in the above study said that they had had to take care of a drunken student, 20.1 percent had been insulted or humiliated, 18.6 percent had a serious argument because of others drunkenness, 13.6 had had property damaged, while 1.3 percent, all women, had been victims of sexual assault or date rape.

While the rates of drug use in Africa are low compared to industrialized countries, they are a cause for concern. According to a UNDCP/WHO report (2000), more than 25 percent of students in Nigeria said it will be easy to obtain a wide variety of illegal drugs such as crack cocaine, which has entered the market in Lagos. In South Africa – the only substantially industrialized sub-Saharan country - prevalence rates were of similar magnitude, but included the smoking of a mixture of cannabis and methaqualone. Cannabis will be said to be a popular drug among secondary school students in both countries. For male and female students, it will be reported that the age of first use will be between 10 and 17 years. Other drugs of abuse were cigarettes and glue.

The use of psychoactive substances in Nigeria has been seen as a problem of youth living in large urban areas. What will be known about substance use in the country in 2005 can be summarized as follows: 5 percent of adult males and 22 percent of male youth are cigarette smokers while the use of cocaine and heroin is common among young people in large urban centers (Mackay and Erickson, 2002; in Obot, 2005). The most commonly abused drug by both adults and youth is cannabis. One of the studies conducted specifically to address secondary school adolescent drug use in major urban areas of Nigeria, in 2003 (Obot, Karuri and Ibanga, 2003) showed that, overall, lifetime prevalence of cigarette smoking will be 19 percent, while 10.7 percent of students reported smoking at least one cigarette in the past year. Alcohol abuse will be

reported by 30 percent of the respondents. Other drugs of abuse included cannabis, 5 percent, and inhalants, most often glue sniffing 14 percent.

Alcohol and drug abuse among the youth are implicated in a range of social and economic problems in South Africa. A speech delivered on behalf of the Minister for Health at the launch of the International Commission on Prevention of Alcoholism (ICPA) South Africa Chapter, in Pretoria, on 27 June 2006, revealed that there is an increase in demand for treatment for illicit drugs in substance abuse treatment centers. Also of concern is the reported increase in the proportion of younger patients coming for treatment. The Minister added that, nationally, almost one of eight learners has had their first drink before the age of 13. In addition, 31.8 percent of learners had drunk alcohol on one or more days in the month preceding interviews by the South African National Youth Risk Behaviour Survey (2002). The results also showed that one in five learners had smoked cigarettes on one or more days in the preceding month. The most commonly abused drugs were said to be alcohol, mandrax, marijuana, heroin and tobacco in the form of cigarettes.

In Kenya, drug abuse has threatened the lives of the youth of 29 years and below. While addressing the opening of the Narcotics Drugs and Psychotropic Substances Control Seminar, Wako (2001) said that 60 percent of drug abusers are youth less than 18 years of age and recommended that drug users should be made to realize the dangers of drug abuse. The Office of the National Agency for the Campaign against Drug Abuse (NACADA) in Kenya will be created in March 2001. Between 2001 and 2002, NACADA commissioned the first ever national baseline survey on the abuse of alcohol and drugs in Kenya. The study targeted Kenyan youth aged between 10 and 24 years. The summary of the unedited report, which will be released in 2002, revealed that substances of abuse, both illicit and licit were forming a sub-culture amongst Kenyan youth. Contrary to common assumptions, the survey demonstrated that substance abuse will be widespread and that it affected the youth mostly and cut across all social groups. Overall, most commonly abused drugs were found to be alcohol, tobacco, khat and cannabis. In addition the youth were also abusing imported illegal substances such as heroin, cocaine and mandrax.

Although non-students engaged extensively in substance abuse, most youth use will be in secondary schools and universities. The report concluded that substance abuse often begins at a very young age: for example, for students and non-students, it starts when they are in primary or secondary school.

Another country wide survey conducted in 2004 by NACADA among students and school-leavers found that hard drugs like heroin, ecstasy, cocaine and mandrax were widely abused in schools by children as young as ten years. The survey revealed that some legal substances such as alcohol, tobacco and khat were commonly abused leading to high incidence of violence in schools (East African Standard, May 22, 2004). Forty-three percent of students from Western Kenya confessed to alcohol abuse 41 percent in Nairobi, 27 percent in Nyanza, 26 percent in Central Province and 17 percent in Eastern Province. Nairobi students led in cigarette smoking followed by Central, Coast, Eastern and Rift Valley provinces.

The Ministry of Health estimates that Kenyans smoke about 10 million cigarettes a year. Ministry statistics also show that smoking prevalence rates among children below 15 years are between 13 and 15 percent. Among young people aged between 18 and 29, the rate is estimated to be 44.8 percent, and 52 percent among and university students (Gatonye, Daily Nation May 22, 2006). On the same note, the then Minster for Health, Hon. Charity Ngilu warned that the number of smokers in Kenya is increasing, saying that 1.1m under age Kenyans were addicted to tobacco (Daily Nation, May 23, 2006).

A study by the Great Lakes University, Kisumu found in 2009 that 58 percent of the secondary school students in Kisumu District had consumed alcohol at some point in their lives (Daily Nation, June 2, 2009). The study interviewed 458 students from nine secondary schools in Kisumu and concluded that use of drugs including alcohol, tobacco, khat, cannabis and cocaine had risen drastically in the previous decade. By age 15, according to the study, some students were found to have already started using drugs and by the time they were 19, 33 percent males and females had already become drug abusers.

From the foregoing, it can be seen that drug abuse is a reality among the youth especially in Kenya. If the rate at which young people have indulged in drug abuse is anything to go by, then the future of the society is uncertain and something must be done urgently to address the problem. There is need for a study to evaluate the effectiveness of drug abuse prevention initiatives aimed at reducing demand for drugs among students, and how drug abuse prevention measures can be improved, as well as how ineffective ones can be weeded out. In view of this the current study will be carried out. Knowledge of the nature and extent of drug abuse is important in the development and implementation of intervention strategies to curb the problem amongst the youth in schools.

2.5 Curbing drug abuse in educational institutions

In an attempt to curb drug abuse, some educational institutions in Kenya including secondary schools, and universities have started the peer education programmes to address the problem. Institutions have started peer education programmes aimed at reducing irresponsible sexual behavior, unwanted pregnancies, sexually transmitted infections (STIs) including HIV/AIDS and drug abuse by improving the quality of counseling and service delivery for students. The peer outreach programme is the highlight of the project, as it trains students to promote responsible behavior among their peers. Some activities carried out in peer counseling include showing videos, follow-up discussions, door-to-door counseling and public lectures.

