



**act:onaid**

**FACING THE CHALLENGE  
OF DRUG AND  
SUBSTANCE ABUSE  
AMONGST YOUNG PEOPLE IN  
HOPLEY**



**act:onaid**

**DRUG AND SUBSTANCE ABUSE DYNAMICS  
AND SOCIETAL IMPACT IN HOPLEY**

*Research Report*

*JUNE 2023*

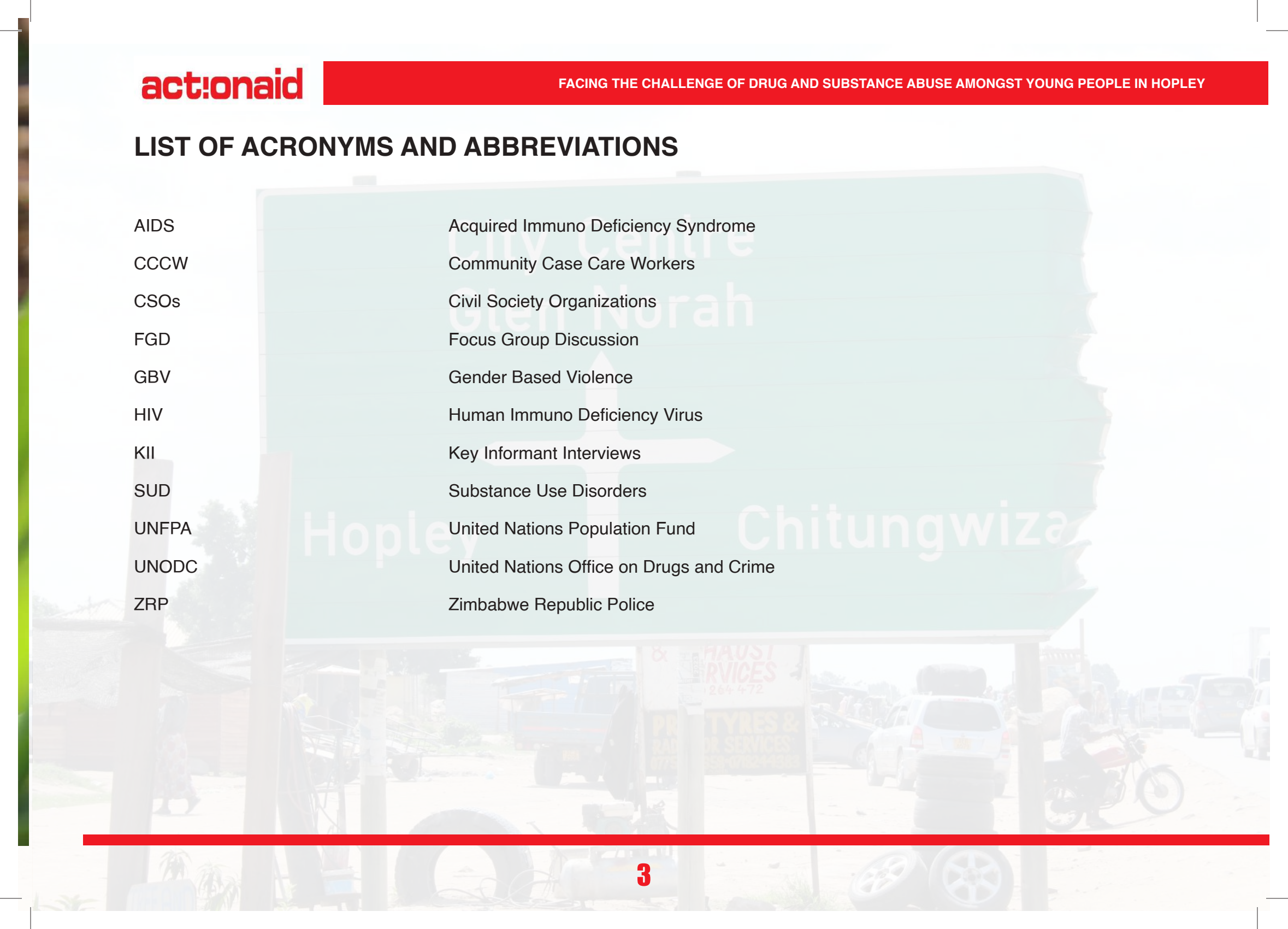
## ACKNOWLEDGEMENTS

The successful accomplishment of this research was a result of the cooperation and support of the young people, community leaders and stakeholders in Hopley. Therefore, we extend our sincere gratitude to the following:

The Zimbabwe Republic Police (ZRP) for granting permission to the young people to conduct the feminist research. Without the ZRP's permission, this study could not have been undertaken.

- ActionAid Zimbabwe and Katswe Sistahood team for providing technical oversight and data quality assurance during the research process.
- ActionAid Denmark for financing the feminist research.
- All key informants for the valuable qualitative information they provided. Special mention goes to the government line ministries, City of Harare, CSOs, Community Case Care Workers (CCCW) operating in Hopley.
- Youths participants in the Focus Group Discussions (FGDs). This research would not have been accomplished without the invaluable insights they provided.

## LIST OF ACRONYMS AND ABBREVIATIONS

The background of the page is a faded photograph of a road sign in Hopley, Zimbabwe. The sign is green with white text and a white arrow pointing right. It lists "City Centre", "Glen Norah", "Hopley", and "Chitungwiza". Below the sign, there are various vehicles and a person on a motorcycle on a dirt road. A red horizontal bar is at the bottom of the page.

AIDS	Acquired Immuno Deficiency Syndrome
CCCW	Community Case Care Workers
CSOs	Civil Society Organizations
FGD	Focus Group Discussion
GBV	Gender Based Violence
HIV	Human Immuno Deficiency Virus
KII	Key Informant Interviews
SUD	Substance Use Disorders
UNFPA	United Nations Population Fund
UNODC	United Nations Office on Drugs and Crime
ZRP	Zimbabwe Republic Police

# CONTENTS

## TABLE OF CONTENTS

Acknowledgements-----	2
List of acronyms and abbreviations-----	3
Table of contents-----	4
List of Figures-----	5
Executive Summary-----	6
Introduction-----	8
Methodology-----	12
Research Findings-----	15
Conclusion and Recommendations-----	24
Annexure-----	29

## LIST OF FIGURES

Figure 1: Sex of the respondents-----	16
Figure 2: Age of the respondents-----	17
Figure 3: Employment status of the respondents-----	18

## LIST OF TABLES

Table 1: Categories of substances and drugs consumed in Hopley-----	19
---	----

# Executive Summary

In June 2023, the youth in Hopley conducted feminist research on drug and substance abuse as part of their action plans following a December 2022 Road show on drug and substance abuse conducted. The research, coordinated by a steering committee of 15 youths (9 females and 6 males), aimed to gain insights into drug and substance abuse among young people in Hopley. It focused on understanding the driving forces behind drug abuse, sources of illicit substances, prevalence among youths, and barriers to addressing the issue.

