

Country snapshot Kenya

Alcohol and health



This snapshot provides an overview of alcohol consumption in Kenya, its health effects, the current policy response and key opportunities for action. The snapshot was developed to accelerate progress in the implementation of the five high-impact SAFER interventions (1), in the context of the Global Alcohol Action Plan (2)¹.

As part of a SAFER initiative, country teams, supported by WHO, at all levels, identified opportunities to advance action on alcohol policies and interventions. These cross-disciplinary country teams were nominated from different ministries or agencies with a mandate to work on alcohol, such as ministries of health, finance, trade, justice and transport.

The SAFER initiative supports the, [Framework for Implementing the Global Alcohol Action Plan, 2022-2030 in the WHO African Region](#) (3).

► Opportunities for action



Develop the implementation plan and regulatory framework of the national policy for the Prevention, Management and Control of Alcohol, Drugs and Substance Abuse



Strengthen restrictions on alcohol availability, including the development of a national formula on outlet density



Facilitate access to screening, brief interventions and treatment



Review the alcohol taxation framework

¹ The Global Alcohol Action Plan 2022-2030 was adopted by Member States at the Seventy-fifth World Health Assembly.



Country context

Over the past decade, Kenya has undertaken significant economic reforms that have contributed to sustained economic growth and social development (4). In 2023, the Kenyan government strengthened its commitment to ensuring all Kenyans have access to and receive essential quality health services without suffering

financial hardship by launching the Kenya Universal Health Coverage Policy 2020–2030 (5). This work is supported by Kenya's focus on reducing noncommunicable diseases (6), which are responsible for approximately 38% of all deaths in 2021 (7). The Kenya Mental Health Policy 2015–2030 includes reforms to the mental health system and services (8).

► Alcohol consumption patterns

- In 2022, the total alcohol consumption per capita was 2.5 litres per year of pure alcohol (15+ years), compared to 3.5 litres per year regionally and 5.0 litres per year globally (9).
- In 2019, 13% of people (15+ years) engaged in heavy episodic drinking¹, 19.6% of males compared to 6.8% of females (9).
- In 2019, 58.4% of people (15+ years) were lifetime abstainers, 48.7% of males compared to 67.7% of females (9).
- In 2019, unrecorded per capita consumption was 0.6 litres per year (15+ years, pure alcohol) (9).

► Culture and tradition

- Traditional homebrew is popular in Kenya and is part of many cultural activities such as marriages (10).
- The process and practices of making and consuming traditional brew differ between Kenya's diverse communities (11). Common homebrew traditional beverages include chang'aa (wuruchi or wirgiik), a distilled spirit made from grains such as millet or bananas (11).
- The production of traditional homebrew is sometimes undertaken by women to generate income to support their families (10).
- Lack of regulation and quality control in the homebrewing process can lead to tainted batches (10), which has been linked to several fatalities and hospitalizations (11).

► Youth

- Approximately 21% of the population were people aged between 15–24 years in 2023 (12).
- In 2019, alcohol consumption was 12.8% among 15–19-year-olds, 14.0% of males compared to 11.5% of females (13).
- In 2016, 7.0% of young people (15–19 years) engaged in heavy episodic drinking (9).

¹ Heavy episodic drinking refers to consuming 6 or more drinks on any occasion in the past 30 days.

Health and social consequences of alcohol consumption

► Mortality and morbidity related to alcohol



Alcohol use disorders

among males (15+ years) is **7.1%** 12 month prevalence¹ (2016) (9).

among females (15+ years) is **0.9%** 12 month prevalence¹ (2016) (9).



Liver cirrhosis **due to alcohol** use death rates

among males is **26.2 per 100 000** population (2021)² (7).

among females is **10.8 per 100 000** population (2021)² (7).

► Road traffic deaths



In 2021, there were **4 579 road traffic deaths** (14).

In 2019, the alcohol-attributable **road traffic crash death rate** was **10.9 per 100 000 population** (15+ years)³ (15).

The consumption of alcohol and problems related to alcohol vary widely around the world, but the burden of alcohol-related disease and death remains significant in most countries (13)



¹ Prevalence refers to the proportion of males and females that have been diagnosed with an alcohol use disorder during the calendar year..

