

NACADA QUARTERLY

A Publication of the National Authority for the Campaign Against Alcohol and Drug Abuse



Interior CAS Roots for Continuous Review of Supply Suppression Strategies

Partnership to Weed Out Alcohol and Drug Abuse in Primary Schools in Bomet County

Drinking Alcohol to Relieve Hangover Could Lead to Addiction

Study Links Alcohol Consumption to Premature Ageing of the Brain

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CEO's Message



Two years since the arrival of COVID-19 in our country, we have for the first time witnessed a sharp decrease in the number of cases reported. The government moved to relax most of the containment measures in March, something that has enabled us to gradually go back to our normal lives. As an Authority, we are glad to have successfully made it through the challenging period. We are proud of our staff for embracing vaccinations and adhering to the pandemic protocols. Moving forward, we hope to work seamlessly and achieve more as an organization than before.

As the year progresses, we will continue to examine what has worked and what has not at the organizational and individual scale. We will also assess how our strategy has fared, how our programmes have helped respond and thrive under the strain of extraordinary circumstances, and acknowledge where we need to improve.

In our quest to boost drug use prevention amongst learners, we are looking forward to working closely with primary and secondary schools in the country. We aim to do this through collaborating with the Ministry of Education, County Governments and other relevant bodies so as to

play our rightful role in curbing drug and substance abuse in our schools.

We also managed to attend this year's 65th Session of Commission on Narcotic Drugs (CND) at the United Nations Office on Drugs and Crime (UNODC) Headquarters in Austria. While reporting on changes in the scope of controlled substances, we were delighted to inform the UN member states that Kenya had included two drugs, Tramadol and Ketamine, in the list of controlled substances. These drugs have registered an increase in misuse in the recent past.

Lastly, two of our board members, Dr. Kepha Ombacho and Esther Gathogo, left the Authority to pursue other interests. We thank them for their selfless service to the Authority and wish them all the best in their future endeavours.

**Victor G. Okioma, EBS
CHIEF EXECUTIVE OFFICER**

Editor's Note



Welcome to this edition of the newsletter.

We have exciting articles on the various issues related to our mandate, one of which is how alcohol manufacturers are using stimulating strategies to target a niche female market.

Without looking at scaring anyone, one of our contributors has put down an article that is based on scientific studies which show that continuous alcohol use shrinks the brain. While heavy drinking has long been linked to cognitive decline, a new study suggests that it might not take much alcohol at all to trigger negative changes in the brain.

Tobacco use and control continues to be a challenge within the country and in Africa at large. Enjoy reading the various angles to this issue with the undersigned's eye opening training in South Africa. The Tobacco Industry Monitoring training provided an opportunity to share experiences with

tobacco control advocates from various African countries, as well as a critical analysis of the tobacco industry especially its interference tactics.

There are a few other interesting articles in the newsletter which are aimed at keeping you, our valued stakeholder, well briefed about the various happenings within the Authority.

Enjoy the reading!!!

Simon Mwangi
**MANAGER, CORPORATE
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Partnership to Weed Out Alcohol and Drug Abuse in Primary Schools in Bomet



NACADA Board Chair Prof. Mabel Imbuga (right) together with Bomet Deputy Governor Shadrack Rotich (middle) during the meeting on March 15, 2022 in Bomet County. / **Photo: Courtesy.**

By Simon Mwangi

NACADA is aspiring to roll out alcohol and drug abuse (ADA) training for primary school teachers in Bomet County to curb the menace.

This was revealed during a meeting between the Authority's Board Chair Prof. Mabel Imbuga and the county's Deputy Governor His excellency Hon. Shadrack Rotich.

Speaking during the consultative meeting that brought together representatives of the county's Education department, the Bomet County Alcoholic Beverage Control Agency (BOCABCA) and the Kenya Primary School Heads Association (KEPSHA), the Chair underscored the need for children in primary schools to be prevented from abusing drugs.

"Statistics from NACADA have time and again indicated that we have high prevalence rates for various drugs among children as young as nine years old. This is a worrying trend that needs to be nipped in the bud if we are to win the fight against alcohol and drugs in this country. Our collaboration with Bomet County will be a model one that we hope will be replicated across the country," said Prof Mabel.

In 2013 the alcohol prevalence rate in the county was approximately above 30 percent but through BOCABCA's

strategies, this has been brought down to approximately 22 percent.

Speaking during the same meeting, the Deputy Governor observed that there are approximately 500 alcohol dispensing outlets licensed in the county, down from 1,640 in 2014, which is one of the measures the county is putting in place to reduce availability and consumption of alcohol.

