BINDURA UNIVERSITY OF SCIENCE EDUCATION

FACULTY OF SOCIAL SCIENCES AND HUMANITIES

The Effects of drug and substance abuse on human security in Zimbabwe: a case study of Mbare

By

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ABSTRACT

This study examines the effects of drug and substance abuse on human security in Zimbabwe, a case study of Mbare. Being guided by the Human Security Theory and Social Disorganization Theory, providing understanding on how substance abuse affects individuals living conditions and community. Mixed-methods research approach was used, combining qualitative and quantitative data collection methods. Data was collected from 51 respondents through questionnaires and structured interviews. The target population included youths, community members, healthcare professionals, and law enforcement officials. The first objective brings out how drug and substance abuse has weakened community relations through increased crime, domestic violence, and loss of trust among residents. The second objective findings showed that substance abuse contributes to mental health disorders, physical health challenges, and the spread of infectious diseases. The third objective revealed that, drug abuse reduce productivity, increase unemployment, and affects in a negative way the community development. This can be concluded that drug and substance abuse is a major threat to human security, affecting social stability, health and economic growth. There is recommendation of an approach involving community awareness, rehabilitation services, stronger law enforcement, and youth empowerment initiatives to address the problem so it comes to an end.

Key words: Drug and substance abuse, Human security

DECLARATION

I, B221950B, declare that this dissertation titled "The Effects of Drug and Substance Abuse on Human Security in Zimbabwe, a case study of Mbare" is my original work and has not been submitted to any other institution for the award of any degree or qualification.

All sources used in this study have been acknowledged and properly referenced.

Student  14.08.26

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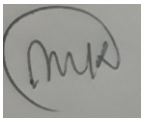
Chairperson 

DEDICATION

Above all, I dedicate this work to God Almighty for granting me life, strength, wisdom, and perseverance throughout this academic journey. Without His grace and guidance, this achievement would not have been possible.

I dedicate this dissertation to my beloved parents, brothers and sisters for their unwavering support.

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Above all, I thank God for granting me the strength, wisdom, and perseverance to complete this dissertation.

LIST OF ABBREVIATIONS AND ACRONYMS

AIDS – Acquired Immune Deficiency Syndrome

HIV – Human Immunodeficiency Virus

SPSS – Statistical Package for the Social Sciences

STATA – Statistical Data Analysis Software

UNDP – United Nations Development Program

UNODC – United Nations Office on Drugs and Crime

WHO – World Health Organization

ZIMSTAT – Zimbabwe National Statistics Agency

ZRP – Zimbabwe Republic Police

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CHAPTER ONE

INTRODUCTION

1.1 Background of the study

The spread of drug and substance abuse has become one of the most urgent social issues facing communities throughout the African continent and elsewhere, transcending its effects on the health of individuals, community relations, the economic productivity of the community and social cohesion. In Zimbabwe, this phenomenon has been taking alarming rates, especially in the highly populated urban settlements of Harare, where economic and institutional vulnerabilities, poverty and unemployment have paved the way for quick spread of substance abuse amongst the youth. The challenge of widespread drug abuse at its core is a challenge to human security which, according to the United Nations Development Programme (1994), is defined as the presence of comprehensive security for every individual from threats to their physical security, health, dignity, and well-being.

Mbare is one of Harare's oldest, and most densely populated, residential suburbs and has in recent years been a key public concern for increasing illicit and injurious substance use among young people. The suburb is close to the city's central business area and is characterized by high population density, low poverty rates, limited access to quality social services and high informal sector activity which is important in supporting the livelihoods of a large number of residents in Mbare Musika – one of Zimbabwe's largest and most active informal markets. In this socio-economic context, the use of

substances such as marijuana (locally known as mbanje), crystal methamphetamine (known in the local context as mutoriro) and various cough syrups and other pharmaceutical products has become widespread and has created ripple effects of consequences for community safety, public health, family stability, and local economic development.

The World Health Organization (2021) has established extensive evidence of the effects of substance abuse on multiple levels of impact, from an individual's own health, to community safety, to overall social development processes. These observations are corroborated by a report from the United Nations Office on Drugs and Crime (2022) showing that there has been an upward trend in substance use all over the world, especially in low-income urban areas with high unemployment and weak institutional support. Zimbabwe is no exception to this worldwide phenomenon, in this country drug abuse is seen as a symptom and at the same time as a catalyst of increasing social vulnerability, in the context of a long period of economic recession, high youth unemployment and ready availability of cheap drugs.

The structural determinants of substance use in Zimbabwe can be traced back to the current economic situation in the country over the last 20 years. Many Zimbabwean youths are unemployed and lack access to meaningful routes to productivity in the informal economy which has gained ground since the formal manufacturing sector shrunk, and stable employment opportunities became scarce (Muzvidziwa, 2019). In many of the poorer neighborhoods, like Mbare, where there is a lack of recreational

facilities, and even organized crime is absent, drug use has become a response to frustration, idleness, and psychological disempowerment occasioned by economic exclusion. Drugs provide a convenient, albeit devastating, way for young people to cope with the feelings of distance from others and lack of realization of their hopes and dreams.

From a human security perspective, the ramifications of this trend are far-reaching and problematic. Security as outlined in the UNDP's (1994) framework is not just about the protection of the state from external threats, but a range of conditions which are needed for people to live in dignity free from fear and free from want. Substance abuse and abuse globally destroy each of these elements: it undermines social trust and reciprocity among people that can keep a community together; it drives cycles of fear, crime, and violence, and causes families to lose their social and economic capital whilst existing on the edge of economic survival (WHO, 2021). In affected communities, parents describe a day to day nightmare of having children who are addicted and unpredictable; even dangerous in some cases to them and members of their family.

Substance abuse in this setting has serious health implications as well. Chronic users of crystal methamphetamine, especially, exhibit a range of severe health issues such as episodes of psychosis, a chronic state of aggression, and profound cognitive deficits, along with ultimate decompensation of their physical health. The accompanying behavioral disinhibition profoundly increases the likelihood of individuals engaging in HIV infection and other communicable diseases; this creates unnecessary pressure for the strained public health system, and imposes devastating impact on poor families'

budget (UNODC, 2022). There is a strong correlation between escalating drug use and higher levels of crime, school dropout, mental health issues and family breakdown in drug-affected city communities, as reported by the Zimbabwe Civil Liberties and Drug Network (2021).

The Government of Zimbabwe has recognized the extent of the crisis, implementing a variety of policy responses such as law enforcement operations, public awareness campaigns and rehabilitation structures (Government of Zimbabwe, 2022). Civil society organizations have become involved at the community level with education programmes and campaigns for greater policy responses. But as Chikoko (2020) has noted, coordinated multi-sectorial efforts that bind together government powers, community knowledge and education to produce durable and effective solutions to substance abuse have so far been hard to achieve. In the context of Mbare, the level of substance abuse is still deepening and growing, despite these interventions, which indicates that the structural factors addressed by the interventions are entrenched, and that the current responses are inadequate.

In light of this dire need, this study aims to explore this phenomenon from an empirical perspective and address its impact in the context of three interrelated aspects, namely, community relations, public health and economic development. The study will provide contextually relevant evidence-informed messages about the nature and scale of these impacts to enhance scholarship and the design of policy and program responses.

1.2 Statement of the problem

This abuse of drugs has become a serious social problem that threatens community relations, public health, and local economic development. Despite efforts by government and community stakeholders to address the issue, the use of substances such as crystal meth (mutoriro), marijuana, and cough syrups continues to rise, especially the young generation, leading to increased crime, domestic violence, and social instability that weaken trust and cohesion within the community (United Nations Office on Drugs and Crime, 2022). At the same time, drug abuse has resulted in major health challenges, including physical illness, mental health disorders, and increased diseases (World Health Organization, 2021), while also negatively affecting economic development through reduced productivity, unemployment, and reliance on informal or activities that are against the law (World Bank, 2020). However, there is limited ideas that examines how socio-economic characteristics, such as overcrowding, poverty, and a strong informal economy, contribute to drug and substance abuse and its wider effects. Therefore, this project seeks to investigate these relationships and their effects on community relations, health, and development.

1.3 Aim of the Study

The general objective of this study is to examine the effects of drug and substance abuse on human security in Zimbabwe especially the suburb of Mbare in Harare as a prime case study site.

1.4 Objectives of the study

I. To examine the effects of drug and substance abuse on relations in the community.

II. To evaluate the effects of drug and substance abuse on health.

III. To assess the impact of drug & substance abuse on local economic development.

1.5 Research Questions

I. How does drug and substance abuse influence community relations?

II. What are the major health effects of drug and substance abuse on individuals and the wider community?

III. How does drug and substance abuse negatively affect the economic development?

1.6 Assumptions of the study

There are several underlying assumptions that underlie this study and guide its design and analysis. It is believed that drug and substance abuse is a widespread and longstanding social issue in Mbare, high amongst youth and other economically disenfranchised people in the area. The researchers also assume that this universal substance use has measurable negative consequences on community relations in terms of increased inter-group conflicts, the gradual loss of trust between persons, and a loss of social bonds between community members.

Further, it is assumed that substance abuse results in severe and measurable effects on individual and community health and has been demonstrated in physical, psychological and emotional domains. It is also believed that these health consequences

entail major economic consequences, in terms of reduced individual productivity, exclusion from formal and informal labour markets and the risk of limiting sustainable local economic development. The study also adopts the view that the social-economic nature of Mbare – high population density, concentrated poverty and the widespread informality of business and economic transactions – are also constitutive in shaping prevalence and nature of substance abuse in the community.

In addition, it is assumed that all participants in the research accompany the study in a way that will be honest and credible with their experiences and observations, and that the process of data collection from the selected sample will be able to give sufficiently representative findings for a meaningful analytical conclusion on the general relationship between substance abuse and human security in the context of Mbare.

1.7. Purpose of the study

To academic institutions

This work contributes original scholarly research to the literature on drug and substance abuse and its impact on human security in urban conditions in sub-Saharan Africa. It offers an empirical basis for institutions like Bindura University of Science Education, adding to current theory in the fields of public health, community security and urban development in particular local contexts. The study will provide a substantive reference to future researchers, students and scholars who are interested in issues pertaining to substance abuse, social vulnerability and human security issues especially in the under-researched high-density suburbs of Zimbabwe.

To the community

This study has immediate practical relevance for the inhabitants of Mbare and similar urban high-density communities in Zimbabwe. It captures and analyzes the particular pathways by which substance abuse harms safety, health and development at the community level, provides evidence that can be useful for advocacy by community leaders, awareness campaigns of civil society organisations and protective strategies taken by families and young people. Results of the study can also help substantiate and lift the voices of community members whose experiences have not been documented in a systematic way to express their own experience of the human security problems they face every day in a context of narcotics abuse.

To Policymakers and government

This study, which draws on empirical data, offers a unique analysis of the human security impact of substance abuse that can directly guide policy responses in government ministries, law enforcement agencies and public health authorities to make better informed, more effective, and more coordinated policies. The study helps to illuminate the links between socio-economic factors, substance use and abuse rates, as well as the downstream consequences of these factors on community life, health, and economic activity, giving policy makers the evidence they need to create interventions that tackle root causes and not just the superficial symptoms of the problem.