The research adopted a phenomenological approach to delve into subjective experiences and understand the structure of these lived experiences among drug users, peddlers, and those affected by substance abuse. Purposive sampling was employed to select respondents, and data was gathered through document analysis, key informant interviews, and focus group discussions. Thematic analysis was used to identify recurring themes and patterns within the data.

The findings revealed a concerning rise in drug and substance abuse in Hopley, particularly among adolescents and young adults aged 14 to 25 both in school and out of school. Notable contributors to this trend include powerful individuals, corrupt police operatives, and community vendors including those who own tuck-shops, who facilitate the distribution of drugs and substances. Additionally, locally produced, and cheap intoxicants such as musombodiya, made from ethanol and emblements powders, are also flooding the market.

The research revealed that young people consume drugs and substances as a stress reliever against poverty and unemployment. Other common drivers highlighted included peer pressure, broken families, emotional and physical abuse, and curiosity, often resulting in addiction. Furthermore, drug abuse correlates with risky sexual behaviors, increasing the vulnerability of individuals to HIV, unwanted pregnancy, STIs, and violence.

Based on the findings, the following recommendations are made:

- Creating employment opportunities through livelihoods interventions for youth in Hopley. Employment is deemed one of the critical indices of accessing psychosocial support among drug addicts, as work provides opportunities for socialization and healthy relationships with non-substance abusers.
- Establishment of recreation facilities in Hopley to provide alternatives to substance abuse.
- Strengthen multi-stakeholders' interventions and coordination towards addressing drug and substance abuse among young people.
- Establish peer support groups or centers in Hopley to facilitate recovery and provide a non-discriminatory environment for expressing concerns.
- Promote parent-to-child communication interventions to address underlying issues contributing to substance abuse.



City Centre  
Glen Norah



Hopley

Chitungwiza

**Introduction**





Substance and drug abuse in Africa is on the rise with projections estimating a 40% increase in people who use substances between 2018 to 2030<sup>1</sup>. This surge represents the highest global increase, with Sub-Saharan Africa projected to have the highest increase compared to other regions. Moreover, East and West Africa have been identified as key players in the distribution of drugs. The identification of key drug distribution areas in Africa is concerning, particularly given the expected global increase in prevalence of substance use disorders (SUDs) due to the economic crisis brought about by the COVID-19 pandemic. Additionally, projected increases in rates of substance use in Africa appear to be driven by demographic factors. Specifically, the fact that the continent's population is generally younger than other regions, together with projected sharp population rises. It is thus imperative for African states, as asserted by the United Nations Office on Drugs and Crime to develop not only sustainable but also human centered approaches in response to the impending rise in substance use disorders.

Available data across the sub-Saharan Africa region, suggests an upward trend of substance and drug use in the Zimbabwean population. Additionally, media reports paint a picture of an escalating and worrying situation of substance and drug use, involving both licit and illicit substances. Moreover, the situation has been reported to be more complex, economic, and political, with clear signs of moving beyond teenage experimentation or chosen unhealthy behaviour. Studies conducted by the United Nations Population Fund (UNFPA) in Hopley identified alcohol (including illicit 'moonshine' brews), methamphetamine

(crystal meth locally known as mutoriro), cough syrups containing codeine, and marijuana<sup>2</sup> as drugs and substances being consumed by young people in Hopley and greater Harare South. Reports of local youths identified to be in a drunken like stupor are widespread in both print and electronic media, and colloquially referred to as 'ku sticker' (in reference to the paralytic like stupor youths high on substances are often found in).

Available research further shows that COVID-19 pandemic and associated lockdowns further exacerbated substance abuse issues, leading to widespread concerns labeling it an 'impending public health disaster.' The combination of increased substance availability and limited recreational activities for young people during lockdowns has contributed to this surge. However, even before the pandemic, substance abuse, particularly among Zimbabwean youth, had reached crisis levels, exacerbated by socio-economic challenges.

Endemic poverty, affecting 70% of the population, serves as a risk factor for substance and drug use<sup>3</sup>. Additionally, socio-economic challenges contribute to heightened stress, trauma, and mental health issues, further exacerbating substance abuse rates.

Strategies for addressing the identified increases in substance use are hampered by the treatment gap for mental, neurological and substance and drug abuse disorders, with sub-Saharan Africa facing the largest treatment gap globally. This gap is largely due to the 'brain drain' phenomenon in the health sector and significant underfunding of mental health services due to

---

1 United Nations Office on Drugs and Crime World Report 2021  
 2 Joint Programme for Adolescent and Youth Development. Participatory Needs Assessment in Hopley, UNFPA 2017  
 3 Zimbabwe Civil Liberties Drug Network Report 2022

resource constraints. For example, there is a lack of drug and alcohol specialist treatment facilities in Zimbabwe<sup>4</sup>.

The situation for managing SUDs is also likely to be worsened by the emerging reports of the country becoming a hub for drug trafficking, whereby drug runners are reportedly compensated for their services using drugs, increasing availability of drugs in local communities. In response to both increases in substance and drug use and lack of specialist drug treatment provision, the country recently launched the Zimbabwe National Drug Master Plan (2020–2025) which aims to provide both a comprehensive and integrated approach to address the rise in substance and drug use in the country. Within this key strategic document, the government of Zimbabwe reports that currently, approximately 60% of patients admitted in mental health institutions experience substance and drug induced disorders<sup>5</sup>. However, significant challenges are evident in trying to ascertain a reliable picture of the nature of SUDs in the country, owing to the evolving complexity of the problem and the lack of a national monitoring system for substance and drug use.

### **DRUG AND SUBSTANCE ABUSE RESEARCH**

In June 2023, the youth in Hopley conducted research on drug and substance abuse as a follow-up to their action plans and roadshow conducted in 2022. The research aimed to provide a comprehensive understanding of drug and substance abuse among young people, focusing on the following key areas:

**1. Identification of Substances:** To identify the substances and drugs being abused by youth in Hopley.

<sup>4</sup> Reducing the treatment gap for mental, neurological and substance use disorders in Africa. Lessons from the Friendship Bench in Zimbabwe, D. Chibanda 2021

<sup>5</sup> Zimbabwe National Drug Master Plan 2020-2025

**2. Patterns, Prevalence, and Consequences:** To understand the patterns, prevalence, and consequences of drug and substance abuse among young people in Hopley.

**3. Evaluation of Interventions:** To identify and evaluate any existing interventions and harm reduction strategies being implemented to address drug and substance abuse.

**4. Identification of Gaps and Recommendations:** To identify gaps or barriers in current substance and drug abuse interventions and provide recommendations for addressing these gaps.



**RESEARCH OBJECTIVES**

## **IDENTIFICATION OF SUBSTANCES**

- Determine the types of substances and drugs commonly abused by youth in Hopley.

**Objective**

**01**

## **PATTERNS, PREVALENCE, AND CONSEQUENCES**

- Investigate the frequency and severity of drug and substance abuse among youth.
- Explore the consequences of drug and substance abuse on individual health, social dynamics, and community well-being.

**Objective**

**02**

**RESEARCH OBJECTIVES**

**EVALUATION OF INTERVENTIONS**

- Assess the effectiveness of current interventions and harm reduction strategies in addressing drug and substance abuse.
- Examine the accessibility and utilization of support services for individuals struggling with substance abuse.