"In realization of the momentous problem that we are facing, and in appreciation of the partnership with NACADA, the county government through its Education department and in collaboration with KEPSHA will mobilize 750 primary school teachers from its 25 sub-counties who will be trained by the Authority to be the ADA champions in their respective schools," said the Deputy Governor.

The county government will also organize for public barazas targeting 5,000 parents and 16,000 pupils for sensitization forums on alcohol and drug abuse.

In collaboration with NACADA, the county will train program monitors who will ensure that objectives of the prevention programs are being met and who will provide an oversight role during the program roll out.

Development of Communication Policy and Strategy on Course



NACADA Corporate Communications Manager Simon Mwangi takes the CEO and staff through the draft Communication Policy and Strategy at Thika Greens Golf Resort. / **Photo: Samuel Musungu.**

By Neema Nyakairu

The Authority is in the process of developing a Communication Policy and Strategy that will help to streamline its communications to the target audiences and thereby contribute to the realization of the organizational objectives.

The technical team involved in the process held a two-day retreat towards the end of March at Thika Greens Golf Resort to take stock of what had been done, identify gaps and lay out a plan on how to carry out what was remaining. The team reviewed and made appropriate changes to the two draft documents and drafted strategic objectives for the Communications Strategy.

NACADA Chief Executive Officer Victor Okioma expressed his satisfaction with the progress and urged the staff to work on the pending activities so that the documents be approved by the board as scheduled. He provided his insights on the drafts and wished the team well as they carry on with the remaining tasks.

Prior to the meeting, the staff members had done stakeholder mapping and audience segmentation. This was key in identifying the Authority's stakeholders and pinpointing their expectations as well as those of the Authority. They also did situational analysis whose aim was to find out the communication channels that the internal and external stakeholders use to receive messages from the Authority as well as the channels that they think should be explored. The situational analysis also focused on the satisfaction levels and relevance of the messages by the recipients and recommendations on how NACADA can improve its communications.

The next steps of the development of the documents include crafting key target messages and channels, review of zero drafts, development of monitoring and evaluation plan, presentation of the second drafts to the board for their input, and stakeholder validation.



NACADA Chief Executive Officer Victor Okioma gives his input on the draft Communication Policy and Strategy. / **Photo: Samuel Musungu.**

The development of the Communication Policy and Strategy started last year in collaboration with the Directorate of Public Communication, which is under the State Department of Broadcasting and Telecommunications in the Ministry of ICT, Innovation and Youth Affairs. The process is expected to be finalized and the two final documents launched by June this year.

Interior CAS Roots for Continuous Review of Supply Suppression Strategies



Ministry of Interior Chief Administrative Secretary Winifred Guchu at the UNODC Headquarters in Vienna, Austria. Behind her is NACADA Chief Executive Officer Victor Okioma. / **Photo: Courtesy.**

By Samuel Musungu

Ministry of Interior Chief Administrative Secretary Winifred Guchu has called for continuous review of the strategies employed in drug supply reduction.

While delivering Kenya's statement during the general debate of the 65th Session of Commission on Narcotic Drugs (CND) on March 14, 2022 in Vienna, Austria, the CAS said the trends of illicit drug trafficking and abuse keep evolving and, thus, require vibrant and modern responses.

"These strategies should be sufficient in addressing money laundering, identification of illicit financial flows, illicit cultivation and use of the dark net as well as postal deliveries. We must also go beyond rescheduling of substances to addressing the supply of precursor chemicals that are used in such illicit manufacture," said Guchu.

She revealed the country has witnessed increased levels of illicit drug trafficking and abuse, which have led to negative outcomes such as substance use disorders (SUDs), drug overdose, insecurity, mental illnesses, HIV infections, and premature deaths. This, she explained, is why Kenya has adopted a multi-pronged approach to curb both demand and supply reduction.

On the global scale, Guchu said the situation is no different as drug abuse, illicit production and trafficking continue to pose a serious risk to people's wellbeing. "The effects of SUDs are unforgiving, disrupting communities and families

with many paying the ultimate price of losing their lives through drug-related crime and illnesses."

"These effects have been worsened by COVID-19 that has seen many people progress from drug use to addiction and many others initiated to drug use because of the pressure and stress associated with the close-down of most economies and the pandemic restrictions."

The CAS further elucidated that due to its complexity and dynamism, the world drug problem requires heavy investment to support effective investigations, prosecution and other criminal justice procedures. She urged the international community to offer both financial and technical support to developing countries so as to have a unified response against the problem.

