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PREFACE

Over the past two decades, Alcohol, Drugs and Substance Abuse in Kenya has risen to unprecedented levels. Drugs and Substance abuse is linked to the rising crime rate, HIV/AIDS prevalence, school unrest, family dysfunction, poverty, death and other malaise in the country. Consequently the scourge has negatively impacted on the workforce, family and society at large.

The Ministry has not been spared from this problem and, therefore, recognizes the need to develop a workplace policy as a guide to the fight against Alcohol, Drugs and Substance Abuse at the workplace.

The aim of this policy is to promote a drug free workplace, inform employees on the dangers of Alcohol, Drugs and Substance Abuse, dispel denial and misconception surrounding Drugs and offer a way forward and hope to the affected. This therefore calls for concerted efforts from all employees to address the menace.

The Policy emphasizes the need for active campaigns against Alcohol, Drugs and Substance Abuse to be mainstreamed into core functions of the Ministry and it’s Semi Autonomous Government Agencies (SAGAs)

This policy will guide on programmes geared towards maintaining an Alcohol, Drugs and Substance free, healthy and productive work force in the Ministry.

HON. SAMWEL KANZUNGU KAMBI
CABINET SECRETARY
MINISTRY OF LABOUR, SOCIAL SECURITY AND SERVICES.
FOREWORD

Alcohol, Drugs and Substance Abuse among the youth and adults is high and on the rise in Kenya. The affected engage in taking Alcohol, Drugs and Substance to overcome problems and challenges facing them today.

Alcohol, Drugs and Substance Abuse has direct consequences to the users as they cause both short and long term health problems. In addition Substance use is associated with risky social behavior, domestic violence, absenteeism, high accident rates, low productivity, loss of focus, pecuniary embarrassment; it also affects employee’s integrity, including increased conflict at the work place.

The Ministry has realized the need to have co-ordinated intervention strategy in the workplace to mitigate the impacts of Alcohol, Drugs and Substance Abuse.

Consequently, a Ministerial Alcohol, Drugs and Substance Abuse Committee has been constituted to advice on the issues, create awareness to all employees and provide support and referral services for the affected. The Committee has developed an Alcohol, Drugs and Substance Abuse Work Place Policy. The policy has been developed through wide consultations and is guided by relevant statutory and regulatory framework.

I wish to express my sincere gratitude to the Alcohol, Drugs and Substance Abuse Committee for their tireless effort and commitment in the development of this policy.

ALI ISMAIL NOOR, CBS
PRINCIPAL SECRETARY
**DEFINITION OF TERMS**

<table>
<thead>
<tr>
<th>Term</th>
<th>Definition</th>
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<tbody>
<tr>
<td>Addiction</td>
<td>Physical and mental dependence on a particular substance. A Chronic disorder which has genetic, psychosocial, and environmental dimension and is characterized by the continued use of a substance despite its detrimental effects, impaired control over the use of a drug, and preoccupation with a drug’s use for non-therapeutic purpose.</td>
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<td>Affected</td>
<td>A person who is feeling the impact of Alcohol and Drugs Abuse through sickness or loss of a relative, friends or colleagues.</td>
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<tr>
<td>AIDS</td>
<td>Acquired Immune Deficiency Syndrome: A cluster of medical conditions often referred to as opportunistic infections that affects people whose immunity is reduced due to infection with the Human Immunodeficiency Virus (HIV).</td>
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<tr>
<td>Alcohol:</td>
<td>Alcohol means any beverage that contains ethanol. Ethanol is a Sedative hypnotic drug obtained by fermentation of Carbohydrates using yeast.</td>
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<tr>
<td>Alcoholism</td>
<td>Refers to a disease known as ‘Alcohol Dependence Syndrome’. It's a chronic, often progressive disease in which an employee’s craves alcohol and drinks despite repeated alcohol related problems.</td>
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<td>Confidentiality</td>
<td>The assurance that information accessed and shared will not be revealed without written consent of the client.</td>
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<td>Counseling:</td>
<td>A helping relationship in which clients are assisted to resolve their issues and/or cope with situations.</td>
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<td>Drug:</td>
<td>A drug is any chemical substance which when taken into the body can affect one or more of the body’s functions.</td>
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<td>Drug Abuse:</td>
<td>Non-medical use of drugs that destroys the health and productive life of an individual. The consumption of illegal drugs or unhealthy use of legal ones.</td>
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<td>Employees assistant Programmes (EAPs)</td>
<td>Are employees-benefit programmes offered by employers, within the framework of counseling, to assist employees in dealing with personal problems that might adversely affect their work</td>
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<tr>
<td>HIV</td>
<td>Human Immunodeficiency Virus: A virus that weakens the body’s immune system, ultimately causing AIDS.</td>
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<tr>
<td><strong>Illicit:</strong></td>
<td>Forbidden by law or customs.</td>
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<tr>
<td><strong>Licit:</strong></td>
<td>Not forbidden; lawful, usage differs between licit and illicit drugs.</td>
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<td><strong>Prevention:</strong></td>
<td>A programme designed to combat Alcohol, Drugs and Substance Abuse.</td>
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<td><strong>Policy:</strong></td>
<td>An organization’s position on a particular issue.</td>
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<td><strong>Rehabilitation:</strong></td>
<td>Restore someone to health or normal life by training &amp; therapy after addiction.</td>
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<tr>
<td><strong>Safety:</strong></td>
<td>Security or well being of employees.</td>
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<td><strong>Support:</strong></td>
<td>Services and assistance that are provided to help a person cope with difficult situations and challenges.</td>
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<td><strong>Workplace:</strong></td>
<td>Occupational settings, stations and places where workers spend time for gainful employment.</td>
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<tr>
<td><strong>Vulnerability:</strong></td>
<td>Exposed to the possibility of being attacked or harmed either physically or emotionally.</td>
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### ABBREVIATIONS AND ACRONYMS

