

NEEDS ASSESSMENT FOR THE DEVELOPMENT OF A DRUG ABUSE INTERVENTION AMONG ZIMBABWEAN YOUTHS

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Abstract

There is a problem of drug abuse among the Zimbabwean youths. Thereby creating an escalated need to support youths who use drugs in the Zimbabwean community to fight the rampant challenge that has affected more than fifty percent of the Zimbabwean youths. The current study aimed to explore if there is a need to develop a Christian-based drug abuse intervention to enhance self-control and self-concept among youth drug abusers in Zimbabwe. The needs assessment was conducted using a mixed method approach, where desk research approach was method triangulated with survey questionnaire feedback from eight experts in related fields to the current study. Findings from the study shows a unanimous agreement to the developing of a drug abuse intervention to support youth drug abusers in Zimbabwe gain self-control and self-concept. The study concluded that indeed there is a need to develop a Christian based drug abuse intervention for Zimbabwean youth drug abusers.

Keywords: Development, Drug abuse, Intervention, Need, Youth

1. INTRODUCTION

There is a severe problem of drug and substance abuse among Zimbabwean youths (Nhapi & Mangwende, 2020; Mhlanga, 2020; Dodo et al., 2021; Mafa, & Simango, 2021). The majority of youths in Zimbabwe, approximately 57 percent are drug and substance abusers (Zimbabwe Civil Liberties and Drugs Network, 2019). According to World Health Organisation (WHO) Africa (2020), Zimbabwe has the highest number of young adults in Africa who abuse drugs, at 70.7 percent among males and 55.5 percent among females. The Voice of America (VOA) Africa, in 2015 estimated the number of drug abusers in Zimbabwe to be between 1 million and 1.2 million out of a total population of 14.4 million (Kundwe & Mbwire, 2020) and that the police record more than 100 drug abuse cases every month in Harare, the capital of Zimbabwe alone. Concerning drug abuse statistics in Zimbabwe, there are no accurate statistics, hence the country relays on calculated estimates (Makande, 2017; ZCLDN, 2020). Manayiti (2016) citing Deputy Director of Mental Health Services in the Ministry of Health and Child Care of Zimbabwe affirms that it is a mammoth task to establish the exact, accurate figure of drug abusers in Zimbabwe. Though there may be a short of accurate statistics, this

does not negate the existence of the problem of drug abuse by the youth in Zimbabwe (Mazuru, 2018).

Disturbingly, statistics on youth drug abuse in Zimbabwe continue to increase yearly despite measures implemented by various stakeholders to fight the pandemic in treatment, rehabilitation, and enforcement (Gumbo, 2020; Nyabeze et al., 2021). The problem of drug abuse in Zimbabwe has been exacerbated by the lack of adequate and appropriate interventions to support the recovery and quitting process of people who use drugs. The drug abuse issue has been brought up on the national agenda as the president of Zimbabwe on the 2022 National Youth Day (21st February 2022) declared drug abuse to be a national disaster and appealed to all stakeholders and individuals to proffer solutions for this menaces that has become a threat to the health, cultural, religious and socio-economic sphere in Zimbabwe (Tembo, 2022).

To note, Zimbabwe has not been docile in responding to the issue of drug abuse (Matutu & Mususa, 2019) as the Government of Zimbabwe put in place policies and legislature to govern, enforce, rehabilitate and treat people who use drugs in the country. The Government of Zimbabwe has a zero-tolerance approach to the issue of drug abuse (Makande, 2017; Muchabaiwa & Mbonigaba, 2021) where drug abuse is a crime (Nhapi & Mathende, 2016; Dzobo et al., 2020). An expert in mental in Zimbabwe, Chirisa et al. (2021) alludes that the focus of the Government of Zimbabwe ought to shift from a punitive approach to a more rehabilitative approach regarding drug abuse so that there could be a wholesome cognitive change in drug abusers, which can facilitate positive change (Dudzai & Gumbo, 2020).