Although such activities can go a long way in addressing and curbing drug-related problems, they are secondary to the role of the family in socializing children and the youth in the right direction. The family is the basic building block of every culture. Children are not only better socialized at home than in the peer group, but are also best socialized by parental example and the sharing of social values. Positive sociability is firmly linked with the family in relation to childs self-worth. This in turn depends largely on the values and experiences provided by the family, at least until the child can reason consistently. The basic role of the family is therefore to ensure

that children grow up in a loving and secure environment where they can be taught sound values.

From the foregoing it is clear that reducing drug use and abuse has been a priority of the Kenyan government at national and local level for many years. However, there is evidence that the problem is far from over. According to a speech delivered by the late Hon. Professor Saitoti, then Minister for Education, to the Third African Convention of the African Principals at the Bomas of Kenya (August 27, 2004), one of the greatest challenges impacting negatively on the achievements in the education sector in Africa is drug abuse amongst the youth in schools. Some African cities have been identified as either destinations or conduits for hard drugs. The minister went on to say that drug peddlers and barons are known to target the youth in schools as a lucrative market. As a result, drug abuse has become one of the root Sources of school indiscipline. The minister went on to say Kenya and other countries could not afford to lose the war against drugs because failure to address this problem will lead to the destruction of the youth and thus the future of many countries. However, a report compiled by NACADA indicts the government because of its reluctance to curb the menace. According to the report, the government is unable to address drug abuse due to its need to gain tax returns from growers and manufacturers of certain addictive substances. In the view of the report, this is related to the fact that drug abuse in schools has reached alarming proportions (Odera, May 11, 2005).

According to a World Bank report (Daily Nation, December 15, 2005), the majority of Kenyan youth are into theft, violent crime and drug abuse, and many are likely to suffer from HIV/AIDS. This situation is associated with poverty and joblessness. In spite of measures taken by the government to curb drug abuse, it is on the increase in schools and threatens to affect learning programmes and discipline. A fresh and concerted effort by the authorities and the public is therefore required to curb the menace locally, especially among the youth (UN Secretary, Koffi Annan, 2006). While addressing a regional meeting on tobacco, organized by the Framework Convention Alliance, the then minister for health, Hon. Charity Ngilu, reported that more than one million Kenyan minors could be smoking their way to an early grave.

The minister revealed that about 13 percent of primary school pupils smoked cigarettes. In addition, 27 percent of the Kenyan population is addicted to tobacco (Daily Nation, November 10, 2005). According to the minister, tobacco addiction must be fought and overcome to bring down tobacco-related deaths and promote health.

The extent of drug abuse in schools is reflected in media reports as indicated in this section. Siele (Daily Nation, July 18, 2005) maintains that the problem of drug abuse continues to affect most institutions of the learning in Kenya. According to his report, six students were hurt in a fight at a disco, at the Nakuru Agricultural Society of Kenya showground. Some of the students appeared drunk. In another incident, four students from Rasul Al Karam, Nakuru, were arrested for inciting others to go on strike after they were denied permission to attend the show. The students allegedly sneaked out of school and went on a drinking spree. They returned drunk and started plotting a strike. The students were arrested as they tried to vandalize school property to protest.

In another incident, a fire gutted a dormitory in Nyeri High school as students scampered for safety. According to Ogutu and Njogu (The Standard, May 17, 2005), some boys who were smoking in their room were believed to have dropped a cigarette butt suspected of sparking the blaze. On the same note, while giving an address on the International Day of the Family on 14 May 2005, the then sports minister Ochilo Ayako said that parents needed to play a more active role in the fight against drug abuse. He noted that many youths in Kenya were exposed to drugs through advertisements on television. According to him, the mass media were glorifying smoking and alcohol abuse as indicators of success and stardom (The Standard, May 17, 2005).

Once a top school in Machakos, Eastern Province of Kenya Tala High school is today a shadow of its former self. The school is now infamous for frequent student riots. In 2005, the school experienced its worst strike when rampaging students destroyed property worth Kenya Shillings 5 million, leading to the closure of the institution. According to the school principal, Mr. Samuel Chepkole, the declining academic performance of the school can be attributed to rampant drug abuse among students, laxity among staff and embezzlement of funds set aside to improve facilities by former school heads (The Standard, January 12, 2006). While addressing the Third Global Youth Employment Summit 2006, His Excellency Hon. Mwai Kibaki (13 September, 2006), reported that the youth today are facing many challenges that are hindering them from the full realization of their aspirations. These include drug and alcohol abuse and HIV/AIDS. The president argued that experimentation with alcohol and drugs is a serious problem among the Kenyan youth. He advocated awareness programmes to avoid risky behaviour that can expose the youth to drug abuse and the HIV/AIDS virus.

According to a study carried out by the Great Lakes University in Kisumu, the use of drugs among secondary school students has doubled in 10 years (Gathura, Daily Nation June 2, 2009). A 2001 study by NACADA indicated that about 22 percent of high school students were using alcohol. However, the Great Lakes University study found that a staggering 58 percent of respondents had consumed alcohol, 34 had used tobacco, 32 percent khat, 18 percent cannabis and 5 percent cocaine. The age group at most risk will be put at between 16 and 18. The Great Lakes University study though not conclusive, shows a 16 percent increase of drug abuse among secondary school students since the 2001 report by NACADA.

If the above scenario is anything to go by, then it is clear that drug abuse is a threat to the general public as well as the youth in Kenyan schools. It is therefore necessary that drug abuse amongst students and society in general must be fought so as to reduce the criminality and social dysfunction that tends to accompany drug abuse at all social levels. In view of this, the current study set out to establish the cause, nature and extent of drug abuse amongst students in Machakos District with a view to proposing a programme for prevention and intervention.

2.6 Theoretical Framework

This study made use of two main strain theories namely; Robert Merton's Goal-Means Gap Theory and Cohen's Status Frustration Theory.

2.6.1 Merton's Goal-Means Gap Theory

Robert Merton's social strain theory holds that each society has a dominant set of values and goals along with acceptable means of achieving them. Not everyone is able to realize these goals. The gap between approved goals and the means people have to achieve them creates what Merton terms social strain. The dominant goals and values in American society emphasize success through individual achievement. Success is primarily measured in terms of material goods, social status, and recognition for personal expression (e.g., artistic/athletic). The indicators of material success include a person's job, income, and place of residence, clothing, cars, and other consumer goods. The accepted means of achieving these goals are also highly individualistic, emphasizing hard work, self-control, persistence, and education.

