BINDURA UNIVERSITY OF SCIENCE EDUCATION

FACULTY OF SOCIAL SCIENCES AND HUMANITIES

A MODEL CAPACITATING COMMUNITIES TO EFFECTIVELY ADDRESS SUBSTANCE ABUSE AMONG YOUNG PEOPLE. THE CASE OF CHIPADZE, BINDURA

BY

ELIZABETH NGWENYA

B221172B

SUPERVISOR: MS MUREGI

A DISSERTATION SUBMITTED TO THE DEPARTMENT OF SOCIAL WORK IN PARTIAL FULFILMENT OF THE REQUIREMENTS OF BACHELOR OF SCIENCE HONOURS DEGREE IN SOCIAL WORK

YEAR 2026

BINDURA

DECLARATION

I Elizabeth Ngwenya hereby declare that this dissertation is my original work and has not been previously submitted for a degree or other qualification at any other institution. All sources and materials used have been duly acknowledged and referenced.

CLEARANCE FORM

Student Signature: 

Date: 19 August 2026

Supervisor's Signature: 

Chairperson's Signature:

REALEASE FORM

Student number: B221172B

Project tittle: A model capacitating communities to effectively address substance abuse among young people. The case of Chipadze, Bindura

Year granted: 2026

Permission is hereby granted to Bindura University Library to produce single copies of this project and lend or sell such copies for private, scholarly or scientific research purposes only. The researcher reserves other Publication rights and neither the project nor extension extracts from it may be printed or otherwise reproduced without the author's written permission

Student's Signature: 

Date: 19 August 2026

Supervisor's Signature 

Date: 22 August 2026

APPROVAL FORM

Supervisor

I certify that I supervised Elizabeth Ngwenya carrying out this research titled, A model capacitating communities to effectively address substance abuse among young people. The case of Chipadze, Bindura, in partial fulfilment of the requirements of the Bachelor of Science Honours Degree in Social Work and recommend that it proceeds for examination.

Supervisor

Name: R. Muregi Signature: Date: 22 August 2026

Chairperson of the Department Board of Examiners

The Departmental Board of Examiners is satisfied that this dissertation report meets the examination requirements and therefore I recommend to Bindura University of Science Education to accept this research project by Elizabeth Ngwenya titled, A model capacitating communities to effectively address substance abuse among young people. The case of Chipadze, Bindura, in partial fulfilment of the Bachelor of Science Honours Degree in Social work.

Chairperson

Name: MS E.E CHIGONDO

Signature**.**.....Date.....

ACKNOWLEDGEMENTS

This project would not have come to being with my efforts alone. I have been supported all the way by a number of incredibly supportive and very patient people, whom I am greatly indebted to. First and foremost, l would like to express my deep gratitude to my supervisor Ms Muregi, for her valuable and constructive suggestions during the planning and development of this research. My friends also played an important role in the realization of this study and I'm grateful to them. I would as well want to thank Bindura City Council for granting me permission to carry out my study. Special thanks go to all the participants of this study who are members of the Chipadze community for their cooperation during the course of this study. Lastly, special mention goes to my parents for their patient guidance, enthusiastic encouragement and useful criticism of this research work. Their intellectual and scholarly advice is second to none.

DEDICATION

I dedicate this research to my father J Ngwenya

ABSTRACT

This study explored community-based responses to youth substance abuse in the high-density suburb of Chipadze, Bindura, with the ultimate objective of developing a context-specific intervention framework. Guided by the lens of the socioecological theory, the research investigated the multi-layered drivers of substance use and the systemic barriers hindering local mitigation efforts. The study aimed to identify the psychosocial factors contributing to substance abuse among young people in Chipadze, explore challenges faced by community stakeholders in addressing substance abuse among young people in Chipadze and develop a context specific model for capacitating communities to effectively address substance abuse among young people in Chipadze, Bindura .A qualitative case study design was adopted, utilizing purposive and snowball sampling to engage a sample of 13 participants, comprising eight recovering youth and three key professional stakeholders, a psychiatric nurse, a social worker, and a police officer. Data were gathered through in-depth and semi-structured interviews and analyzed using thematic analysis.The empirical findings revealed that youth substance abuse is a complex symptom driven by intersecting factors, notably peer contagion, family fragmentation, severe emotional distress, and acute existential hopelessness caused by high unemployment ,even among educated graduates. Concurrently, efforts to address the crisis are severely crippled by resource scarcity, deep-seated social stigma, the economic normalization of local drug trades, and a lack of inter-professional synergy among institutional actors. To bridge the gap between reactive policies and grassroots realities, the study concludes that top-down measures must be replaced by localized, multi-level empowerment. Consequently, this study proposes the Community Capacitation and Integration Model, advocating for the establishment of youth-friendly productive hubs, localized restorative justice dialogues, decentralized low-threshold psychiatric care, and integrated stakeholder collaboration to effectively realize the preventive and recovery needs of young people.

LIST OF ACRONYMS

CSO	Civil Society Organisation
DSM-5	Diagnostic and Statistical Manual of Mental Disorders (Fifth Edition)
NGOs	Non-Governmental Organisations
ZIMSTAT	Zimbabwe National Statistics Agency
ZRP	Zimbabwe Republic Police

CONTENTS

Declaration II

Clearance form III

Release form IV

Approval form V

Acknowledgements VI

Dedication VII

Plagiarism report VIII

Abstract IX

List of acronyms X

Contents XI

List of tables and figure XIV

1 CHAPTER 1: THE INTRODUCTION

1.1 Introduction 1
1.2 Background of the study 1
1.3 Statement of the Problem 3
1.4 Purpose/Aim of the study 3
1.4.1 Research Objectives 4
1.4.2 Research Questions 4
1.5 Assumptions of the study 4
1.6 Significance of the study 5
1.7 Delimitations of the study 7
1.7.1 Limitations of the study 7
1.7.2 Definition of terms 8
1.8 Dissertation Outline 9
1.9 Summary 10

2 CHAPTER 2: LITERATURE REVIEW

2.1 Introduction 11
2.2 Theoretical framework 11
2.3 Conceptualization of the key phenomena in the study 12
2.4 General overview of the study 14
2.5 Psycho-social factors contributing to substance abuse among young people in Chipadze, Bindura 16
2.5.1 Peer pressure and social influence 17

2.5.2 Family dynamics and parenting practices 17
2.5.3 Mental health and emotional well-being 18
2.5.4 Social-economic challenges and unemployment 18
2.5.5 Community environment and social disorganization 19
2.6 Challenges faced by community stakeholders in addressing substance abuse among young people in Chipadze, Bindura 19
2.6.1 Limited resources and infrastructure 20
2.6.2 Lack of knowledge and training among stakeholders 20
2.6.3 Weak coordination and collaboration among stakeholders 21
2.6.4 Stigma and negative attitude towards substance abuse 21
2.6.5 Weak policy implementation and enforcement 22
2.7 Development of a context specific model for capacitating the community to effectively address substance abuse among young people in Chipadze, Bindura 22
2.8 Chapter summary 24
3 CHAPTER 3: METHODOLOGY
3.1 Introduction 26
3.1.1 Research approach 26
3.1.2 Research design 27
3.2 Research setting 27
3.3 Target population 28
3.4 Sampling 28
3.4.1 Sample size 28
3.4.2 Sampling Technique 29
3.5 Data collection techniques and instruments 29
3.5.1 In-depth interview guides 29
3.5.2 Semi structured interview guides 30
3.6 Data analysis and techniques 30
3.7 Ethical considerations 31
3.7.1 Limitations of the study 32
3.8 Chapter summary 33
4 CHAPTER 4: DATA PRESENTATION AND ANALYSIS
4.1 Introduction 34
4.2 Demographic information 34
4.2.1 demographic information for primary participants 34
4.2.2 demographic information for key informants 35
4.3 Psychosocial factors contributing to substance abuse among young people in Chipadze, Bindura 36
4.3.1 Peer pressure and social influence 36
4.3.2 Family dynamics and exposure to substance abuse 37

