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Evaluating Rehabilitation Outcomes and Service Gaps at Ihururu Treatment and Rehabilitation Hospital: A Case Study from Nyeri County, Kenya”

Background:

Ihururu Treatment and Rehabilitation Hospital is a 90-bed Level 4B specialised facility for male clients, established in August 2023 by the county government of Nyeri in response to rising cases of drug and substance abuse and limited access to affordable rehabilitation services. Located 9 kilometres from Nyeri Town, the hospital provides both chemical and non-chemical rehabilitation services. Since its inception, up to June 2025, the facility has admitted 391 clients from diverse professional backgrounds. Despite growing demand and clients’ aftercare follow-ups through phone calls and the existence of an Alumni wall for continued encouragement and sharing of insights, the facility faces significant challenges in maintaining long-term recovery, with relapse rates remaining high and many clients presenting with suicidal thoughts, threats, and attempts.

Methods:

A retrospective descriptive study was conducted using patients’ records from August 2023 –June 2025, analysed using Excel. Data on patient demographics, treatment outcomes (sobriety, lapse, and relapse), and identified barriers to recovery were examined. Qualitative interviews with service providers and a sample of discharged clients further explored systemic and psychosocial challenges hindering effective rehabilitation.

Results:

Of the 391 clients admitted, 52% maintained sobriety, 40% relapsed, and 8% lapsed. The majority of admissions comprised individuals aged 22-35 years, accounting for 76% of the client population within this age group. A significant proportion were identified as university dropouts. Employment status distribution was as follows: Unemployed 130(33.2%), university students 102(26.1%), police personnel 12(3.1%), medical professionals 10(2.6%), educators 15(3.8%), and other professionals 122(31.2%). Qualitative data indicated contributing factors to relapse included weak post-discharge support, poor reintegration mechanisms, unmet socio-economic needs, and lack of life skills programmes. The facility also faces challenges such as staffing shortages, with the client-to-counsellor ratio exceeding the recommended 1:10, being approximately 1:17, limited funding, and minimal community engagement.

Conclusions and Recommendations:

The findings highlight an urgent need for strategic interventions to improve long-term recovery outcomes and mitigate suicide risk at Ihururu Treatment and Rehabilitation Hospital. Recommended actions include integrating psychosocial support, economic empowerment programmes, and structured mental health care into rehabilitation. Strengthening community involvement, aftercare follow-up, and reintegration support mechanisms is critical. Further research is recommended to develop a comprehensive, multisectoral model tailored to the unique social and economic conditions of Nyeri County.

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