"Being a shared problem, the world drug problem requires cooperation and collaboration at all levels. Indeed, no state can claim to be self-sufficient in dealing with the complexity of drug trafficking. We therefore appreciate forums provided by the Secretariat as there is always something we can learn from each other."

During the same session, NACADA Chief Executive Officer Victor Okioma said Kenya supports the World Health Organisation's recommendation to include Brorphine and Metonitazene in Schedule 1 of the 1961 Convention and Eutylone in Schedule II of the 1971 Convention.

He implored the global health body to further evaluate Tramadol and continue discussions on Ketamine, which is witnessing an increase in use and misuse.

"The control of Tramadol and Ketamine is critical in addressing public health concerns particularly in developing countries. To further strengthen national control measures, Kenya has so far included both Tramadol and Ketamine in the list of controlled substances following review of the Narcotic and Psychotropic Control Act," said the CEO.

Tramadol is a medication used for short-term management of moderate to severe pain in adults while Ketamine is an anaesthetic used to induce sleep or numb sensation in certain parts of the body.

The United Nations Office on Drugs and Crime (UNODC) organizes CND sessions every year to provide a platform for the UN member states to discuss the world drug situation as well as adopt resolutions on related issues. CND makes the final decisions on the WHO's proposals to schedule, re-schedule or de-schedule a substance.

Kenya Makes Progress in Alternative to Incarceration (ATI) Initiative for Persons with Substance Use Disorders



NACADA Public Education, Advocacy and Rehabilitation Director Dr. Yvonne Olando makes her presentation at the UNODC Headquarters in Vienna, Austria. / **Photo: Courtesy.**

By Samuel Musungu

The Government of Kenya, through NACADA in collaboration with the United Nations Office on Drugs and Crime (UNODC), debuted an initiative known as "Treatment and care for people in contact with the Criminal Justice System: Alternatives to Conviction or Punishment" in 2018. This formed part of the Commission on Narcotic Drugs (CND) resolution 58/5 on "Supporting the collaboration of public health and justice authorities in pursuing alternative measures to conviction or punishment for appropriate drug-related offences of a minor nature".

Speaking during the 65th CND Session at the UNODC Headquarters in Vienna, Austria, on March 16, 2022, NACADA Public Education, Advocacy and Rehabilitation Director Dr. Yvonne Olando said the initiative was aimed at supporting the development and mainstreaming of alternative measures along the criminal justice continuum for people with drug use disorders.

"This was in cognizance of the fact that alternative measures exist and include those to prosecution e.g. diversion and to incarceration e.g. community service orders and probation," said the Director.

She stated that Kenya held two multi-agency workshops on Alternatives to Incarceration (ATI) for persons with drug use disorders in contact with the criminal justice system in 2021, specifically a training for policy makers on ATI in September and a follow up workshop on the work done by the various

agencies, formation of the ATI steering committee and its operational framework in November.

Other steps taken so far include the formation of a multiagency steering committee to drive the agenda on ensuring take up and mainstreaming of ATI for persons with substance use disorders in contact with the criminal justice system as well as the development of a National Action Plan characterised with short & long-term goals in all the case proceedings stages: pre-trial, trial and post-trial.

Dr. Olando revealed that the next steps in the ATI Initiative include activation of the aforementioned steering committee and implementation of the Action Plan by the committee, stakeholders, and policy makers.

She said this implementation will involve review and revision of the Standard Operating Procedures (SOPs) and relevant screening and referral to treatment instruments, development of relevant policies, and establishment of partnerships among different criminal justice, healthcare and community service actors. Others are Identification and dissemination of best practices and monitoring, evaluation of and learning from the ATI project to inform future decisions and actions.

The Criminal Justice System in Kenya is made up of interdependent sub-systems, which include the courts, police, prosecution, witness protection and prison services.

Tobacco Industry Monitoring: Musings from a Training in South Africa



Participants drawn from eight African countries during the Africa Tobacco Industry Monitoring (ATIM) training in Pretoria, South Africa. Among them is NACADA's Corporate Communications Manager Simon Mwangi (far right). / **Photo: Courtesy.**

By Simon Mwangi

The “tobacco industry” includes manufacturers, importers and distributors of tobacco products and processors of tobacco leaf – an entire group of businesses whose only goal is to make profits, directly or indirectly, from tobacco products.

The tobacco industry has energetically promoted tobacco sales, despite knowing for decades that tobacco use and exposure to secondhand tobacco smoke damages people’s health. Despite a promise made in 1954 to investigate and share all research findings, the industry has hidden the facts from the public and continues to deny the full impact of tobacco products in order to maintain profits and increase sales.

