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A STUDY OF DRUGS USE AWARENESS AMONG STUDENTS IN KENYA

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ABSTRACT

The study aims to assess the substance use related literacy among the medical students in government based medical college in the Nairobi, Kenya. The methodology of the study was cross sectional based on survey method. Result states that majority of students reported there is presence of substance abusing youths are existed in their classrooms. Results also shows that there is low level of self-intake substance and increase assertiveness as found among medical students.

Keywords: Substance Use, Medical, Students, Health Literacy, Mental Health, Kenya

INTRODUCTION

The term "mental health literacy" (MHL) is about beliefs and knowledge about mental disorder which aid recognition, management or prevention about something. MHL is about understanding some disorder, understanding when and how to search suitable mental health information, and related causes and risk factor-based knowledge. It also consists of understanding of health-related information, risk factors, self-treatments, and seeking professional help [1, 2]

The college life time is a transitional stage among individuals' development and also contains high risk for initiating substance use. It is estimated that globally, about 1.2 billion individuals

are victims of substance abuse. At global level, there is increase in use of addictive substance use since now these substances are easily available and mostly individuals adopt using these because of poor company.

Chatterjee *et al.* [3] stated that the use of substance among university level student is increasing across the world. Common factors leading to this trend include easily availability, desire to be popular rapidly, poor role model, pressure from peer group and experimentation behavior leading to this trend. There is trend of using substance all over the world and this trend is more concentrated among university and college level students [4, 5, 6, 7, 8, 9, 10, 11]

The alarming facto is that a lot of time, college and university level students and the health professionals have poor knowledge of the negative effects of harmful effects of substance usage [12, 13, 14, 15, 16, 17]. Studies conducted in this domain shows that the substance usage is facilitated because of poor knowledge about its effects ^[18, 19, 20, 21]

Objective

The objective of the study are as follows;

• To measure the mental health literacy (knowledge and attitude about substance use) among medical college students in a Kenyan medical college.

MATERIALS AND METHODS

The participants of the study are medical college students in their second, third, and final years studying medical degree program. The first-year student was excluded from the study. We adopted questionnaire named 'Knowledge and Attitude Addiction Questionnaire for Adolescent (KAAQA)' [14]. It is a self-reported survey which is used to measure knowledge about substance use and its effects. The study nature is cross-sectional. The questionnaire consists of 31 statements where individuals are required to answer on dichotomous scale of yes or no. We took informed consent from all participants. The questionnaire was administered on individual basis and through physical distribution and collection back on same day.

Population and Sampling

For this study, the population represent all medical students, however, we selected only one medical college which is a government-based college in the city of Nairobi, Kenya. We used convenience non-random sampling for data collection.

Statistical Analysis

We collected data from participants and entered in SPSS version 21. Analysis included frequencies, mean, standard deviation, chi-square test for comparison purpose.

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Variable	Male (N=209) Frequency (%)	Female (N=217) Frequency (%)	(χ^2) value	P value			
Marital status: Single	207 (99)	202 (93.1)	10.048	0.007			

RESULTS AND OBSERVATION Table 1: Socio-demographic Details

	Married	1 (0.5)	4 (1.8)				
	Engaged	1 (0.5)	11 (5.1)				
Religion:	Christian	202 (96.7)	205 (94.5)				
	Muslim	3 (1.4)	7 (3.2)		0.064		
	Hindu	0	4 (1.8)	7.274			
	Others	4 (1.9)	1 (0.5)				
Year of study: 2 nd year		108 (51.7)	101 (46.5)	0.926	0.336		
	3 rd year	101 (48.3)	116 (53.5)				
Family type:	Nuclear	142 (67.9)	171 (78.8)	= 00 c	0.015		
	Extended	67 (32.1)	46 (21.2)	5.896	0.015		
Locality:	Urban	172 (82.3)	126 (58.1)	••• •	0.0004		
	Rural	37 (17.7)	91 (41.9)	28.6	<0.0001		
Mean Age (SD) =19.66 ±1.07							

 χ^2 test applied between Medical College and Nursing College group Students; P <0.05 was considered statistically significant. There were total of 207 male and 202 females participated in the study making total of 426 in the study. Most participants were single in male category (207) as well as in female category (202). Religion wise, most participants were Christians (202) in male category and in female category, there were 205 Christians. The family type was mostly nuclear as 142 participants in male category and 171 participants in female category. Most participants in both male and female category comes from urban areas.