4.3.3 Emotional distress and trauma 39
4.3.4 Poverty, unemployment and difficult living conditions 40
4.4 Challenges faced by community stakeholders in addressing substance abuse among young people in Chipadze, Bindura 42
4.4.1 Limited resources, weak coordination and environmental constraints 42
4.4.2 Normalization of substance abuse, accessibility of drugs and community environment 42
4.4.3 Hopelessness among youths 43
4.4.4 Lack of knowledge, stigma and inadequate psychosocial support systems .. 44
4.4.5 Weak coordination among stakeholders and fragmented interventions 45
4.5 Strategies for strengthening community to effectively address substance abuse among young people in Chipadze, Bindura 46
4.5.1 Community development that is youth friendly 46
4.5.2 Awareness and educational programs 47
4.5.3 Economic empowerment and employment opportunities 47
4.5.4 Professional support services and rehabilitation 48
4.5.5 Strengthening law enforcement and drug control systems 49
4.6 Chapter summary 50
5 CHAPTER 5: SUMMARY, CONCLUSIONS AND RECOMMENDATIONS
5.1 Introduction 51
5.2 Summary 51
5.3 Psychosocial drivers of substance abuse among young people in Chipadze, Bindura
5.3.1 Stakeholder challenges in addressing substance abuse 52
5.3.2 The proposed intervention model 54
5.4 Conclusions 54
5.5 Areas for future research 55
5.6 Recommendations 55
5.6.1 To the Bindura City Council and local government 55
5.6.2 To the Ministry of Health and Child Care 55
5.6.3 To Law Enforcement (ZRP Bindura) 56
5.6.4 To the Chipadze community and families 56
5.7 Implications for social work practice 56
5.8 Chapter summary 56
References 57
Appendix 1 59
Appendix 2 63
Appendix 3 67

LIST OF TABLES AND FIGURES

Table 4.2.1Demographic information for primary participants……..34
Table 4.2.2 Demographic information for key informants……35
Figure 5.1 The Proposed Intervention Model……53

1 CHAPTER I: THE INTRODUCTION

1.1 Introduction

This chapter introduces the research and brings a thorough background for it. This background comprises the problem statement objectives research questions, and the importance of the research. The work mainly targets building a setup that empowers communities in managing substance abuse issues effectively among young people. The study is in particular carried out in Chipadze, Bindura. This chapter essentially lays the groundwork for the whole research by placing the problem in a wider social context and arguing the necessity of the work.

1.2 Background of the Study

The abuse of substances by young adults is one of the most pressing social and public health problems worldwide, which has been increasing over the years. More and more people see it as the result of a number of related factors social economic, psychological, and environmental combined. The World Health Organization (2023) states that harmful use of alcohol and drugs is a major cause of ill health, death, and social problems worldwide, most of all among children and teenagers. The United Nations Office on Drugs and Crime (UNODC, 2022) also confirms that drug use among young people is increasing worldwide and the consequences include health deterioration, dropping out of school unemployment crime, and family break-up.

For many developing countries, the problem is further aggravated by structural issues like poverty unemployment peer pressure, and inadequate social protection systems. UNODC (2022) also points out that drug use disorders are on the rise in low- and middle-income countries, In particular among youth, whereas the prevention and treatment systems are grossly insufficient. This has led to a great strain on families, communities, and social services which are often deprived of adequate resources and are So ineffective in their response. The World Bank (2021) supports this by stating that socio-economic inequality and lack of youth development opportunities are main factors which make young people vulnerable to drug abuse.

Within the African setting, the connection between drug abuse among young people and factors like the rapid growth of cities, joblessness among the youth, family disintegration, and turning to

dangerous social milieus has been drawn (African Union, 2020). There is a continuous rise on the continent in the number of young people developing disorders from substance abuse, which in turn is lowering their educational success, working capacity, and social harmony. Reports from the United Nations Children's Fund (UNICEF, 2021) show that more and more African young people are coming face to face with drugs and alcohol at a young age, oftentimes in situations where preventive help from the environment is still lacking.

In Zimbabwe, drug addiction among young people has not only made it to the headlines as a key societal issue but also the consequence on both urban and peri-urban areas are evident. The Ministry of Health and Child Care (2021) has quoted that there is an increasing trend in the consumption of alcohol, marijuana, and other unlawful drugs among the youth population of the country. This has led to a rise in crime, mental health issues, students leaving school before completion, and weakening of family ties. On top of that, the Zimbabwe National Statistics Agency (ZIMSTAT, 2022) points out that lack of jobs is why pushing young people to drug use, mostly in densely populated and peri-urban places.

Though the government, NGOs, and community organizations have all made attempts, drug abuse is still thriving in some areas, which resonates with a lack of coordination, sustainability, and genuine community participation (UNODC, 2022; WHO, 2023). Most interventions are usually reactive instead of preventive and community participation in solving the problem is often not fully integrated (UNICEF, 2021).

In Chipadze Bindura local people have also seen a drug abuse problem among young people leading to serious issues in their community. They have witnessed an increase in drug use and alcohol consumption by young people that is only one of the reasons for the family quarrels, school failure, unemployment, and instability in the society. Despite the presence of different kinds of campaigns like awareness rehabilitation church police the problem is still there. This is a sign that the current tackling of the problem may not be addressing the core psychosocial and structural reasons for drug abuse in the community.

Despite the ongoing drug abuse problem in Chipadze, the community's response and capability level to deal with the issue appear to be quite low. UNODC (2022) points out that effective and sustained measures against drug abuse can be achieved with strong community participation, integrated services, and context-specific strategies focusing on root causes rather than symptoms.

Still, in many cases, community structures are either not used enough or not given enough power to take a leading role in prevention and rehabilitation efforts.

This study aims at finding a local-level model for empowering communities to handle the youth drug abuse problem in Chipadze, Bindura effectively. It rests on the premise that communities, when equipped and well-coordinated, have the capability of being leading figures in prevention, early intervention, and recovery support.

The paper draws on research on the significant role community-based efforts play in substance abuse prevention (WHO, 2023; UNODC, 2022; UNICEF, 2021). It intends to look at the lived experiences and the actual situations in Chipadze to help come up with a sustainable and contextually relevant intervention model.

1.3 Statement of the Problem

Youth substance abuse has become a major social issue in many communities and even more so in Chipadze community in Bindura. Ideally, communities should act as the first line of on and support, where families, schools and local authorities work together identifying early signs of substance use, giving advice and ensuring timely interventions. Unfortunately, the real situation on the ground shows that there are gaps between this expectation and the reality up to the point that cases of young people using drugs and substances are still on the rise. The responses already in place within the community are mainly reactive, fragmented, and hardly enough to tackle the issue of substance abuse sustainably. For this reason, the problem is contributing to negative outcomes like school dropouts unemployment risky behaviours, and mental health issues among young people. Even though there are national programs to deal with substance abuse, most of the time they do not really reach the community level effectively with intervention specific to the local context. The problem so is the inability of communities like Chipadze to develop and implement coordinated and sustainable strategies to prevent and address youth substance abuse. This research aims to close this gap by creating a community intervention model that will be community capacity strengthening for more effective intervention.

1.4 Purpose/Aim of the Study

The aim of this research is to come up with a model tailored to the specifics of the area that will empower the community of Chipadze, Bindura to handle drug abuse among youths effectively.

The research work intends to tackle the problems of feeble and uncoordinated community responses to drug use by increasing the knowledge of the shortages that are present in prevention, therapy, and support for recovery. While achieving this, the research project hopes to deepen the understanding of ways in which community organizations may be fortified to take up a more engaged and sustainable role in the fight against drug abuse. Also, it is the intention of this research to identify viable and culturally appropriate solutions that may foster community engagement and collective effort in dealing with young people's substance abuse problems.

1.4.1 Research objectives

1. To identify the psychosocial factors contributing to substance abuse among young people in Chipadze, Bindura

2. To explore challenges faced by community stakeholders in addressing substance abuse among young people in Chipadze, Bindura

3. To develop a context specific model for capacitating communities to effectively address substance abuse among young people in Chipadze, Bindura.

1.4.2 Research Questions

1. What psychosocial factors contribute to substance abuse among young people in Chipadze, Bindura?

2. What challenges are faced by community stakeholders in addressing substance abuse among young people in Chipadze, Bindura?

3. How can a context-specific model be developed to capacitate communities to effectively address substance abuse among young people in Chipadze, Bindura?

1.5 Assumptions of the Study

The research adopts a series of hypotheses that shape the direction and execution of the work. One is that young people in Chipadze, Bindura who abuse substances if interviewed will not only share their experiences but will do so in such a way as to be very informative and candid. Another is that, parents, community leaders, and service providers would know quite a bit about substance

abuse from both an experiential and an informational point of view so that this would be able to enlighten the study about the difficulties encountered. The research also posits that psychosocial influences like peer pressure, family relations, and economic status are among the important factors that lead to the abuse of drugs and other controlled substances by young people in the localities.

Another assumption is that to some extent, the participants' remarks will be authentic representations of their views, emotions, and encounters, whereas the researchers have to admit that it is impossible to be certain that no lies, omissions, or distortions have been made. Also, it is presumed that the data collected from the subjects will be adequate for developing a localised model to assist and empower the community in dealing with drug abuse among their people. Lastly, even though experiences differ there are still common patterns that can be identified and used to inform practical and applicable interventions within the Chipadze community.