Dependency on tobacco is engineered, in the case of smoking, by careful, calculated formulations of more than 1000 chemical and other ingredients. The tobacco industry sells a product that, unlike any other legal commercial good, kills up to half its regular users when consumed as directed by the manufacturer.

The tobacco industry puts profits before people

There is a fundamental and irreconcilable conflict between the tobacco industry’s interests and public health policy interests. In one corner, the tobacco industry produces and promotes a product that has been scientifically proven to be highly addictive, to harm and kill many and to give rise to a variety of social ills, including increased poverty.

The tobacco industry has decades of experience of operating away from the public eye. Although these covert tactics continue, in recent years tobacco industry opposition has become more aggressive and overt.

It increasingly includes direct counter-action against policies and strategies contained in, and promoted by, the WHO FCTC. The objective is to extend the tobacco industry’s sphere of influence with the aim of reaching all levels and sectors of government, as well as nongovernmental groups including the private sector and civil society, while trying to appear before politicians and the public as indispensable contributors to economic and social welfare.

Forms of tobacco industry interference

In its efforts to derail or weaken strong tobacco control policies, tobacco industry interference takes many forms. They include:

- maneuvering to hijack the political and legislative process;
- exaggerating the economic importance of the industry;
- manipulating public opinion to gain the appearance of respectability;
- fabricating support through front groups;
- discrediting proven science; and
- intimidating governments with litigation or the threat of litigation.

How to Help a Person with Substance Use Disorder



A person with substance use disorder receives his dose of methadone at a Medication Assisted Therapy clinic run by Doctors Without Borders (MSF) at Karuri Level 4 hospital in Kiambu on October 3, 2019. / **Photo: Reuters.**

By Laura Agesa

The sight of a loved one battling substance use disorder (SUD) can be both mentally and emotionally draining. The worst part is they may also be eager to quit the habit but just can't quite get there. However, you may be in a better position to help them beat SUDs if you don't indulge in the substances yourself. With the following directions, you can easily be of help to your friend, family, or neighbour who is struggling with SUDs:

Build a Good Relationship with the Person

People with SUDs tend to run away from people or an environment where they sense hostility or feel judged. Therefore, you need to build a relationship with the person in question so that he or she can trust that all you have their best interests at heart. That way, you can initiate talks about addiction and help them see past their addiction. You would have enabled the individual be open to look for assistance to overcome SUDs.

Respect their Boundaries

In this case, you should not force them to express themselves or quit alcohol and drug abuse. If they value their privacy, then respect that and don't act like an investigative

officer. You are there as a friend and your support is all that the person needs.

Seek Help from the Person's Family

As much as you would like to help, you must understand that it won't be a walk in the park. You will need the support of those close to the victim and family. Not all family members are close and hence getting to know those that are close to the individual will prevent trust issues with them.

Focus on Free Will

To help a person, you need to make sure the decision to quit comes from within them. As a support system, the only thing you can do is advise and direct. The choice to stop should be one's own decision. This will enable you to be sure that he or she will walk through the rehab journey determined to quit regardless of the relapse risks that might come their way.

Helping a friend or family is not an easy decision. And if you choose to go that direction, you should be mentally prepared for the task. It is a noble step that will require you to exercise a lot of patience along the way. In the event you lack knowledge about anything, consult an expert and hopefully you will conquer.

Long-Held Alcohol Link to Longer Life Debunked



Alcohol being poured into a glass. / Photo: Getty.

By Samuel Musungu

Over the years, some researchers, media outlets, and the alcohol industry have continuously propagated the notion that alcohol reduces the risk of cardiovascular diseases (CVD) and, thus, prolongs life. A new report by the World Heart Federation (WHF) - a Switzerland-based NGO that champions heart health and aims to reduce the burden of stroke and heart disease worldwide- has termed the assumption misleading.

"The myth surrounding the protective behaviour of alcohol has been suggested to be due to their role in increasing high-density lipoprotein (HDL) cholesterol. However, many studies have not found any effect of high HDL in reducing the risk of myocardial infarction. Alcohol has been associated with coronary calcification and increased carotid intima-media thickness, which can deprecate vascular health," reads part of the WHF's policy brief titled *The Impact of Alcohol Consumption on Cardiovascular Health: Myths and Measures*.

The document revealed that the prevalence of CVD has almost doubled over the last two decades, chiefly due to alcohol consumption. It stated that 2019 alone recorded over 500 million new cases while more than 18.5 million people died of CVD, making it the top cause of mortality and disability globally. Other than alcohol consumption, the report mentioned tobacco use, low physical activity, and unhealthy diet as other preventable behavioural risk factors that contribute to CVD.