2.6.2 Cohen Status Frustration Theory

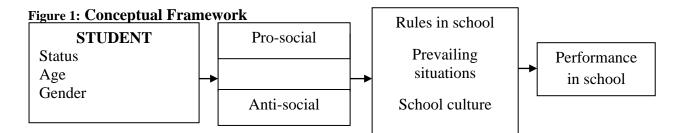
Albert K. Cohen wrote about delinquent gangs and suggested in his theoretical discussion how such gangs attempted to "replace" society's common norms and values with their own sub-cultures. He proposed two basic ideologies, the first of which is called status frustration.

Status frustration is directed mainly to the young people of lower classes. There is no parallel between social realities and the rest of society's promoted goals, they become frustrated at the disadvantages and inequalities that they face, and this leads to Cohen's second principle; reaction formation.

Reaction formation is the reaction from status frustration, and the young men of the lower classes find themselves replacing their society's norms and values with alternative ones. I.e. instead of working hard being the common goal for respect, it may become a delinquent act like who commits the most vandalism to gain the respect. This provides the group with a sense of values and status which they cannot receive from the larger society. It is a process which allows the members of the groups to adapt to their own exclusion from society. Unlike Merton's strain theory, Cohen holds the view that the reaction to status frustration is a collective response rather than an individual one.

This theory accounts for the increasing rates of non-utilitarian crime (vandalism, loitering and joyriding) in western societies. Although actions such as these do not provide monetary gain to the perpetrator, they come to hold value to members of the sub-culture as such, becoming accessible means of achieving status and prestige among the individual's peer group.

2.7 Conceptual Framework



From the figure above the researcher presumes that student's academic performance is influenced by the extent of substance abuse, Sources of substance abuse, substance commonly abused and the type of strategies used to address substance abuse.

CHAPTER THREE: RESEARCH METHODOLOGY

3.1 Research Design

The research design for this study is a descriptive survey. In view of this, the study will adopt the field survey method to collect both quantitative and qualitative data. The field survey implies the process of gaining insight into the general picture of a situation, without utilizing the entire population (Gall, Borg and Gall, 1996: 28).

3.2 Target Population

This research was carried out in the Embakasi District, Nairobi County. The District has 36 secondary schools of which three are boys' schools and three are girl's schools. The other 30 are mixed schools, private or public. The target population for this study was Form 3 and 4 students, deputy-head teachers, school counselors, class teachers and chair persons representing Parent-Teacher Associations (PTAs).

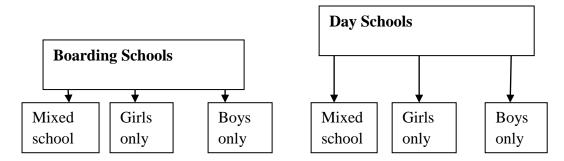
Forms 3 and 4 students were targeted because they have been in school for some time and are likely to be more familiar with the cases of drug abuse in schools and better placed to evaluate the impact of these substances on the academic performance of students. In addition, they are mature enough to suggest ways of dealing with the issue from their own experiences, and make suggestions for improvement.

To survey the opinions of experts and students, nine schools were utilized which included nine each of deputy-head teachers, school counselors, class teachers and chair persons representing Parent-Teacher Associations (PTAs) in the selected schools. The selection criteria was that a student must have entered in the school's records for having been involved in drugs.

3.3 Sampling of the study

Only six of the 28 secondary schools in Embakasi District were sampled for this study based on the categories below.

Figure 2: List of schools



The schools were stratified into boys only, girls only and mixed, where three schools were purposively selected from each category.

Sampling frame was created from the schools records of students who have been caught taking drugs. Consent was sought from both the students and their parents/guardians and all those who give their full consent to be interviewed. A total of 230 students were interviewed.

3.4 Data Collection Methods

a) Interview

Primary data from both the Key Informants and the students was collected through interview. Interviewing as a research method involves the researcher asking questions and, receiving answers from the people being interviewed. It is very widely used in social research and there are many different types (Robson, 2002). For instance, a fully structured interview has predetermined questions with fixed wording, usually in a pre-set order.

3.5 Data Collection Tools

Semi-structured interview with predetermined questions was used in the case. This tool provided the flexibility required for such a study. It permitted for the change of

the wording of the question and explanations given for particular questions, which was inappropriate with a particular interviewee.

3.6 Secondary Data

These data was collected from publications, reports from concerned Government ministries and relevant books and journals.

3.4 Data Analysis and Presentation

The study used Statistical Package for Social Sciences (SPSS) to analyze quantitative data. Orodho (2005) explains that SPSS is a comprehensive, integrated collection of computer programme for managing, analyzing and displaying data. The qualitative data was coded thematically and then analyzed statistically.

Themes were developed as per the study objectives, and data from the various tools synthesized and triangulated. The arguments and recommendations of different contributors formed the basis of the study and discussed and analyzed in a way that the researcher was able to draw conclusion and recommendations. The presentation was in form of statistical techniques such as frequency tables and also it made use of graphical presentations such as tables of frequency, percentage, mean and standard deviation.

CHAPTER FOUR: DATA PRESENTATION AND ANALYSIS

4.1 Introduction

This chapter covers data analysis, presentation and interpretation of the findings. The Broad objective of the study was to find out the impact of substance abuse on the academic performance of secondary school students in Embakasi district, Nairobi County. The reliability of the data collected for the study was determined through ascertaining the reliability of the questionnaires and interview schedules. The target population was 396 respondents.

4.1.1 Response rate

The target population was comprised of 230 Form 3 and 4 students, 9 deputy head teachers, 9 school counselors, 9 class teachers and 9 PTA chair persons from the selected schools. According to Mugenda and Mugenda (2003), a 50 percent response rate is adequate, 60 percent good and above 70 percent rated very good. This also concurs with Kothari (2004) assertion that a response rate of 50 percent is adequate, while a response rate greater than 70 percent is very good. This implies that based on this assertions; the response rate in this case of 88 percent is very good.

4.2 Demographic Information for Students

This section is sub-divided into gender, age, and form studied.

	Frequency	Percentage
Male	122	53
Female	108	47
Total	230	100

Table 1: Gender distribution

Source: Researcher 2013

Pertaining on the gender of the students, the researcher inquired between males and females who dominate. It was clearly revealed that most of those interviewed were males accounting for 53 percent than their female counterparts who also had a percentage of 47, hence making the female gender to be the minority group than their males who were the majority. The results are tabulated as in table 2.

Table 2: Age Distribution

	Frequency	Percentage
15 years and below	12	5
16-18	196	85
19 and above	22	10
Total	230	100

Source: Researcher 2013

The researcher requested the respondents to indicate their age brackets. The analysis of the findings revealed that (12)5 percent of the students 15 years and below, (196) 85 percent are between ages 16-18, and the remaining (22)10 percent are between 19 years and above. The analysis of the findings is as shown in table 3.