1.6 Significance of the Study

The focus of this research is on young people in Chipadze, Bindura who, per the study, are the main substance abusers in the area. With the help of this research, psychosocial factors that lead to substance abuse can be understood by revealing the actual conditions, pressures, and influences that cause young people to commit this vice. Such knowledge is very crucial as it not only raises self-awareness of the problem amongst individuals affected by it but also motivates them to change their behaviour. At the same time, the wider community is not left behind because this research increases understanding of the main factors that lead to substance abuse. It is possible for community members including families to apply this understanding to develop protective factors at home and in the neighborhood like better communication, supervision, and emotional support for young people.

It is understandable that for a community to raise up and nurture its young people it needs those stakeholders who are actively involved in the upbringing, guidance, and support of the young ones. Through the family, a child gets a better understanding of both the obvious and hidden factors of substance use allowing the family to respond effectively to the early signs. The learning institutions, educators, and counselling staff can utilize the results of this study to also understand the changes in behaviour among pupils more deeply and strengthen/stabilize the school counseling and prevention programs. The spiritual and cultural leaders whose roles are morally guiding the

community may then again, employ this information to raise the awareness campaigns and further the promotion of desired behavioral norms. The local political leaders like councilors, in general, will be able to find an evidence-based understanding of the issue which leads to well-informed community mobilization and prevention strategy, which are two ways they can benefit from the study.

Non-governmental organizations and civil society organizations working in substance abuse prevention, youth empowerment, and community development stand to benefit from the findings of this study. The research offers context-specific evidence that can guide the design and implementation of more effective interventions tailored to the realities of Chipadze and similar communities. Rehabilitation centres and service providers may also use the findings to improve community reintegration strategies and aftercare support systems for recovering individuals. The proposed model for capacitating communities can work as a practical system for strengthening collaboration between institutions and communities in addressing substance abuse.

Health, social welfare, education, and law enforcement departments of the government tend to derive considerable benefits from the insights of this research. The study uncovers the psychosocial factors that lead to substance abuse as well as the community-level challenges encountered by the stakeholders. The Ministry of Health and Child Care and health institutions concerned could utilize the study results to enhance community-based mental health and substance abuse prevention initiatives. Same here, the Department of Social Welfare might use the findings to upgrade support mechanisms for at-risk youth and their families. Correspondingly, the Ministry of Primary and Secondary Education could leverage the research results to reinforce school-based prevention programs and early intervention strategies. Equally importantly, law enforcement agencies, through a better understanding of the societal aspects of substance abuse, may provide a more balanced approach between law enforcement and prevention efforts. On top of these, policy formulation could be influenced by the study, which points out the shortcomings of existing community-based approaches and capitalizes on more integrated and sustainable responses to substance abuse.

This research adds to the scholarly world by presenting firsthand data on the substance abuse issue among the youth in Zimbabwe, To be exact in semi-urban areas like Chipadze, Bindura. It brings additional insights into the psychosocial factors related to drug abuse and on the effectiveness of

community-based intervention programs. Developing a model uniquely tailored for the Zimbabwean context that empowers communities is a major contribution both to the theory and practice of social work, public health, and community development. Academics and researchers might consider this paper as a starting point for comparative analyses, testing of the model, or further adjustments of the community-based drug abuse intervention schemes. Besides, it leads the way to related research areas like effectiveness of the rehabilitation programs, youth resilience, and community involvement in substance abuse prevention.

1.7 Delimitations of the Study

Delimitations are essentially the research boundaries set by researchers to focus and define the scope of their study (Marshall & Rossman, 2016). These refer to the researcher's control on subject matters that determine what a study will include and exclude. This research is limited to Chipadze, Bindura in Mashonaland Central Province, Zimbabwe, and as such, the results are drawn from this specific community setting and may not be entirely applicable to other areas that have different socio-economic and cultural conditions. The research targets young people who are affected by substance abuse in Chipadze and a few community stakeholders like families, local leaders, and service providers who are engaged in dealing with substance abuse. It excludes young people outside Chipadze or other population groups not involved in the study.

The research is content-wise limited to investigating psychosocial factors that lead to substance use, the difficulties experienced by community stakeholders in combating substance abuse, and the creation of a model that is specific to the community for enabling them to tackle the issue. It does not cover in detail clinical rehabilitation processes in institutional settings, pharmacological treatment approaches, or national-level policy development except for their relevance to community responses. Besides, the research relied on data gathered within a particular research timeframe representing the current experiences and conditions at the moment of data collection and so does not deal with long-term historical trends. Besides, the study Mostly focuses on community-based reactions to substance abuse among youth and the formulation of a practical model rather than thoroughly testing or evaluating existing national structures.

1.7.1 Limitations of the Study

This study has a few limitations mainly due to the nature of the research rather than the researcher. One of these limitations is that the study depends on the participants' self-reporting, which is a direct source of recall bias, perception, or even unwillingness to reveal certain personal experiences related to drug abuse. This could result in some responses being less detailed or plus some inaccuracies. Yet, this downside was mitigated by first giving a confidentiality guarantee to the participants and then when doing the data collection creating as safe as possible and non-judgmental environment to get the participants to open up.

Another limitation of this research is that it only focuses on Chipadze, Bindura. So, the results cannot be assumed to apply to other communities that have different social, economic, and cultural contexts. The qualitative case study approach yet was used and it enables understanding the thing very deeply since it is studied in the real-life context. This, in turn, makes the findings relevant to the settings where cases are similar. It can also be expected that some key informants will be hard to reach because of their work or reluctant to take part. The researcher was able to get around this by being agreeable to do scheduling in ways that suit the participant.

The academic research timeframe may only allow a limited stay in the field. That said, the researcher did spend enough time for the data collection, which was followed up with repeated engagements with the participants to obtain data that is trustworthy.

1.7.2 Definition of Key Terms

Model is a term used to describe a simplified version or representation of a complex structure, occurrence, or process that helps in explaining, describing, or guiding it in a more organized manner (Miles, Huberman & Saldaa, 2014). In this research, it is a tailored structure aimed at facilitating and empowering community actions in responding to the substance abuse challenges among young people.

Capacitating is a term that denotes the act of enabling and equipping persons or groups with the necessary talents skills knowledge, and resources so that they can function better and handle challenges more successfully (United Nations Development Programme [UNDP], 2010). The use of it in this research is community empowerment in the most effective ways to cope with the issues of substance abuse.

A community is a group of people that come from the same location, have social ties, common values, a sense of belonging, and they interact in their shared environment (Delanty, 2018). When talking about the research, communities mean the people of Chipadze Bindura which include families, leaders, and the local institutions that have a role in substance abuse-related issues.

Substance abuse refers to the excessive or harmful consumption of mind-altering drugs such as alcohol and illegal drugs that result in detrimental physical, mental, and social outcomes (World Health Organization, 2023). This research defines it as the use of drugs and alcohol among youth that have adverse effects on their health and social behavior.

Young people are those persons who are usually at the age of adolescence and early adulthood during which time they are undergoing many changes both physiologically and psychologically resulting in the formation of their identity and being highly influenced by their social and environmental factors (United Nations, 2022). This research refers to young people as the ones in Chipadze who are at risk or are already involved in substance use behaviours.

1.8 Dissertation Outline

This study is organized into five chapters. Chapter One presents the introduction to the study and provides the background of the research problem, the statement of the problem, research aim and objectives, and research questions. It also outlines the significance of the study, assumptions, delimitations, limitations, and definition of key terms, thereby laying the foundation for the entire research.

Chapter Two focuses on the literature review. It presents and critically analyses existing literature related to psychosocial factors contributing to substance use, challenges in addressing substance abuse, and community-based interventions. The chapter also explores theoretical frameworks that inform the study and identifies gaps in existing knowledge that justify the need for the current research.

Chapter Three presents the research methodology used in the study. It describes the research design, study area, target population, sampling techniques, data collection methods, data analysis procedures, and ethical considerations. This chapter explains how the research was carried out in a systematic and rigorous manner.

Chapter Four focuses on data presentation, analysis, and interpretation of findings. It presents the results obtained from participants and discusses them in relation to the research objectives and existing literature. This chapter forms the basis for understanding the key findings of the study.

Chapter Five provides the summary of findings, conclusions, and recommendations. It highlights the major outcomes of the research and proposes practical recommendations for improving community responses to substance abuse. It also suggests areas for further research based on the gaps identified in the study.