Objective

03

**IDENTIFICATION OF GAPS AND RECOMMENDATIONS**

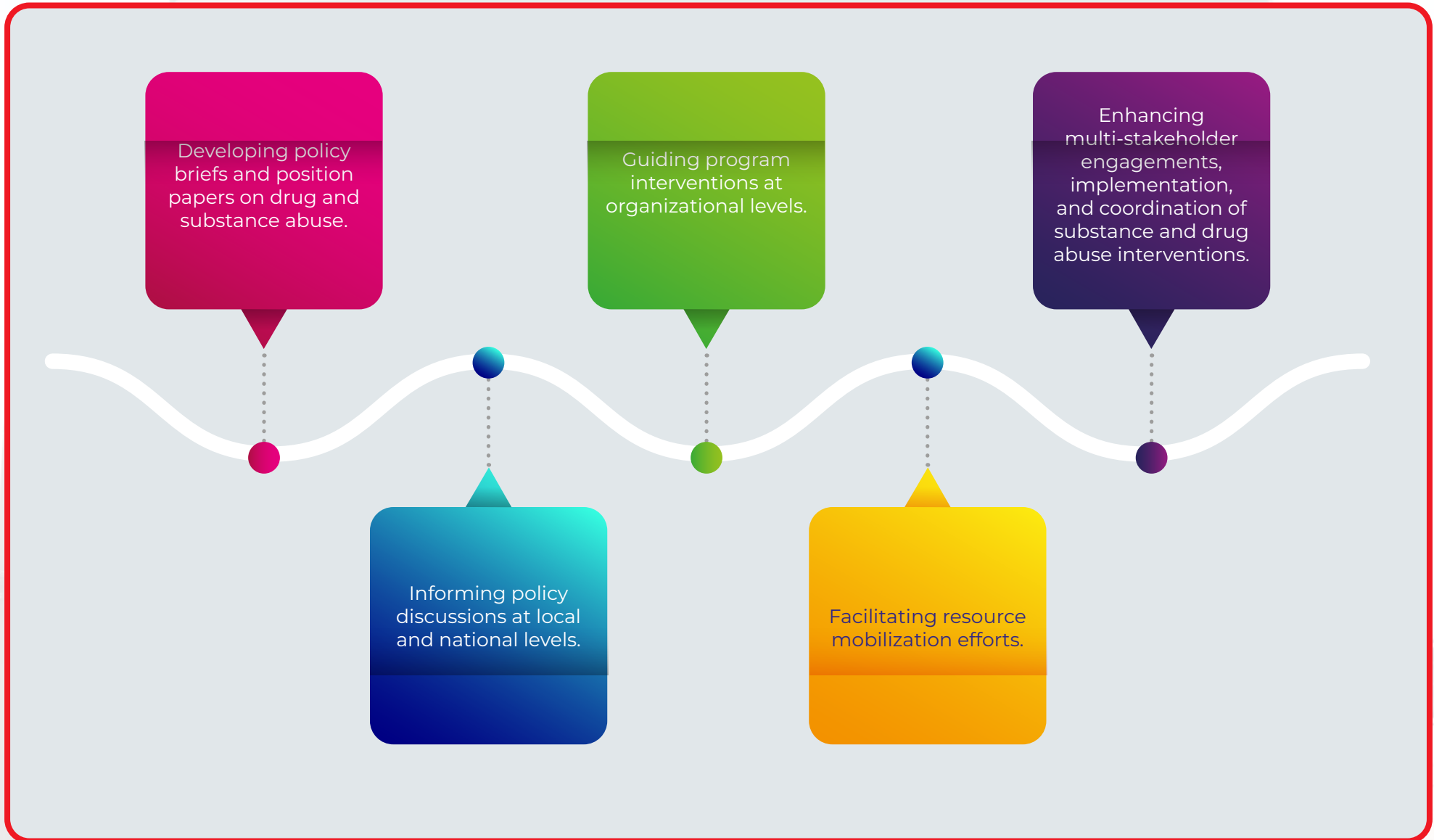
- Identify any gaps or barriers hindering effective substance abuse interventions.
- Provide actionable recommendations to address identified gaps and improve existing interventions.

Objective

04

**POTENTIAL IMPACT AND UTILIZATION OF RESEARCH FINDINGS**

The research findings are expected to serve as a valuable resource for:





**Methodology**



**2.1 STUDY DESIGN**

The research adopted a phenomenology approach to identify the phenomena, focusing on the subjective experiences and underlying structures of drug and substance abuse among young people in Hopley. Likewise, the researchers aimed to understand the experiences of the drug and substance users, peddlers, and those interfacing with

the scourge on a day-to-day basis including the triggers of substance and drug abuse from the perspectives of the users. Phenomenology was founded in the early 20<sup>th</sup> century by Edmund Husserl and Martin Heidegger and originated from philosophy. Phenomenology is used to describe, in depth, the common characteristics of the phenomena that have occurred (Statistical solutions, 2021)<sup>6</sup>. Thus, this methodology was found to be fit to explore trends associated with the triggers of drug and substance abuse.



**2.2 SAMPLING STRATEGY**

Purposive sampling, a non-probability technique, was employed to select participants with specific characteristics relevant to the research objectives. Lund Researchers (2012), state that the main goal of purposive

sampling is to focus on particular characteristics of a population that are of interest, and which will best enable one to answer their research questions. The sample being studied is not representative of the population in Hopley for the youths. For this reason, the researchers opted for purposive sampling. To be specific, the homogenous purposive sampling technique is used to achieve a homogenous sample of people with the same or similar characteristics (Ames, Glenton, and Lewin, 2019). Since the researchers wanted to understand the triggers of drug and substance abuse, a homogenous sample was used as the research questions addressed specific characteristics of the particular group of interest. Qualitative approach was used to explore the phenomena of drug and substance abuse in Hopley. The study objectives were constantly referred to in line with the demands of the research questions.



**2.3 SAMPLE SIZE**

A total of 90 participants, comprising 20 females and 70 males aged 18-35 years, were engaged in six focus group discussions. Additionally, CSOs, government line ministries, City of Harare and three female community case care workers participated in key informant interviews. Purposive sampling ensured the selection of participants capable of providing

detailed insights into the phenomenon under investigation.

6

<https://www.statisticssolutions.com>



## 2.4 DATA COLLECTION METHODS

The researchers used document analysis, key informant interviews and focus group discussions to source information. Document analysis involved reviewing relevant documents such as the Zimbabwe National Drug Master Plan 2020-2025, the United Nations Office on Drugs and Crime World Report, and the Zimbabwe National Strategic Plan for Mental Health services to contextualize the research findings. The information provided by the documents provided background information on drug and substance abuse and set the tone for the deeper analysis of the phenomena. Focus group discussions and key informant interviews facilitated collaboration between researchers and participants, offering a comprehensive understanding of drug and substance abuse dynamics in Hopley. Moreover, the use of these methods allowed for methodical data sourcing and triangulation. Thus, the researchers had the opportunity to check the data sourced from the selected participants against information sourced from documents. 6 focus group discussions and 12 key informant interviews were conducted.