It further disclosed that alcohol has been linked to about 230 International Classification of Diseases, 10th edition (ICD-10 diseases), out of which 40 would not prevail minus alcohol. The organization also said that alcohol is associated with deaths caused by infectious diseases,

digestive diseases, intentional and unintentional injuries, and a number of non-communicable diseases (NCDs).

"Recent evidence has found that no level of alcohol consumption is safe for health. Alcohol consumption negatively affects mental and physical health and is also linked with poorer quality of life and poverty. Even in smaller quantities, alcohol consumption can increase the risk of breast cancer. It can cause more severe motor and cognitive dysfunction in women at much lower levels of consumption than men."

Apart from the direct health implications on the drinker, WHF said alcohol intake is responsible for a major societal impact. "It is linked with motor vehicle accidents, injuries, familial discord, and burden on a country's criminal justice system, among other negative outcomes. Also, children with parents who suffer from alcohol abuse were found to exhibit higher rates of alcoholism in their life span."

The policy brief pointed out that some of the studies that show positive effects of alcohol are funded by the alcohol industry, derive evidence from observations rather than scientific research, and contain unaccounted confounding factors, which weaken the quality of the evidence. It clarified that no randomized controlled trials (RCTs) have confirmed the health benefits of alcohol.

"Alcohol industries deceptively promote their products under the labels of 'healthy' and 'safe'. The portrayal of alcohol in print and electronic media as necessary for a vibrant social life has diverted attention from the harms of alcohol use. Youth-targeted advertisements and encouraging alcohol as 'heart-healthy' have created a conducive environment for young adults to relate alcohol with having a good time."

WHF stated that the persistence of misinformation and interference from the alcohol industry as well as the lack of investment in evidence-based alcohol control strategies have frustrated public health experts' efforts to make significant progress in curbing alcohol-related harms and deaths.

The federation suggested enforcing comprehensive restrictions or bans on alcohol sponsorship, advertising, and promotion. This, it said, will lower the incidence of alcohol use since these advertisements have a huge impact on young people. It added that the restrictions will curtail the alcohol industry's ability to influence social norms through false depictions in their adverts.

Study Links Alcohol Consumption to Premature Ageing of the Brain



The study found reductions in grey and white matter on the brain structure with increase in the amount of alcohol consumed. /

Illustration: Northwestern Medicine.

By Neema Nyakairu

One to two units of an alcoholic drink per day is likely to accelerate the ageing of your brain by two years. This is according to a study by *Nature Communications*, which primarily looked into how alcohol intake affects the gray matter and white matter microstructure in the brain. An alcohol unit is equivalent to roughly half a beer while two units a bottle of beer or glass of wine.

The research showed that, even in modest levels, alcohol has an impact to the brain, including changes in the brain structure and the reduction in its volume. It also found reductions in grey and white matter on the brain structure with increase in the amount of alcohol consumed.

"Going with the level of alcohol consumption, this relation grew sturdier. For example, when moderate drinking in 50-year-olds increases from one alcohol unit a day to two units, substantial changes are observed in the brain which is in turn alike to aging two years, then going from two alcohol units to three is like aging three and a half years," reads part of the findings.

The grey matter is throughout the central nervous system and allows individuals to control movement, memory, and emotions while the white matter are the parts of the brain and spinal cord that are responsible for communication within.

Remi Daviet, one of the authors of the findings, said consumption of two to three units of alcohol a day was

associated to ageing of three and a half years. "It's not linear. It gets worse the more you drink," he said.

The study was done by utilizing multimodal imaging data from 36,678 generally healthy middle-aged and older adults from the UK Biobank.

"Participants were grouped according to their level of alcohol consumption causing a pattern to slowly materialize: The gray and white matter volume that the individual's other characteristics might otherwise predict was reduced," reads part of the research findings," reads the publication.

A corresponding author on the study and a faculty member at Penn's Wharton School, Gideon Nave, said, "The fact that we have such a large sample size allows us to find subtle patterns, even between drinking the equivalent of half a beer and one beer a day. Having this dataset is like having a microscope or a telescope with a more powerful lens. You get a better resolution and start seeing patterns and associations you couldn't before."

He added that even though the study only focused on the correlations, drinkers may have to reconsider the amounts of alcohol they take. "This study looked at average consumption, but we're curious whether drinking one beer a day is better than drinking none during the week and then seven on the weekend. There's some evidence that binge drinking is worse for the brain, but we haven't looked closely at that yet."

Tricks or Treat: Feminization of Alcohol Advertising



The alcohol industry has been able to develop and market products that appeal to women's tastes and lifestyle choices. / **Photo:** Shutterstock.