1.9 Chapter Summary

The first chapter of this research gave the background to the study, focusing on the problem of substance abuse and disclosing the importance of the study to various stakeholders, mainly young people in Chipadze, Bindura. It touched on the context of the study and formally raised the research question that set the course for the whole study. The chapter gave the research aim and objectives that revolve around to determine psychosocial factors influencing substance use, to examine the difficulties faced by community stakeholders, and to design a context-specific model for empowering communities to fight substance abuse, among others. The chapter laid down the research questions aimed at young people and community stakeholders. It also provided the assumptions upon which the research was based, the delimitations that outline the in & out of the research, and the limitations that highlight the problems encountered. The most important words related to the study were also defined to help clarity and uniformity in understanding.

2 CHAPTER 2: LITERATURE REVIEW

2.1 Introduction

This chapter looks at the literature on substance abuse among the youth, Most of all community response and capacity in dealing with the problem. Literature review is based on the objectives of the study aiming to identify psychosocial factors contributing to substance abuse among people in Chipadze, to explore challenges community stakeholders face in addressing substance abuse and to develop a model which is context-specific for mobilizing communities to effectively address substance abuse among young people. The chapter is guided by the socioecological theory which posits that human behavior is influenced at different levels like individual family community and society. The chapter also gives the theoretical system, key concepts, research overview, themes derived from study objectives and the summary of gaps found in existing literature.

2.2 Theoretical Framework

This research adopts the socioecological theory which offers a holistic method to identify human behavior through analyzing the relationship of the person and his/her environment. This theory was the brainchild of Urie Bronfenbrenner and has been extensively used in public health as well as social sciences to explain complicated human behaviors such as substance abuse. Based on the socioecological theory, a person's behavior is impacted by a number of factors at different levels, the individual interpersonal community, and societal (McLeroy et al. 2016; Golden & Earp, 2019). At the individual level, behavior is influenced by elements oAAppendixe, level of knowledge, attitudes, and psychological wellbeing. When talking about substance abuse, a number of problems like stress, trauma, and low self-esteem have been pointed out as major factors contributing to substance abuse among young people (WHO, 2021; UNODC, 2022).

At the interpersonal level, the influence of family members, friends, and significant others play a role in one's behavior. It has been discovered through research that peer pressure, family conflict, and lack of parental oversight are major factors that lead to adolescent substance use (Viner et al. 2019; Hawkins et al. 2020). These social interactions are even more significant in the community of Chipadze where social networks are instrumental in the formation of youth behavior. The community level in this theory involves the social units where the interactions occur, for example schools neighborhoods, and local institutions. A breakdown of community structures, lack of

recreational opportunities, and poor accessibility to supportive services are some of the community risk factors related to substance abuse (Caldern et al. 2021; UNODC, 2022). However, strong community systems and the engagement of stakeholders are potential protective factors. At the societal level are the more general factors like cultural traditions, economic conditions, and policies that have a bearing on behavior. Many substance abuse cases in developing countries including Zimbabwe have been related to high unemployment levels, poverty, and lack of unpolluted implementation of drug control policies (World Bank, 2022; Moyo & Chikoko, 2021).

The socioecological theory helps us to understand the problem of drug addiction in a comprehensive way. In fact, it reflects the aims of the research as it helps to pinpoint psychosocial factors operating at different levels and to understand the plight of community stakeholders. This theory is the backbone of a context-specific model as it points out that good interventions should cover different levels at the same time instead of just trying to change the individual's behavior. Critics believe that this theory is so general that it is almost impossible to put into practice because of the multi-level approach it entails (Golden & Earp, 2019). This feature makes it possible to bring together various viewpoints, which is why it is perfect for research that wants to come out with intervention models that are not only practical but are also sensitive to context.

The Socioecological theory acts as a roadmap in this research helping in the review of literature, organizing research and supporting the creation of a model that empowers the community to deal with substance abuse among youths in Chipadze, Bindura.

2.3 Conceptualisation of Key Phenomena in the Study

The main theme of this chapter is the concept that lays at the foundation of the research that is substance abuse. To trace the present study in the ever-evolving academic and policy discussions, it is necessary to delineate the notion of substance abuse as is done and explicated in the existing literature. Since the concept of substance abuse is intricate and diverse, it is natural that different disciplines, cultures, and patterns of use will have different interpretations of it.

Generally, substance abuse entails the harmful or hazardous use of psychoactive substances like alcohol and drugs which causes negative health, social, and economic outcomes (World Health Organization, 2021). In the same vein, the United Nations Office on Drugs and Crime (UNODC) characterizes the abuse of substances as the use of substances in violation of medical or social

norms that could bring dependency and other negative effects (UNODC, 2022). That's why, these definitions not only point at the consumption itself but also the repercussions related to it. Recently a reevaluation has been done and instead of projecting drug abuse as a mere individual moral failure, substance abuse is presently thought of as a complex interplay of psychological, social, and structural factors by the researchers. They contend that drug abuse among youth is a demonstration of the use of drugs as a vehicle to cope with the impact of stress, trauma, or socio-economic hardships (Degenhardt et al. 2019; Viner et al. 2019). Such a view is in good standing with the public health approaches through which drug abuse is perceived as a behavioral and social problem rather than as a mere criminal or disciplinary issue.

Young people using substances is an occurrence that is mainly tied to easily available substances like alcohol and cannabis though, in Zimbabwe, there is a rise in the demand of illicit or misused pharmaceutical drugs. Many studies reveal that the earlier a person gets involved with a psychoactive substance, the stronger the chance to become a long-term user or dependent. It can also bring about other negative effects like dropping out of school, getting one or more mental health problems, and even doing things which are dangerous to oneself or others (WHO, 2021; UNODC, 2022). All this makes it a very important time to reach out to the youth with necessary programs, support, and interventions. It is very necessary to make a clear differentiation between substance use, misuse, and abuse. Generally, substance use means taking any substance in any way, not necessarily leading to damage. Misuse usually involves wrong or overuse, such as using someone else's prescription medication. Abuse is taking a drug or drugs persistently even though at some point harmful effects have occurred on the physical, mental, and social levels (Caldern et al. 2021). Being able to differentiate these concepts is very relevant here as it gives this research the possibility to comprehend in depth the type of drug-related behaviors young people in Chipadze engage in.

Another factor which is greatly influencing the way substance abuse is understood is context. Studies indicate that substance abuse patterns differ greatly from place to place due to cultural diversities, economic level, and substance supply (World Bank, 2022). Substance abuse still ranks high among the other problems like unemployment, poverty, and lack of mental health services in most of the low- and middle-income countries and Zimbabwe is no exception (Moyo & Chikoko,

2021). It is, imperative that we devise the solutions that work for each context instead of implementing the same set of rules everywhere.

Recently people looking into the issue of substance abuse argue that besides only focusing on treatment and rehabilitation, the role of families, schools, and other community stakeholders in prevention and early intervention should be given more importance as support. They believe that community-based responses to substance abuse have great value (Hawkins et al. 2020; UNODC, 2022). This stance fits well this study that wants to make a model to energize communities so that they become capable of effectively combating substance abuse among their young people.

Despite the extensive body of literature on substance abuse, gaps remain in understanding how communities, particularly in specific local contexts like Chipadze, can be effectively empowered to respond to the problem. Much of the existing research focuses on individual level factors or national level policies, with limited attention given to grassroots level challenges and capacities. This study seeks to contribute to this gap by providing a context specific analysis and proposing a practical model grounded in community

2.4 General Overview of the Study

Drug addiction among youth is broadly considered one of the main global public health and social problems that not only affect developed countries but also emerging and poor countries at different stages of development and socio-economic conditions. Per the latest figures, in 2021 roughly 296 million individuals worldwide used drugs, which is a considerable increase compared to ten years ago, and youth form a big part of this group (United Nations Office on Drugs and Crime, 2022). Apart from drug abuse, alcohol misuse is still a big part for illness and death, leading to over 3 million deaths each year, many of them caused by young people taking part in dangerous behaviors while under the influence of alcohol (World Health Organization, 2021). Also, global qualitative research shows that youth drug abuse is, in many cases, linked to psychosocial stressors like mental health problems, social isolation, school stress, and trauma. For example, Degenhardt et al. (2019) and Viner et al. (2019) emphasize that adolescence is a sensitive period of human development when young people are trying things out and figuring out who they are, this way making them more prone to substance use Mostly when support systems in their environments are weak or completely lacking. Besides these individual factors, structural ones like fast urbanization, bigger supply of drugs and social inequalities have led to the changing drug abuse patterns globally. This

marks a crucial role of drugs worldwide and really show the need for implementing several comprehensive intervention strategies at different levels around the world.