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
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<tbody>
<tr>
<td>AA</td>
<td>Alcoholics Anonymous</td>
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<td>ADA</td>
<td>Alcohol and Drugs Abuse</td>
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<tr>
<td>AIDS</td>
<td>Acquired Immune Deficiency Syndrome: a cluster of medical conditions. Often referred to as opportunistic infections that affects people whose immunity is reduced due to infection with the Human Immunodeficiency Virus.</td>
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<td>ADSA</td>
<td>Alcohol, Drugs and Substance Abuse</td>
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<tr>
<td>COR</td>
<td>Code of Regulations</td>
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<tr>
<td>EAPs</td>
<td>Employee Assistance Programmes</td>
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<tr>
<td>HIV</td>
<td>Human Immunodeficiency Virus: a virus that weakens the body’s immune system, ultimately causing AIDS</td>
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<tr>
<td>IEC</td>
<td>Information, Education and Communication</td>
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<td>MLSSS</td>
<td>Ministry of Labor, Social Security and Services</td>
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<tr>
<td>NA</td>
<td>Narcotics Anonymous</td>
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<tr>
<td>SAGA</td>
<td>Semi Autonomous Government Agencies</td>
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<td>TOT</td>
<td>Training of Trainers</td>
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<td>UNCRC</td>
<td>United Nations Convention on the Rights of the Child</td>
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1.0 INTRODUCTION

Alcohol and Drug Abuse in the workplace has the potential to negatively affect the health, safety, productivity and performance of employees, which result in low business output in organizations. Therefore, the well being of the working community is paramount. Although alcohol and drug abuse happens in the context of the family and the wider society, the workplace offers a chance for early detection, intervention and psycho-social support for employees. Consequently, this benefits the employer, the family and the community at large.

An ideal workplace policy on alcohol and drugs abuse should address issues of preventive educations, referral for treatment and rehabilitation, psycho-social support, acquisition and dissemination of behavior change material, minimization of denial and stigma associated with alcohol dependency, and customizing targets for prevention and control of alcohol and drug abuse to a specific area of the Ministry’s operations and risk levels.

The target group for this policy will be employees of the Ministry of Labour, Social Security and Services (MLSSS) and it will be applied to all with equity and without discrimination. However, for the policy to be successful, it is critical that there is commitment and ownership from Ministry top management.

Drug abuse is defined as usage of drugs and substances in quantities and frequencies that interfere with a person’s ability to make sound life decisions.

Alcohol and drug abuse is recognized as a global threat to security, social-economic and cultural welfare. Drugs and substances of Abuse in Kenya include licit and illicit drugs. Licit drugs include alcohol, tobacco, miraa, inhalants and pharmaceutical products. Illicit Drug includes cannabis, heroin, cocaine and Psychotropics substances like diazepam.
2.0. RATIONALE

The existence and extent of Alcohol, Drugs and Substance Abuse has been identified as one of the greatest problems in the workplace. This affects various aspects of discipline and performance. In tackling this issue, concerted effort by all stakeholders in the Ministry is therefore paramount.

Some of the effects of alcoholism and drug abuse include; addiction, absenteeism, brain damage, low concentration, quarrelsome, low productivity, withdrawal from family functions, change in daily habits, mood swings, accidents, poor hygiene, poor health, vulnerability to disease, conflict with the law, outbursts of violence, anti-social behavior and disorientation in time, space and even death.