1.8 Delimitations of the Study

This study is geographically limited to Mbare suburb of Harare, which was

identified as the main area for study due to its high rates of drug and substance abuse activities and the fact that it represents the socio-economic environment of the phenomenon under study which is characterised by high concentration of poverty, a high population density and a high informal sector economic activity. Mbare is one of the old residential suburbs of Harare, close to the city centre and is characterised by the presence of major economic centres such as Mbare Musika, which is one of the largest informal trading centres in Zimbabwe. These characteristics make it a very fertile ground for the study of the relationship of socio-economic structure, substance abuse and human security.

The study focuses on the areas of the Mbare community in which the economic and social activities are most dense, specifically informal market zones, where substance distribution and use are most focused as well as the negative human security implications of drug abuse are most keenly felt. The participants are targeted towards the groups most directly impacted by the substance abuse phenomenon, in particular youth, market vendors, and long-term community residents. Given the focus of the study on Zimbabwe's urban periphery, the scope of analysis is necessarily limited to the three areas identified as having the potential for an impact on human security — community relations, health, and economic development — and does not necessarily consider areas with similar challenges, such as neighbouring suburbs or Zimbabwe's rural areas.

1.9 Limitations of the study

There are a number of factors which have influenced the process of this study, and

for which recognition should be given. The major drawback is regarding the participants' willingness to openly respond to the research. Although it is known that there is a link between drug abuse and criminality and some drugs users have been seen to be violent, some members of the community were hesitant to participate fearing that they may suffer some retribution from people whose activities may be highlighted by the report. This was met with strict guarantees of anonymity of participants, and with the data collection procedures being as confidential as possible so as to reduce any perceived risk in participating.

In addition, the geographical area for data was constrained by lack of resources and time in Mbare. The time period of the study was defined as 2025-26, which was enough for meaningful qualitative information to be generated but not long enough to cover the total suburb. Finally, the qualitative research methodology used to collect the data, while enabling the collection of rich and contextually nuanced data, has a limited transferability to other suburbs in Zimbabwe and national level generalisation. To maximise reliability and credibility of the findings, measures were applied during the research process such as transparent reporting procedures, strict confidentiality protocols, and methodological triangulation.

1.10 Definition of Key Terms

Drug Abuse: is the harmful or hazardous use of psychoactive substances, including illegal drugs as well as those legally available and used in ways contrary to their prescription or intended use, which leads to negative consequences for the health, mental

state or social functioning of the user (WHO, 2021).

Drug and substance: The chronic use of legal or illegal drugs or chemicals, such as alcohol, pharmaceuticals, or narcotics, in ways that result in harmful physical, psychological and social consequences.

Human Security refers to a people-centred understanding of security which secures individuals from the multiple threats to their physical safety, health, economy and dignity including threats from poverty, violence, disease and social exclusion (UNDP, 1994).

Addiction: A chronic, relapsing neurological condition that involves compulsive involvement in substance use or other behaviours despite a person knowing that they are harmful to the self and causes physiological and chemical dependence, as well as psychological dependence.

Youth: People in the transition between childhood and full adulthood (between 13 and 25 years of age) and the age group most severely impacted by the substance abuse phenomenon in Mbare.

1.11 Dissertation Outline

This dissertation has been divided into five consecutive chapters that cover different aspects of the research.

Chapter One serves as the foundation for the study and sets the context for the research problem at global, national and local levels. It describes the background

conditions that make drug and substance abuse a major human security issue in Mbare, as well as the problem statement, aim, objectives and research questions, and outlines the relevance of the study for various stakeholder groups. Delimitations and limitations of the research are stated, conceptual terms are defined, and the general format for the dissertation is provided.

Chapter Two conducts a thorough review of literature, both theoretical and empirical, on issues related to drug and substance abuse and its implications for human security. The chapter reflects international and African literature and focuses on the known causes and consequences of substance abuse, the analysis of the most likely theoretical lens for this study, and the gaps in the literature that this study aimed to explore.

Chapter Three presents an explanation of the research methodology that has been used in the study explaining the philosophical orientation, research design and the mixed-methods approach chosen. The description and explanation of the data collection tools (interview schedule, questionnaire, etc.), sampling procedures, and ethical principles used in the entire process of engaging the participants.

Chapter Four provided results of the study, using descriptive analysis, thematic interpretation and illustrative data representations to show how substance abuse affects community relations, public health and economic development in Mbare. Findings are related systematically to the research questions and located in the context of relevant literature reviewed in Chapter Two.

Chapter Five summarises the main findings of the study, discusses how well the research objectives were met, and presents a series of conclusions and recommendations based on the study that will appeal to the community, civil society and government actors. The chapter ends with a discussion of the key avenues for further research on substance abuse and human security in Zimbabwe.

CHAPTER TWO

LITERATURE REVIEW

2.1 Introduction

This chapter lays out the theoretical and empirical underpinnings of the study's analytical framework. Its main aim is to place, or locate the present investigation in the background of all the known scholarly work on the subject, thus indicating how much has been previously done in this field and how the present investigation fits into the existing body of work and is able to fill in the gaps. It is presented in two main movements. First, it describes two theories that when combined together form the conceptual structure that will guide the analysis undertaken in this study: the Human Security Theory and the Social Disorganization Theory. Secondly, it tests, surveys, and summarizes the relevant empirical literature according to the three central research questions of the study – impact of drug and substance abuse on community relations, impact on individual and public health, and impact on local economic development. The chapter ends with the knowledge gaps that remain unfilled and therefore make the current study to be entertained and the significant findings from the literature are summarised.

2.2 Theoretical Framework

The social concept of drug and substance abuse is too complex to be adequately dealt with by theory which fails to provide a matrix in which both its structural determinants and its far-reaching implications for human well-being can be understood.

This study employs two complementary theories namely, Human Security Theory and Social Disorganization Theory that afforded a holistic approach in the analytical of the research problem.

2.2.1 Human Security Theory

The Human Security Theory is an underlying paradigm shift in the thinking of security from the state and its territorial boundaries to the individual human being and the conditions for his or her dignified and secure life. The theory, formulated in the path-finding 1994 Human Development Report by the United Nations Development Programme (UNDP), is an alternative to the state-centric view of security that has historically dominated the concept of security. This broad concept of security is realised in seven interrelated dimensions, as defined in the conceptual framework: economic, food, health, environmental, personal, community, and political security.

While all of these dimensions are applicable to the phenomenon of drug and substance abuse, some are of particular analytical relevance in the context of Mbare. Drug abuse impacts health security, and leads to a series of physical and mental health problems that have a direct impact on individuals' ability to function and flourish. Violence, interpersonal conflict and theft are often associated with high levels of substance use and abuse, posing a risk to personal security. Economic security decreases as individuals lose their ability to be productive and their time and resources are used to maintain addiction. When trust is eroded, social structures lose their function, and the fear of insecurity becomes part of everyday life, community security, the stability and cohesion of the

social fabric in which people live, is undermined.

The Human Security Theory is analytically useful in this study because it introduces a paradigm that shifts the focus from those narrow, enforcement-oriented views of the drug abuse problem to a consideration of structural and institutional factors that need to be tackled in order to realize human security. Responses to drug abuse that only focus on law enforcement without following investment in social and economic empowerment, access to health care services and community stabilisation are insufficient to tackle the scale of the human insecurity that drug abuse both causes and at the same time reveals, as the WHO (2021) has explained. Thus, drug and substance abuse becomes a not just a criminal justice issue but a question of human development itself that demands coordinated, multi-dimensional responses.

2.2.2 Social Disorganization Theory

The Social Disorganization Theory complements the Human Security Theory in explaining the conditions in which drug and substance abuse can penetrate and flourish in certain communities. The theory was originally developed by sociologists Clifford Shaw and Henry McKay (1942) through their influential research into patterns of delinquency in Chicago and suggests that criminal and deviant behaviour can be foreseen as a function of structural and environmental conditions that affect the social institutions that control behaviour and maintain community norms.

Shaw and McKay (1942) characterized poverty, residential instability and ethnic heterogeneity as the key structural factors that weaken the cohesion of a community and

ultimately its collective efficacy—the ability of community members to coordinate and act together to achieve shared goals and the maintenance of social order. When these structural conditions coincide, the social institutions which are normally more important in the regulation of behaviours—the family, the school, the religious institution, the neighbourhood association—are undermined and unable to function well in their normative roles. In this context of reduced social controls, deviant behaviors such as substance abuse have a far greater chance of developing and maintaining.

The theory is focused on collective efficacy. Where social organization is high, the informal social control that residents of a community can have over actions that threaten their community's well-being—such as monitoring the activity of youth, intervening in fights, or responding to new social issues—can be especially dense due to the high levels of trust and reciprocal obligation. In socially disorganized communities, however, lack of such networks provides opportunities for deviant behavior to thrive and be unchecked (SAGE Publications, 2010). The theory therefore focuses analysts' gaze not on the nature of deviant actors (such as offenders, substance users, etc.) but on the structural qualities of environments that generate and facilitate deviant action.

Social Disorganization Theory is a powerful explanation in the context of Mbare. The theory equates the structural combination of extreme overcrowding, worn-down housing facilities, concentrated poverty, high unemployment and informality of the economic order with social disorganisation and its related pathologies, which is exactly what the suburb represents. The conditions create pressure that erodes traditional social systems

in form of parental supervision, extended family networks, and community leadership institutions, thereby decreasing the community's informal social control capacity to regulate youth behaviours (Muzvidziwa, 2019). In this context, the use of drugs is made more available, more normalised, and the community is unable collectively to resist it.

The theory also sheds light on the cyclical aspects of the problem. Harmful use of drugs and alcohol is also widespread and when it does occur it further undermines the social institutions and trust relationships that help to prevent it in the first place, in a vicious cycle that promotes social disorganisation and drug use fuels social disorganisation. Importantly, according to Shaw and McKay (1942), this cycle can only be disrupted by structural changes, not by acting out punitively toward individual users (improvements in employment opportunities, educational opportunity, housing quality, and community institutions). This implication has a direct relevance in the recommendations in this study.

2.3.1 Effects of drug and substance abuse on community relations

One of the longest and most profound effects of drug and substance abuse in high-density urban areas is the damage to community relations. The consequences of substance abuse, especially crystal methamphetamine, marijuana and pharmaceutical drugs containing codeines, create a constellation of behavioural, social and institutional impacts that all combine to destroy the trust, reciprocity, and solidarity that is the foundation of healthy community life. According to the United Nations Office on Drugs and Crime (2022), there is a strong empirical link between drug-related activities and

increased rates of community violence, theft, assaults and domestic violence, all of which have a direct effect on the relational fabric of neighbourhoods affected by these activities.

One of the key ways in which substance abuse hampers community relations is by making fear a common aspect of neighbourhood life. Routine witnessing or victimization of drug-related violence, property crime and volatile aggressive behaviour of drunk persons erodes trust and co-operative community interaction, which is essential to a feeling of safety. Community members withdraw from communal and public life, and shy away from spontaneous neighbourly interactions, collective activities and helping each other maintain social cohesion. In the Mbare context, Zimbabwe Civil Liberties and Drug Network (2021) has captured the effect of this dynamic particularly well, with certain public areas becoming sites of public drug use and distribution which has turned them into "spaces of avoidance" and "spaces of fear."