1.1 Current Drug Abuse Interventions in Zimbabwe

The Zimbabwe Republic Police (ZRP), Department of Drugs and Narcotics, Community Policing and Crime Prevention, and other related ZRP Departments have been tirelessly working towards raising awareness, teaching on drug abuse to the public as well as reconciling and reintegrating estranged youth drug abusers with their families (Makande, 2017). Though drug abuse programmes by the ZRP play a critical role in enforcing drug abuse laws, community awareness programmes on drug abuse, and conflict solving (Nyabeze et al., 2021; Wamara, 2021) they need to be complemented by treatment programmes that will support the quitting process among people who use drugs, but to date, there are no public run drug abuse treatment programmes in Zimbabwe (Rwafa et al., 2019; ZCLDN, 2020).

The focus of the public mental health system in Zimbabwe has been to treat those who have severe or acute drug abuse problems or psychosis and admitted in public hospitals, where they receive detox programmes for the highly intoxicated, cognitive behavioral therapy, individual counselling, at times family counselling and occupational therapy (Nhunzvi et al., 2019; Rwafa et al., 2019). However, there is a need to provide treatment programmes for those who have low to moderate drug abuse problems too to deter them from reaching psychosis levels (Mukuzunga et al., 2021; Mazuru, 2018).

Regarding civic organisations and drug abuse in Zimbabwe, Rugobo (2019) expresses that though there are Non-Governmental Organisations (NGOs) in Zimbabwe their main efforts are on HIV/AIDS and food aid to the communities and it could be time these organisations pay

attention to the issue of drug abuse. The current general response to drug abuse in Zimbabwe creates a vital need for the development of treatment programmes that can complement the existing efforts by the Government and its stakeholders to fight the drug abuse pandemic (Nhapi & Mangwende, 2020; Dodo et al., 2021).

1.2 Needs in Drug Abuse Treatment

Though efforts by these multi stakeholders to address the issue of drug abuse in Zimbabwe are commendable, drug abuse and relapse cases are on the increase (Rwafa et al., 2019). There is a need to increase interventions that cognitively support positive behavioural change among Zimbabwean drug abusers (Chirisa et al., 2021). There is a need to take cognisance of the social, political, economic, and environmental factors in Zimbabwe to make adjustments or complement the existing treatment methods offered by the public mental health institutions of Zimbabwe, utilising resources that are already available in the community (Nhapi, 2019). One such resource is religion, as religion plays a significant role in addressing day to day social issues, and a voice, that is listened to in the Zimbabwean community, as such, systematic treatment for drug abusers emanating from a religious basis may be heard by the youth (Nhunzvi et al., 2019).

There are various modules or interventions that support people who use drugs (Taylor, 2013; Fishman et al., 2016). While modules may differ, it is essential for every module developer to conduct a needs assessment that will guide the module design and development (Kvale 1989; Biasutti, 2019). With a similar view, Reeve et al. (2020) expresses that it is a principle of public health science to understand, justify, and establish the need and appropriateness of an intervention programme.

Regarding drug abuse treatment, needs assessment is used to examine how well, or how poorly the provisions of the current service delivery system are pertaining to the treatment needs of the community (Altschuld, & Witkin, 2000). Typically, needs assessment seeks to understand whether the existing drug treatment programs meet community needs in terms of the numbers and types of clients served. To note, needs assessment is not an efficacy study, as it does not focus on the effectiveness of previous programs in modifying the negative behaviours of the clients treated; rather it focuses on needs in terms of treatment demand and effectiveness of existing treatment programs in accessing drug users in the community (Soriano, 2012).

The current study is an exploratory study on needs assessment of developing a Christian-based drug abuse, treatment module with the aim to enhance self-control and self-concept among tertiary students who use drugs. Therefore, the research is deemed to be part of design- based research. As postulated by van den Akker et al. (2006) design based research is a fast growing field in research and is appropriate in model, module, programme and system designing and basically focuses on assessing the need in developing new tools or products that could improve practice and it's most apparent feature being its contribution in practical implications. The current study is therefore with the objective to ascertain the need for developing an intervention module that is aimed to enhance self-control, and self-concept among youth drug abusers in the Zimbabwean context.