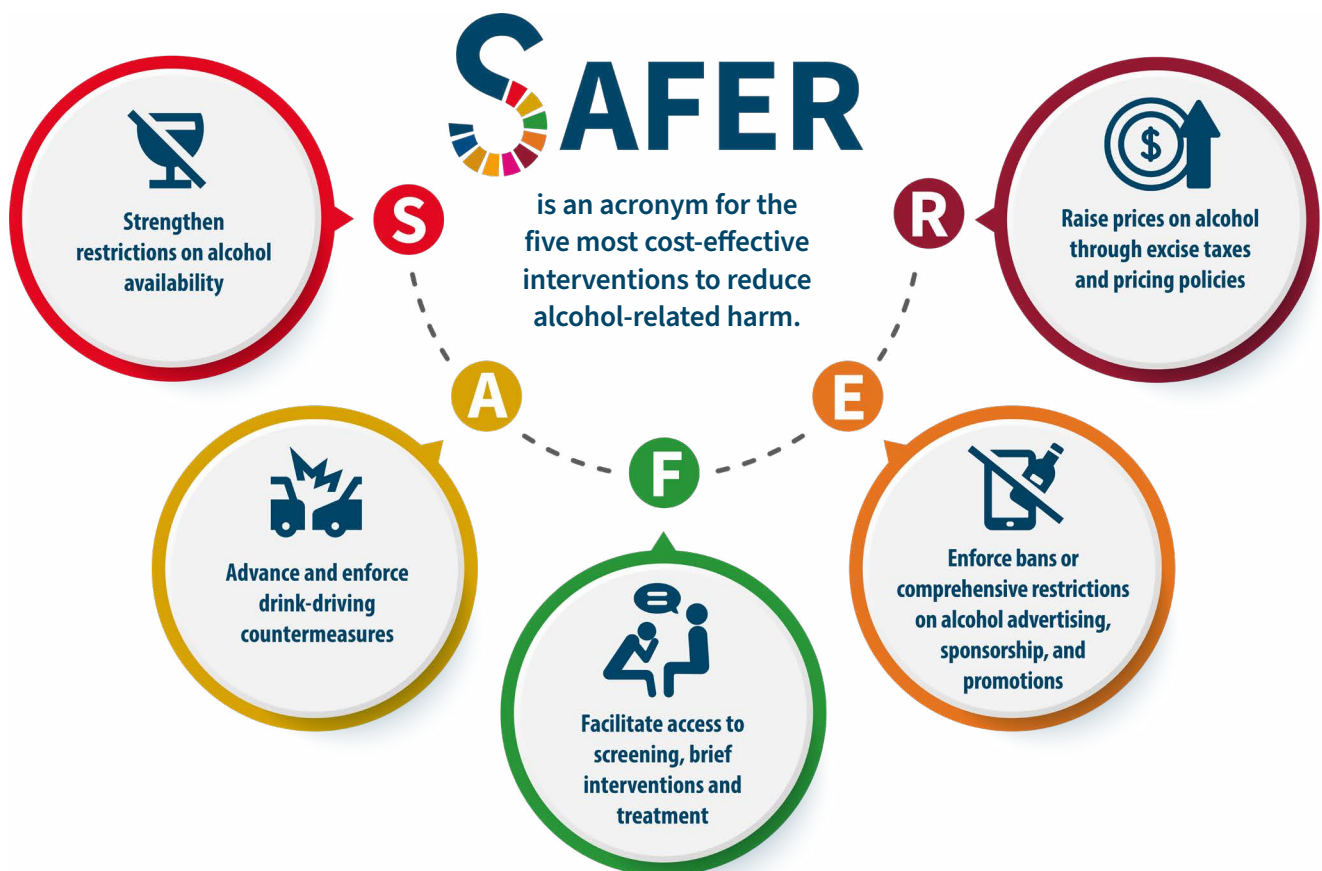
² Age-standardized death rates per 100 000, estimates for the year 2021.

³ Age-standardized death rates per 100 000, estimates for the year 2019.

Alcohol consumption can result in significant harm to individuals, their families and societies. Alcohol (ethanol) is a psychoactive and toxic substance that impacts multiple biological systems. The consumption of alcohol is a causal factor in more than 200 disease and injury conditions (16). Worldwide, 2.6 million deaths result from alcohol consumption yearly (13). A significant proportion of the disease burden attributable to alcohol consumption arises from unintentional and intentional injuries, including those due to road traffic crashes, violence and suicide, particularly in young people (13). Alcohol consumption presents a

significant challenge for countries, mainly due to its economic burden on the health system, criminal justice system and labour productivity.

Cultural, social and religious norms influence alcohol consumption, as well as its normalization (acceptability), ease of purchase (availability) and price (affordability). Addressing this multidimensional causality requires a portfolio of high-impact interventions. **SAFER** is a technical package that comprises five population-based interventions to reduce alcohol-related harm, allowing countries to reduce alcohol consumption and related health, social and economic consequences (1).



Policy mapping in the context of SAFER interventions¹

Strengthen restrictions on alcohol availability

- The **Alcoholic Drinks Control Act, No 4 of 2010 (17)** provides the legislative framework for the production, sale and consumption of alcoholic drinks.
- A Liquor Licensing system regulates alcohol availability via different retail licenses. For instance, a supermarket license allows sales from 10:00 to 20:30, while a general drinks license permits sales from 17:00 to 23:00 (17).
- The system regulates alcohol availability by controlling the density of sale outlets. The framework also prohibits alcohol sales via vending machines, and restricts packaging of alcoholic beverages to glass containers with a minimum capacity of 250 ml (17).