## 2.5 DATA ANALYSIS

The research used thematic analysis to closely examine collected data to identify themes, topics, ideas, and patterns of significance that came up repeatedly from the data. The approach was guided by familiarization, coding, generation of themes, reviewing of themes, defining, and naming of themes, thus thematic domains of the research were generated. In this regard, data was analyzed to determine themes that emerge from the data set in a comparative fashion. The aim of the analysis approach was to harness and come up with data codes as well as to generate themes in accordance with the collected data per question. A clear step-by-step process was then followed by the researcher concerning what is involved when analyzing data using thematic analysis.



## 2.6 QUALITY CONTROL

Standardized data collection instruments were used during the research. All enumerators were trained at one place prior to data collection. The project management team supervised data collection, entry, and cleaning while the monitoring and evaluation (M and E) team provided technical backstopping throughout the research. Finally, study findings will be validated through a feedback workshop.





### 2.7 LIMITATIONS

Data collection was delayed due to commitments by other targeted respondents who were participating in the National Harmonized Elections conducted between 23 and 24 August 2023. Their input was however incorporated during the validation meeting conducted in November 2023.



### 2.8 ETHICAL CONSIDERATIONS

The research team worked to meet the research objectives while minimizing any risk of harm. Ethical procedures were developed to protect all groups involved in the research. These were guided by two principles:

(a) respecting all people at all stages of the research process.

(b) minimizing harm to respondents and researchers.

As part of this process, the research team first shared information about the research objectives and sought informed consent from the respondents. Confidentiality was maintained throughout the whole research process. All identifiers such as names and contact details were removed from the researchers' notes, communication products, and research reports. All data collection was held in safe places that did not draw unnecessary attention.



A close-up photograph of a person's hand holding a test tube containing a yellowish liquid. The person is wearing dark pants. The background shows an outdoor setting with a dirt ground and a brick building with a doorway. The scene is brightly lit, suggesting daylight.

**Research Findings**

**3.1 INTRODUCTION**

The research revealed widespread drug and substance abuse among adolescents and young adults aged 14 to 25 in Hopley, including school-going children. Illicit drugs are either clandestinely manufactured within the local communities or smuggled from neighboring countries like South Africa, Mozambique and Zambia through porous entry points and facilitated by well-organized syndicates at the official border posts. It was further noted that powerful individuals, corrupt police operatives and community vendors including those who own tuck-shops were identified as part of the web that facilitate peddling and selling of drugs and substances in Hopley. Apart from imported drugs, locals are also flooding the market with cheap, highly intoxicating substitutes such as musombodiya, a colourless drink made from ethanol and emblems powders manufactured and distributed through tuck-shops in Hopley.

The research revealed widespread drug and substance abuse among adolescents and young adults aged 14 to 25 in Hopley, including school-going children. Illicit drugs are either locally manufactured or smuggled from neighboring countries, facilitated by corrupt individuals, and organized syndicates. High-risk behaviors associated with substance abuse, such as street prostitution and trading sex for drugs, expose individuals to HIV/AIDS, unwanted pregnancy, and violence. Efforts to address drug abuse are hindered by stigma, criminalization, and lack of adequate facilities, exacerbated by uncoordinated stakeholder interventions.

Drug and substance abuse often result in risky sexual behaviors, including street prostitution, trading sex for drugs and forced sex. These high-risk behaviors, together with drug use, can also expose individuals to HIV and AIDS, unwanted pregnancy, sexually transmitted diseases, and violence. Efforts to address drug and substance abuse are affected by stigma and discrimination, absence of rehabilitation facilities

and criminalization which makes it impossible for abusers of drugs and substances to come out in the open to seek assistance. Furthermore, uncoordinated efforts in addressing drugs and substances abuse among key stakeholders in Hopley are also hampering efforts to address problems.

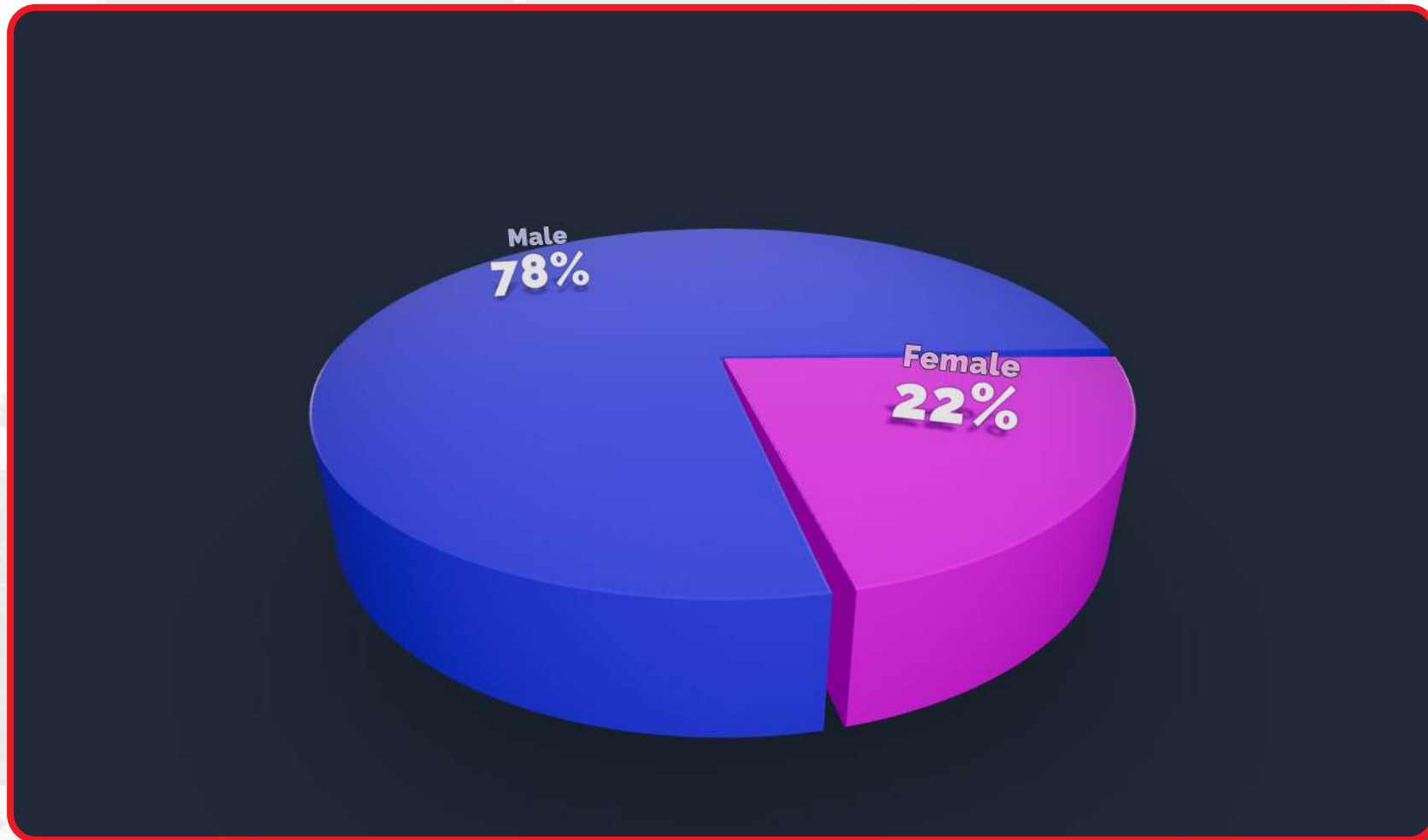


**DEMOGRAPHIC CHARACTERISTICS**

**SEX OF THE RESPONDENTS**

At least 90 youths participated in the research with 78% being female respondents and 22% being male respondents as indicated in **Figure 1** below.