Table 3: Form of study

	Frequency	Percentage
Form three	135	58.7
Form four	95	41.3
Total	230	100

Source: Researcher 2013

Further, the study determined on which form the respondents studied. Out of the two forms interviewed, it was clear that form three emerged out to be dominant group of the respondents by accounting 58.7 percent and the remaining 41.3 percent are from four. The results are tabulated in table 4.

	Frequency	Percentage
Alcohol (incensed)	230	100
Local Brew/ chang'aa,	115	50
Marijuana	70	30.4
Tobacco	176	76.5
Miraa	105	45.7
Khuber	14	6.1
Glue	16	7

Table 4: Drugs listed in the schools' records that students have used

Source: Researcher 2013

According to the findings above, it was clear that licensed alcohol was used by all the students (100%). This was followed by tobacco at 76.5 percent, local brew at 50 percent, miraa at 45.7 percent, marijuana at 30.4 percent, glue at 7 percent and khuber at 6.1 percent.

Table 5: Main	Sources o	of the drugs
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	Frequency	Percentage
Slum peddlers	129	56.1
Small shops (Kiosks near schools)	27	11.7
School workers	12	5.2
Touts.	62	27
Total	230	100

Source: Researcher 2013

The study further sought to establish main sources of drugs from the respondents. According to the analysis of the findings 56.1 percent indicated from slums,11.7 percent small shops,17.05.2 percent come school workers and the remaining 27 percent revealed touts as also the sources of drugs. The analysis of the finding is tabulated in table 6.

	Frequency	Percentage
Purchased	198	86.1
Got them for free	22	9.6
Total	230	100

Source: Researcher 2013

The study sought to establish whether the students purchase the drugs or get them for free. The study findings revealed that overwhelm majority (86.1 percent) raise funds as group to purchase drugs and mostly raise funds from excessive pocket money, others they cheat to their parents on the grounds of required a certain book read, lost

personal books, and also from asking more money than required for school retreats and go to that extent of stealing their fellow colleagues books to sell them for money.

The findings related to the extent of drug abuse among students showed that drug abuse is widespread. Regarding the frequency of usage, Alcohol and local is consumed daily; miraa is once a week and finally bhang is consumed once a month.

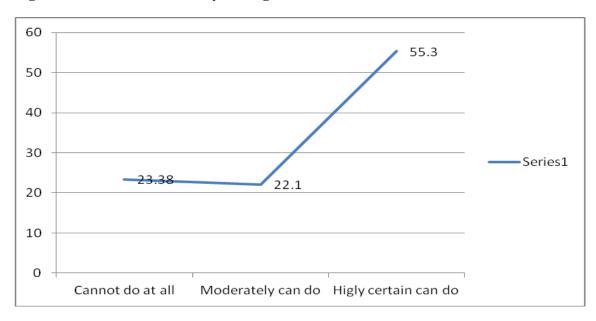
4.4 Level of self-efficacy among the students

The study sought to find out the level of self-efficacy among the students.

No.	Questions	Scale of 10					
		01	-23	45	-6-	78-	-9-10
		Cann all	ot do at	Mode can d	erately o	Highly can do	certain
		F	percent	F	percent	F	percent
1.	I can always manage to solve difficult problems after taking drugs.	42	18.3	73	31.7	115	50
2.	If someone opposes or is against me, I can find a way to get what I want after taking drugs.	27	11.7	3	1.3	200	87
3.	It is easy for me to stick to my plans and accomplish my goals without leaving drugs	55	23.9	73	36.1	102	44.3
4.	I am confident that I could deal efficiently with unexpected events when using drugs.	76	33	55	24	98	42.6
5.	Thanks to my resourcefulness and ability to figure things out, I know how to handle unexpected or unforeseen situations when I take drugs.	69	30	40	17.4	121	52.6
	Mean	53.8	23.38	48.8	22.1	127.2	55.3

Source: Researcher 2013

Figure 3: Level of self-efficacy among the students



Source: Researcher 2013

The researcher found of paramount importance to request respondents to indicate down their respectful level of self-efficacy by giving various opinions on drugs. The analysis of the findings clearly indicates that 55.3 percent indicated highly certain can do, 22.1 percent were to moderately can do and the remaining 23.38 percent said cannot do at all in the event of using drugs. Therefore, from the findings of the study it is deduced that most students were highly certain that they can solve difficult problems, accomplish their goals, deal efficiently with unexpected events and also handle unexpected or unforeseen situations when using drugs. The results are tabulated in table 8 and illustrated in figure 3.

4.5 Content analysis from Key Informants

The study sought to establish the categories of the respondents, the study findings established that, the respondents comprised of 39.1 percent class teachers, 39.1 percent counselors and those who were both class teacher and counselor comprised of 21.8 percent of the respondents. The study therefore deduced that from the teachers and counselors selected some held both positions and this enabled the teachers to have a better understanding of the students. Moreover, the study sought to establish the composition of Key Informants gender and it was clearly reflected clearly that the

female gender dominated and comprised the majority by accounting for 53 percent and they were followed closely by their male counterparts who also accounted for 47 percent. It is perceived from the analysis of the findings that at least gender balance is addressed and more females are teachers compared to males.

The researcher sought to determine the type of school respondents operate from. Data was coded and analyzed then illustrated as in table 4.3 above. It is observed that most (46 percent) school are day mixed, followed by 31 percent boarding mixed, 9 percent are day boys,7 percent day girls and boarding Boys and boarding girls were 2 percent and 5 percent respectively. The study deduced that a majority of secondary schools in Embakasi constituency, Nairobi County are day Mixed.

The study further determined whether the schools selected were private or public schools. The analysis of the finding showed that the majority of secondary schools in Embakasi district, Nairobi County are private school recording 63 percent while private school recorded were 37 percent of the schools population in Embakasi constituency, Nairobi County. The results were shown in the figure 4.4 below.

Years of experience	Frequency	Percentage
Over 20 years	2	6
16-20 years	5	14
11-15 years	14	39
6-10 years	11	31
1-5 years	4	11
Total	36	100

Table 8: Seeking to establish the teaching/ counseling Experience

Source: Researcher 2013

The study also inquired the teaching experience from the respondents. This was of vital important due to that the more experienced teachers executed their functions effectively and efficiently. The results revealed that the majority 39 percent of the respondents had experience from the age bracket of between 11-15 years, followed by 31 percent of the respondents who had experience from the age bracket of between 6-

10 years, followed by 14 percent of the respondents who had experience from the age bracket of between 16-20 years, 11 percent of the respondents who had experience from the age bracket of between 1-5 years and 6 percent of the respondents who had experience from the age bracket of between.