The repercussions in interpersonal relations are also dire within households. Stimulant substances like crystal methamphetamine have been linked to states of extreme aggression, paranoia and cognitive distortion which can have a significant effect on how one can interact with others in a constructive way (World Health Organization 2021). Parents of drug dependent kids often report a radical reversal of the typical family role where the parent is afraid of their own kids, hiding treasures away from them: it's devastating, and it's a breakdown of the most basic of healing trust relationships that make up the emotional foundation of family life. Household-level relational ruptures act

together at the community level to create a context of generalised suspicion and a context of diminished mutual support networks that communities depend on during times of hardship.

The spatial correlates of drug use and distribution also help understand how a concentration may be related to fragmenting a community in terms of its impact on "shared social norms." A public display of substance use, and apparent social toleration of it, by a significant number of people, such as in the setting of informal markets can be seen as an indicator that a community members' social norms allow or tolerate substance use (Zimbabwe Civil Liberties and Drug Network, 2021). The normalisation effect can further add to the direct social harms caused by drug abuse, as well as make it more difficult for a young person to resist the temptation to start using drugs. Additionally, the economic opportunities arising from drug distribution networks: some members of the community are involved in drug distribution while others are victimised as a result of the violence and criminality that accompanies it, leading to antagonisms and suspicions that add to a division in social cohesion.

The structural determinants of these community-level effects (unemployment, poverty, lack of parental supervision, and lack of positive recreational opportunities for young people) must be tackled as part of any total response (Chikoko 2020). Interventions which target the user alone, or criminal networks, will be unsuccessful in breaking the social dynamics that result in drug abuse and the public relations implications of such abuse being passed on from one generation to the next.

2.3.2 Influence of drug and substance abuse and health

Drug and substance abuse-induced health effects are one of the most well-documented aspects of the impact of drug and substance abuse, with many individual physical, mental and public health impacts that combine for an enormous burden to drug and substance users, their families and community health systems. By the WHO definition of health as a state of complete physical, mental and social well-being and not simply the absence of clinically diagnosable disease, substance abuse is a serious attack on human health in all three of its components.

When a person keeps using a substance, it has a wide range of physical health effects. Over time, repeated use of drugs like crystal methamphetamine damages the immune system and increases a person's risk of developing many opportunistic infections and chronic diseases. Physiological effects of chronic drug use include respiratory problems, heart damage, brain damage and liver damage (WHO, 2021). The already resource-challenged Public Health System in Zimbabwe has also been under pressure as the number of health presentations resulting from drug abuse continue to increase, especially hospital facilities that report presenting an increasing number of new young patients with drug-use induced health crises (Government of Zimbabwe, 2022). The public health system is not equipped to meet that extra need so many people who are in need for substance-related health issues do not receive the care necessary and conditions set in that cannot be reversed, resulting in permanent disability or premature death.

The mental health effects of drug abuse are also severe and at times more socially disruptive as a result of the direct effect that it has on interpersonal behaviour. Psychoactive substances impact upon the neurochemical processes and this impacts upon the perception, mood regulation and executive functioning in a fundamental way. Certain conditions, such as acute psychosis with hallucinations and intense paranoia, as well as chronic anxiety, depression and emotional instability which may last for long periods after intoxication (WHO, 2021), often follows crystal methamphetamine use – especially. The consequences of these mental health impacts lead to harmful behaviors like violent acts, self-destructive behavior and aggression when there is no provocation or provocation, thus spreading the damage of individual drug use beyond the individual and into the community. This high prevalence of mental illness linked to drug taking is a public mental health problem in areas like Mbare that cannot be managed by the current health services.

Another important aspect of the public health effects of substance abuse is the connection to the transmission of infectious diseases. The effects of intoxication, like losing one's inhibitions, greatly raises the likelihood of participating in unprotected sex and other high-risk activities, leading to more HIV and other STI transmission within affected communities (UNODC, 2022). Of significance in the present Zimbabwean HIV situation is the impact of this dynamic in terms of public health as it may undo the gains made in infection control and adherence to the prescribed treatment. The psychological aspect of addiction also adds to the health-damaging behaviours – such as eating,

hygiene, and following treatment and care – that are vital for maintaining health, thus increasing the levels of chronic health neglect which are in addition to the direct effects of drug or alcohol consumption.

The consequences of a health effect of drug abuse do not only affect the user of drugs, but also support structures such as families and communities. “Selfless" informal caregivers of family members with a substance use disorder, often disproportionately women, suffer from substantial psychological burden, economic sacrifice and social stigma (UNODC, 2022). The children in these homes are especially at risk: They are at higher risk for being underfed, exposed to psychological and emotional abuse, having interrupted education, and growing up with developmental difficulties with long-term consequences on their own health and well-being because of parental substance abuse. Limited access to quality, affordable services for people with disabilities and persons with mental health issues in high population-density areas like Mbare, that people can access, means that this cycle of harm is not properly professionally interrupted, thus perpetuating the public health burden from individual to communal generations.

2.3.3 Effects of drug and substance abuse and economic development

The third major way in which drugs and other substances affect human security is through their economic effects, which affects people's productivity in their work, the earnings and financial health of households, and the viability of businesses and the wider economy of communities. Economic development is essentially based on the premise of

having a productive, healthy, and engaged population, which can make a meaningful contribution to the creation and distribution of economic value (UNODC, 2022). Substance abuse erodes these assets of human capital in a systematic way and the consequences of this are not only directly felt among those who use drugs and alcohol, but also within their families and the overall community economy.

On the individual level, the most immediate economic impact of drug and alcohol abuse is loss of productive capacity. Addiction affects the brain's capacity to think, to maintain discipline, stamina and reliability in interpersonal relationships, all of which are essential for productive employment. Employees with substance addiction are more likely to be absent from work, to have lower productivity, and be more prone to work accidents, which makes them less valuable to their employers and even more likely to get fired (World Bank, 2020). For those not in formal employment, who make up a large population of the people in Mbare, the loss of productive capacity quickly and seriously affects their incomes, and hence their living standards, as reliability is of immediate consequence to their income streams.

One of the most worrying economic aspects of drug abuse is unemployment of youth that abuse drugs, which is the case with substance abusing youth in communities like Mbare. Many youth who would otherwise be transitioning into productive economic activities as entrepreneurs, traders, apprentices and workers are pulled off into negative trajectories which curtail productive options and have significant impacts on their communities (UNODC, 2022). Economically, diversion of household finances to sustain

addiction exacerbates the economic damage as the money that could be used to buy food security, education for children, medical treatment, or tools to generate income, is instead used to purchase drugs and other substances, thereby reducing the household's savings in the process and not just the users.

The macroeconomic implications of drug and substance abuse do not only affect the economy at the household level, but also the investment and business climate of affected communities. This link between drug abuse and increased rates of theft, vandalism, violent conflict and the like, fosters an atmosphere of insecurity, serves as a strong deterrence to commercial investment and entrepreneurial activity (UNODC, 2022). Existing businesses in neighbourhoods at the highest risk of exposure to drug-related crime suffer from property damage and theft, and also from the loss of business because residents of the community stay away from what they see as a dangerous neighbourhood. The net result of these forces is a restraining of local economic activity, depriving the broader community of the jobs, goods and services that economic growth would provide.

Another dimension in the economic effects of drug abuse is the costs placed on the resources of government. The total number of public funds that are spent on responding to drug-related illness and injury, providing rehabilitation, and on social protection of families destabilised by drug abuse collectively represent public resources that could be channeled towards productive capacity development, infrastructure, and education (WHO, 2021). The opportunity cost is especially relevant in a resource poverty stricken

national environment like that of Zimbabwe where the marginal value of public investment in developmental infrastructure is great, while fiscal space to absorb additional demands on government expenditure is very limited.

To appreciate these economic implications, it is useful to think about them in the context of a structural process, the Social Disorganization Theory. The absence of economic opportunities, lack of access to education, and concentrated poverty can lead to the emergence of drug use in certain areas like Mbare and can be reinforced by the economic effects of drug use. Drug abuse can therefore be seen as an internal exacerbating factor of an otherwise fragile local economy, worsening poverty and underdevelopment (World Bank, 2020). This cycle-breaking begins with interventions that tackle the structural economic factors that contribute to substance using behaviours, and the direct economic burden substance using behaviours have in parallel — which has clear implications for the recommendations this study proposes.

The available literature has produced a considerable amount of knowledge on the health, social and economic impact of drugs and substance abuse in a variety of African and international settings, but there are important gaps in the literature. Perhaps the most important of these is the lack of empirical research specifically addressing issues of peri-urban high-density suburbs in Zimbabwe. Most Zimbabwean scholarship on substance abuse, to date, has involved either policy analysis at national level or in rural communities, while studies of the unique socio-economic dynamics of dense urban areas like Mbare have received scant attention. Implications for the human security

impact of such settings exist, but the relationship between the particular dimensions of these environments (overcrowding, informality, concentrated poverty) and patterns of substance abuse and their impacts on human security is still under-studied.

Further, previous studies have mostly focused on the impact of substance abuse on one area of life—either health, crime or economic productivity—and have neglected to fully acknowledge the interdependencies between these areas or the compounding and incremental effect of multiple impacts on community human security. This study aims to fill both these gaps by using an in-depth, empirical analysis that brings together all three impacts of substance abuse on community relations, health and economic development in the particular and under-researched setting of Mbare.

2.4 Chapter Summary

This chapter has set the wheeling of the investigation of the impact of drug and substance abuse on human security in Mbare with theoretical and empirical groundings. The Human Security Theory was useful for explaining the various layers of problems that substance abuse poses to individuals and communities, and the Social Disorganization Theory provided structural first explanations for how drug abuse can be located in a community and how it works. The empirical literature reviewed highlighted the broad spectrum of impacts of substance abuse spanning the fields of community relations, public health and economic development, and included a variety of international and African academic publications. The chapter ended with a description of gaps in the literature, mainly the Zimbabwean peri-urban context and a need to

conduct an integrated analysis of the combined impacts of substance abuse, which this study aims to fill. The methodological framework within which the study will produce the empirical findings to bridge these gaps is explained in the next chapter.

CHAPTER THREE

RESEARCH METHODOLOGY

3.1 Introduction

The credibility and the analytical of any research project are based not only on the quality of the questions it asked but also on the appropriateness and coherence of the methodological framework in which the questions are investigated. The methodological choices that directed the course of this study on the impact of drug and substance abuse on human security in Mbare are well presented and comprehensively discussed in this chapter. It explains the philosophical and practical reasons for each method used, and follows the research approach, design, target population, sample population, sampling method, data collection instruments, data analysis method, and ethical considerations in turn. Each decision is specifically explained in terms of the nature of the research problem and the three goals of the study, so that the reader will be able to judge the process by which the findings have been obtained and the confidence that the findings warrant.

3.2 Research approach

This study employed a mixed methodology research approach that is used with a purposeful combination of both qualitative and quantitative approaches within a single self-contained research project. A research approach, as described by Creswell (2014), is an umbrella plan that guides study's assumptions, data collection, analysis, and interpretation. The choice of a mixed-methods approach for this study was motivated by

the realization that the phenomenon we are researching (the effects of drug and substance abuse on human security) has measurable aspects in terms of its observable patterns, and irreducibly experiential aspects in terms of the human dimensions. Seeking to understand patterns of prevalence and trends using only a single method would result in either a lack of statistical coverage of all groups or a lack of interpretive coverage of the phenomenon.

