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Pilot Project: Group-Based School Intervention for preventing and addressing Substance Use.

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Background:

Youth and adolescents who use alcohol and other drugs can experience negative consequences that usually cause adverse effects on their physical, psychological, and social functioning. Direct impacts include psychiatric morbidities, poor academic performance, and behavioral problems such as misconduct at home and in school, as well as engagement in risky behaviors like reckless sexual activity. Indirectly, substance use also affects families of adolescents through conflicts, financial strain, and disrupted relationships, and affects peers through normalized risky behaviors. A study by Kurui and Ogoncho in 2019 in Kenya found that contributors to use in the context of adolescents include peer pressure, curiosity, and seeking fun.

Training programs have shown promise in equipping lay providers to deliver effective interventions and enhance the capacity of teachers to support students (Substance Abuse Treatment, 2025). Incorporating life skills training, such as managing peer pressure and mental health, is recommended to enhance their impact (Substance Abuse Treatment, 2025).

Methods:

To address this burden, we are currently implementing a pilot care program in a secondary school in Uasin Gishu County, Eldoret, under the Academic Model Providing Access to Healthcare (AMPATH), a consortium of Moi University, Moi Teaching and Referral Hospital, and North American universities. We have partnered with Parents Teachers Association representatives, the Ministry of Health, the Ministry of Education, school heads, and curriculum review professionals in Uasin Gishu County to implement and oversee the project. Central to this initiative is the formation of substance use peer support groups in schools, led by trained teachers using a 10-session school-based substance use intervention manual aimed at educating, promoting well-being, and fostering recovery among students in school. It contains topics on education about substance use, life skills training, motivational interviewing, relapse prevention skills, and linkage to individual care. The program is delivered weekly during the guidance and counselling sessions by trained teachers. To adopt a school-led approach and refine the model before scaling, the project is being rolled out in phases.

Results

Each school has unique needs in terms of available resources and infrastructure required to support the program. In the secondary school where the first phase of the pilot project was launched in 2024, three support groups with a total of 56 students were formed and were facilitated every week during clubs'time by trained teachers. The students who had registered with the club showed a lot of interest and commitment to the program by attending the sessions even without teachers having to follow up.

The administration has also shown support by not punishing students who are involved with the club and by allocating time for the program.

Conclusion:

Most adolescents in Kenya between the ages of 15 and 19 years spend significant time in school. Teachers are therefore uniquely positioned to support students with substance use and related issues. Training programs show promise in equipping teachers to become lay providers in delivering effective interventions and enhancing their capacity to support students (Substance Abuse Treatment, 2025).

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