By Caroline Kahiu

Every year in March, the world celebrates the achievements and contributions of women and girls, and simultaneously recognizes the barriers they continue to face. Today, the world is facing several significant challenges that disproportionately impact women and girls, including the ongoing COVID-19 pandemic, humanitarian emergencies, climate migration, conflict, curtailment of rights and substance use issues.

Pink, glitter, "mummy wine o'clock time"....alcohol selling strategies can be patronizing and damaging. We have seen a shift in the culture of women's drinking and there is a big marketing piece of that. The alcohol industry has been able to develop and market products that appeal to women's tastes and lifestyle choices. We have seen marketing adverts focusing on slimness, weight, pink packaging, low calories and messages of empowerment in celebration of women in association with International Women's Day, Valentine's Day and even Mother's Day.

Unfortunately, more and more women are addicted to booze and increasingly suffering from the ill effects of alcohol. Women bodies are affected differently by alcohol than men's bodies for reasons that go beyond mere size. Female bodies break down alcohol differently and that makes women more vulnerable to alcohol-related health risks.

Women react more quickly to booze because they are far less able to break down and digest alcohol before it circulates in their blood system and brain. The key is an enzyme in the stomach called alcohol dehydrogenase that

breaks down alcohol before it enters the bloodstream. As a result, women are also likely to suffer from liver damage than men do and develop other adverse effects of alcohol more quickly than men.

That is why we need to pull the alarm lever, if the level of marketing gets the same energy as it is for men, the harms will be greater for women than for men. What we need to remember is that alcohol advertising normalizes drinking. Young people are consuming alcohol advertising through social media just like adults.

There needs to be a policy change by governments to restrict alcohol advertising to better regulate the types of messages reaching young girls in particular. This can curb some of the damage that marketing can do both online and in broadcast media, as well as bolstering organizations that promote alcohol-free lifestyles.

Alcohol use prevention, public health bodies and advocates have flagged out the fact that more women are drinking alcohol as well as a rise in female binge drinking and alcohol related deaths. Yet it is not clear their message is being heard amid a barrage of female oriented alcohol advertising.

One thing is clear: gendered marketing remains a reality across all aspects of daily life. Unlocking many values that the alcohol adverts and products purport to tap into such as happiness, empowerment and independence require real change not a bottle of booze. We have to acknowledge that feeling empowered is not the same thing as actually being empowered.

Drinking Alcohol to Relieve Hangover Could Lead to Addiction



Hangover symptoms typically begin when the blood alcohol content drops significantly and is at or near zero. / Photo: Rawpixel.

By Simon Mwangi

Quite often alcohol imbibers in Kenya will be heard seeking to '*unlock*' the following day after a night out where they partook one too many. This is the justification for additional alcohol in the system to beat nasty hangovers characterized by binge or heavy drinking. A hangover is a group of unpleasant signs and symptoms that can develop after drinking too much alcohol. Hangover symptoms typically begin when the blood alcohol content drops significantly and is at or near zero. They're usually in full effect the morning after a night of heavy drinking.

Alcohol is the obvious culprit behind hangovers. But it isn't always the alcohol itself. Its diuretic or dehydrating effects actually cause most hangover symptoms. Chemicals called congeners can also cause more intense hangovers.

It is the process of dealing with the hangover that thrusts to the fore the very problematic nature of imbibers in handling the issue. Commonly referred to as '*kutoa lock*' it comes from the age-old idea that sometimes the cause of an ailment can also be its cure. In the case of a hangover, it means drinking more alcohol to relieve unpleasant symptoms like headache, dehydration, upset stomach, and fatigue.

This is a relatively common practice, with most social drinkers reporting that they have consumed alcohol to get rid of a hangover. The theory behind this hangover remedy is that if you drink more alcohol, your blood alcohol levels will rise and you will no longer experience hangover symptoms.

However, when you eventually stop drinking and blood alcohol levels return to zero, the hangover will return. In some sense, the practice can prolong the time until you experience a hangover — but it cannot prevent it entirely. Actually, those practicing this habit can easily slip into a medical condition known as dipsomania, a term describing a medical condition involving an uncontrollable craving for alcohol or drugs.

Alcohol Use Disorder (AUD) can be challenging to recognize and can lead to alcohol withdrawal syndrome (AWS), a potentially life-threatening disorder. Also called alcoholism, it is defined by the National Institute on Alcohol Abuse and Alcoholism (NIAAA) as a chronic relapsing brain disease characterized by compulsive alcohol use, loss of control over alcohol intake, and a negative emotional state when not using.