Moreover, the study sought to confirm from the key informant the type of drug abuse among students in Schools. The study established if whether there was drug abuse among students in secondary schools in Embakasi constituency, Nairobi County. Majority of the respondents said yes by 79 percent and only 21 percent said no. It can be concluded that there is drug abuse among students of secondary schools in Embakasi constituency. The respondents were requested to indicate if whether they had experience dealing with drug problems in schools. Overwhelming majority (81 percent) said yes while only 19 percent respondents said no.

Category	Frequency	Percentage
Boys are the main abusers	21	59
Both boys and girls equally abuse Drugs	3	8
Girls are the main abusers	12	33
Total	36	100

Table 9: Distribution of Known Drug Abusers

Source: Researcher 2013

On the general distribution of known drug abusers in terms of gender among mixed secondary schools, the results clearly indicated that boys are the main abusers by accounting 59 percent while 33 percent are girls and only 8 percent revealed it is both boys and Girls abuse drugs. In this case, that is on drug abuse, mostly Boys abuses drugs in secondary schools.

Classification	Frequency	Percentage
Form 4	13	36
Form 3	17	47
Form 2	4	12
Form 1	2	5
Total	36	100

Table 10: Forms Mostly Involved With Drug Abuse

Source: Researcher 2013

More investigations were needed on the forms mostly involved with drug abuse. According to the analysis of the findings, 47 percent come from form III who comprised the majority followed by 36 percent from IV, 12 percent and 5 percent from forms II and I respectively. It can therefore conclude from the study that form III students are more vulnerable to the uptake of drugs as compared to other students in other forms.

	Frequency	Percentage
Yes	13	36
No	23	64
Total	36	100

Table 11: If whether there is an increment of drug problem in Embakasi schools

Source: Researcher 2013

The researcher asked the respondents if whether there is drug increment in secondary schools in Embakasi constituency, Nairobi County. Based on the results most respondents said yes by 64 percent while 36 percent said no. This implies that there is an increment of drug abuse in secondary schools in Embakasi constituency, Nairobi County.

	Frequency	Percentage
Less than 20 percent of		
student take drugs	1	3
About 20 percent of the		
students take drugs	6	17
About 40 percent of the		
students take drugs	14	39
About 60 percent of the		
student take drugs	10	28
About 80 percent of the		
student take drugs	3	8
Nearly 100 percent of		
students take drugs	2	6
Total	36	100

Table 12: Overall Assessment of Drug Abuse in secondary Schools

Source: Researcher 2013

In regard on the overall assessment of drug abuse in secondary schools, 39 percent of students take drugs. This is represented by 39 percent of the respondents. 28 percent of the respondents said that it is 60 percent of the students who take drugs, 17 percent of the respondents said 20 percent of the students take drugs, 8 percent of the respondents indicate 80 percent of the students take drugs and 3 percent of the respondents said less than 20 percent of the students take drugs. The study deduced that the overall assessment of drug abuse in secondary schools that about 40 percent of the students take drugs.

Sources of drugs	Frequency	Percentage
Shoe cobblers	13	34
Fellow students	9	21
Matatu touts	6	16
Shops	4	11
Slum areas,	3	8
Hospital	1	3
Total	36	100

Table 13: Sources of drugs according to the key informants

Source: Researcher 2013

The study probed the main sources of drug abuse. 34 percent of the respondents come from shoe cobblers who were the majority of the respondent's while 21 percent of the respondents indicated that it is from fellow students, 16 percent of the respondents

indicated that it came from matatu touts, 11 percent of the respondents indicated that it is from shops, 8 percent of the respondents indicated it is slum areas, 4 percent of the respondents indicated it is from hospital, 3 percent of the respondents indicated teachers and cinema halls. The study deduced that the main source of drugs is from the shoe cobblers around the school areas. The respondents were also requested to rank the sources of drugs from the most common to the least. The results revealed that, slum areas come first, followed by shops, matatu touts, fellow students, shoe cobbles, from teachers, Cinema halls and hospitals had equal percentage and finally the least common source is from parents.

Reasons	Frequency	Percentage
Lack of role models home	4	9
Conflict With parents	3	8
Peer pressure	10	27
A lot of work in school(stress)	9	25
To enhance intellectual a ability	1	3
Breakdown of family units	1	3
Excess of pocket money	9	25
Total	36	100

Table 14: Students' reasons of taking drugs

Source: Researcher 2013

Various reasons were given out on why most students take drugs. Most students take due to peer pressure who accounted for 27 percent and 25 percent revealed that they take drugs due to excess of pocket money and a lot of work in school leading to excessive stress 9 percent of the respondents indicated students take drugs due to lack of role models at home, 8 percent of respondents indicated that students take drugs due to conflicts with parents while 3 percent of the respondents indicated that the students take drugs to enhance intellectual abilities and breakdown of family units respectively. The study deduced that peer pressure was the major reason for students in high school to take drugs especially in the teenage years of experimental.

	No	t at all	Li	ttle	Mo	oderate	Gre	eat	Ve	ry great
			ex	tent	ext	ent	exte	ent		tent
	F		F		F		F		F	
		percent		percent		percent		percent		percent
Poor parenting and social vices in the family contribute to use of drugs by	-	-	_	-	-	-	5	15	_	-
students Availability of drug peddlers and selling shops have promoted drug abuse in schools	_		_		_		4	9	_	
Main cause of drug abuse in schools is through peer groups	-	-	-	-	-	_	10	27	-	-
Non-teaching staff, community members participate in smuggling drugs to school students	-	-	_	-	1	4			_	-
Poor management and administration of the schools encourages drug abuse in schools	-	-	-	-	-	-	2	7		
Drug abuse is associated with lack of discipline by students in the school	-	-	-	-	-	-	14	38	-	_

Table 15: Factors that lead to the abuse of alcohol and drugs by students

Source: Researcher 2013

The respondents were asked to indicate factors that lead to the abuse of alcohol and drugs by students in schools. To a great extent was indicated by Poor parenting and social vices in the family contribute to use of drugs by students with a frequency of 5 and 15 percent, availability of drug peddlers and selling shops have promoted drug abuse in schools with a frequency of 4 and 9 percent, main cause of drug abuse in schools is through peer groups with a frequency of 10 and 27 percent, Poor management and administration of the schools encourages drug abuse in schools with a frequency of 2 and 7 percent, drug abuse is associated with lack of discipline by students in the school with a frequency of 14 and 38 percent. Moreover, the findings of the study further revealed that to a moderate extent was indicated Non-teaching

staff, community members participate in smuggling drugs to school students with a frequency of 1 and 4 percent. Therefore, it can be depicted that overwhelming majority indicated great extent that indeed the listed factors leads to the abuse of alcohol that and drugs by student in schools.