Advance and enforce drink-driving countermeasures

- The blood-alcohol concentration limit for the general population and young people is 0.08 g/dl (14). These limits are currently under review (unpublished information [March 2025]²).
- The **Traffic (Drunk Driving) Rules, 2023 (18)** state that drivers of public service, commercial, or school transport vehicles found driving after consuming alcohol will have their license suspended for six months.
- The **Traffic (Amendment) Act, 2022 (19)** states that anyone driving or in charge of a vehicle on a public road while under the influence of alcohol or drugs beyond legal limits commits an offence and may face a fine up to one hundred thousand Kenyan shillings or imprisonment up to two years or both.

Facilitate access to screening, brief interventions and treatment

- A national treatment and rehabilitation facility is available to provide alcohol and drug treatment facilities with subsidized care especially for women with alcohol and drug substance use disorders (unpublished information [March 2025]).
- Training in screening and referral for people with alcohol use disorders is partly provided to community health providers that support primary health care (unpublished information [March 2025]).
- The essential benefits package partially covers treatment and rehabilitation of alcohol related disorders (unpublished information [March 2025]).

¹ Policy mapping was conducted as part of a landscape assessment report for the SAFER inter-country learning initiative. Cross-disciplinary country teams were comprised of nominated representatives from ministries and agencies with a mandate to work on alcohol such as health, finance, trade, justice and/or transport.

² Unpublished information refers to the observations and information collected by multisectoral country teams that mapped policies and interventions across the SAFER interventions as part of the SAFER inter-country learning initiative.

Policy mapping in the context of SAFER interventions¹

Enforce bans or comprehensive restrictions on alcohol advertising, sponsorship, and promotions

- Under Alcoholic Drinks Control Act, No 4 of 2010 (18), the Kenya Information and Communications Act (1998) (20) restricts alcohol advertising, sponsorship and promotions. Examples include:
 - The following is not permitted:
 - False and misleading alcohol promotions regarding product characteristics, health and social status.
 - Alcohol promotions in events for people under 18 years of age.
 - Use of alcohol promotion materials associated with persons under the age of 18 years, including the removal of alcohol billboards near basic education learning institutions.
 - Advertisement fees on alcohol, betting and gaming subjected to an excise duty rate of 15% (television stations, print media, billboards, and radio stations), under Finance Act, 2023 (21).

Raise prices on alcohol through excise taxes and pricing policies

- Alcoholic beverages are subjected to excise duty. The Tax Laws (Amendment) Act, 2024, provides that as of January 2025, the excise rates for spirits of alcoholic strength exceeding 6% is KES 10 per centilitre of pure alcohol, for beer and cider the excise rate is KES 22.5 per centilitre of pure alcohol and for wine, including fortified wine, the excise rate is KES 22.5 per centilitre of pure alcohol (22).
- Import duty applies to all types of alcoholic beverages imported into Kenya. The rates can vary depending on the country of origin and the specific beverage (unpublished information [March 2025]).
- Alcoholic beverages in Kenya are also subject to value added tax (VAT) of 16% (23).

Opportunities for Action

As part of the SAFER inter-country learning initiative, country teams, supported by WHO, identified opportunities to

advance action on policies and interventions. The following are key areas that could be explored for future action.

Strengthen restrictions on alcohol availability

- Develop the implementation plan and regulatory framework of the national policy for the Prevention, Management and Control of Alcohol, Drugs And Substance Abuse.
- Finalize the development of the Strategy for Alcohol and Substance Abuse.
- Consider the development of a national formula on outlet density and strengthening restrictions on sales of alcoholic beverages in supermarkets.

Facilitate access to screening, brief interventions and treatment

- Update the competencies of community health workers to screen by including questions in the existing survey.
- Integrate brief intervention approach into primary care services, including mhGAP services.
- Expand the provision of alcohol dependence treatment and substance use disorder to in-patient centers.

Enforce bans or comprehensive restrictions on alcohol advertising, sponsorship, and promotions

- Review and enforce regulations on alcohol marketing, including marketing through social media platforms.
- Develop a national mechanism for surveillance of marketing of alcohol products.

Raise prices on alcohol through excise taxes and pricing policies

- Reviewing the alcohol taxation framework with the intention of decreasing affordability and consumption.
- Adjust excise taxes for inflation.

Regional resources

- Framework for Implementing the Global Alcohol Action Plan, 2022-2030 in the WHO African Region (*World Health Organization African Region; 2023*) (3).

National resources policies

- Alcoholic Drinks Control Act, No 4 of 2010 (18).
- Kenya Mental Health Policy, 2015 (8).
- National Guidelines on Drug Use Prevention 2021 (24).
- National Guidelines for Alcohol and Substance Use Prevention and Management in Basic Education Institutions 2021 (25).
- Framework For Community Engagement in Management Of Alcohol And Drug Abuse 2022 (26).
- National Guidelines For Aftercare And Reintegration For Persons Recovering From Substance Use Disorders (27).
- The National Protocol for Treatment of Substance Use Disorders in Kenya (28).
- National Standard for Treatment and Rehabilitation of Persons with Substance use Disorders (29).
- Kenya Standard: Management of Persons with Substance Use Disorders (30).

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connect, share, practice

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