Preceded by a vague feeling of malaise and a burning sensation in the throat, dipsomania is a sudden need to drink that is irresistible, despite a short and intense struggle. The crisis lasts from one day to two weeks and consists of a rapid and massive ingestion of alcohol or whatever other strong, excitatory liquid happens to be at hand, whether or not it is fit for consumption. It involves solitary alcohol abuse, with loss of all other interests.

A variety of effective interventions exist to treat alcoholism. Some people will be able to change their rate of alcohol consumption, or quit altogether, simply by having had the devastating effects of their behaviour pointed out to them by someone they trust. Unfortunately, interventions by family and friends are sufficient in only a minority of cases.

A Gender Perspective on Effects of Drug and Alcohol Abuse



Women take a lot of time to metabolize alcohol and other drugs as compared to men, thus increasing their risk of getting affected by harmful metabolites. / **Photo: Shutterstock.**

By Laura Agesa

The world marked the International Women's Day on March 8. The theme for this year's commemoration was *break the bias*, which focused on reducing the gender inequality and segregation gap. When it comes to substance use, their impacts differ among men and women. They vary from health, parenting, mental health, response to treatment, and quitting.

The first drink or taste of drugs can easily lead to addiction. Biologically, women take a lot of time to metabolize alcohol and other drugs as compared to men, thus increasing their risk of getting affected by harmful metabolites. This can cause them to develop gastric ulcers, liver cirrhosis, brain impairment, shrinkage, and other diseases related to substance abuse after taking little amounts of alcohol and drugs for a relatively shorter period.

Women suffering from substance abuse disorders (SUDs) are vulnerable to mental health issues such as eating disorders and depression hence making them to neglect their roles in the society. However, this does not mean that men do not develop mental issues as a result of SUDs per se; it is only that research shows women are more affected.

Expectant women with poor general health, poor nutrition and lack prenatal care put the unborn child in danger when they engage in substance use. Although the effects of these

substances on the foetus have not been fully explored, one of the likely consequences is poor brain development. Continuous substance use during the first trimester may affect the connections and wiring of the foetal brain, thus injuring the child's ability to learn and impacting general brain development and maturity. On the other side, the mother is likely to suffer from miscarriages, preterm labour, and even death if not taken care of properly.

Furthermore, how the society perceives substance abuse among men and women makes it hard for women to seek treatment. Men are naturally viewed as strong compared to women, making it somewhat easy for them to open up about their drinking issues. A woman in the same scenario is shunned and viewed as irresponsible. This makes it hard for her to come out and seek help. Victimization is the cause of various negative outcomes among women who need help.

Most women also avoid seeking treatment fearing that their children will be left unattended to. As a result, majority of them suffer from anxiety, depression, low self-esteem, and suicidal behavior in silence.

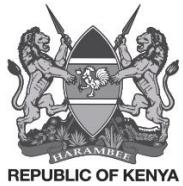
Appointment of Director, Compliance and Enforcement, Quality Control and Risk Management



The Authority is delighted to announce the appointment of Mr. James Koskey as the Director Compliance and Enforcement, Quality Control and Risk Management. Mr. Koskey brings vast knowledge and experience in government policies and reforms. He has also served as a District Commissioner in various posts across Kenya. Prior to joining NACADA, he was the Senior Deputy Secretary in the Ministry of Interior and Coordination of National Government.

He holds a Master's Degree in Public Administration and Management from Mount Kenya University and a Bachelor of Arts degree in Government and Public Administration. In addition, he is extensively trained in strategic leadership and development, conflict resolution and peace building, performance management, prevention and countering violent extremism and disaster management.

The Authority wishes him well as he takes up the new role.



CUSTOMER SERVICE DELIVERY CHARTER

At the **National Authority for the Campaign Against Alcohol and Drug Abuse**, we are committed to serving you promptly with courtesy and efficiency. This is our promise to you.