The qualitative aspect of the study was geared towards collecting rich and descriptive data that allows for the capturing of the subjective experiences, perceptions and interpretations of persons living in the community who have been affected by the substance abuse issue in Mbare. The qualitative dimension of the study allowed for the access of experiential knowledge relevant to the study and unavailable to quantitative instruments through in depth interviews with purposively selected participants, young people, community leaders, healthcare practitioners and informal market vendors. Those involved in the commercial operation of Mbare Musika supplied finer-grained information on the modes of distribution of substances in the space of the informal trader, while individuals living in high-density residential blocks described how the dense residential environment influences both the risk of substance use and what it means to use substances.

This quantitative arm of the study provided supplementary information to these experiential descriptions in the form of numerical data that were able to reveal relationships, frequencies and general trends across the populations in the study. A broader sample community resident was selected and a structured questionnaire,

predominantly closed-ended, was given to them to be systematically quantified for later statistical analysis. The quantitative dimension also gave the qualitative findings some sense of scale, as it provided an empirical basis for determining the frequency and/or distribution of the various substance abuse related experiences in the community. It was a purposeful blending of these two streams of methodology, yielding a larger body of evidence than either could have achieved alone and more internally validated.

3.3 Research Design

The study used case study research design, with the geographical, social bounded case being Mbare. According to Kothari (2004), research design is an algorithm for the systematic structure of the research conditions into which the instruments for collecting and analysing the data are arranged in such a way as to include the methodological relevance and procedural efficiency. The choice of the case study approach for this investigation was due to the well-established ability of the approach to provide an in-depth study of a socially complex phenomenon in its natural environment (Baxter & Jack, 2008), which is important when the research problem of the investigation is deeply embedded in the specific structure and social context of a given case.

The case study site, Mbare, was selected because it is well known to be one of the areas facing the most serious problems of drug abuse; because it exemplifies the socio-economic issues such as poverty concentration, overcrowding, and high levels of informal economic activity, which are part of the analytical framework of the study; and because it is a typical example of the high-density urban areas in which the human

security impacts of drug abuse are most felt throughout Zimbabwe. The intensive investigation of the one case enabled the study to reach a level of understanding of the research problem that would be sacrificed in a study in which the research design is about many cases and minimal context.

In this case study situation, two data collection instruments, namely semi-structured interview and structured questionnaire were used simultaneously, which allows the qualitative depth and quantitative breadth aspects of the research problem to be explored. Semi-structured interviews with key community players, such as local government officials, health care workers, and police officers, brought to the analysis the knowledge that comes from privileged institutional roles and vantage points for observing substance abuse trends, determinants and consequences in Mbare.

3.4 Target Population

Creswell (2014) describes the target population of a study as the entire collection of people who have specific characteristics that are relevant to the research problem and who are of interest to the researcher from whom the researcher requires information and knowledge. The target population for this study was the resident community of Mbare that was divided into a number of functional subgroups with differential interests and knowledge about the substance abuse phenomenon and its human security implications. Young people were identified as a key sub-population as they were the group most directly affected by the risk of substance use in Mbare, both in the academic literature and in the community conversation. Their first-hand experiences of the social contexts,

peer relationships, and organizations that influence substance use behaviour make their view invaluable to understanding the phenomenon. Community leaders also shared their expertise gained from their role of social authority and community observation, offering their perspective on the social cohesion, communal response and institutional capacities that are the key areas in the human security dimensions of the research problem. Healthcare providers shared their experience with the physical and psychological effects of drug abuse, and law officers provided insights into the criminal and public safety aspects of drug-related activity in the community. The reported participants' categories were intentionally chosen to make sure the results of this study would present a true multi-perspectival interpretation of the research problem.

3.5 Sample

A sample is a proportionately representative representation from a larger population, from which observations and conclusions capable of being made with a degree of assurance, is selected (Kothari 2004). The total sample of this study was fifty one (51) comprising all the identified subgroups in the community of Mbare. The sample included both residents who responded to structured questionnaires and those who were also involved in in-depth interviews; the proportions of residents in each of these groups were dependent upon the different data needs of the qualitative and quantitative parts of the research design.

Sample size determination was based on practical considerations such as accessibility of participants, time constraints and the resources parameters under which the study was

conducted. It was recognized that a larger sample may have been beneficial in improving the statistical confidence of the quantitative findings but the sample of fifty-one participants was felt to adequately provide analytically meaningful findings across both methodological strands, especially in the light of the richness of information available through the qualitative interview component of the study. The small number of participants is somewhat offset by the use of mixed methods which would allow for the triangulation of the results from the instruments and therefore further support the evidential foundation of the conclusions.

3.6 Sampling technique

Sampling technique as defined by Kothari (2004) is a systematic process of sifting out a representative sample from the whole population on which observation and inference of the research is to be made. A mixed sampling method approach was used, which included three types of sampling namely stratified, random and purposive sampling methods applied differently on various samples of participants depending on the nature of data required for each.

At the primary level of participant selection, Mbare community was divided into geographically and socially separated areas: stratified sampling was used to ensure that the sample reflected the views of the people across Mbare's various neighbourhoods and social settings and not in one neighbourhood or social environment. It was important as Mbare is an internally heterogeneous space in which conditions and experiences can be meaningfully different between some residential and some commercial sectors.

Strata were then used to introduce an element of probability-based sampling to randomly select residents for questionnaire administration, thus minimizing any systematic selection biases and increasing the representativeness of the quantitative sample. Random sampling reinforced the validity of statistical inferencing from the questionnaire data by providing each resident in the selected strata an equal chance of being sampled.

The selection of key informant interview participants, consisting of community leaders, healthcare providers, and law enforcement officers were non-randomly selected based on their position to provide knowledge and experience relevant to the study's goals. The criterion-based took care to ensure that the interview respondents had the richest knowledge of the context from which the qualitative data was generated, thereby maximizing the information gained from the interviews given the time and resources available for the interviews.

3.7 Research Instruments

Based on the definition provided by Solso (1998), research instruments are instruments used by the researcher to collect empirical data needed to solve the research problem. Two major instruments were used in this study, namely the semi-structured interviews and structured questionnaires, which complementary attributes supported the mixed-methods nature of the study.

3.7.1 Interviews

The main tool for collecting qualitative data was the use of semi-structured interviews which allowed for direct and interactive dialogue with the respondents in a

conversational mode to foster interpretive flexibility whilst at the same time ensuring thematic consistency. According to Kothari (2004), interviews are a variety of direct interaction between the researcher and the respondent, in which a set of questions has been planned, and the experiences of the respondent, his/her perceptions and interpretations are obtained in his/her own words. Adolescents, parents, educators, community leaders, and health workers were interviewed in this study, offering experience- and institutional-based views on the substance abuse phenomenon and its impact on the human security.

A semi structured approach was selected to allow emergent themes and unexpected findings to be explored through probing and follow-up questions, and without losing the coherence of themes between interviews, to allow for comparison. The interview guide was structured based on open-ended questions that allowed participants to describe their experiences and observations related to community involvement with drug use and drug-related issues related to crime, violence, health, education, and family dynamics. This interview format was conversational and interactive, creating a low risk, high rapport situation where more open discussion was successfully developed than might have occurred in a more formal or impersonal instrument, in which case, participants would have been less likely to respond candidly or in as much detail to a topic on which there is heavy social stigma and personal sensitivity.

3.7.2 Questionnaires

The main quantitative data collection instrument was structured questionnaires

which allowed for the systematic collection of standardised responses from a larger sample of community residents than would be practical with the interview component. According to Kervin (1999) questionnaires are formalised, sets of written questions answered by the respondents either autonomously or with the help of the researcher. The questionnaires designed for this study included both an open-ended and closed-ended format, and were focused on the presence or absence of drug abuse-related experiences within the community, as well as perceived causes, effects, and opinions of community members regarding possible responses to drug abuse.

Closed-ended items allowed for quantitative measurement of responses, and statistical comparisons of responses across the sample, while the open-ended items allowed for room for elaboration of perspectives by respondents that the prescribed responses categories may not have fully encapsulated. Standardised format of questionnaire was used to make it comparable with respondents and help identifying patterns and trends in the sample population in general. Another interesting difficulty found in the administration of the questionnaires was the unwillingness of some respondents to answer items which were directly related to drug experiences; this appears to be a function of the sensitive nature of the subject and the attendant social stigma. This was dealt with great care through careful reassurance of respondents' confidentiality and through the anonymity of all questionnaire returns before data entry and analysis.

3.8 Data Collection Procedures

Data collection was done systematically, in an ethically sound manner and in the following sequence. Research was done in Mbare with proper regulatory permission and community legitimacy as an institutional authorization was given by Zimbabwe Republic Police (ZRP) before any fieldwork activities commenced. After receiving this authorisation, questionnaires were sent to purposive and randomly selected residents in identified community zones and the questionnaires were retrieved after allowing sufficient time for the individuals to complete the questionnaires critically.

Interviews took place at the participant's workplace, wherever possible, or at locations at which the participants were likely to be available and at which they were likely to be comfortable such as a community gathering space in order to minimise practical obstacles to participation and to ensure a comfortable interview setting for the open disclosure of information. Prior to any data collection with any participant, the researcher explained the purpose, scope, and procedures of the study in detail and secured informed consent. Every communication with the participants was done with careful consideration for their dignity, autonomy and time and during the entire fieldwork period the ethical principles governing the research on human subjects were adhered to.

3.9 Data Analysis

Data analysis according to Sharma (2017) systematic approach of examining, organising and interpreting empirical information to obtain meaningful answers to

research questions. As is typical of the mixed-methods approach, each of the qualitative and quantitative data streams in this study was analyzed using unique but complementary procedures.

The results from the structured questionnaires were extracted as quantitative data and analyzed using SPSS and STATA software packages, which allowed identified frequencies, distributions and associative patterns within the numerical data. Results were then presented in a visually engaging and easy-to-understand manner (such as tables, bar graph, pie chart), allowing for effective and easy communication of the statistical patterns to various audiences.

Thematic analysis was used to examine the qualitative data that was obtained in the semi-structured interviews, which is a systematic approach to analysing thematic data that involved re-reading the interview transcripts, annotating meaningful data chunks with descriptive codes, grouping codes into thematic categories and interpreting the themes with respect to the research questions and theoretical framework. This simultaneous use of both analytical strategies allowed the triangulation of findings from the various methodological streams and resulted in a more comprehensive and internally consistent body of analytical conclusions than the use of either strategy alone.

3.10 Ethical Considerations

Ethical issues in relation to human subjects in research needs to be addressed in an ongoing and thorough way throughout the various parts of the research process. Creswell (2014) lists ethical concerns as the principled standards that must be followed

in conducting the research responsibly and safeguarding the rights, dignity and welfare of all those involved in the research. Scrupulous attention was paid to following established principles of ethical conduct in this study as detailed below.