4.6 Extent of the Psycho-social effects of alcohol and drug on the student

The study also explored if whether drug use had negative effects. Overwhelming majority said yes accounting for 88 percent and only 12 percent said no. Drug abuse has negative effects to students both mentally, physically and academic wise.

4.6.1 Negative effects of drug abuse

The researcher probed on the negative effects of drug abuse. Some of negative effects include; Trouble thinking clearly, paying attention and remembering is a problem, poor performance in school or even drop out. Adults might have trouble with their work performance and maintaining employment. In addition, social relationships regardless of age could suffer. Individuals may act on at risky behaviors while under the influence of drugs which can result in violence and infectious diseases. Drug use can alter the function and structure of the brain. Other medical problems which can result of drugs use are: Mental disorders, cardiovascular disease, stroke, HIV/AIDS, cancer, Hepatitis B, Hepatitis C and lung disease and Death just to name a few. Pregnant women who use drugs endanger the health of their unborn child. The child could be born prematurely, have a low birth weight and have trouble with both intellectual development and behavior.

4.6.2 Effects of drug abuse on students affects academic performance.

The study further explored if whether drug abuse affected academic performance among students. Most respondents said yes accounting for 66 percent while 31 percent answered that it is partly so and only 3 percent said no.

	No	ot at all	Li	ttle	Mo	derate	Gr	eat	Ver	y great
			ex	tent	ext	ent	extent		extent	
	F		F		F		F		F	
		percent		percent		percent		percent		percent
Drugs are the		•		•		•		•		•
major										
contributors of	-	-	-	-	1	5	-	-	-	-
absenteeism										
from schools.										
Drugs are the										
major	_		_	_	_	-	5	12		_
contributors of	-	-	-	_	_	_	5	12	_	-
school dropout.										
Drugs are the										
major										
contributors of	-	-	-	-	-	-	4	10	-	-
immoral										
behaviors.										
Drugs are the										
major							_			
contributors of	-	-	-	-	-	-	3	8	-	-
poor academic										
performance.										
Drugs are the										
major										
contributors of	_	_	_	_	_	_	_	_	14	39
violence,									11	57
rampages and										
riots.										
Drugs are the										
major										
contributors of	_	-	_	-	_	-	9	26	_	_
mismanagement							Í	20		
of financial										
resources.	1									

Table 16: Extent of the psycho-social effects of alcohol and drug on the students

Source: Researcher 2013

The study further established the extent of the psycho-social effects of alcohol and drug on the students. Based on the analysis of the findings, those who indicated to a very great extent were represented by drugs being major contributors of violence, rampages and riots with a frequency of 14 and a percentage of 39. In additional, the findings of the study indicated that to a great extent were on drugs being major contributors of school dropout with a frequency 5 and a percentage of 12, drugs being contributors of immoral behaviors with a frequency 4 and a percentage of 10, drugs being major contributors of 8, drugs being major contributors of mismanagement of financial

resources with a frequency of 9 and a percentage of 26. Further, the analysis of the findings revealed that to a moderate extent was indicated by drugs being major contributors of absenteeism from schools with a frequency of 1 and a percentage of 5. Therefore it can be depicted that most respondents drug abuse amongst student has psycho-social effects to a great extent.

Rating drugs	Frequency	Percentage
High Alcohol	13	38
High Tobacco	13	38
Average Narcotic Drug	1	2
Average Cannabis Sativa	3	7
Average Stimulants	6	15
Total	36	100

Table 17: Rating the various categories of drugs usage in secondary schools

Source: Researcher 2013

The respondents were asked to rate the usage of the various categories of drugs in seco7ndary schools. According to the analysis of findings Alcohol and tobacco are among ranked high by 38 percent each respectively. The results further revealed that stimulants, cannabis, and narcotic come second, third and fourth respectively.

The awareness and the rating of the drugs contradict the efficacy in the same students. This can be explained by the fact that human beings have a tendency to engage in a behavior even if they are aware the dangers it poses. The self-harm and para-suicides are in this category.

4.7 Efforts and Interventions Put By the Administration to Eradicate the Menace

The study further found it of paramount important to determine if whether the administration has put in place any mechanism to curb drug abuse in institution. Most respondents said yes by 57 percent while 43 percent said no. Some of the drug control measures highlighted include; Early detection, treatment and rehabilitation of drug addicts, parents should set a warm and friendly atmosphere at home so that the drug users can feel easy to cooperate with, motivation of the addicts to make up their mind up for detoxification ,The youth should be motivated to be involved in the fight

against drug abuse, by educating the community about the problems of drug addiction ,enforcement of laws ,rules and regulation for the control and supply of drugs. The educational course should contain about the drug addiction and drug abuse in detail, Various effects of drug addiction must be advertise through newspapers, radio, television, magazine and vice-versa. The experience of drug users can be advertised to the people through media to aware those who might start taking drugs.

4.8 Methods used to address drug abuse

On the frequency of the measure to curb drug abuse, most of the respondents indicated that, very often use suspension, guidance and counseling and said that it was a very successful method to address drug abuse, followed by expulsion of the students often used not successful, asking parents to come to school to negotiate ways to resolve and was successful and heavy punishment was not successful.

The researcher requested the respondents to suggest some of the ways of eradicating drug abuse in schools. They included; Improving and strengthening guidance on drug abuse prevention in schools, strengthening awareness among young people in/out of employment, Cultivating consciousness to eradicate drug abuse and strengthening preventive measures in communities, Strengthening advocacy and awareness raising activities, Building consulting systems by related organizations, Promoting wider public awareness of counseling services and improving the counseling service organization, Improving the medical service system for drug dependents/addicts, Improving support and counseling for the families of drug dependents/addicts, Strengthening cooperation with private bodies, Strengthening and enriching measures to prevent relapse into drug abuse among young people, and finally Promoting research on the state of drug abuse, methods for treating drug dependence.

CHAPTER FIVE

SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

5.1 Introduction

The main objective of the study was to find out the impact of substance abuse on the academic performance of secondary school students in Embakasi district, Nairobi County. The study sought to answer the following questions; what is the extent of drug abuse and their influence on academic performance among the students in secondary schools in Embakasi district, Nairobi County? Which are the drugs commonly abused by the students and their influence on academic performance among students in secondary schools in Embakasi district, Nairobi County? Which are the drugs among students in secondary schools in Embakasi district, Nairobi County? What strategies do secondary schools in Embakasi use to address substance abuse and their influence on academic performance among the students?

