

Substance abuse has become a widespread social phenomenon in Kenya. In the Coast Province, heroin rehabilitation as a mitigating mechanism has emerged with the Civil Society Organizations (CSOs) taking the lead than the mandated Government agency namely National Campaign Against Drug Abuse (NACADA) in the provision of such services. However, the provision of heroin rehabilitation services, for over a decade in the country, has been occurring without a comprehensive legislative framework. This notwithstanding, demand for heroin rehabilitation services are escalating. This study sought to examine the effectiveness of heroin rehabilitation centres in the recovery and social reintegration of users.

The main objectives of this study were: first, to identify factors that have a significant influence on the frequency of heroin use. Second, was to determine the factors that have a significant bearing on the predisposition of heroin users to seek professional help. Third, was to establish factors that account for the effectiveness of heroin rehabilitation centres.

The study was an evaluation design based on a sample size of 384 heroin users and 75 stakeholders and practitioners. Information on heroin users and their patterns of frequency of use and inclination to seek professional help was obtained using Interview Schedules and was analyzed quantitatively relying on the Chi-square and Logistic Regression analyses. Data from stakeholders and practitioners were obtained using Key Informants and Focus Group Discussions respectively. This information was analyzed qualitatively grouped by themes and presented descriptively citing participants' voices where appropriate.

The key findings show that; first, informants' years of schooling, peer influence and affordability of heroin were the best predictors of the likelihood of high intensity of use. Second, informants' income, peer influence, success of detoxification, perception of charges and counsellor-client relationship were the best predictors of the likelihood of high readiness to seek help. Third, some indicators of sound management, favourable board support, successful treatment and counselling accounted for the effectiveness of the heroin rehabilitation centres. The challenges facing heroin rehabilitation centres from achieving their full potential were found to be lack of adequate financial resources, appropriate drugs for detoxification were considered illegal, a dearth of professional staff, limited land for expansion and high client relapse rate.

This study makes a number of recommendations for policy and for research. First, a legal framework needs to be put in place to empower NACADA to register, regulate and supervise rehabilitation centres as a means of streamlining heroin rehabilitation operations and processes in the country. Second, while heroin and methadone treatment for heroin users is illegal in Kenya, the judiciary should provide exceptional clauses for their use for medical reasons where necessary. Third, policies to discourage substance abuse and to enhance willingness to seek professional help should be formulated and implemented. Fourth, heroin rehabilitation centres be regularly assisted with financial and material resources to facilitate expansion, recruitment and training of professional staff. Fifth, more research is needed to document other factors accounting for the effectiveness of heroin rehabilitation centres, especially those that have emerged from or not considered in this work. Sixth, change and continuity in the effectiveness of heroin rehabilitation centres needs to be studied to determine the pattern of evolution of such centres with a view of getting new insights for their improvement. Seventh, further research is recommended to provide accurate statistics of heroin users, explain their behaviours and practices as well as to cover other substances such as cocaine, hashish or morphine with a view

to determining whether or not a link exists between the frequency of use of these drugs and that of heroin.