Confidentiality

Due to the sensitive nature of the topic and the realistic possibilities of stigmatisation, social judgment or harm to participants from the disclosure of their identities, this study took the protection of participant confidentiality seriously. Victor (2006) points out that information given by research participants is information that is essentially private, and that it is clearly the responsibility of the researcher to keep such information private and not divulge it to non-authorized people or for other than the agreed upon uses. In this process, the researcher kept all the information related to the participants anonymous by assigning them alphanumeric codes, which is to say that no personally identifiable information was advanced into the analytical/reporting stages of the study. All raw data including questionnaires, tapes and transcripts were kept securely and access to these data was limited and would only be used for academic purposes in this study.

Informed Consent

All participant involvement in the study was viewed as being dependent on the premise of informed consent as an ethical necessity. Informed consent is a process whereby potential study participants are given full and understandable information about the purpose of the study, procedures, risks, and benefits; and their voluntary participation

is formally obtained before any data collection is undertaken (Victor 2006). In this study, each potential participant was given an explicit verbal description of the academic value of the work in which they will be involved, the nature of their contribution in this work, how their data will be used and protected, and of their absolute right to refuse to participate or to withdraw at any time without penalty. Ensuring that all participation was truly voluntary and well informed, consent was confirmed and documented prior to commencing any interview or questionnaire activity.

Respect for participant

The researcher kept consistently (always) to the principle of respect for autonomy, i.e., the right of the participants to decide how and to what degree to engage in the research. The participant was not pressured, induced or manipulated to take part in the project or to give responses out of their own comfort zone. The researcher was sensitive to participants' reactions in the data collection tasks and was ready to stop or end the tasks at any participants' discomfort or distress.

Limitations of the study

The actions of the study were determined by a number of constraints, which should be made transparent: Financial and time constraints limited the geographic area to Mbare and the overall sample was not as large as desired. The sensitive nature of topics involving drugs resulted in a reluctance of some potential participants to respond to some

of the questions, and some to participate at all, which may have led to a selection bias in the make-up of the final sample. Secondly, there is a problem of social desirability regarding self-report data, which was a recognised limitation of both the questionnaire and interview instruments used, people were likely to tell what they saw as socially desirable, instead of what they experienced or observed. During the course of data collection steps were taken to minimise this risk such as the provision of strong confidentiality guarantees and the establishment of a non-judgmental interaction environment, though it cannot be guaranteed that this was fully effective.

3.12 Chapter Summary

This chapter has outlined the methodological framework that guided this study in their investigation of the impact of drug and substance abuse on human security in Mbare. The case study design with a mixed-method approach (qualitative and quantitative data streams) was justified as the most suitable method for exploring the multi-dimensional human consequences and the experiential depth of a research problem with complex social dynamics. A description and justification of the participant sample and the sampling design used to form the sample was provided, as well as a description and justification of the instruments used to produce the data in relation to the objectives of the study. Data analysis procedures, ethical principles and methodological limitations were dealt with transparently. The empirical results obtained from this methodological approach are presented next and analysed.

CHAPTER FOUR

DATA PRESENTATION, ANALYSIS AND DISCUSSION

4.1 Introduction

The empirical aspect of this study, in respect to the data that is obtained from fieldwork in Mbare, is presented, analysed and interpreted in this chapter. The respondents' information has been collected through two different parallel tools semi structured interviews and a structured questionnaire and is rendered here in an analytical and readable way by a large readership. The organisational structure of the chapter is designed on the basis of the three major research objectives and the presentation and discussion of the findings are in the systematic and coherent sequence. As such, the chapter discusses the impact of drug and substance abuse on community relations, individual/public health and on local economic development. Empirical data are, in turn, analyzed throughout the study and served as a means of questioning and challenging the conclusions drawn from previous studies regarding a phenomenon that has strong social implications that are increasingly apparent and pervasive.

4.2 Demographic data

The characteristics of the people who were involved in the study are provided in this section as context for interpretation of the findings that follow. The demographic characteristics entered were age, gender and marital status, based on their relevance with regards to the trends of substance abuse and the human security issues emerging from the literature. There are two interdependent reasons why an understanding of the

sample's demographic makeup is analytically important, firstly to allow a determination of how representative the sample is of the wider Mbare community, and secondly, to provide a basis on which to identify whether particular demographic sub-groups are more or less likely to be experiencing the effects of drug and substance abuse, and/or are more or less vulnerable to the effects of drug and substance abuse. Demographic data included in this section has been collected from the structured questionnaires filled by the general resident sample as well as from background data collected at the beginning of each interview session...

4.2.1 Gender (N.o51)

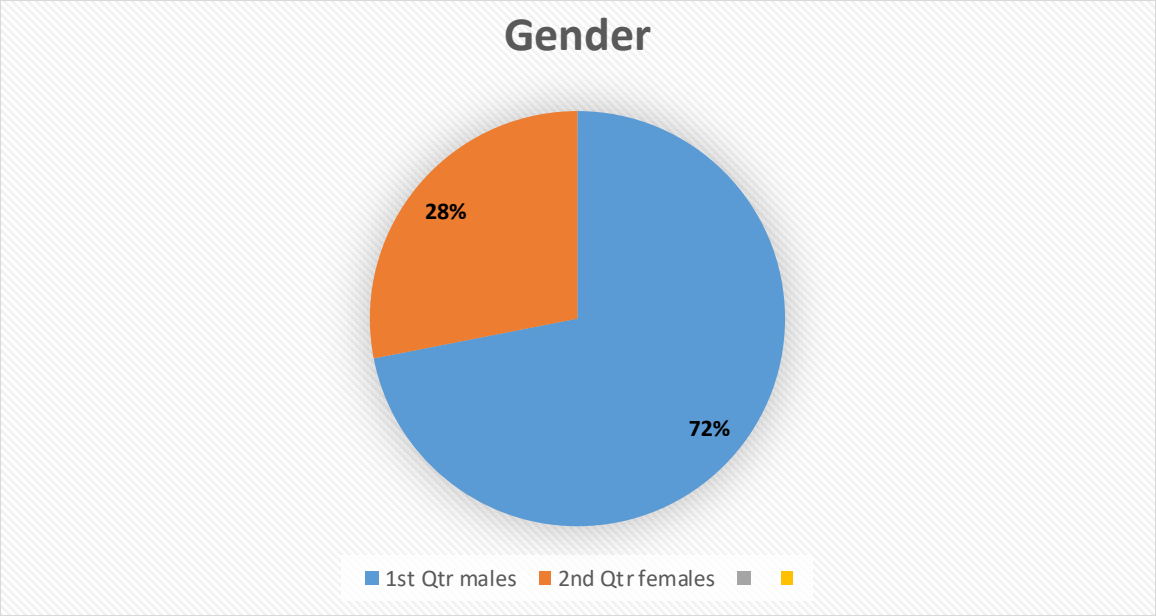

Fig 4 .1Gender

Fig 4.1 shows that the majority of respondents 37(72%) are males. This may be because young man is involved in drug use and related activities unlike looking at females. However, 14 (28%) of respondents were females. They also participated and provided important information especially on the effects of drug and substance abuse on

families and communities. Findings showed that there was representation from all genders.

4.2.2 AGE

Table4.1: Age (N.o51)

Age groups in years	Frequency	Percentage
12-18	8	15.7%
18-35	31	60.8%
Above 35	12	23.5%
TOTAL	51	100%

Table 4.1 shows that most of the respondents 31(60.8%) are aged between 18 and 35 years. This age group was targeted because it is the most affected by drug and substance abuse. A smaller number12(23.5%) representing respondents who were above 35 years including community leaders and parents who shared their experiences on how drug and substance abuse is affecting families. The findings indicated that age is very important when carrying out research as it categorizes people into groups so that it will be easy to identify effects and see which group is the most affected.

4.2.3 Marital status (N.o51)

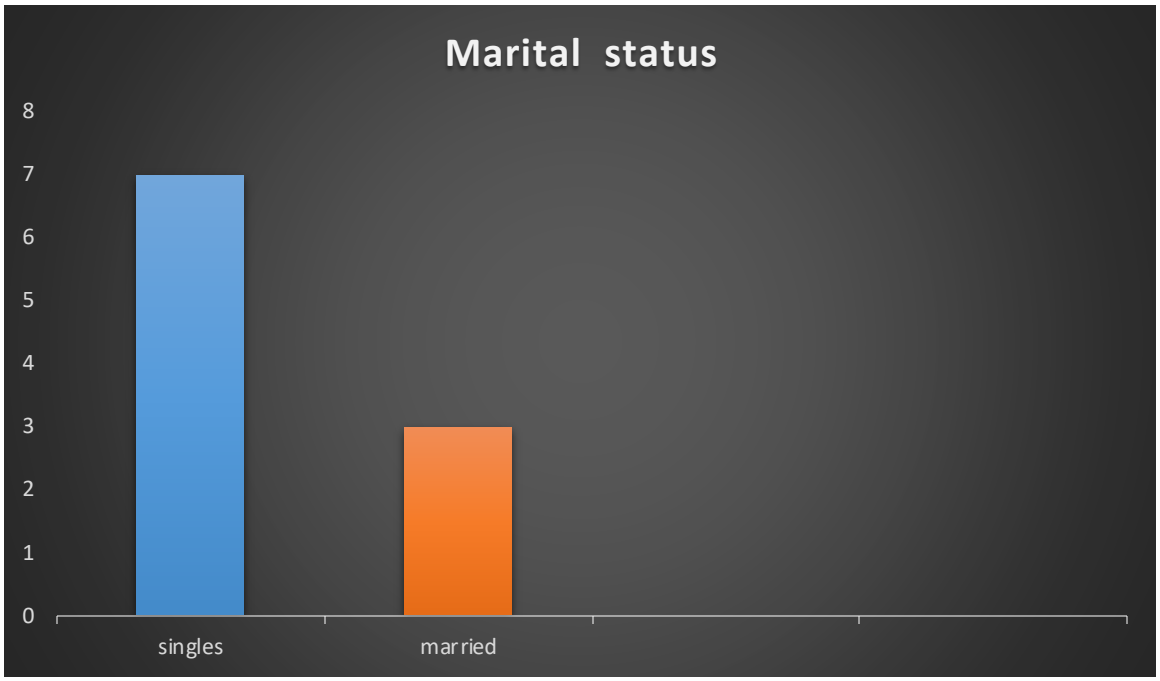

Fig 4.2 Marital status

Fig 4.3 indicated that 35(70%) of the respondents were single, particularly the youths. Youth are ending up taking drugs due to peer pressure, lack of unemployment, stress and sometimes just enjoying with the crowd. Resulting mental illness, infections, weight loss and poor physical health. However, the least are married which is 16(30%) which is believed to be married respondents especially parents highlighted how drug and substance abuse has led to family conflicts, domestic violence and break down of relationships. This finding shows that both married and singles were included to gather information on the effects of drug and substance abuse on human security.