SERVICE	REQUIREMENTS TO OBTAIN SERVICE	SERVICE FEE (KSHS*)	TIMELINE
Serving Customers	Courtesy and respect	Free	Within 7 minutes
Access to Information			
Face to Face Enquiries	None	Free	Immediate
Telephone Enquiries	None	Free	Up to 3 rings
Correspondences	None		Acknowledgement within 7 days upon receipt
Suggestion box	None	Free	
Website	None	Free	Immediate. Visit www.nacada.go.ke
Official email info@nacada.go.ke	None	Free	Acknowledgement within 48 hours upon receipt
Social media platforms	None	Free	
Publications/IEC materials	None	Free	Immediate. Visit www.nacada.go.ke
Resource Centre	None	Free	Weekdays during working hours (Mon-Fri 8.00am to 5.00pm) excluding public holidays
Technical Services			
Research on alcohol and drug abuse- Baseline/ follow-up surveys	Letter of Request or proposal	Subject to contract guidelines	Acknowledgement and response with 7 working days. Services offered weekdays during working hours (Mon-Fri 8.00am to 5.00pm) excluding public holidays
Advise on development and implementation of ADA Workplace policies (Public & private sector organizations)	Letter of Request or proposal	Subject to contract guidelines	
Trainings/Capacity-building on ADA prevention, counseling, treatment, rehabilitation and aftercare (Public & Private Sector)	Letter of Request or proposal	Depends on required resources & scope. Each case on its own merit	
Basic counselling and referrals on treatment, rehabilitation and aftercare	None	Free	45 Minutes to 1 Hour
24-hour free Helpline service 1192: Counseling and referral services on alcohol and drug abuse	None	Free	Immediate*
Accreditation, advise, and licensing of treatment and rehabilitation facilities	None	Free	Acknowledgement and response with 7 working days
Licensing Alcoholic Drinks Importers and Exporters	Application	Depends on scope of operations	
Certification Training Program for Addiction Professionals (Three Phases)	Application	Ksh. 40,000/- physical and Ksh. 20,000/- virtual	
Enforcement on compliance to the ADCA, 2010 on alcohol and drug abuse	None	N/A	
Job or Attachment Application	None	N/A	
Payments for goods and services rendered	Relevant documents to support payments	N/A	
Procurement of goods and services	Relevant documents	As per PPRA	

*Depends on when a counselor concludes serving clients before an incoming call.

Any service that does not conform to the above standards or any officer who does not live up to the above commitment to courtesy and excellence in service delivery should be reported to:

CHIEF EXECUTIVE OFFICER

National Authority for the Campaign Against Alcohol and Drug Abuse

NSSF Building, Block A, 18th Floor
P.O. Box 10774-00100 GPO NAIROBI
Tel.: +254 020 272 1997, 2721993
Email: complaints@nacada.go.ke / info@nacada.go.ke
Website: www.nacada.go.ke

THE COMMISSION SECRETARY/CEO

Commission on Administrative Justice

2nd Floor, West End Towers, Waiyaki Way, Nairobi
P.O. Box 20414-00200 NAIROBI
Tel.: +254 020 2270000/ 2303000
Email: complain@ombudsman.go.ke
Website: www.ombudsman.go.ke

NACADA endeavors to uphold our national values and principles of governance on human dignity; human rights; equality and equity; social justice and inclusiveness; non-discrimination and protection of the marginalized.

www.nacada.go.ke | @NACADAKenya | NACADA | NACADAKenya | NACADAKenya

COMPLAINT HANDLING PROCEDURE

HOW TO COMPLAIN

Where our services do not meet the standards that we have set, you may forward your complaint to us through the following channels:

- Verbally; you may ask to speak to the line manager for the service you are seeking.
- You may forward your complaint by email to ceo@nacada.go.ke or info@nacada.go.ke
- You may write a letter directly to the Chief Executive Officer.

Every effort will be made to treat your complaint with utmost confidentiality.

COMPLAINT HANDLING PROCESS

1. We will acknowledge complaints and enquiries within seven (7) days of receipt.
2. We will acknowledge receipt of other disputes and complaints received through email, letters and related communication within seven (7) days.
3. We will make our decision known on any matter brought before the Board within 30 working days following the conclusion of investigations.

The following procedure will be followed in handling complaints



COMPLAINT CHANNELS

All complaints should be forwarded to us through the following channels:

CHIEF EXECUTIVE OFFICER

National Authority for the Campaign Against Alcohol and Drug Abuse
 NSSF Building, Block A, 18th Floor
 P.O. Box 10774-00100 GPO NAIROBI
 Tel.: +254 020 272 1997, 2721993
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THE COMMISSION SECRETARY/CEO

Commission on Administrative Justice
 2nd Floor, West End Towers, Waiyaki Way, Nairobi
 P.O. Box 20414-00200 NAIROBI
 Tel.: +254 020 2270000/ 2303000
 Email: complain@ombudsman.go.ke
 Website: www.ombudsman.go.ke

Need Help With Alcohol and Drug Abuse?

**OUR HELPLINE
NUMBER 1192 IS
AVAILABLE 24/7
FOR FREE**



P.O. Box 10774 00100 Nairobi
NSSF Building, Eastern Wing, 18th Floor
Bishops Road, Nairobi