The Ministry has come up with a workplace policy on Alcohol, Drugs and Substance Abuse with the aim to:-

- Help increase the employees’ confidence and morale, reduce absenteeism and high turnover, increase productivity and efficiency, increase competitiveness and reduce the medical burden at the workplace.
- Create awareness on the harmful effects of Alcohol, Drugs and Substance Abuse at the workplace.
- Assist the Ministry in managing Alcohol, Drugs and Substance Abuse through early detection and intervention.
- Establish a corporate Culture and practices that prevent and pre-empt Alcohol, Drugs and Substance Abuse at the workplace.
3.0. OBJECTIVES

The main objective of the policy is to maintain an Alcohol, Drugs and Substance free, Healthy and productive workforce.

Specifically, the policy aims at:-

• Identifying specific problems faced by Alcohol, Drugs and Substance Abusers at the workplace;

• Establishing prevalence of Alcohol, Drugs and Substance Abuse at the workplace through baseline surveys;

• Identifying the emerging trends in (ADSA) Alcohol, Drugs and Substance Abuse at workplace.

• Determining contributing factors causing initial use and influencing (ADSA) Alcohol, Drugs and Substance Abuse;

• Pre-empting Alcohol, Drugs and substance Abuse at the workplace;

• Safeguarding the health and welfare of employees;

• Empowering the employees with relevant information and knowledge on the effects of Alcohol, Drugs and Substance Abuse;

• Making provision for early detection and intervention mechanisms through capacity building and creation of a conducive environment;

• Prescribing clear rules on expected conduct and consequences in relation to Alcohol, Drugs and Substance Abuse;

• Preventing accidents and occupational hazards related to Alcohol, Drugs and Substance Abuse at the workplace through early detection, risk analysis and mitigation;

• Providing support systems that mitigate against Alcohol, drugs and Substance Abuse in the workplace;

• Providing support services which include counselling, treatment and rehabilitation;
4.0. LEGAL AND REGULATORY FRAMEWORK

Drugs and Substance Abuse is recognized as a global threat. It is therefore a criminal offence which is punishable under the law. To address issues that go with it, the government has put in place various laws to curb drug misuse. The policy will be implemented within the following legal and regulatory framework:

- Constitution of Kenya
- Public Health Act: Cap 242
- Pharmacy and Poisons Act: Cap 244
- Methylated Spirit Act: Cap 120
- Dangerous Drugs Act: Cap 245
- Chang’aa prohibition Act. Cap 70
- Liquor Licensing Act: Cap 21
- Traditional Liquor Act: Cap 122
- Tobacco Control Act No.4 of 2007
- Employment Act: Cap 226
- Occupational Safety and Health Act: No.15 of 2007
- Code of Regulations – (COR)
- Children Act: No. 8 of 2001
- Food, Drugs and Chemical Substances Act: Cap 254
- Narcotic and Psychotropic Substances Act: 1994
- Penal Code: Cap 63
5.0. PROGRAMMES
The following programmes have been identified for purposes of implementation of the policy.

5.1 Baseline Survey
The Ministry will conduct a baseline survey to establish and assess the extent, nature and magnitude of Alcohol, Drugs and Substance Abuse at the workplace at regular intervals.

5.2 Sensitization and awareness creation will be conducted at the national, county and sub-county levels with the aim of promoting behavior change and maintaining a healthy and productive workforce. The Ministry will take advantage of International, National and Regional days for sensitization and awareness creation.

5.3 Establishment of Alcohol, Drugs and Substance Abuse Counseling Desks
Drugs and Substance Abuse counseling desks shall be established at the national, county and sub-county levels for counseling and rehabilitation services.

5.4 Capacity Building
Capacity building on Alcohol, Drugs and Substance Abuse shall be conducted for the Training of Trainers, managers, supervisors and peer counselors at all levels of the establishment to provide adequate support to employees.

5.5 Rehabilitation
Employee assistance Programmes (EAPs) shall be established with the aim to integrate the employee into society through support groups (e.g. alcoholics anonymous, narcotics anonymous), Psychosocial Therapy and medication.

5.6 Information, Education and Communication Materials (I.E.C.)
Information, Education and Communication Materials (IEC) will be developed with messages campaigning against Alcohol, Drugs and substance Abuse. These will include brochures, fliers, banners, posters, stickers, T-shirts and caps. Inscriptions with Alcohol, Drugs and Substance Abuse messages will be printed on stationeries, pay slips, calendars, pens, diaries and cutlery.
5.7. **Drug free sporting events**

The Ministry shall organize sporting events at Ministerial, departmental and Institutional levels to campaign against Alcohol, Drugs and Substance Abuse in the workplace.

5.7.1 **Linkages and partnership**

Appropriate linkages and referral systems will be established with the aim of assisting the affected employees.

