

Abstract

In Kenya, alcohol, cigarettes, Khat (miraa) and cannabis sativa, have remained the most popular abused substance and have been linked to increasing rates of HIV/HCV . This study's objective was to identify the types, frequency, and methods of substances used and their relationship to HIV and HCV seroprevalence among substance abusers in five representative Kenyan cities. Methods: Purposive and snow-ball sampling was used. Among 1420 substance abusers, psychosocial and substance use factors were assessed, with a subset of 120 tested for HIV and Hepatitis C Viral (HCV) infection. Results: In five Kenya cities, the highest oral daily consumption of the drugs was recorded in Malindi (83.3%) and Mombasa (56.6%). Snorting and sniffing was used on a daily basis mainly in Mombasa (85.0%) followed by Nakuru (72.7%) and Nairobi (70.6%). Malindi exclusively practiced injection of drugs on a daily basis with a one-day prevalence rate of 100.0%, followed by Mombasa (86.5 %) and Nairobi (67.9%). Across the five cities, the most prevalent substance abused was Alcohol (36.3%) followed by nicotine (17.5%), Cannabis sativa (9.9%), Heroin (8.0%), Khat whose active ingredient is *Catha edulis* (2.8%), and cocaine (2.2%) and the most popular route of intake was oral (45.7%), nasal (38.7%) and injection (10.4%). Of the 120 tested for HIV and HCV, approximately 61% were seropositive for Hepatitis C and 42% for HIV and 85% were Injection Drug Users (IDUs). Interestingly, of these IDUs, 49.5% tested positive for HIV and 70.29% tested positive for Hepatitis C (HepC). These results support a relationship between IDU behavior and HIV/HepC and the need for an IDU-focused prevention effort that would 1) integrate sexual and injection behavior risk reduction, 2) identify and complement local cultural strengths, and 3) link Kenya's nascent democratic governance initiatives with building the necessary IDU prevention infrastructure.