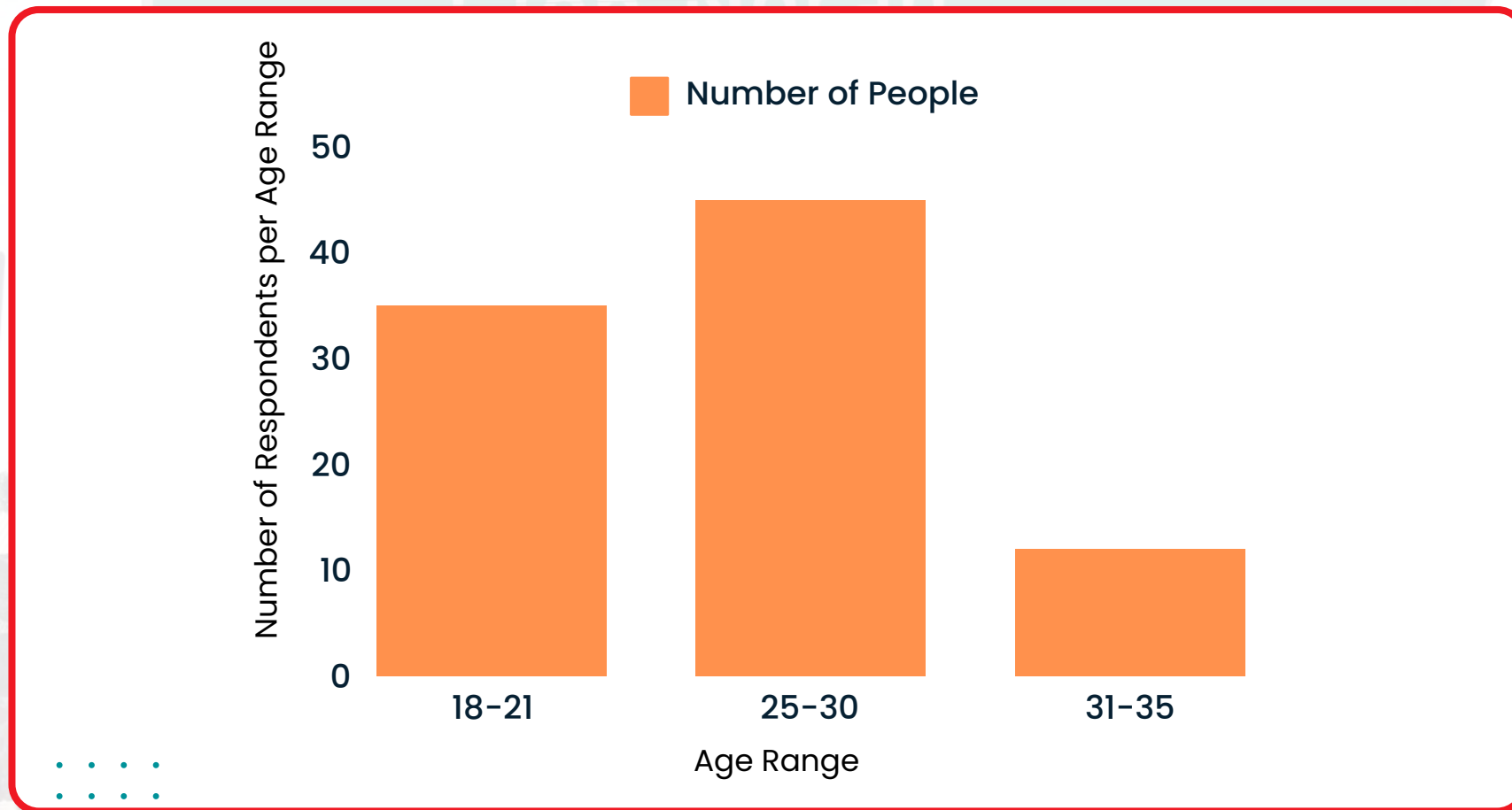
**Figure 1: Sex of the respondents**



**AGE OF THE RESPONDENTS**

The research showed that the majority of the respondents (43) were drawn from ages between 25-30 followed by those aged between 18-24 while the least number of respondents came from people aged 31-35 as indicated in **Figure 2**.