The study adopted a descriptive survey. The district has 36 secondary schools of which three are boys' schools and three are girl's schools. The other 30 are mixed schools, private or public. The target population for this study was Form 3 and 4 students, deputy-head teachers, school counselors, class teachers and chair persons representing Parent-Teacher Associations (PTAs). A total of 360 students were randomly selected for this study. Therefore, the total number of expected participants in the study is 396.

In order to identify the participants in the study the schools were stratified into boys only, girls only and mixed, where three schools were purposively selected from each category.

Data was collected using a semi-structured interview with predetermined questions. The data collected was analyzed both quantitatively and qualitatively. This section therefore presents a summary of the findings, conclusion and recommendations based on the research questions.

5.2 Conclusion

From the findings of the study, drug abuse among students is widespread and spells danger not only for the youth who abuse the drugs, but also for the wellbeing of the nation. Students abuse drugs regardless of the type of school they attend, although the tendency to do so is higher in mixed day as compared to boys' schools and girls' schools. A variety of drugs are abused by students with the most common being alcohol, tobacco, khat and cannabis, all of which are easily available or locally produced. The main sources of drugs are low socio-economic areas (slum areas), small shops, school workers and public transport. Teachers perceive the strategies used to address drug abuse as ineffective and thus they need modification to ensure effectiveness. A type of school frequency distribution, which also revealed gender distribution frequencies, showed that, of those who acknowledged drug abuse, 46 percent attended mixed day schools 31 percent boarding mixed schools, and remaining 23 percent was for types of schools. The findings indicate that the perceived effects of drug abuse among students were; lack of concentration on studies, missing classes, conflict with teachers, poor health, failure to do assignments, and even rejection by friends.

The study also determined the measures put in place to curb the menace drug abuse. Some of measures include: guidance and counseling, summoning parents/guardians to school, suspension, expulsion, heavy punishment close monitoring and vetting of students' visitors, talks during assembly, and impromptu inspections. Teachers' perception of the biggest challenge faced in addressing drug abuse is a lack of adequate knowledge on how to deal with drug abuse hence an indication that teachers feel inadequate to address the vice in schools. Majority of school counselors and teachers are not trained in approaches to addressing drug abuse. Majority have only attended workshops lasting a few days, not full training. Teachers cited the two main reasons for drug abuse as the breakdown of family units and excessive pocket money.

5.3 Recommendations

Most teachers and school counselors feel ill-equipped to address drug abuse in schools. The MOE should mount intensive training for all school counselors to give them relevant skills.

Ministry of education should formulate uniform policy to guard against disparities in addressing drug abuse in schools. This policy would be an important component of a comprehensive drug preventive strategy for youth in schools.

Since some parents may lack exposure on issues related to drug abuse, the MOE and NACADA should take the lead in organizing parenting programmes, and continuously making information available on how to address drug abuse among their children.

Government interventions should target both low and high-risk families. As many parents as possible should be included in these programmes and not only those involved in school management affairs such as those in the Board of Governors (BOG) or Parent-Teacher Associations (PTA).

The issue of drug abuse among the youth should remain on the agendas of policy makers in the country, especially elected leaders, so as to maintain long-term commitment to solving the drug problem. This could include advocacy, creating awareness, and meet-the-people campaigns.

5.4 Recommendations for further study

It is suggested that research be carried out to address the following:

- a. More investigations are needed on the methods used to address drug abuse in schools in various parts of Kenya because the methods used to address the problem may differ according to different circumstances.
- b. Given guidance and counseling is emphasized as a method of addressing drug abuse in schools, its effectiveness in addressing the problem should be investigated. Such studies would contribute towards strengthening guidance and counseling in schools.
- c. Research is needed to ascertain the relationship between school policy and drug abuse among students.

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APPENDICES

APPENDIX 1: INTERVIEW SCHEDULE FOR STUDENTS.

Introduction

Instructions: (*Please read the instructions given and answer the questions as appropriately as possible*). It is advisable that you read carefully and correctly fill in each section as provided.

Section A: Demographic Information

1. What is yo	ur gend	er?	Male	[]	Female	[]
2. Which is y	our age	?				
3. Which For	m are y	ou of study				
Form three	[]	Form four	[]			
Others						

Section B: Drug Abuse

4. You are down in the school record for having used/abused drugs, where did you get the drugs from?
(e.g. fellow students, parents, drug peddling, kiosk). Please specify
5. Did you purchase them or did you get them for free?
6. If you purchased, where did you get the money from?

7. What use the frequency of us/abuse?

Drugs	Daily	Once a week	Once a month	When available
1				
2				
3				
4				
5				

Section C: Level of self-efficacy among these students

For each of the following statements, please circle the choice that is closest to how true you think it is for you. The questions ask about your opinion. There is no right or wrong answers. All questions will be measured on an 11 point scale ranging from 0 (I am definitely not able to do this) to 10 (I definitely can do this).

Think about current activities as a student. Read each of the following statements **carefully**, then circle the number that best represents your response, where:

0 indicates: I am definitely not able to do this

10 indicates: I can definitely do this

No.	Questions	Scale of 10
1.	I can always manage to solve difficult problems after taking drugs.	0123456789—10 CN MD CN
2.	If someone opposes or is against me, I can find a way to get what I want after taking drugs.	012345678910
3.	It is easy for me to stick to my plans and accomplish my goals without leaving drugs	012345678910
4.	I am confident that I could deal efficiently with unexpected events when using drugs.	012345678910

5.	Thanks to my resourcefulness and ability to	012345678910
	figure things out, I know how to handle	
	unexpected or unforeseen situations when I take	
	drugs.	