4.2 Community relations and drug abuse.

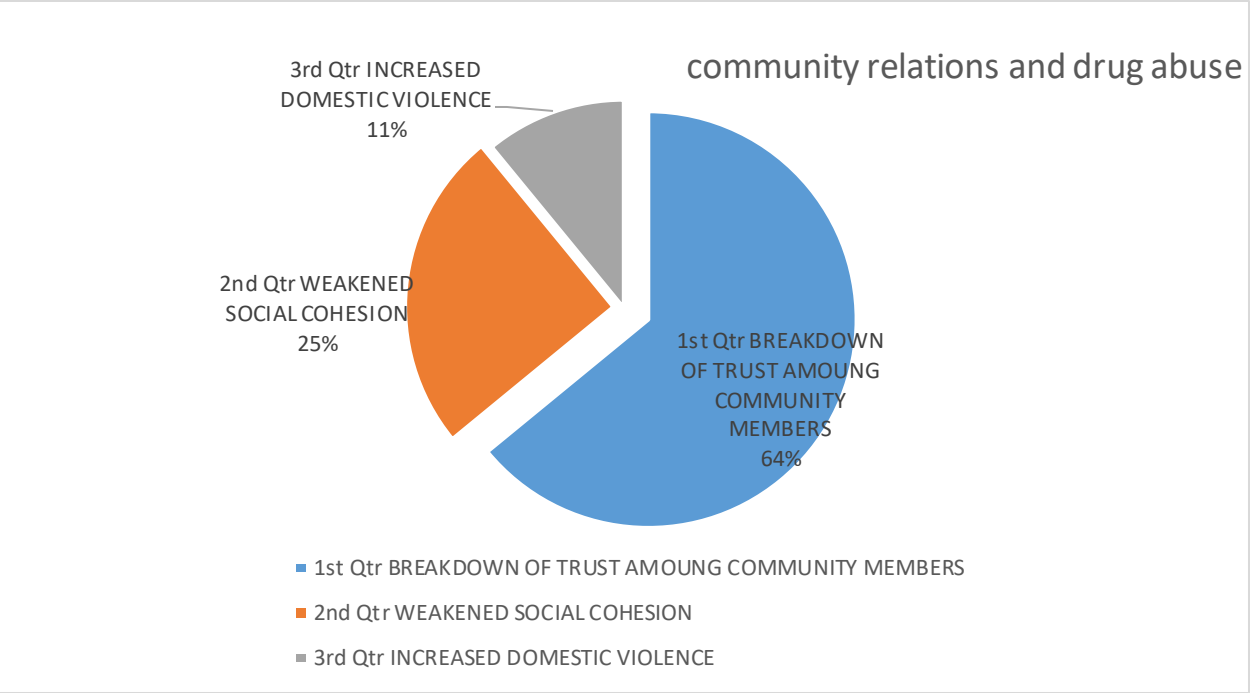

Fig 4.3 Community relations and drug abuse

Findings indicated on fig 4.3 shows that most respondents 32(64%) indicated that there has been (1) breakdown of trust among community members, (2) weakened social cohesion which is 13(25%) of respondents and (3) 6 (11%) respondents indicated how it has increased domestic violence. All this is because individuals who take drugs are often involved in theft, violence and other criminal activities. Many drug users frequently steal from neighbors and even their own family to curb for their cravings, which leads to fear and mistrust within the community. It has weakened social cohesion. Respondents noted that community activities such as meetings, cooperative work, and social gatherings are now poorly attended because people fear interacting with drug users. Lastly there is increase in domestic violence which has increased the number of divorce rates.

4.2.1 Breakdown of trust among community members

The study showed that 32(64%) reported that drug and substance abuse has led to a serious breakdown of trust within the community. Respondents indicated that individuals who abuse drugs are often involved in theft and dishonest behavior, which makes it difficult for community members to trust one another. Many participants explained that drug users usually steal from neighbors, local shops, and even their own family members in order to sustain their addiction. One vendor shared

"*You can't leave your door open anymore because you don't know who will steal from you, even relatives are no longer trusted because of drugs."*

This situation has created an environment of fear, where people are constantly worried about their safety and property. As a result, relationships between neighbors have become toxic, and community members are less willing to support or talk with each other.

These studies are consistent with Chikoko (2020), who found that drug abuse in urban Zimbabwe is strongly associated with increased crime and loss of trust within communities. Similarly, the United Nations Office on Drugs and Crime (UNODC, 2022) notes that drug addiction often leads individuals to engage in criminal activities, which undermines social trust and community stability. Therefore, the breakdown of trust which shows big patterns which are seen in other studies which shows that it's a pattern that has to be worked on.

4.2.2 Weakened social cohesion

Study also revealed that 12(25%) asserted that drug and substance abuse has weakened social cohesion. Which refers to the ability of community members to live together peacefully, cooperate, and support one another. Respondents responded that drug abuse has reduced participation in community activities such as meetings, social gatherings, and development ideas. Community leader explained,

"*People are no longer united like before because everyone is afraid of the drug users*."

"*The youths who should be helping in the community are now isolated and involved in drugs*." (Community leader)

It further showed that drug users are often bring them out from society due to stigma and negative behavior. This creates a lot of challenges within the community and reduces unity among them. As a result, important community projects and initiatives are affected because fewer people are willing or able to participate.

The UNDP (1994), supports these findings which emphasizes that strong community relationships and participation are very important for human security and development. When social cohesion get to be affected, community stability is affected .In addition, WHO (2021) highlights that substance abuse disrupts social relationships and reduces community unity. With this situation there is clear demonstration of how drug abuse weakens the unity and cooperation needed for a normal

community to function

4.2.3 Increased domestic violence

The study indicated that 7(11%) reported that drug and substance abuse has contributed to more violence in homes. Some reported that many households experience conflicts, arguments, and physical violence because of drug use. Individuals under the influence of drugs were described as aggressive and unpredictable, often leading to fights within families.

"*When they take drugs, they become violent and start beating family members*." (Vendor 2)

"Parents are now living in fear of their own children."(Vendor 3)

The study also found that drug abuse leads to emotional abuse, neglect, and breakdown of family relationships. In some cases, family members are forced to leave their homes due to unsafe conditions. This not only affects individual households but also contributes to instability within the wider community. It has also resulted in the increase of family breakdowns because of violence some of the partners will not be able to handle but rather ask for divorce

The study link with WHO (2021), which identifies substance abuse as a major factor contributing to domestic violence and family conflict. Similarly, UNODC (2022) states that drug use increases aggression and reduces self-control, leading to violent behavior. Research by Muzvidziwa (2019) in Zimbabwe also found that drug abuse is

closely linked to family breakdown and domestic disputes.

4.3.3 Drug and substance abuse and health

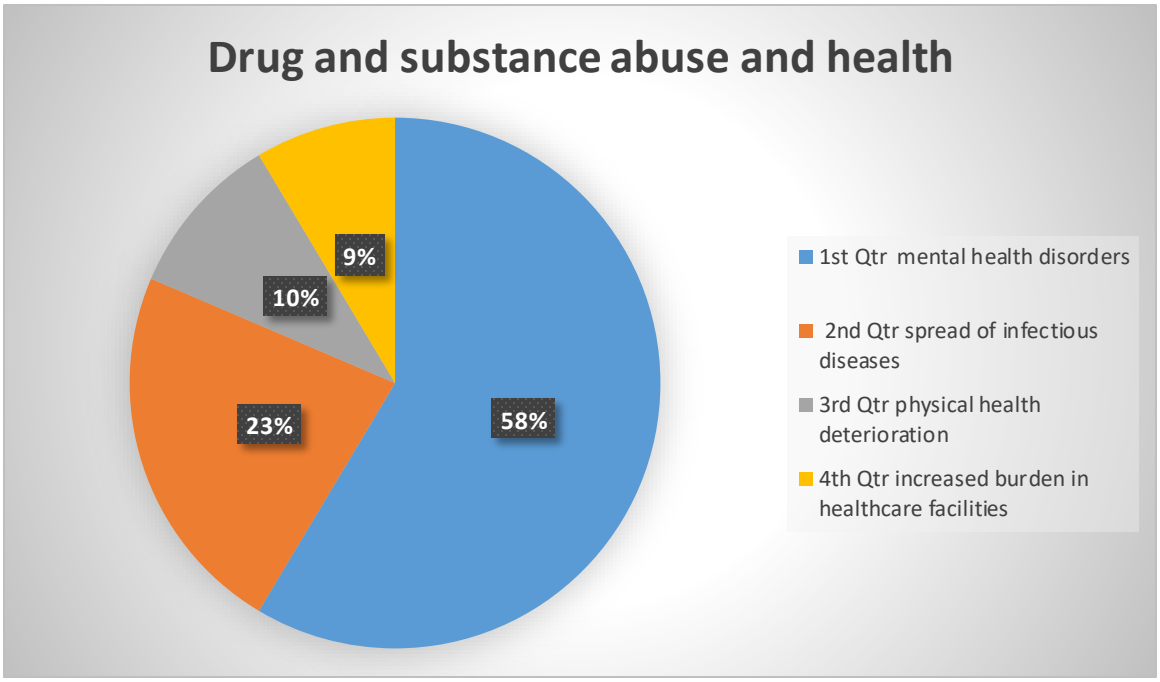

Fig 4.4 Drug and substance abuse and health

Fig 4.4 shows the results investigated, which was further explored through four sub themes (1) mental health disorders with majority respondents 30(59%) agreeing to that, (2) spread of infectious diseases were 11(20%) responded believes that, (3) physical health deterioration (4) increased burden on healthcare facilities, to gain deeper understanding of the effects of drug and substance abuse on health

A lot of respondents reported that mental health disorder as the top thing causing issues on health. Followed by the spread of infectious diseases such as HIV and AIDS, thirdly there is serious health loss among all drug addicts and lastly there is increased burden on healthcare facilities.

4.3.1 Mental health disorders

Collected data showed that the majority 30(59%) reported that mental health disorders were the most common effect of this problem in Mbare. Respondents frequently mentioned conditions such as depression, anxiety, hallucinations, and aggressive behavior, all this affecting them. Participant 1 said,

"*These boys are no longer normal; they talk to themselves and become violent for no reason*.

M*utoriro is destroying their minds that they will end up having mental health issues and you might think they are mad whilst its drugs. (*Participant 2)

The collected findings are consistent with WHO (2021), which notes that substance abuse is a major cause of mental health disorders worldwide. UNODC (2022) also highlights that too much drug use leads to long-term psychiatric conditions. This confirms that mental health is the most affected aspect of human security.

4.3.2 Spread of infectious diseases

This research revealed that 11(23%) reported that it contributes to the spread of diseases such as HIV and other sexually transmitted diseases. Respondents indicated that drug users often engage in unsafe sexual intercourse. Participant 3 said,

"When *they are high, they do not care about protection or challenges faced after this, this results in a lot of unwanted pregnancy and challenges in taking care of those children resulting in the increase of streets children*"

This sync findings by UNAIDS (2020), which identifies substance abuse as a key factor in the spread of HIV. Similarly, WHO (2021) explains that impaired judgment from drug use increases risky behavior. This shows that drug abuse is not only an individual issue but also a public health concern.

4.3.3 Physical health deterioration

It is clear that 6(10%) respondents reported that drug users suffer from serious physical health problems such as weight loss, breathing challenges, and chronic issues. Community leader 3 explained,

"*You can see their bodies becoming weak and very thin everyday they are always sick*."