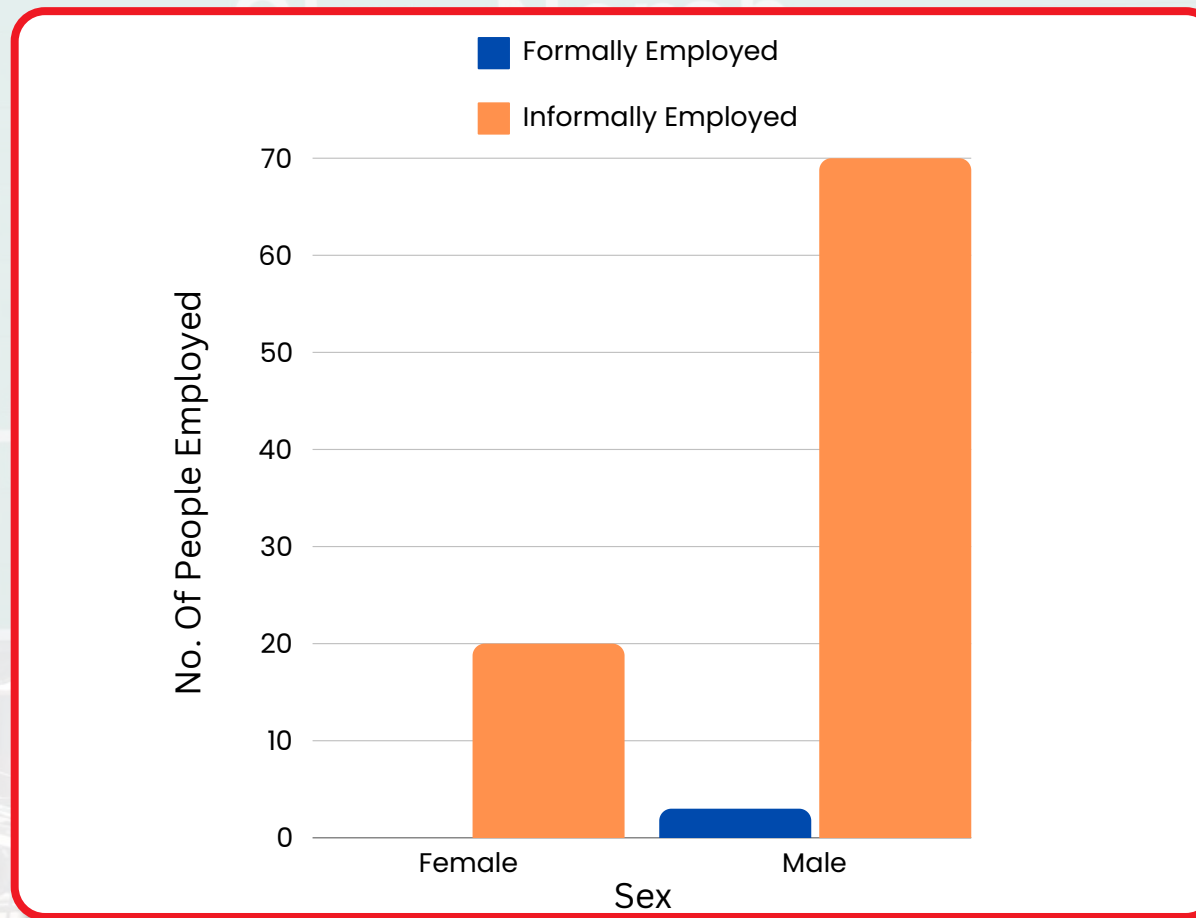
**Figure 2: Age of the respondents**



**EMPLOYMENT STATUS OF THE RESPONDENTS**

**Figure 3** below shows that 98% of the respondents are informally employed with the majority of them finding it difficult to sustain their livelihoods.

**Figure 3: Employment status of the respondents**



### Prevalence of drugs and substances

The research revealed that teenagers and young adults in Hopley aged between 14 and 25 including school children have been identified as the most vulnerable section of the population particularly those from poor and unstable backgrounds, are vulnerable to drug and substance abuse. Commonly used substances include cocaine, methamphetamine, alcohol, marijuana, and locally manufactured alternatives such as musombodiya.

Teenagers and young adults, particularly from poor and unstable backgrounds, are vulnerable to substance abuse. Reports also highlight unconventional methods of intoxication, such as inhaling vapors from diapers and bleach.

Table 1: Categories of substances and drugs consumed in Hopley.

Category(s)	Different types
Central Nervous System Depressants or stimulants	Cocaine, methamphetamine, crystal meth, commonly known as <i>mutoriro</i> , Chalk, Ice, Crank, alcohol, marijuana/mbanje/cannabis
Inhalants	Alcohol, heroin, glue, and cough mixtures such as histalix and bronclear, Glue; Solvents – <i>fembo</i> and Genkem; Chlorpromazine – <i>Maragado</i> ; <i>Mangemba</i> ; Cane spirit; moonshine known locally as <i>tumbwa</i> or <i>kozoda</i> .

Apart from imported drugs, locals are also flooding the market with cheap, highly intoxicating substitutes such as musombodiya, a colourless drink made from

ethanol and emblems powders manufactured and distributed through tuck-shops in Hopley. Reports from the interviews also highlight unconventional methods of intoxication, such as inhaling vapors from diapers and bleach.

“Drug abusers can take anything that they think will keep them euphoric or sedated and cases of organic psychosis are on the rise” said one of the respondents of the FGDs.

### Causes of drug and substance abuse

The research respondents indicated that young people consume drugs and substances as a stress reliever against poverty and unemployment. Other common drivers highlighted included peer pressure, broken families, emotional and physical abuse, and curiosity, often resulting in addiction. The drug and substance abuse scourge has been blamed on factors such as youth exposure to technological gadgets, weak policing, and an increase in child-headed households due to parent migration, neglect, or death. In the same token, the prolonged school closures due to the COVID pandemic compounded by lack of recreational facilities also saw idle young people especially students turning to drugs and substances to fight boredom.

### Effects of drug and substance abuse

The research findings reflect on the detrimental effects of drug and substance abuse, impacting various aspects of individuals’ lives as well as broader societal dynamics. Drug and substance abuse have far-reaching consequences, impacting not only the individuals directly affected but also their families, communities, and broader societal structures.



### 1. Risky Sexual Behaviors

Drug and substance abuse often lead to engaging in risky sexual behaviors, including street prostitution, trading sex for drugs, and experiencing forced sex. Such behaviors not only increase the risk of contracting HIV and sexually

transmitted infections (STIs) but also contribute to unwanted pregnancies and instances of gender-based violence (GBV). Testimonies from the community underscored the prevalence of girls resorting to drug use as a means to engage in sex work, exposing them to significant dangers and violence.



### 2. Social and Behavioral Consequences

The research revealed that drug users, particularly youth, may exhibit destructive behaviors such as harassing their parents and engaging in theft or robbery to sustain their addiction.

This behavior extends beyond familial relationships, leading to alienation from peers and disengagement from school and community activities. Consequently, substance-abusing youth face increased risks of suicide, homicide, and illness, further exacerbating the toll of drug abuse on individuals and communities.



### 3. Mental Health Implications

Drug and substance abuse contribute to various mental health issues among users, including depression, developmental delays, apathy, and withdrawal.

Sleep disturbances, such as insomnia and irregular sleep patterns, were commonly reported among substance users, exacerbating mental health challenges and affecting overall well-being.



### 4. Impact on Family Dynamics

The use of drugs and substances disrupts family dynamics and poses significant challenges to household functioning. Families with substance users often struggle to maintain

day-to-day activities and allocate resources, with financial resources being diverted towards sustaining addiction rather than meeting basic needs. This strain on family resources and relationships results in emotional and psychological distress among family members, further perpetuating a cycle of instability and dysfunction.





**5. Social and Economic Costs**

The social and economic costs associated with youth substance abuse are substantial, encompassing financial losses, distress among victims of substance-related crimes, and increased burdens on support systems.

The demand for medical and treatment services for affected youth further strains existing resources, highlighting the urgent need for comprehensive interventions to address substance abuse at both individual and societal levels.

**Barriers Of Current Efforts Towards Addressing Drug And Substance Abuse**

Addressing drug and substance abuse in Hopley faces numerous barriers, hindering effective intervention strategies and exacerbating the challenges faced by individuals and communities affected by addiction.

**1. Criminalization and Stigmatization**

Drug and substance abuse are heavily stigmatized and criminalized, creating significant barriers for individuals seeking help. Public and self-stigma, fueled by negative stereotypes and prejudice, marginalize, and underserve those struggling with addiction. Provider-related stigma within healthcare services further compounds the issue, with individuals with substance use disorders (SUDs) often treated as lesser priorities or lacking dignity and compassion in their treatment. Despite the proven effectiveness of

tailored social support services, they remain scarce in practice, leaving many without access to essential resources for recovery.