In the African setting, youth substance abuse is a problem that is further complicated by socioeconomic and structural challenges that are prevalent in the continent. Data in the region is at times very spotty though the evidence that is here points to an upsurge in the use of cannabis alcohol heroin and synthetic drugs, in particular among the urban youth (United Nations Office on Drugs and Crime, 2022). The findings of qualitative studies that were conducted in a number of African countries reveal that poverty, unemployment and exclusion are the main causes of substance abuse. Besides that, a large number of the young people take drugs and alcohol as ways of coping with their economic conditions and lack of opportunities (World Bank, 2022). Family changes, the weakening of traditional supports and the increasing exposure to violence and instability have diminished the protective role of the communities. Hawkins et al. (2020) point out that a number of African communities have seen a weakening in their social controls resulting in the increased vulnerability of the youth. At the same time, the scarcity of mental health treatments and rehabilitation centers limits the success of the interventions. Despite the existence of the policy systems in many countries, their implementation is usually hindered by the shortage of resources, lack of trained personnel and the stigma of substance abuse which makes people less willing to seek help.

In Zimbabwe, substance abuse in young people is becoming a major issue mostly in the urban and peri urban communities which are more economically challenged. A number of reports have shown that the abuse of alcohol, cannabis and other more addictive drugs like crystal methamphetamine, locally known as "mutoriro", has increased. Although there is no definite picture of the situation in the country, the research done so far has indicated that a very high number of young people are getting involved in drug use quite early. This has a number of negative impacts on their health, education and social life. These all contribute to creating an atmosphere that leads to one's drug use (Moyo & Chikoko, 2021). On top of that, young people seeking for a sense of identity or belonging in crowded places become more vulnerable to the peer pressures that serve to push them towards drugs and alcohol.

Communities are often the first to react to issues of drug abuse in Zimbabwe, but their response is usually undermined by various hurdles that curb their potential. Community members like

families, schools, health facilities, and local governance structures are most of the time ill-equipped, untrained, and without coordinated mechanisms necessary to tackle this issue thoroughly. In fact, the rehabilitation centers, which help young people kick their drug habits, are few and most of them are not only far away but also difficult to access. Prevention initiatives are irregular and usually poorly funded. Substance abuse stigma continues to be a major obstacle both in prevention and treatment because those who suffer from it are more often ostracized than helped. Although government and NGOs have rolled out awareness programs and intervention measures, these efforts have remained quite scattered and not local community needs specific enough, say that of Chipadze in Bindura.

The literature review shows that although drug abuse among youth is a worldwide issue, how this problem is expressed and tackled differs greatly from one place to another. More importantly, plainly very little work has been done to understand how communities, in particular those at the grassroots level, can be given the tools to respond to drug abuse in a well-organized and sustainable way. Most of the research that has been done either concentrates on individual level factors or on general policy systems, to the neglect of the actual situations faced by community stakeholders. As a result, there is a need for studies that are tailored to specific contexts and which examine not only the psychosocial factors that drive drug abuse but also the obstacles that communities face in trying to deal with it. This is the gap that the current research aims to fill and by doing so, it intends to aid in the creation of a structure that is based on the experiences of the people of Chipadze and that has the ability to enhance community responses to drug abuse by young people.

2.5 Psychosocial Factors Contributing to substance Abuse Among Young People in Chipadze, Bindura

Psychosocial factors are major contributors to substance abuse among youth, and these factors can be individual, relational, or societal. There is now more and more evidence that substance use cannot simply be connected to the choice of an individual, but is rather the outcome of a interaction of psychological, social and community conditions that determine behavior over time. Youth as they are, going through a time of great change and personal development, are very much at risk. When kids are finding out who they are, if they are having emotional ups and downs, and if they get easily influenced by others, they become susceptible to substance abuse (Viner et al. 2019;

World Health Organization [WHO], 2021). In a climate as tight as Zimbabwe, where poverty and other difficult economic conditions can be counted on, these qualities of youth are even more exposed, and so it is fair and right to delve into the psychosocial factors driving substance abuse among youth.

2.5.1 Peer Pressure and Social Influence

Peer influence is among the commonly mentioned reasons for drug use among youngsters. Teens and young adults, craving acceptance and a sense of belonging in their social circles, may get involved in risky deeds, like substance abuse, to be accepted. Studies show that young individuals tend to try drugs or alcohol under peer pressure as they see those substances as the norm and a way to fit in (Hawkins et al. 2020; UNODC, 2022). Viner et al. (2019) go on to explain that peer pressure can be exerted both directly by coaxing and indirectly, by the individual's perception of what is expected by their social network. In several communities including those with scarce recreational options, the peer groups frequently turn out to be the primary venues for socializing that means the young members of such groups run a higher risk of coming in contact with substance use. The need to preserve one's social identity and be part of the in-group can then lead to ignoring one's own reasoning resulting in substance abuse even though the young ones are aware of its downsides. Though peer networks can also act as a source of protection in some circumstances, studies imply that in the high-risk environments their influence is mostly linked to heightened vulnerability.

2.5.2 Family Dynamics and Parenting Practices

The family environment is very important in determining the davranish of young people including their chance of drug use. Research shows that variables like parental neglect, insufficient supervision, family conflicts, and weak parent-child relationships greatly raise the risk of substance use among teenagers (Caldern et al. 2021; WHO, 2021). Strong family ties, good communication, and the presence of parents are linked to less drug use. In many poor areas, the parents or carers are sometimes economically so pressed that they hardly manage to supervise and support their children emotionally which leads the children to be even more exposed to drugs. Moyo and Chikoko (2021) show that in Zimbabwe, families splitting up, and migration have been two factors making family structures so weak that many young people are left without proper

guidance. Also, families where adult members' drug use is a kind of norm may unintentionally lead children to behave in the same way which shows the intergenerational aspect of the problem.

2.5.3 Mental Health and Emotional Well-being

One of the biggest factors behind drug abuse by youth is mental health problems which, the more, get publicly acknowledged. Depression anxiety trauma, and the like are very closely tied up in drug use because people, who are affected by these problems, often resort to drugs or alcohol as their way of coping (Degenhardt et al. 2019; WHO, 2021). This connection between the two is very scary in particular considering that mental health services are almost nonexistent in many poor countries including Zimbabwe. The youths who are emotionally disturbed and That means likely to get drug addicted are those who feel the urge to go down this path to avoid hardships like poverty, family fights, or pressure from school. Besides, this will probably become such a dependence that each time the drug use worsens the person's mental state, he or she will want to use more drugs. The presence of both mental illness and drug use at the same time, also known as dual diagnosis, makes it even harder to help these people, because that is when they need both drugs and mental health professionals, which are highly lacking in poor areas.

2.5.4 Socioeconomic Challenges and Unemployment

Socioeconomic circumstances are a major influence on young people turning to drugs, mostly poverty and unemployment. In situations where communities have poor educational and job opportunities, this often breeds despair and a feeling of being stuck, which may push individuals towards drugs as a way of escape or handling their problems (World Bank, 2022; UNODC, 2022). Teenagers and young adults who are not occupied with some form of work or study are at a higher risk of spending time in environments where there is drug use, so a higher chance of exposure and risk. In Zimbabwe, it has been pointed out that the very high level of youth unemployment is something important leading to drug abuse, in particular in urban and peri-urban areas. Moyo and Chikoko (2021), the absence of job opportunities is a double blow. It leads to psychological problems and at the same time, it denies one the chance to be part of positive social networks and to get support. In the end, drug abuse is not only the result but also the way of dealing with the problems of a person's socioeconomic environment.

2.5.5 Community Environment and Social Disorganization

In addition to the immediate influences of family and peers, the wider community environment has a significant impact on young people's decisions to use drugs. For instance, the exposure to drug availability, inadequate recreational facilities, poor law enforcement, and a disorganized community have all been cited as main reasons for drug abuse among the youth (Hawkins et al. 2020; UNODC, 2022). In settings where drugs are readily available with minimal regulations, young individuals are more inclined to try drugs and eventually become dependent on them. Social disorganization, a condition that arises when social institutions are weak and community ties are minimal, lowers the effectiveness of a community in supervising and steering the behavior of its young members. This aspect is clearly visible in neighborhoods undergoing rapid urban development and economic decline, where traditional forms of support have become less effective. Besides that, the lack of youth centers and activities greatly contribute to the risk of drug addiction among young people as it deprives them of constructive alternatives to drug use.

From the overall perspective, research works reveal that the psychosocial factors that lead to drug abuse among young people are not only interrelated but vary as the situational context. Even though individual level factors such as psychological well-being and decision-making really help, the ripple effect of family, peers, and community influences often mold and sustain these factors. So, this calls for comprehensive strategies that tackle different levels of influence at the same time. While the current literature sheds light on these aspects, it barely delves into how communities can be strengthened to adequately and sustainably react to them in a coordinated manner. This research intends to expand on the groundwork by which these psychosocial factors are explored and tied into the community-level interventions in the Chipadze, Bindura area.