"*Cough syrups are damaging their bodies slowly because it makes one numb and not able to function like a normal being and that's what they call kusticker and one is in this condition they actually loose appetite one can go for a day without eating"* (Community leader 4)

These findings coordinate with UNODC (2022), which states that drug abuse weakens the immune system and causes long-term health problems. Muzvidziwa (2019) also found that drug users often neglect nutrition and hygiene, leading to poor physical health.

4.3.4 Increased burden on healthcare services

The study found that 4(8%) reported drug abuse has increased pressure on

healthcare facilities in Mbare. Respondents showed that clinics are having a lot of people with drug-related cases each and every day. Nurse 1, stated that

"*They are now full of drug cases, especially mental health patients and because of the poor economy not all are receiving adequate help in time*".

This shows that the youth that are believed to be boasting the economy they are actually playing a role in draining it. This is supported by WHO (2021), which notes that substance abuse strains healthcare systems, particularly in developing countries. UNODC (2022) also emphasizes that limited resources make it difficult to manage drug-related health issues effectively.

4.4 Drug and substance abuse and economic development

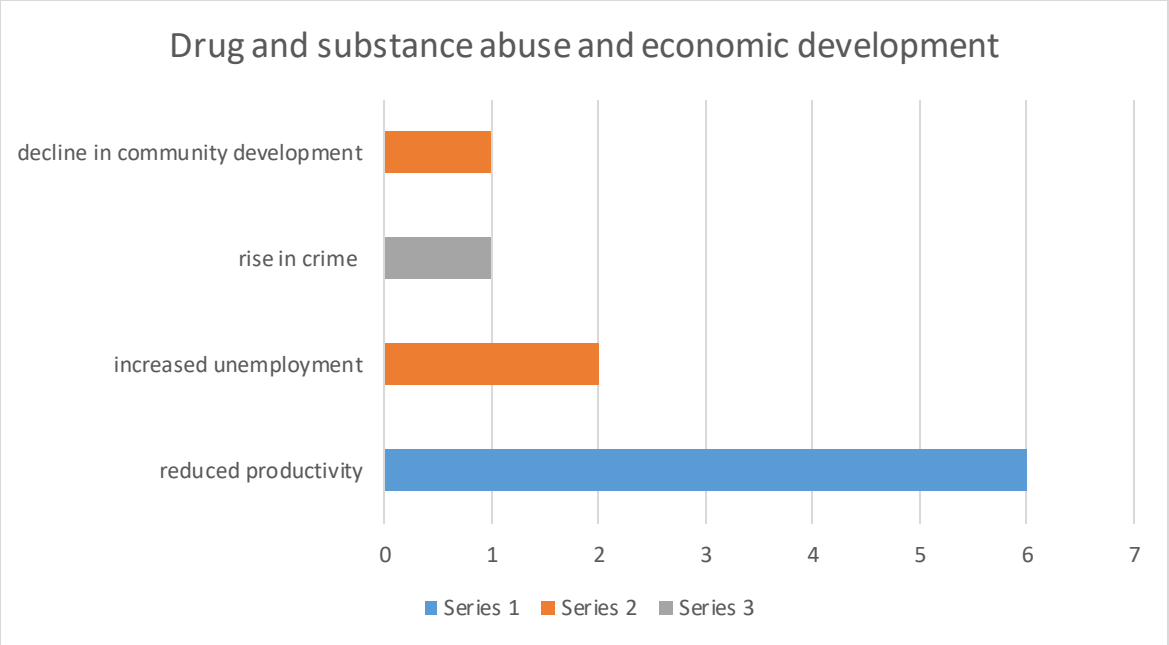

Fig 4.5 Drug and substance abuse and economic development

Fig 4.5 shows that drug and substance abuse has significantly reduced productivity among youth. Most of the 30(60%) respondents indicated that there is reduced productivity among youth, which is being caused lack from concentration, motivation and discipline, which affects their ability to work effectively. 11(20%) respondents indicated that there is increased unemployment because employers are reluctant to hire individuals who abuse drugs. Thirdly 5(10%) asserted that there is rise in crime affecting business which includes theft and vandalism which negatively affects business. This shows that tree is huge decline in community development because youth who could positively contribute to development projects are involved in drug use.

4.4.1 Reduced productivity among youths (largest segment)

Fig 4.4 showed findings that30 (60%) reported that reduced productivity is the most significant economic effect of drug abuse. Respondents indicated that many youths fail to work effectively due to addiction. Participants 5 and 6 said,

"*They cannot focus on anything, even small jobs they fail to do".*

It is clear that even if they work all what they think to do with the income or the little penny they get is to buy drugs. Due to drugs like mutoriro which slows individual's performance in activities because they affect concentration and decision making, findings indicate that if drug addicts start something they cannot finish because their minds are not stable. Production is greatly affected due to the issues of being absent and lack of consistency as drug users often miss work or arrive late due to the issues of intoxication or withdrawal.

This supports UNODC (2022), which indicates that drug abuse reduces productivity and economic output. Muzvidziwa (2019) also found that substance abuse affects the ability of youths to participate in economic activities. Which is clear evidence that these drugs bring no good but harm to the society and everyone in it

4.4.2 Increased unemployment

The study found that 11(20%) reported that drug abuse contributes to high unemployment levels. Respondents noted that employers avoid hiring drug users. Business owner 1explained,

"*No one wants to employ someone who is always high and unreliable whatever they think is drugs and the money they get they think of getting more drugs*

This links with ILO (2020), which indicates that substance abuse reduces employability and job stability. UNODC (2022) also proving that addiction limits individuals' chances of securing jobs. This clearly is evidence that the rates of unemployment are leading to crimes and underdevelopment.

4.4.3 Rise in crime affecting businesses

Research showed that 5(10%) respondents reported that drug abuse has led to increased crime, including theft and vandalism in their communities which is resulting in more problems. Business owner 2 stated,

"*We are losing goods every day because of these youths looking for money for drugs to take care of their drug cravings drug addicts' end up stealing from very small business*

owners who are trying to make ends meet. Small business owners end up running loss and closing their business leading to breakdown of upcoming businesses

Chikoko (2020), supports this since he found a strong link between drug abuse and crime in urban Zimbabwe. UNODC (2022) also states that drug users often engage in crime to sustain their addiction. This clearly is evidence that this study how community members are being burdened with the effects of drug and substance abuse.

4.4.4 Decline in community development

Findings showed that 5(10%) believes drug abuse limits community development. Respondents indicated that many youths are no longer participating in productive activities. Participant 4 stated,

"*The youth who should be building the community are now destroying it".*

This links up with the speech given by President Emmerson Munangangwa that stated Nyika inovakwa nevene vayo vene vasina kusticker. In simple terms he was making it clear that as long we have youths who are still abusing drugs and substance there is going to be a continuous decline in the community development of any societies in Zimbabwe.

This is in sync with UNDP (1994), which emphasizes that development depends on active citizen participation. Drug abuse reduces this participation, slowing community progress. Which links with the findings of this study.

4.5 Chapter summary

Chapter four presented ,analyzed and discussed the findings of the study on the effects of drug and substance abuse on human security using data collected through interviews and questionnaires .All this was guided by the three main objectives ,examining the effects on community relations ,health and development .Findings revealed that drug and substance abuse has negatively affected community relations by causing breakdown of trust among community members ,weakening social cohesion and increasing domestic misunderstandings . Looking at health, the study showed that drug abuse has led to serious mental health disorders such as depression and hallucinations, contributed to the spread of infectious diseases due to risky behaviour. Furthermore the study found that drug and substance abuse has effects on economic development by reducing productivity among youths, increasing unemployment, promoting crime that affects business, causing financial strain on households and limiting community development initiatives .All these findings demonstrate that drug and substance abuse is a major threat to human security affecting the wellbeing, safety, and economic stability of individuals and the community as a whole

CHAPTER FIVE

SUMMARY, CONCLUSIONS, AND RECOMMENDATIONS

5.1 Introduction

The final chapter of the study brings together the intellectual input of the study by analyzing the key findings of the study, articulating evidence-based conclusions in direct response to each of the research objectives and then translating the conclusions into recommendations that can inform the range of stakeholders with the potential to make significant impact in the substance abuse landscape of Mbare. The aim of the study was to explore the impact of drug and substance abuse on human security in Mbare, highlighting the implications of the widespread consumption of substances such as marijuana, crystal methamphetamine and pharmaceuticals that have been diverted for recreational purposes on the community within 3 interrelated areas: social cohesion and community relations, individual and public health, and economic development. The study was conducted using a mixed methodology involving structured questionnaires and semi-structured interviews which provided a wealth of empirical data whose implications resonated with not only the immediate context of Mbare but also with the broader policy and programme agendas for urban substance abuse in Zimbabwe, guided by the Human Security Theory and the Social Disorganization Theory. The chapter continues with a structured summary of the chapter's contribution, a synthesis of key research findings, objective-aligned conclusions in the context of the Sustainable Development Goals, targeted recommendations and directions for future research.

5.2 Summary

5.2.1 Summary of the whole project

Chapter One provided the background to the research and showed how the problem of drug and substance abuse is embedded in the particular social economic environment of Mbare, giving a profile of the suburb's urban structure, which included high population densities, concentrated poverty, high unemployment rates and informal economic structures that provide a foothold where children and youth use drugs and/or substances. It stated the aims and objectives of the study and the research questions that will be answered, assumptions on which the study was based, and significance of the study for academic knowledge, community welfare and the government policy. Delimitations and limitations were openly disclosed and major concepts used were clearly defined to create a common language for the analysis to be presented.

Chapter Two was a systematic review of the theoretical and empirical literature relevant to the study subject matter. The Human Security Theory and the Social Disorganization Theory were further developed as complementary theories that enabled the study to be built around the analytical architecture, providing conceptual tools to understand the structural factors of substance abuse as well as the multi-dimensional social security context it produces. An empirical literature review provided a picture of the knowledge background of various authors on impact of drug abuse on the relation of community, public health and economic development internationally, in Africa and in Zimbabwe. The chapter ended with an identification of the areas where the existing

literature lacked information especially in the context of a high-density urban environment in Zimbabwe and was addressed by this study.

The methodological framework used for the empirical part of the study was described in Chapter Three. The justification of the mixed methods research approach and exploratory case study design was discussed based on the nature of the research problem and analysis requirements of the objectives of the study. A description of the target population, sample composition and sampling strategy (stratified, random and purposive) was given with explanation of its application. Both semi-structured interviews and structured questionnaires were enhanced, data analysis was described for qualitative and quantitative data analyses and ethical issues involved in participant engagement, such as informed consent and confidentiality protection were discussed.

Chapter 4 discusses the results obtained from the field work were presented, analysed and discussed. Based on the thematic organisation of the data in relation to the three research objectives. Thus, quantitative results were presented in tabular, graphical and descriptive statistical form and qualitative results in the form of themes and which were later supported by appropriate participant quotes. In the analytical discussion, results were placed in the appropriate theory and literature context to critically assess and confirm evidence from the literature on the substance abuse phenomenon and its effects on human security in Mbare.

Chapter Five marks a final thought of the study by summarizing the key findings, drawing conclusions based on the objectives given in the research, and

providing recommendations for those who make policies, community leaders, and stakeholders. The chapter also identifies areas for further research to deepen understanding and inform strategies to reduce drug and substance abuse.