6.0 **GUIDING PRINCIPLES**

In implementing the policy, the Ministry will be guided by the following principles:-

- Gender Equality
- Non-discrimination
- Confidentiality
- Social dialogue
- Healthy and Safe work environment
- Recognition of ADSA as a disease and workplace issue
- Continuation of employment relationship
- Care and support
- Management responsibility
- Prevention

7.0. **RESTRICTIONS ON LEGAL AND ILLEGAL DRUGS AT THE WORKPLACE**

7.1. **Restrictions on Alcohol**

The Ministry restricts and prohibits access and availability of Alcohol through possession, consumption and sale at the workplace.

7.2. **Availability of non-alcoholic beverages**

In place of Alcoholic beverages, the Ministry will ensure that Non-Alcoholic beverages, including water, are made available in appropriate and convenient locations.
7.3. **Restrictions on illegal drugs and substance**
The Ministry does not allow possession, sale and consumption of illegal Drugs and Substances at the workplace.

7.4. **Corporate culture and practices**
The Ministry shall not formally or informally encourage organizational culture that encourages or facilitates alcohol, Drugs and Substance Abuse in all its functions and activities.

The Ministry prohibits wearing attires with messages that promote Alcohol, Drugs and Substance Abuse at the workplace.

7.5. The ministry and its environs are declared non-smoking zones.

8.0 **MANAGEMENT OF HUMAN RESOURCE**

8.1 **Non Discrimination of Employees**
Employees with Alcohol or Drugs Abuse related problems will not be discriminated against and will access health care services similar to employees with other health problems. In addition, they will receive similar benefits like paid sick leave, leave without pay and health care insurance coverage, in accordance with Public Service Regulations and practices. Rehabilitated employees will be reintegrated into the normal working systems and helped to adapt to the prevailing working conditions.

8.2 **Job Security and Promotion**
Employees who seek treatment and rehabilitation for Alcohol and Drug Abuse related problems will not be discriminated against by the employer and will enjoy normal job security and opportunity for career development.

8.3 **Support Program for Employees**
The ministry shall coordinate support programmes for employees with Alcohol, Drugs and Substance Abuse problems. This will be done through the establishment of Employee Assistance
programmes (EAPs) in cooperation with the affected employee. EAPs will include counseling, treatment and rehabilitation programmes which are adapted to the individual needs.

8.4 Intervention and Disciplinary Procedures
Employees who have problems with alcohol, Drugs and Substance Abuse (ADSA) will be treated as persons suffering from a normal health problems. Therefore, in such circumstances, the Ministry, though having the authority to discipline, will offer counseling, treatment and rehabilitation alternatives before consideration is given to the imposition of disciplinary sanctions. However, should the employee fail to change, consideration will be made to either refer the matter to the medical board or apply the appropriate disciplinary measures as the case may be.

8.5 Confidentiality
The ministry shall ensure confidentiality in dealing with the affected person’s affairs.

8.6 Job Placement for Rehabilitated Employees
When an employee voluntarily discloses a previous history of alcohol and drug abuse related problem to the ministry, the management shall, where reasonably practicable, avoid exposing the rehabilitated individual to a working situation similar to that which, in the past, may have led to such problems.

8.7 The managers and supervisors shall have the obligation and responsibility to ensure early detection of Alcohol, Drugs and Substance Abuse (ADSA) by the employee and accord the necessary assistance.

8.8 Any member who is using prescription or over-the-counter drugs that may impair their ability to safely perform their job, or affect the safety and well being of others, must notify a supervisor of such use before resuming any duties.
9.0 IMPLEMENTATION

The following components will form the implementation modalities of the policy:

9.1 The Cabinet Secretary shall:
- Facilitate the implementation of the policy.
- Create partnerships with stakeholders, line ministries and development partners.

9.2 The Alcohol, Drugs and Substance Abuse Control Committee shall:
- Formulate policy on Alcohol, Drugs and Substance Abuse
- Review the policy periodically
- Carry out surveys on ADSA
- Sensitize and create awareness on ADSA
- Plan and budget for ADSA
- Create linkages and referral systems
- Play advisory role to the management on ADSA issues
- Monitor and evaluate ADSA programmes and activities
- Develop Ministry specific information, education and communication materials
- Establish counseling desks and resource centres.

9.3 RESPONSIBILITIES OF THE EMPLOYEE

The employee shall:
- Participate in training programmes provided by the Alcohol, Drugs and Substance Abuse Control Unit of the Ministry
- Provide a conducive environment for those affected by Alcohol, Drugs and Substance Abuse
- Be committed to maintain an Alcohol Drugs and Substance free workplace
- When affected, be encouraged to voluntarily own up and seek assistance available within the Ministry
- Participate in Alcohol, Drugs and Substance Abuse surveys
10.0 MONITORING AND EVALUATION

Monitoring and Evaluation of ADSA programmes shall be undertaken periodically.

11.0 POLICY REVIEW

This policy will be reviewed after two years or earlier if occasion demands.