No.	Questions	Scal	e of 10				
		01	23	45	6-	78—9-10	
		Cana at al	not do l	Moderately can do		Highly certain can d	
		F	%	F	%	F	%
1.	I can always manage to solve difficult problems after taking drugs.						
2.	If someone opposes or is against me, I can find a way to get what I want after taking drugs.						
3.	It is easy for me to stick to my plans and accomplish my goals without leaving drugs						
4.	I am confident that I could deal efficiently with unexpected events when using drugs.						
5.	Thanks to my resourcefulness and ability to figure things out, I know how to handle unexpected or unforeseen situations when I take drugs.						
	Mean						

APPENDIX II: QUESTIONNAIRE TO KEY INFORMANTS

A. Personal Characteristics of Informants

1. Indicate whether you are one of the following:

Class teacher [] Counselor [] both class teacher and counselor []

2. Gender

Male [] Female []

3. Type of school. Tick appropriate

Day Boys [] Day Girls [] Day Mixed [] Boarding Boys [] Boarding Girls [] Boarding Mixed []

4. The school is

Private [] Public []

5. For how many years have you taught since you qualified as a teacher? *Tick appropriately*.

0-5 years [] 6-10 years [] 11-15 years [] 16-20 years [] Over 20 years []

SECTION B: DRUG ABUSE

6. Would you say there is drug use among the students at your school?

a) Yes [] b) No []

7. Have you had any experience in dealing with drug problems in your School?

Yes [] No []

8. If your school is co-educational (mixed), what is the general distribution of known drug abusers in terms of gender? *Tick one only*

Boys are the main abusers [] Both boys and girls equally abuse Drugs []

Girls are the main abusers []

9. Which Forms are mostly involved in drug abuse? You can tick more than one.

 Form 1
 []
 Form II
 []
 Form IV
 []

10. If there is a drug problem in your school, is it increasing?

No [] Yes []

11. What is your overall assessment of drug abuse in our secondary schools? *Tick one only*.

Nearly 100% of students take drugs [] About 80% of students take drugs []
About 60% of students take drugs []About 40% of students take drugs []
About 20% of students take drugs []	Less than 20% of students take drugs []

SECTION C: SOURCES OF THE DRUGS

12. In your own opinion, which are the main sources of abused drugs? *You can tick more than one.*

Matatu touts	[]	Shoe cobbles	[]	Shops	[]
Slum areas	[]	Cinema halls	[]	Hospitals	[]
Fellow students	[]	Teachers	[]	Parents	[]

13. Rank the following sources of drugs abused from the most common to the least common source. *Indicate the appropriate number in the box*.

	Most	Common	Moderately	Fairly	Not source
Sources	common	source	common	common	
	source		source	source	
	1	2	3	4	5
Matatu					
touts					
	1	2	3	4	5
Shoe					
cobblers					
	1	2	3	4	5

Shops					
	1	2	3	4	5
Slum areas					
	1	2	3	4	5
Cinema					
halls					
	1	2	3	4	5
Hospitals					
	1	2	3	4	5
Fellow					
students					
Teachers	1	2	3	4	5
	1	2	3	4	5
Parents					

14. In your own opinion, why do students in your school take drugs? *You can tick more than one.*

Lack of role models at home	[]	Conflict with parents	[]
Peer pressure	[]	A lot of work in school (stress)	[]
To enhance intellectual ability	[]	Break down of family units	[]
Excess pocket money	[]			

15. The following statements relate factors that lead to the abuse of alcohol and drugs by students. To what extent do you agree with each of the statement? Use a scale where 1- To a very low extent, 2- To a low extent, 3- To a moderate extent, 4- To a great extent and 5-To a very great extent.

	1	2	3	4	5
Poor parenting and social vices in the family contribute					
to use of drugs by students					
Availability of drug peddlers and selling shops have					
promoted drug abuse in schools					
Main cause of drug abuse in schools is through peer					
groups					
Non-teaching staff, community members participate in					
smuggling drugs to school students					
Poor management and administration of the schools					
encourages drug abuse in schools					
Drug abuse is associated with lack of discipline by					
students in the school					

Section D: Extent of the psycho-social effects of alcohol and drug on the student

16. Do you agree that drug use has negative effects?

(a) Yes [] b) No []

(b)	If	yes,	please	list	down	some	of	the	negative	effects?
		•••••		•••••						

17. Would you say that the effects of drug abuse on students affect their academic performance?

a) Yes [] b) No [] c) Partly so []

18. The following statements relate to the extent of the psycho-social effects of alcohol and drug on the student. To what extent do you agree with each of the statement? Use a scale where 1- To a very low extent, 2- To a low extent, 3- To a moderate extent, 4- To a great extent and 5-To a very great extent.

	1	2	3	4	5
Drugs are the major contributors of absenteeism from					
schools.					
Drugs are the major contributors of school dropout.					
Drugs are the major contributors of immoral behaviours.					
Drugs are the major contributors of poor academic					
performance.					
Drugs are the major contributors of violence, rampages					
and riots.					
Drugs are the major contributors of mismanagement of					
financial resources.					

19. How would you rate the use of the following drugs in your school?

a) High [4] b) Average [3] c) Low [2] d) Not at all [1]

	High	Average	Low	Not at all
(a) Depressants				
Alcohol				
(b) Tobacco				
including cigarettes				
(c) Narcotic drug				
1. Opium				
2. Heroin				
(d) Cannabis sativa				
1. Bhang				
2. Hashish				
(e) Stimulants				
1. Cocaine				
2. Miraa				

Section E: Efforts and interventions put by the administration to eradicate the menace

20. Has the administration put in place any mechanism to curb drug abuse in the institution?

a) Yes [] b) No []

21. Highlight any other measures.

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SECTION F: METHODS USED TO ADDRESS DRUG ABUSE

22. Kindly indicate the frequency (in terms of usage) of the measure to curb drug abuse and rate them in terms of success. On a scale of 1 to 5, 5 being very successful.

Use the ranking key below.

Ranking key:

1. VO - very often 2. O - Often 3. NO - Not often 4. NA - Not at all

Indicate the appropriate number in the box.

Measure	VO	0	NO	NA	Rate its
					success
Expulsion					
Suspension					
Guidance & counseling					
Ask parents to come to school to negotiate ways to resolve					
Heavy punishment (specify)					

23. Suggest ways of eradicating drug abuse in our schools.

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APPENDIX III: TIME FRAME

A work plan is crucial to time management, especially when a study is to take place within a limited period. Following is a schedule of activities indicating when each respective activity is due to occur:

Event\Date	May	Jun	July	August	Sep	Oct
Topic Selection						

Concept Paper Development			
Proposal Writing			
Correction			
Presentation and Approval			
Instrument Test			
Data Collection			
Data Analysis			
Report Writing			
Defense and Presentation			
Defense and Presentation			

APPENDIX IV: THE BUDGET

BUDGET ITEM	UNIT	RATE	TOTAL COST(Ksh)
MATERIALS			
Literature Survey/Photocopying	Item		2500
Internal Services	Item		6000
Research Assistant(2)	15 Hrs	300	9000
SUB TOTAL			17 500
OTHER COSTS			
Drafts Proposed Printing			2000
Binding			1500
Travel/ Accommodation			24000
Office Supplies			4000
Telephone/ Internet			4000
Report Publication & Photocopying			6000
Data collection			30000
SUB TOTAL			23,000
Contingency			6,000
TOTAL COST			106, 500