2.6 Challenges faced by community stakeholders in addressing substance abuse among young people

Community stakeholders encounter a range of highly intertwined problems when attempting to tackle substance abuse among youth, a situation that is further complicated by scarcity of resources, lack of knowledge and training, weak coordination among institutions, stigma and poor implementation of policies, all these factors greatly undermine the impact of community-based interventions. The literature is fairly loud on the point that despite truth is communities are still expected to be playing the main role in prevention, early yet detection and intervention, they are

usually not sufficiently enabled to do their part mostly in cases of low resource settings (World Health Organization [WHO], 2021; United Nations Office on Drugs and Crime [UNODC], 2022; Hawkins et al. 2020). This disparity between expectation and capacity calls on us to thoroughly investigate challenges of community stakeholders so that we can come up with a list of practical and context relevant interventions.

2.6.1 Limited Resources and Infrastructure

The shortage of financial, human, and institutional resources is among the biggest hurdles for community stakeholders in dealing with substance abuse by young people. Research shows that many communities, mostly those in developing countries, have very little budget for health and social services, and this limits their capability to run prevention programs, offer counselling, and support rehabilitation operations (WHO, 2021; World Bank, 2022). There is always a lack of trained professionals including social workers, psychologists, and community health workers without whom it is difficult to meet the complex needs of persons addicted to substances. In Zimbabwe, these problems are very severe as the economy has caused heavy strain on health and social service sectors. Moyo and Chikoko (2021), many communities are not even aware of the existence of rehabilitation centers, and those that do have such facilities are so crowded that patients often have to share beds. There are no availability of any community infrastructure such as youth centers or sports and leisure facilities. These are the kinds of things that not only limit the present capacity to deliver services but also contribute to the weakening of the community's overall ability to respond effectively to the problem.

2.6.2 Lack of Knowledge and Training Among Stakeholders

Another important problem is poor knowledge and training of community stakeholders about prevention and intervention of substance abuse. The involvement in community level responses by various community members, including parents, teachers and community leaders has shown to be ineffective unless they have sufficient skills to recognize early indications of substance abuse or to intervene appropriately (UNODC, 2022; Caldern et al. 2021). Lack of skills can be due to lack of access to the training and education programs. As both Hawkins et al. (2020) and Caldern et al. (2021) assert, communities that are involved in preventing substance abuse are in need of understanding of the risk factors for substance abuse, knowledge about protective factors, and evidence-based programs for prevention. In many contexts, this knowledge is lacking or

incomplete, resulting in substandard responses. The situation in Zimbabwe is worsened by inadequate institutional support for capacity building efforts which leads to vulnerable community stakeholders being expected to prevent substance abuse without sufficient training and knowledge.

2.6.3 Weak Coordination and Collaboration Among Stakeholders

Poor level of coordination and collaboration among members of the community was also identified as a barrier. WHO (2021) report on key results emphasized the importance of an integrated response that involved various actors working interdependently towards the problem of concern; family school healthcare facility police community organizations and other institutions. Agencies oftentimes work in Silo and had limited collaboration in most cases which can result in repeat work, over or under utilization of resources, service gaps and suboptimal impact as interventions tend to compete rather than complement each other. For example, prevention services in the schools are not supported by the community or the family system while services are not equally standardized at the community level for instance. Lack of collaboration among healthcare providers and community organizations may impede the continuity of care among individuals in treatment. No information on community level collaboration and or institutional silos in the Zimbabwean context (Moyo & Chikoko, 2021).

2.6.4 Stigma and Negative Attitudes Towards Substance Abuse

Another major obstacle that ruins community response to the problem of substance abuse is the stigma and negative attitudes of society towards substance abusers. Studies show that people who use substances are stereotyped as morally weak or socially deviant, which results in their discrimination and social exclusion (WHO, 2021; Degenhardt et al. 2019). This stigma not just adversely affects the substance users but also in a way forces the families and local communities to keep quiet about the matter or not to seek help. It can be dangerous for young people giving them the idea that they are being judged and falsely labeled which might be early signs of substance abuse and should be interventions that are kept secret and allowing progression of the substance use to the severe forms of substance abuse. Stigma can affect the perceptions of community members themselves, making them adopt a harsh and inflexible attitude towards substance abusers such as punishment rather than a supportive one. Culture and norms in Zimbabwe can bring the concealment of substance abuse due to shame which corresponds to the stigmatization of substance users and because of this hinder the implementation of open and inclusive interventions.

Addressing stigma is a prerequisite to creating a supportive environment where prevention and treatment can be more effective.

2.6.5 Weak Policy Implementation and Enforcement

Besides the existence of policies and systems geared to combating substance abuse, poor implementation and lack of enforcement still remain the biggest problems at the community level. Research reveals that although most countries have in place coherent drug control strategies, they are often split between policy formulation and actual implementation (UNODC, 2022; World Bank, 2022). Other reasons like limited funding, political unwillingness and lack of effective monitoring create this gap. In Zimbabwe, despite the presence of national policies and awareness campaigns targeted at substance abuse, their influence is sometimes barely felt at the very local level. Community members may not be fully conversant with the policies or may lack the capability to implement them in an effective manner. The intervention programs usually end up being isolated and uncoordinated, which leads to the reduction of their overall effectiveness. Enhancing the delivery of the policies and the provision of adequate support to the actors at community level becomes critical for tackling substance abuse in a more coordinated and sustainable way. The literature shows that community stakeholders are exposed to numerous challenges that greatly restrain their capabilities to effectively deal with substance abuse among youth. These challenges surface in different ways and in most cases they are mutually reinforcing that a complicated environment emerges which is capable of producing comprehensive and context-specific solutions. Although the existing papers point out these limitations, there is hardly any mention of how communities can be enabled in a practical way to overcome them. The research intends to fill this gap by first of all, understanding these challenges thoroughly and through the findings, create a model that will enhance community capacity in Chipadze, Bindura.

2.7 Development of a Context Specific Model for Capacitating Communities to Address Substance Abuse Among Young People

Designing a localized system to equip communities in handling the problem of youth substance abuse effectively entails a combination of strategies aimed at fortifying community centers, upgrading the knowledge and skills of the stakeholders, making the interventions culturally and socially relevant. Most of the literature points out that externally designed interventions without proper understanding and integration of local context do not give sustainable results and the

situations where community dynamics greatly influences the behavior of the people are more vulnerable to such failures (World Health Organization [WHO], 2021; United Nations Office on Drugs and Crime [UNODC], 2022; Hawkins et al. 2020). More scholars have agreed that to successfully fight substance abuse, the efforts focusing only on the individual are not enough instead the community empowerment, participation, and ownership should be the major factors of the intervention design.

The major factor that should be kept in mind while coming up with such a model is that the capacity of the community is not only the sum of the resources it can boast of, but also is the other elements like the local knowledge skills interpersonal relationships, and organizational structures that assist the community in circumstances of substance abuse. Research evidences that communities with strong social ties, participative leadership, and collaborative structures have a higher ability to carry out prevention activities and extend help to drug users (Caldern et al. 2021; WHO, 2021). In numerous cases, including Zimbabwe, these community strengths capacities are either weakly developed or may not even exist, because of this the disjointed interventions are only marginally effective. This is a clear indication that the model not only aims at resolving the problem of resource deficiency but is also focused on reinforcing the community-level systems and processes.

Academic sources underscore the significance of implementing levels approaches that match the-meter -models like the Socioecological theory, which stresses the interplay of individual interpersonal community and societal factors in determining behavior (Golden & Earp, 2019; McLeroy et al. 2016). A community-oriented design means integrate interventions at different levels including individual consciousness and behavior modification, family support systems, peer involvement, community mobilization, and policy endorsement. This kind of strategy not only guarantees that interventions are well-rounded but also that they tackle the main factors leading to substance abuse and not just the symptoms. Community-based initiatives, for instance, which offer a mix of life skills training, parental education and youth engagement have been proven to yield better results than stand-alone interventions (Hawkins et al. 2020; UNODC, 2022).

Another key factor to consider when developing a model is ensuring continuous community stakeholder participation during the entire development process. Participatory methods, which bring together stakeholders like parents, teachers, local leaders, health workers and young people themselves, are generally considered a prerequisite for ensuring that interventions are pertinent,

well-accepted and have longevity (WHO, 2021; World Bank, 2022). Studies show that when communities are deeply involved in both problem recognition and solution formulation, they show a stronger community ownership and commitment to sustain interventions over time but interventions directed from the top-down without incorporating local voices are often unable to meet the specific needs and circumstances of the target group.