5.2.2 Summary of research findings

The study investigation into the effects of substance abuse on community relations produced strong evidence that it has been an area of considerable impact and high levels of social harm. An overwhelming majority of respondents felt that drug abuse had contributed to a material weakening of social cohesion within their community, in terms of an increase in theft, robbery and violent confrontations, a loss of trust between neighbours and a gradual disintegration of the social networks on which the community members normally rely for mutual support. One issue that came to the fore as a specific aspect of the community relations effect was domestic violence – how the behaviours of dependency had shifted the environments of their homes into fearful and unstable avenues. All these trends together led to an ever more suspicious, isolated and less solidary community.

Findings on the effects on health showed a wide-spread and multi-faceted burden of diseases that can be attributed to substance use in the Mbare community. Participants noted a wide range of physical health problems experienced by people who use substances, such as chronic illnesses, food neglect and increased susceptibility to infectious diseases, exacerbated by disinhibiting behaviours under the influence. Leaving no doubt were the mental health issues, as anxiety disorders, depressive

episodes, and acute psychotic episodes were described by many of the regular substance users, and especially those who were crystal methamphetamine dependent. The physical and psychological impact of these on users' ability to function productively and the burden these placed on families and on an already heavily strained public health system were themes in both the quantitative and the qualitative data streams.

Findings on effects of drugs on development indicated that there was a pattern throughout the study sample that productivity loss, withdrawal from the labour market, and financial losses for the household were related to substance abuse. Participants explained how addiction has been taking the place of productive economic participation of the affected young people, resulting in high unemployment rates and their dependence on illegal livelihoods which further undermined the general economic life of the community. Significant mechanisms by which drug abuse transforms individual substance use into family level deprivation include diversion of household financial resources from essentials like food, education, and healthcare to the purchase of preferred drugs. The link between substance abuse and increased crime risk was found at the community level to be an important factor in deterring investment and preventing new enterprises in the community, inhibiting the local economic dynamism that is necessary for sustainable development.

5.3 Conclusion

The first research question focused on how drug and substance abuse affects community relations. This concludes that substance abuse significantly weakens social

cohesion, increases crime, domestic violence, and erodes trust among community members. These social disruptions act as a barrier in achievement of Sustainable Development Goal (SDG) 16, which is, peace justice, and strong Institutions, which aims to promote peaceful and inclusive societies, because drug-related conflicts and insecurity undermine community stability.

The second research question examined how drug and substance abuse influences health. Findings indicate that substance abuse contributes to physical illnesses, mental health disorders, and increased spread of diseases. As a result, achieving SDG 3, which is food health and well-being, which seeks to ensure healthy lives for all and promote well-being, becomes more challenging in communities heavily affected by drug abuse and creating a health one

The third research question focused on the effects of drug and substance abuse on economic development. Concluding that drug abuse reduces productivity, increases unemployment, and encourages dependence on illegal economic activities leading to many youths going to prison. This negatively affects the local economy and the livelihoods of families, making it difficult to achieve SDG 8, which is decent work and economic growth, which promotes sustained economic growth and productive employment.

It can conclude that drug and substance abuse has been causing social, health, and economic consequences. Addressing these challenges is very important not only for improving community well-being but also for supporting Zimbabwe's progress toward

achieving SDG 3, SDG 8, and SDG 16, which together aim to foster healthy, economically productive, and peaceful communities which the president is giving more emphasis on

5.4 Recommendations

Based on the findings of this research, several recommendations can be made to address the effects of drug and substance abuse

Finding on effects on health recommend community awareness programs should be made to educate youths and families about the dangers of drug and substance abuse and produce healthy lifestyles. Authorities should strengthen law enforcement and monitoring systems to reduce the availability and circulation of illegal substances in the suburb.

Findings on effects of drug and substance on community relations recommend that rehabilitation services should be made more accessible everyone who is struggling with addiction, including support for mental health and reintegration into productive activities so that they reduce community crimes.

Finding on effects of drug and substance abuse on development suggests that schools and community centers should establish prevention programs that engage youths in skills development, sports, and social activities to reduce their vulnerability to drug abuse. Those in charge of making policies should develop targeted economic and social interventions, such as employment opportunities and social support programs, to address the underlying socio-economic factors, including poverty and unemployment that

contribute to substance abuse.

Future study can look into the effectiveness of drug rehabilitation programs in reducing and substance abuse.

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APPENDICIES.

Appendix 1

I ….. a student at Bindura University of Science Education. I am carrying out an academic study on the effects of drug and substance abuse on human security, case study of Mbare. This study is for school purposes only and you have been identified as a potential respondent to the study because of your expertise. Your answers will be kept private and confidential. Taking part in this study is voluntary.

SECTION A: BIOGRAPHICAL INFORMATION

1. Marital status ☐ single ☐ married

2. Sex: ☐ Male ☐ Female

3. AGE

12-18: ☐ 18-35 ☐ above 35☐

Instructions

Please read each statement and tick (✓) one answer that best shows how you feel.

Scale:

1 =Strongly Disagree 2 = Disagree 3 = Not Sure 4 = Agree
5 = Strongly Agree

OBJECTIVE 1: EFFECTS OF DRUG AND SUBSTANCE ABUSE ON THE COMMUNITY RELATIONS OF MBARE	1	2	3	4	5
1.Drug and substance abuse has increased crime rates in Mbare					
2.Drug abuse has contributed to family breakdown in the community					
3.Substance abuse has reduced community safety and security					
4.Drug abuse has negatively affected social relationships among residents					

5.Drug and substance abuse has increased has increased violence and conflicts in families					
OBJECTIVE 2:EFFECTS OF DRUG AND SUBSTANCE ABUSE ON HEALTH					
1.Drug abuse has led to increased cases of mental health disorder in Mbare					
2. Substance abuse has increased hospital admissions in the community					
3.Drug abuse has increased the spread of infectious diseases					
4.Substance abuse has increased affects physical health and productivity					
5.Drug and substance has increased premature deaths in the community					
OBJECTIVE : EFFECTS OF DRUG AND SUBSTANCE ABUSE ON ECONOMICS DEVELOPMENT OF MBARE					
1.Drug and substance abuse has increased school dropouts rates among youth in Mbare					
2.Drug abuse has reduced employment opportunities for young people					
3.Substance abuse negatively affects youth skills development					
4Drug abuse has increased youth involvement in criminal activities					
5.Drug and substance abuse limits the future prospects of young people in Mbare					

Appendix 2

I ….. a student at Bindura University of Science Education. I am carrying out an academic study on the effects of drug and substance abuse on human security, case study of Mbare. This study is for school purposes only and you have been identified as a potential respondent to the study because of your expertise. Your answers will be kept private and confidential. Taking part in this study is voluntary.

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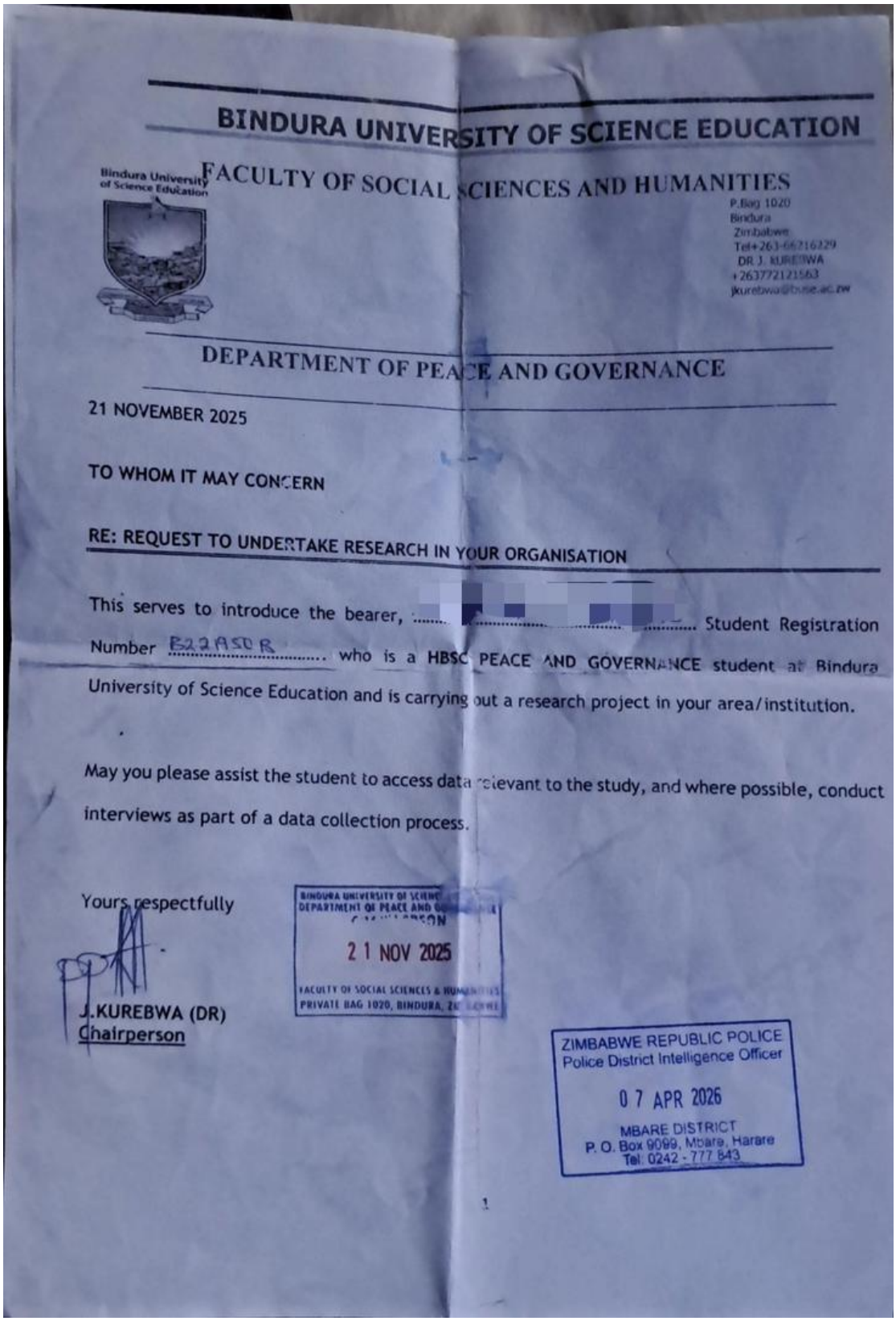
Appendix 3



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DEPARTMENT OF PEACE AND GOVERNANCE

21 NOVEMBER 2025

TO WHOM IT MAY CONCERN

RE: REQUEST TO UNDERTAKE RESEARCH IN YOUR ORGANISATION

This serves to introduce the bearer, ... Student Registration Number B224508 ..... who is a HBSC PEACE AND GOVERNANCE student at Bindura University of Science Education and is carrying out a research project in your area/institution.

May you please assist the student to access data relevant to the study, and where possible, conduct interviews as part of a data collection process.

Yours respectfully

J.KUREBWA (DR)
Chairperson

BINDURA UNIVERSITY OF SCIENCE
DEPARTMENT OF PEACE AND G
CHAIRPERSON
21 NOV 2025
FACULTY OF SOCIAL SCIENCES & HUMANITIES
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