**2. Treatment Gap and Resource Constraints**

A significant treatment gap exists for mental health, neurological, and substance use disorders, primarily due to a ‘brain drain’ of mental health professionals and underfunding of mental health services. The lack of specialized treatment facilities for drug and alcohol addiction exacerbates this gap, leaving individuals without adequate support. Many illicit drug users are unaware of the need for treatment or face barriers to accessing it, contributing to ongoing addiction cycles. Even when individuals acknowledge their struggle with addiction, they may lack information about available treatment options or face logistical challenges in accessing them.

**3. Family Rejection and Sociocultural Factors**

Family rejection poses a significant barrier to seeking assistance for drug and substance abuse. Some parents may deny or dismiss their child’s addiction, attributing it to external factors such as evil spirits or preferring prayer over professional support. Sociocultural beliefs and norms may also discourage seeking help, particularly when community leaders or family members are also struggling with addiction. The interconnectedness of family dynamics and substance abuse further complicates the situation, with familial involvement in substance abuse hindering support systems and perpetuating cycles of addiction.

#### 4. Legal and Law Enforcement Challenges

Zimbabwean drug laws inadequately address drug misuse, prevention, and treatment, contributing to ongoing challenges in combating substance abuse. Corruption within law enforcement agencies further exacerbates the situation, with reports of police involvement in drug trafficking and providing security to drug lords. Despite efforts to conduct operations and arrest drug peddlers, the lack of prosecutions or convictions highlights systemic issues within law enforcement and the justice system. The fragmented and uncoordinated efforts of stakeholders in Hopley further impedes progress in addressing drug and substance abuse effectively.

#### 3.12 Chapter Summary

In this chapter, the findings of the research have been highlighted. The research found out that there is rampant abuse of drugs and substances among the adolescents and young adults in Hopley. Due to high unemployment levels, peer pressure, lack of recreational facilities among other factors the future of the young people remains a pipe dream. Mushrooming of tuck-shops for the peddling of drugs compounded by poor policing and lack of structures to support drug and substance users has made the situation worse further exposing the youth to dangers of drug and substance abuse. Reported cases of social and health consequences of drug abuse such as school drop-outs, family disintegration, unwanted pregnancies, GBV among others paint a bleak future for the lives and livelihoods of the young people in Hopley.





# Conclusions & Recommendations

## 4.1 Conclusions

Based on the findings of this research, the following conclusions are made:

### Prevalence of drugs and substances

- The teenagers and young adults in Hopley aged between 14 and 25 including school children have been identified as the most vulnerable section of the population especially those from poor and unstable backgrounds.
- The drugs and substances that are commonly used in Hopley include alcohol, cannabis/marijuana/mbanje, heroin, glue and cough mixtures such as histalix and bronclear, methamphetamine (crystal meth, commonly known as meth, speed, mutoriro, Chalk, Ice, Crank, Guka); Glue; Bronclee (Bronco); Solvents – fembo and Genkem; Chlorpromazine – Maragado; Mangemba; Cane spirit; moonshine known locally as tumbwa or kozoda. Others were said to dip diapers and bleach products in boiling water and inhale the vapours as intoxicants.

### Drug trafficking and supply chain

- Most of the drugs consumed in Hopley are either locally manufactured or smuggled from foreign countries like South Africa, Mozambique, Zambia, Malawi among others.
- An intricate web of powerful individuals, corrupt police operatives and community vendors including those who own tuck-shops known as gazzas were identified as the vehicle peddling drugs and substance Hopley.

### Causes of drug and substance abuse

- The respondents indicated the key drivers of drug and substance abuse and

among these included relieving stress against poverty and unemployment. Other common drivers highlighted included peer pressure, broken families, emotional and physical abuse, and curiosity, often resulting in addiction.

- The prolonged school closures due to the COVID pandemic compounded by lack of recreational facilities also saw idle young people especially students turning to drugs and substances to fight boredom.

### Effects of drug and substance abuse

- The research indicated that drug and substance abuse lead to a range of adverse outcomes, including risky sexual behaviors, prostitution, trading sex for drugs and forced sex. These high-risk behaviors, together with drug use, could expose individuals to HIV, unwanted pregnancy, sexually transmitted diseases, and violence.
- Drug and substance abuse result in sleeping disorders and nightmares. Testimonies from the drug and substance users revealed that they sometimes experience sleeping disorder including at times sleeping beyond normal hours while others suffer from insomnia.
- The research showed increased school dropout rates, absenteeism including some not performing well in their studies. Others also indicated that there is limited committed to education among learners who use drugs including others becoming truant.
- Moreso, drug and substance abusing youth are alienated from and stigmatized by their peers as well as disengaging from school and community activities.

## Barriers To Addressing Drug And Substance Abuse

Addressing drug and substance abuse in Hopley faces numerous barriers, hindering effective intervention strategies and exacerbating the challenges faced by individuals and communities affected by addiction.

### 1. Criminalization and Stigmatization

Drug and substance abuse are heavily stigmatized and criminalized, creating significant barriers for individuals seeking help. Public and self-stigma, fueled by negative stereotypes and prejudice, marginalize and underserve those struggling with addiction. Provider-related stigma within healthcare services further compounds the issue, with individuals with substance use disorders (SUDs) often treated as lesser priorities or lacking dignity and compassion in their treatment. Despite the proven effectiveness of tailored social support services, they remain scarce in practice, leaving many without access to essential resources for recovery.

### 2. Treatment Gap and Resource Constraints

A significant treatment gap exists for mental health, neurological, and substance use disorders, primarily due to a 'brain drain' of mental health professionals and underfunding of mental health services. The lack of specialized treatment facilities for drug and alcohol addiction exacerbates this gap, leaving individuals without adequate support. Many illicit drug users are unaware of the need for treatment or face barriers to accessing it, contributing to ongoing addiction cycles. Even when individuals acknowledge their struggle with addiction, they may lack information about available treatment options or face logistical challenges in accessing them.

### 3. Family Rejection and Sociocultural Factors

Family rejection poses a significant barrier to seeking assistance for drug and substance abuse. Some parents may deny or dismiss their child's addiction, attributing it to external factors such as evil spirits or preferring prayer over professional support. Sociocultural beliefs and norms may also discourage seeking help, particularly when community leaders or family members are also struggling with addiction. The interconnectedness of family dynamics and substance abuse further complicates the situation, with familial involvement in substance abuse hindering support systems and perpetuating cycles of addiction.

### 4. Legal and Law Enforcement Challenges

Zimbabwean drug laws inadequately address drug misuse, prevention, and treatment, contributing to ongoing challenges in combating substance abuse. Corruption within law enforcement agencies further exacerbates the situation, with reports of police involvement in drug trafficking and providing security to drug lords. Despite efforts to conduct operations and arrest drug peddlers, the lack of prosecutions or convictions highlights systemic issues within law enforcement and the justice system. The fragmented and uncoordinated efforts of stakeholders in Hopley further impede progress in addressing drug and substance abuse effectively.