Table 2: Substance use related knowledge and attitude (KAAQA)

No	KAAQA Items	Total Sample (N=426)	Total Percentage	Male Students (N=209)	Female Students (N=217)	χ2 value	P value
1	Risk of substance use if staying with such people	353	82.8638	165	188	0.407	0.4777
2	Substance use improves memory/ concentration	376	88.2112	186	190	27.917	< 0.0001
3	Most of youth starts substances with peer group	257	60.32864	48	209	2.494	0.0714
4	Substances reduces stress	284	66.66667	167	117	11.27	0.0007
5	Substances don't damage health if used in small amount	219	51.40845	85	134	4.411	0.0227
6	Most of substance abuser don't know their harmful effects	141	33.09859	65	76	0.129	0.7149
7	It causes liver damage if used for longer duration	365	85.68075	187	178	9.992	0.0017

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8	People appear influential/ rich on consumption of substance	387	90.84507	198	189	10.094	0.0014
9	One should not take substances which cause bad effect but one may take substances which won't cause such bad effects	124	29.1	56	68	7.701	0.0044
10	Chewing tobacco may cause oral & throat cancer	177	41.5493	87	90	4.914	0.0149
11	If one won't feel intoxicated over consumption of larger amounts it shows that he is healthy	121	28.40376	56	65	19.914	<0.0001
12	Females won't consume any substance	55	12.9108	21	34	10.92	0.0009
13	There is no treatment for addiction	52	12.20657	30	22	4.942	0.0147
14	Substance abusers are bad people so they should not be helped	59	13.84977	31	28	4.717	0.0177
15	Majority of substance abuser are rich people	94	22.06573	45	49	44.927	0.0001
16	Injecting drugs may cause HIV	122	28.6385	54	68	17.14	0.0001
17	Most of youth don't take any substance	334	78.40376	165	169	0.142	0.7044
18	Willful subjects may quit substance any time despite longer intake of substance	166	38.96714	88	78	0.441	0.4019
19	Drugs increases pleasure of life	341	80.04695	178	163	19.197	0.0001
20	One should take substance at least once just to understand that it causes damage	343	80.51643	180	163	11.492	0.0007
21	If someone takes substance at home there is more risk for such intake in family	166	38.96714	76	90	0.001	0.9772
22	Substance abusing youth are influential in their peer group	172	40.37559	90	82	1.979	0.0902
23	Substance abusing youth are more likely to succeed	289	67.84038	123	166	27.17	< 0.0001
24	There is no problem in substance take until it is revealed to others	171	40.14085	87	84	19.017	< 0.0001

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25	Harmful effects of drugs are only			55	65	17.707	< 0.0001
	temporary	120	28.16901				
26	Youth takes substance only when there is any quarrel between parents/ peers	99	23.23944	45	54	1.429	0.1149
27	Have you taken any substance?	116	27.23005	55	61	9.701	0.0019
28	Does any of your friend takes substances	80	18.77934	36	44	9.971	0.0017
29	Does any of your family member takes substance	147	34.50704	89	58	0.219	0.4711
30	Do you have confidence to say no when somebody offers you any substance	146	34.2723	90	56	19.047	<0.0001
31	Do you want to have correct information regarding how to prevent substance intake	223	52.34742	78	145	1.129	0.1971

 χ^2 test applied between Medical College and Nursing College group Students; P <0.05 was considered statistically significant