2. MATERIALS AND METHODS

The researchers firstly identified the topic of research, purpose and attributes that is drug abuse and Christian influence to the recovery in people who use drugs. The researchers then went on to conduct a desk research to gain more appreciation on the subject matter. The researchers listed down the study sources narrowing down to those that provide most relevant and more authentic information applicable to the current research. Desk research is conducted where the type of information sought is available in printed form, news, books, journals, magazines and digital platforms (Frost, 2021). The current study considered journal articles, educational institution repositories, government and non- government resources as information sources. After identifying the data collection sources, the researchers checked for any available information closely related to the needs in the treatment of people who use drugs in Zimbabwe. The relevant and most recent information was gathered and compared for any duplication (Marlatt, & Donovan, 2005). Major themes considered relevant for assessment were; current practise in the treatment of people who use drugs, excess and inadequacies in treatment, Holistic public and private policies and reception in treating people who use drugs.

After ascertaining the themes in module development, the researchers went on to develop survey questions that complimented and needed further clarity from the data gathered in the desk research. The survey questions were validated by two experts in mental health from the researchers' affiliated university before distribution to the experts. This study through LinkedIn and research gate sought for experts in the field of mental health, drug abuse, youth studies and Christianity to verify and give their opinion on the needs in the treatment of people who use drugs in Zimbabwe. Each expert formulated their own ideas via completing open and close-ended questions, available was a space to add other views. The survey questions were open-ended and derived from the Brown (1997), National Institute on Drug Abuse (NIDA)'s resource center for health services research questions, for drug and substance abuse treatment needs. The Brown (1997) needs assessment questions for drug and substances abuse treatment include the following questions: Are drug abuse, treatment programs seeing a significant proportion of drug users in the community? Are drug abuse, treatment programs seeing clients that reflect the drug-using characteristics of the community? Table 1 shows the profiles of the experts who were participants in the needs assessment by the current study.

Table 1: Experts' profile

Expert	Expertise	Academic Qualifications	Experience
1	Clinical Psychologist	Ph.D. Psychology	7 years
2	Addiction, counselling, and mental health (adults)	Ph.D. Counselling Education and Supervision	10 years
3	Substance abuse counselling	Ph.D. Counselling	13 years
4	Youth and gender studies	Ph.D. Gender and Youth Studies	8 years
5	Religious studies (Christianity)	Ph.D. Religious Studies	14 years
6	Pastoral counselling and offender rehabilitation	BA Theology	21 years
7	Drug abuse	PhD Behavioural Psychology	10 years
8	Pastoral care and counselling	BA Theology + Bsc Counselling	33 years

The gathered information from the desk research was consolidated for thematic analysis to answer the objectives of the study, which is to ascertain the need for developing an intervention module that is aimed to enhance self-control, and self-concept among youth drug abusers in the Zimbabwean context. Feedback from experts was used to method triangulate, there by relating to findings from the sourced literature.

3. RESULTS

The study gathered that, the public health system in Zimbabwe does not have harm reduction services that support recovery and quitting to people who use drugs (ZCLDN, 2018; Chingono, 2021) as its focus is on treatment of those who would have developed drug abuse mental challenges only. The failure by the public health system in Zimbabwe to meet community needs with regards to accessing supportive services by drug abusers results in reliance on private rehabilitation centres that are prohibitively expensive and not accessible by many (Nhapi, & Mathende, 2016), and some seeking rehabilitation services to the neighbouring South Africa (Crush, & Tawodzera, 2014). However, there is a rail of hope as the government of Zimbabwe launched the Zimbabwe Drug Abuse Master Plan alongside the rehabilitation and treatment guidelines for substance use (Tembo, 2021).

Experts, two, four and five in the current study express that currently, the number of support programs and facilities in Zimbabwe are not enough to mitigate the rampant problem of drug abuse, as most treatment centres are not affordable by the youth drug abusers. Expert five also highlighted that,

There is a serious need to increase the number programs that support positive behavioural change to people who use drugs, especially those that are easily accessible and affordable to the marginalised youth drug abusers' population.