## 4.2 Recommendations

Building on the conclusions drawn from this study, the following recommendations are proposed:

<b>Employment and Livelihood Interventions:</b>	Implement livelihood interventions aimed at creating employment opportunities for youth in Hopley to address economic vulnerabilities and reduce reliance on substance abuse as a coping mechanism.
<b>Recreation Facilities and Life Skills Development:</b>	Establish recreational facilities and promote sporting activities as a means of engaging youth in constructive activities and developing essential life skills to deter substance abuse.
<b>Multi-Stakeholder Coordination:</b>	Strengthen collaboration among stakeholders, including government agencies, private partners, and development organizations, to implement comprehensive strategies for addressing drug and substance abuse in Hopley.
<b>Legislative and Policy Reforms:</b>	Advocate for the full implementation of existing drug laws and national drug control strategies, alongside periodic reviews to align with evolving challenges and emerging substances. Ensure enforcement measures prioritize support for individuals with substance use disorders rather than punitive measures against users.

<b>Peer Support and Community Engagement:</b>	Establish peer support groups and community centers to provide a supportive environment for individuals in recovery from substance use disorders, fostering a sense of belonging and reducing stigma.
<b>Family Communication and Support:</b>	Promote parent-to-child communication interventions to enhance family support networks and encourage open dialogue about substance abuse, enabling early intervention and support for affected youth.
<b>Integration of Mental Health Services:</b>	Integrate mental health interventions, including substance abuse treatment, into existing healthcare services, such as the Tariro clinic, to improve access and address the holistic needs of individuals with substance use disorders.

# Annexure

## Appendix 1: Tasks and deliverables

Task	Deliverable	Timelines
Task 1: Start up	<ul style="list-style-type: none"> <li>• Compiling research technical proposal</li> <li>• Developing research tools</li> <li>• Review of the technical proposal and research tools</li> <li>• Finalizing the technical proposal and research tools</li> </ul>	23 June 2023
Task 2: Develop research protocols	<ul style="list-style-type: none"> <li>• Draft workplan (including KII &amp; FGD protocols)</li> <li>• Workplan review</li> <li>• Final workplan</li> <li>• Secure logistics and permissions for field work including police clearance</li> </ul>	29 June 2023
Task 3: Data collection, and initial analysis	<ul style="list-style-type: none"> <li>• Training of data collectors, piloting protocols, field testing of the research instruments &amp; revision (as needed)</li> <li>• Data collection (3 days)</li> <li>• Routine fieldwork briefings (face to face meetings)</li> </ul>	05 July-11 July 2023
Task 4: Analysis and writing final report	<ul style="list-style-type: none"> <li>• Draft report</li> </ul>	24 July 2023
	<ul style="list-style-type: none"> <li>• Validation workshop</li> </ul>	26 July 2023
	<ul style="list-style-type: none"> <li>• Final report</li> </ul>	28 July 2023

## Key Informant Interview (KII) Guide

Guidance for introducing yourself and the purpose of the interview:

Good morning/afternoon. My name is----- from -----organization. We are carrying out a research on illicit drugs among youth in Hopley to establish information that will be used to mitigate or prevent its prevalence as well as to inform policy direction at local and national level. The survey is voluntary, and you can choose not to take part. The information that you give will be confidential. The information will be used to prepare reports but will not include any specific names. There will be no way to identify that you gave this information. Could you please spare some time (around 15-20 minutes) for the interview?

NB to enumerator: This survey is NOT part of the registration exercise and will have no influence on your status as a client/non client

Name of the respondent:

Title of the respondent:

Organization or institution represented:

Position of the respondent:

1. What are the most common types of illicit drugs used in Hopley?
2. What are the factors that contribute to the high prevalence of illicit drug use in Hopley?
3. What are the health and social consequences of illicit drug use in Hopley?
4. Who is responsible for the movement and marketing of drugs in the community?
5. Are there any efforts by the stakeholders to prevent or mitigate the impact of illicit drug abuse in the community?
6. What are the barriers towards addressing the problem of drug and substance abuse?



## Focus Group Discussion (FGD) Guide

Guidance for introducing yourself and the purpose of the FGD:

Good morning/afternoon. My name is----- from -----organization. We are carrying out research on illicit drugs among youth in Hopley to establish information that will be used to mitigate or prevent its prevalence as well as to inform policy direction at local and national level. The survey is voluntary, and you can choose not to take part. The information that you give will be confidential. The information will be used to prepare reports but will not include any specific names. There will be no way to identify that you gave this information. Could you please spare some time (around 15-20 minutes) for the interview?

NB to enumerator: This survey is NOT part of the registration exercise and will have no influence on your status as a client/non client

1. What are the most common types of illicit drugs used in Hopley?
  - Explore the users.
  - Areas where the drugs are found.
  - Prices of the drugs
  - What time of the day are the drugs consumed?
  - Demonstrate how they consume the drugs(mamwiro/masvutiro)-are they sold to anyone even a stranger.
  - Should capture case studies, lived realities or testimonies.
2. What are the factors that contribute to the high prevalence of illicit drug use in Hopley?
3. What are the health and social consequences of illicit drug use in Hopley?
4. Who is responsible for the movement and marketing of drugs in the community?
5. Are there any efforts by the stakeholders to prevent or mitigate the impact of illicit drug abuse in the community?
6. What are the barriers towards addressing the problem of drug and substance abuse?

## Appendix 5: Consent form

Title of the project: Youth Hub in Hopley – dignified lives and decent livelihoods for young people

### Introduction

Action Aid Zimbabwe and Katswe Sisterhood are conducting research on drug and substance abuse in Hopley to establish information that will serve to inform programme interventions and policy discussions at local and national level. You are being asked to participate in the research and it's your right to seek clarity on things that you do not understand, or you are not clear of. Feel free to participate in the research. The research will take between 15-20 minutes.

1. I.....(name in full) voluntarily agree to participate in this research study.
2. I understand that even if I agree to participate now, I can withdraw at any time or refuse to answer any question without any consequences of any kind.
3. I understand that I can withdraw permission to use data from my interview within two weeks after the interview, in which case the material will be deleted.
4. I have had the purpose and nature of the study explained to me in writing and I have had the opportunity to ask questions about the study.
5. I understand that I will not benefit directly from participating in this research.
6. I agree to my interview being audio-recorded.
7. I understand that all information I provide for this study will be treated confidentially.
8. I understand that in any report on the results of this research my identity will remain anonymous. This will be done by changing my name and disguising any details of my interview which may reveal my identity or the identity of people I speak about.
9. I understand that I am free to contact any of the people involved in the research to seek further clarification and information.

Signature of research participant

Venue

Date

-----

-----

-----

Signature of researcher

Venue

Date


-----


-----


-----




# act:ionaid

 ActionAid International Zimbabwe  
26 Divine road  
Milton Park  
Harare, Zimbabwe


 +263-04-788123/5, 776127

 +263-772164448/9

 [info.zimbabwe@actionaid.org](mailto:info.zimbabwe@actionaid.org)


 <https://zimbabwe.actionaid.org>

 ActionAid Regional Office  
281 Chimurenga Street  
Rusape  
Zimbabwe

 +263-25-3537

 +263-772 395 967

 [info.zimbabwe@actionaid.org](mailto:info.zimbabwe@actionaid.org)

 <https://zimbabwe.actionaid.org>

 ActionAidZim

 ActionAidZimbabwe

 ActionAid Zimbabwe

 @actionaid\_zim