The model should explicitly respond to issues raised in literature, such as scarcity of funds, insufficient training, poor coordination, and stigma. It entails incorporating capacity-building aspects like workshops for community leaders, designing coordination models, and conducting sensitization drives that aim at stigma reduction and motivating the community to seek help (Degenhardt et al. 2019; UNODC, 2022). Enhancing community structures' partnerships with official institutions, like healthcare and governmental agencies, are key in increasing the availability of support and guaranteeing the continuity of care.

The literature points to a deficiency in current models, mainly when it comes to the issue of adapting them to the direct environment of a place like Chipadze in Bindura. Although several setups offer broad directions for combating substance abuse, they are frequently unmindful of the situation of the area and the weakest communities, cultural features, and the abilities of institutions. The research attempts to fill the gap by creating a model that reflects the situation of Chipadze, extension of both field results and well-known theoretical foundations. The setup that the research will put forward is anticipated to embrace main factors including community empowerment, partnership of different stakeholders, training, and locally tailored interventions. It intends to deliver a useful model that can steer the community in a prevention and mitigation campaign for substance abuse among youth in a synergistic and lasting manner. By rooting the structure in literature as well as in local life, the research attempts to find a middle ground between what is known and what can be done, thereby providing more worthwhile community-based substance abuse interventions in Zimbabwe.

2.8 Chapter Summary

In this chapter, literature on substance abuse among youth was explored. Special emphasis was put on psychosocial factors, difficulties encountered by community stakeholders, and the necessity

of context-specific interventions. The chapter, using the Social Ecological Theory as a guide, revealed that substance abuse is a result of several factors that are linked to each other at the level of the individual, family, and community. These include peer pressure, family relations, mental health issues, and socio-economic conditions. The review went on to show that community stakeholders encounter a lot of challenges such as lack of resources, insufficient training, poor coordination, stigma, and weak policy implementation that lead to ineffective responses to substance abuse. Although existing research offers valuable insights, the chapter pointed to the lack of community-driven, practical models made to be exact for local contexts. This absence forms the foundation for this research that aims to prepare a model for empowering Chipadze community in Bindura to counter effectively drug abuse among youth.

3 CHAPTER 3: METHODOLOGY

3.1 Introduction

This chapter outlines the research methodology employed in this research. The study based on a qualitative research approach. The nature of drug abuse and community empowerment is very complex, the researcher believes that the only way to get a deep understanding of people's experiences, beliefs, and social conditions is through an interpretation of their narratives therefore the study is based on a qualitative method. The researcher thinks that through the lens of people who have experienced substance abuse, one can really understand which psychosocial factors lead to drug abuse and what problems community stakeholders encounter. Creswell and Creswell (2018) explain that qualitative research is a way to study social events in their natural environment and at the same time focus on participants' views, meanings, and experiences. This research was conducted at Chipadze, Bindura and the community stakeholders and youth recovering from drug abuse are intended to be the sources of information for the study which aims at producing evidence-based data for model development specific to strengthening community service delivery in Zimbabwe.

3.1.1 Research Approach

The research adopted qualitative research approach since it enables a detailed investigation of the real experiences, thoughts, and values of both community stakeholders and substance-abuse-recovering youth in Chipadze, Bindura. A research approach is a general plan that determines how research begins, whether data will be self-collected or secondary, obtained by observation or interviews, and how results will be interpreted. A research approach represents the worldview or set of beliefs that researchers hold about the reality and the nature of human knowledge (Saunders, Lewis & Thornhill, 2019). Qualitative research it is a good fit for the research goal of deciphering psychosocial elements leading to substance abuse, exploring the difficulties faced by community stakeholders in combating substance abuse, and designing a new model based on the local context. Qualitative research is concerned with the understanding of social things in their natural setting (Creswell & Poth, 2018), which is one reason why the author could collect comprehensive, descriptive data that exceeded mere numerical measurement and captured diversity, subtleties, and the depth of human experience. Denzin and Lincoln (2018) argue that qualitative research is the best option when one wants to discover the social processes and cultural meanings as viewed by

the participants themselves. As for this study, using the qualitative research method leads to the comprehensive assessment of community dynamics that enable the investigator to perceive how community contexts, and personal experiences, influence substance abuse. As a result, this method not only aligns with the study of the realities of the contexts but also helps in the theory development based on empirical evidence which makes it very valid for addressing the research questions of this study.

3.1.2 Research design

This research uses a case study approach to look in depth at the community services in Chipadze, Bindura. Case study research is a means of open-ended, in-depth, context-based exploration of complicated social issues. It also gives the researcher the ability to go through real-life issues in the natural setting of the case study, set up the structure (Yin, 2018; Baxter & Jack, 2008). Merriam and Tisdell (2016) state that case studies fit qualitative research best as they allow detailed and rich data to be gathered from the different sources such interviews, observations and to analyze the documents for each give a well-rounded view of the case. For this research, the design is a good fit as it aims to understand the underlying psychosocial factors leading to substance abuse, and the difficulties that the community stakeholders encounter. By focusing on the one community, the case study method allows the combination of various qualitative methods, including ethnographic observations, thematic interviews, and document review, to render the whole image of community dynamics. Most importantly, these methods and mainly this one make it possible to study the interactions among social and cultural factors in a naturalistic setting which is key when developing a context-specific model for strengthening rehabilitation services.

3.2 Research setting

The study was conducted in Chipadze which is a high-density suburb of Bindura. The area was made up of mostly low- to middle-income earners, and besides, a high number of young people were experiencing various socio-economic hardships like unemployment, very few recreational facilities. This made the young people very vulnerable to substances. Bindura which is in Mashonaland Central Province, is a mining and university town, because of this the social environment and behaviors in the town were influenced also by this single factor. Over the years the young people of the town have developed substance abuse. This has become a source of headache to the families, community leaders and even service providers. The suburb of Chipadze

was home to major community structures that included schools churches health facilities, and community-based organizations, all of which played a critical role in influencing behavior and were so deemed pivotal in countering substance abuse. The study setting was selected for the research because it demonstrated a typical Zimbabwean community which is struggling with the issue of youth substance abuse and is so suitable for rolling out a community-based intervention model.

3.3 Target population

The target population in this research are youths in the age bracket of 16-35 years, who have gone through a substance abuse treatment process in Chipadze, as well as community stakeholders (psychiatric nurse, social worker and a police officer) who are involved in addressing substance abuse matters in the community. Ritchie and Lewis (2003) define a target population as a group of people who have similar characteristics and are selected as the subject of a research study. Lewis and Thornhill (2019) recently stated that it is extremely important to clearly define the target population to ensure the validity and relevance of the research. The age bracket of youth is intended to cover the population that is mainly affected by drug problems and to set the research on the standard health and social science research methods. The inclusion of community stakeholders reveals the community resources that are necessary to combat substance abuse effectively in the Zimbabwean setting.

3.4 Sampling

3.4.1 Sample size

A sample is a portion of the total population selected for a research study and acts as representatives of the wider population (Etikan, Musa & Alkassim, 2016). The sample of this study was made up of 13 individuals from Chipadze, 8 of whom were youths in their recovery stage from substance abuse (primary participants) and the remaining 3 community stakeholders who have been actively engaged in community capacitation initiatives for substance abuse intervention, that is 1 psychiatric nurse, 1 social worker and 1 police officer (key informants). Purposive sampling was the procedure used in recruiting key informants, which is a non-probability sampling method that offers the researcher with control over the selection of the sample based on participants' characteristics and experience and knowledge related to the event under study. This

method was deemed fit since the selected participants are the ones who are most directly involved in the treatment and control of substance abuse. This way the researcher was able to gather extensive and detailed information on the challenges and capacities of rehabilitation services. Data from these participants were gathered through interviews as study tools. Sampling technique.

3.4.2 Sampling technique

Purposive and snowball sampling techniques was utilized in this study. Purposive sampling was used in selecting key informants, social worker, psychiatric nurse and the police officer who had the knowledge of substance abuse amongst young people in Chipadze, whereas snowball sampling was used to recruit the primary participants. Snowball sampling was very suitable in tapping into these participants who because of the nature of substance abuse are not easily identifiable the study mainly focused on young people in recovery from substance abuse because they have the ability to provide clear, reflective and detailed narratives of their experiences, as well as give their views on support systems and recovery processes. Earl Babbie and Johann Mouton (2013), purposive sampling enables a selective choice of sampling units by the researcher based on particular characteristics such as knowledge and perspectives of the event under study, thereby facilitating the acquisition of rich and varied viewpoints. To mention a few, John W. Creswell (2021) has highlighted that sampling continues until no new information is obtained and the research study objectives are satisfactorily addressed.