Whilst there are Non-Governmental Organisations [NGO] that work towards the rehabilitation of youth drug abusers in Zimbabwe, these NGOs do not meet the meet community needs in terms of the numbers of clients served (Gray, 2016). Moreover, voluntary organisations face numerous challenges of annual registering under the Private Voluntary Organisation Act (17:05), resulting in most organisations failing to meet the standard procedures, and close leaving most youth in unfinished programs (Chikoko, 2016; Batsell, 2018). Corroborating with Gray (2016), expert four highlights that

The community should not be over reliant on donor funding and programs for the recovery and quitting programs as most of these organisations haphazardly close, or have their funding withdrawn thereby dumping clients with uncompleted programs.

The government of Zimbabwe should do more in terms of rehabilitation programmes for people who use drugs (Rugoho, 2019) and drift from the criminalisation of drug abusers to a more rehabilitative approach (Matutu, & Mususa, 2019). The government of Zimbabwe introduced a zero-tolerance approach to drug abuse, where drug abuse is a crime liable for prosecution. Whilst serving as a deterrent measure, the criminalisation policy scares away some drug abusers from seeking rehabilitation services (Urombo, & Kasimba, 2018; Matai et al., 2021). Expert two, four and five in the study concur that the zero tolerance approach should be more applicable to the drug traffickers and sellers, and a more rehabilitative approach be taken to support the drug abusers to recovery and quitting.

There is need to utilise the church as an available resource within the community to support people who use drugs (Chikwanah, 2019). Christian based interventions have always been acceptable, affordable and effective in supporting the Zimbabwean community from several vices, which include HIV/AIDS support programs for the infected and the affected (Chimhanda, 2012; Foster et al., 2005), marital issues (Musoni, 2018), and promoting positive behavioural change in people who use drugs (Zimoyo, 2020; Kumuterera, 2019). Expert five highlighted that

Most Reverends in Zimbabwe are registered counsellors whose focus is predominantly spousal or marital counselling, there is a need for these pastors to be equipped and trained to administer support programs to drug abusers within their communities.

4. DISCUSSION

The findings from this study clearly highlight that there is a dire need for the development of a Christian based intervention that enhances self-control and self-concept among youth drug abusers in Zimbabwe. These results are consistent with previous studies such Lund (2016); Popiolek (2016); Kim et al. (2017) and Love (2019) who articulate of the need for Christian based interventions to support positive behavioural change, specifically self-control attainment among people who use drugs in predominantly the West, the United States of America. These studies though conducted in a different context than the current study, affirm the need, feasibility

and importance of such interventions that have a religious bearing in supporting positive change among drug abusers. Within the African continent, the current study situates itself among studies such as Kabugu (2019); Francis et al. (2019) and Freemantle (2012) who affirm the importance of Christian based interventions to support existing treatment programmes for people who use drugs in Africa. These studies claim that, already a nexus between religion and positive change has been established globally, hence the need to introduce religion based interventions within the African continent.

However to note, the findings from the current study differ from the opinion of Hattie (2014) and Szcześniak & Timoszyk-Tomczak (2020) who do not acknowledge the need for Christian based interventions in treatment. These studies argue that there is a very weak correlation between religion, Christianity to be more precise and positive behavioural change, hence no need for the development of Christian based interventions to support positive behavioural change among people who use drugs.

The findings in the current study are very essential in foding practical solutions to addressing the drug abuse problem in Zimbabwe. In order to come up with interventions regarding mental health issues, a needs assessment ought to be carried out to confirm and imperically prove the hypothesis in treatment questions (Alagheband, 2019).

5. RECOMMENDATION AND CONCLUSION

The current study concludes that a Christian based intervention is needed to support positive behavioural change, specifically self-control and self –concept enhancement among youth drug abusers in Zimbabwe. Though the findings from the current study expose the lacunas that are evidently missing in the treatment of people who use drugs in Zimbabwe, more researches are needed to further affirm the position by the current study. The study thus recommends for future studies to use a bigger sample of experts in drug abuse that includes experts from outside Zimbabwe to enable knowledge impartation from other contexts. The study also recommends for future studies to include the youth drug abusers as well in conducting needs assessment, so that the intervention recipients can give an opinion regarding their treatment.

Declaration of interest statement

I hereby declare that the disclosed information is correct and that there is no conflict of interest in any matter regarding this paper.

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