For item 1, most people (82.8%) agreed that they face risk of substance use if they stay with such individuals who use substance. For item 2, large proportion (88.2%) stated that substance use improves their memory. For item 3, majority participants (60.32%) started substance because of peer groups. For item 4, moderate percentage of participants (66.6 %) considered that substances reduce their stress level. For item 5, minority of participants (51.4%) stated that substances do not damage health if used in small amount. For item 6, less participants (33.0%) stated that substance abusers do not know the harmful effects of substance. For item 7, majority participants (85.6%) stated that they are aware that substance use cause liver damage if used for longer duration. For item 8, most participants (90.8%) stated that use of substance makes them appear influential or rich. For item 9, moderate participants (29.1%) stated that one should take those substances which do not cause bad effects and do not use substances which causes bad effects. For item 10, moderate participants (41.5%) stated that chewing tobacco may cause oral and throat cancer risk. For item 11, minority participants (28.4%) stated that if one won't feel intoxicated after consumption of larger amount, it shows that this person is healthy. For item 12, minority participants (12.9%) stated that female won't consume any substance. For item 13, minority participants (12.2%) stated that there is no treatment for addiction. For item 14, minority participants (13.8%) stated that substance abusers are bad people so they should not be helped. For item 15, minority participants (22.0%) stated that majority of substance abusers are rich people. For item 16, majority participants (28.0%) stated that injecting drugs may cause risk of HIV. For item 17, minority participants (78.4%) agreed that most of youth do not take any substance. For item 18, minority participants (38.96%) stated that individuals are able to quit substance any time even if they are taking it for longer time. For item 19, majority of participants (80.0%) stated that drugs increase pleasure of life. For item 20, minority of participants (28.87%)

stated that one should take substance at least once just to understand that it causes damage. For item 21, minority participants (38.9%) that if someone take substance at home, there is risk that family members may start using the substance. For item 22, moderate participants (40.3%) stated that substance abusing youths are influential in their peer groups. For item 23, majority participants (67.8%) stated that substance abusing youth are more likely to succeed. For item 24, minority of participants (40.1%) stated that there is no problem in substance intake until it is revealed to others. For item 25, minority of participants (28.1%) stated that harmful effects of drugs are only temporary. For item 26, minority of participants (23.2%) stated that youth takes substance only when there is any quarrel between parents or peers. For item 28, minority of participants (27.2%) admitted that they have taken substance. For item 29, minority of participants (34.5%) stated that their friends take some substance. For item 30, minority participants (34.2%) stated that they have confidence to say no when somebody offers them some substance. For item 31, moderate participants (52.3%) stated that they want correct information about how to prevent substance intake.

Discussion

Individuals may start using drugs during the college life mainly due to the immature mind, lack of understanding, and influenced by peers. The misconception is that use of substance will help them overcoming some negative things such as stress [22]. It is important to develop suitable strategy to curb substance use among college and university students since it is at this stage where individuals are at risk of start using substance [23]

We found that students we surveyed were mostly aware of the harmful effects of substance such as cancer, liver damage, and throat infections [20, 24]. The college student major source of information are friends, teachers, parents, and media [4, 14, 24, 25]. An alarming finding is that most students reported higher risk of substance use due to the peer pressure or staying with induvial who take substances. However, positive sign is that mostly students reported that they are able to say no or like to avoid substance use as they have good knowledge about the negative effects of substance use. Individuals who had personal experience of someone 'with a substance use problem' reported that they had negative attitude [12, 17]. In this study minority of students agreed for taking any substance by themselves (14.8%) or by their family members (27.7%) and friends (34.1%) which was similar to another study [20].

Prevention based awareness programs are important to decrease demand by informing students about the relative risks of dependence on various substances based on current knowledge of these risks. As the substance use usually begins after the age of 12 and rises with the increased age, therefore, the preventive substance use disorder education should begin in early adolescence which can deter or delay substance use through changes in

knowledge, attitude, and behavior [26, 27, 28, 29, 30] Adolescent substance use education must meet the needs of those not taking any substance as well as those experiencing initial substance

exposures. Education provided at early age is important in modifying students' responses in substance use situations and in the later age it is most meaningful [27].

Prevention programs should also be targeted to an individual's substance specific educational needs [26, 28] Comprehensive approaches that address behavioral, emotional,

and environmental factors are more effective in eliciting long term effects [26, 27, 28, 29, 30].

CONCLUSION AND IMPLICATION

The conclusion of the study is that among the medical students surveyed, majority of students reported higher risk of substance use due to the staying with such individuals. Majority of students agreed that if they take substance home, it will also be used by some family members. Majority of individuals reported that there is someone in their circle who is using substances. However, it can also be concluded that medical students are aware of the negative effects of substance use

Recommendation

Our first recommendation is that there is need for development of suitable awareness program for medical college students in order to reduce the risk of substance use among these individuals.

Limitation

The limitation of the study includes small sample size, single focus of medical college students, single city based sample, and self-reported measure.

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