3.5 Data collection techniques

For this research data was gathered through semi structured interviews for key informants and in-depth interviews for primary participants. Techniques for data collection signify the organized steps taken by the researcher to collect data from the respondents for answering the research questions (John W. Creswell, 2021). This allowed the researcher to collect in-depth qualitative understanding as well as structured responses that were aligned with the research objectives. The copies of the instruments used in this research are provided in the appendices of this dissertation.

3.5.1 In-Depth Interview guides

Using in depth interview guides, data was collected from the primary participants. These were young people who were recovering from substance abuse and some had recently stopped abusing substances. This approach gave participants an opportunity to talk at length about their personal

experiences, perceptions, and insights related to substance abuse and the significance of their community in their recovery journey. Qualitative research considers deep interviews as a method for capturing rich and detailed data that is grounded in participants' real-life experiences (Braun & Clarke, 2021; Guest et al. 2017). The approach provided an opportunity for carrying out probing and follow-up questions, Because of this facilitating an in-depth study of issues. To make participants comfortable, reduce language barriers, and at the same time, ensure that their experiences were correctly conveyed, the research allowed them to use their native or most familiar language (vernacular). This also helped in enhancing the quality and authenticity of the data collected.

3.5.2 Semi Structured Interview Guides

Semi-structured interview guides were used to collect data from key informants, including social worker, psychiatric nurse and police officer. This allowed the researcher to explore predetermined themes while maintaining flexibility to probe and follow up on emerging issues. Semi-structured interviews are widely used in qualitative research for generating detailed and context-specific information from knowledgeable participants (Braun & Clarke, 2021; King et al., 2019). The use of an interview guide ensured consistency across interviews while allowing participants to provide insights on substance abuse and community-based responses, thereby enhancing the richness and credibility of the data collected.

3.6 Data analysis techniques

This study uses thematic analysis technique. It is very much in line with qualitative research that is aimed at finding out and understanding deeply the experiences and perceptions of the respondents. Thematic analysis is the most suitable technique that helps in uncovering regular repetitions (patterns) and certain themes in the data without forcibly fitting the data to some predetermined categories (Virginia Braun & Victoria Clarke, 2021). Data analysis is basically the methodical process of organizing, examining, and interpreting the information that has been collected to come up with meaningful results and to solve the research problems (Johnny Sardana, 2021). Qualitative research analysis is about identifying the patterns, meanings, and connections within what the participants say in fact, technique gave enough freedom to the researcher to get

the views of youth who at the time of the research were in the recovery process at Chipadze and different members of the community on how effective community services are in substance abuse issues.

Several steps were followed during the data analysis process. Data familiarization was the first step, during which the researcher deeply listened to the interview recordings to understand the data at a deeper level. Coding of data was done during the time when prominent ideas and statements that came from the participants were pointed out and tagged. Johnny Saldana (2021) says that coding is a good way for the researcher to manage qualitative data by breaking it down into manageable parts that make it easier for the researcher to make sense of them.

The next phase was finding and creating themes that consisted in putting together the related codes that were the representation of the main and common patterns identified in the data. The themes underwent a process of checking and editing to be sure that they are a true and accurate reflection of the participants' expression as well as the study objectives. Lastly, themes were given precise definitions and arranged in such a way that they corresponded with the research questions and objectives, so allowing the researcher to report the results in a systematic way. Linking the interpretation of these themes to the related literature and the study's theoretical system enabled the researcher to make well-grounded conclusions about community capacity to tackle substance abuse among youth.

3.7.1 Ethical considerations of the study

This research thoroughly considered a number of ethical issues to safeguard the rights, dignity, and welfare of the participants, complying with the major research ethics standards (Orb, Eisenhauer & Wynaden, 2020). Before starting the gathering of data, the author obtained official consent from the city council management of Bindura to carry out the study. The study was totally voluntary, and the participants received full information for the aim, methods, dangers, and advantages of the research through both the written and oral consent forms which were given in an understandable and culturally suitable way. They had the liberty to stop their participation at any point without the possibility of being punished or experiencing any negative consequences. To keep confidentiality and anonymity, fictitious names were used in the results reporting, and all the data collected have been safely stored and used only for the purposes of this research. No personal information was ever put in the research instruments or reports, because of this the privacy

of the participants was maintained. The researcher also put in place some safeguards to reduce the chances of psychological or emotional hurt, given that talking about substance abuse and community experiences could trigger some painful memories. The questions were thoughtfully structured so that they would not be upsetting, and the participants were handled with respect and empathy throughout the whole time (Resnik, 2020). The researcher never involved any type of force, financial rewards, or gifts; to partake was really a choice made by the people themselves.

3.7.2 Limitations of the study

Several challenges were faced during this research. First, it was difficult to get information from participants as some young people were very reluctant to share their experiences with substance abuse at the beginning. The biggest reason is that such information is sensitive and personal and the participants might be worried about being judged. With a view to overcoming this, the researcher assured the respondents about confidentiality and revealed that all the data collected would be for academic purposes only and that their identities would be kept secret (Orb, Eisenhauer & Wynaden, 2020).

Secondly, getting official permission to carry out the study took a long time and required working with the management of Bindura city council. The researcher had to discuss the goal and importance of the study with council officials and assure them that the results would only be used for research purposes and would in no way damage the image or the work of the hospital.

Finally, lack of relevant research on substance abuse among youth in Zimbabwean communities made it difficult as well. Although the uniqueness of the study added to its creativity, it was also the case that there was a very small amount of previous work that could be used as a point of reference or a standard. To cope with this drawback, the researcher sought advice from the supervisor, did an intensive examination of comprehensively local and international literature, and took advantage of the most suitable theoretical models to illustrate and base the findings of the study (Saunders, Lewis & Thornhill, 2019).

Regardless of these drawbacks, the researcher deliberately made a number of safety measures to keep this research as a methodically correct and morally responsible one and at the same time be able to give useful results about the ability of Zimbabwean communities to deal with the problem of substance abuse among young people.

3.8 Chapter summary

Chapter three focused on the research methodology employed in this study. It followed a qualitative research approach. A case study design was selected to dive deep into one particular setting, giving the researcher a chance to collect data from the community stakeholders who are involved in addressing substance abuse and young people who are in substance abuse. The chapter described the target population of young people aged 16 to 35 who were abusing substances and also community stakeholders, police officer, a social worker, and a psychiatric nurse. A purposive sampling technique was implemented to choose key informants who had firsthand experience and relevant knowledge of the community while snowball sampling was used to recruit primary participants. The tools for data collection were semi-structured and in-depth interviews that gave the researcher an opportunity to obtain rich qualitative data and at the same time have structured responses. Thematic analysis was adopted as a method of data analysis to uncover recurring elements, groups, and themes present in the accounts of the participants. The chapter elaborated on the ethical standards maintained in the research such as getting informed consent, maintaining confidentiality, encouraging voluntary participation, and reducing potential harm. The chapter mentioned shortcomings such as participants' sensitivity about the information, time required for getting authorization, scarcity of literature on the subject, and the steps taken to deal with these issues. The chapter has given a comprehensive summary of the research design, target population, sampling techniques, data collection methods, analysis approaches, and ethics, which have prepared the ground for the presentation and discussion of findings in the next chapters.

4 CHAPTER 4: DATA ANALYSIS AND PRESENTATION

4.1 Introduction

The chapter presents, analyses, and discusses the findings from the study on a model for capacitating communities to effectively address substance abuse among young people in Chipadze, Bindura. The results are presented based on the study's objectives and are discussed alongside reference to the literature reviewed and the socioecological theory that guided the study. Data collection was done through in-depth interviews with young people who are recovering from substance abuse (primary participants) and semi-structured interviews with community stakeholders involved in addressing substance abuse (key informants). Such stakeholders included social worker, psychiatric nurse, and a police officer. Psychosocial factors leading to substance abuse among young people, community-related challenges in addressing substance abuse and the resources and support that are required to enhance community responses are the issues that the chapter deals with. Emerging themes from the data are displayed and discussed in a stepwise manner as per the objectives of the study.

4.2 Demographic Information

4.2.1 Demographic information for primary participants

Participant code	**Age range**	**Gender**	**Status**	**Type of substance previously used**	**current occupation**	**duration of substance abuse**
p1	26-35	Male	Recovering	Crystal meth Cannabis	Unemployed	4 years
p2	16-25	Male	Recovering	Nicotine pouches	Unemployed	2 years
p3	16-25	Male	Recently stopped	Marijuana	student	2 years
p4	26-35	Male	Recovering	Marijuana	Student	5 years
p5	16-25	Male	Recovering	Marijuana	Unemployed	2 years

p6	16-25	Female	Recovering	crystal meth Broncleer	Self employed	3 years
p7	26-35	Male	Recently stopped	Marijuana	Unemployed	5 years
p8	26-35	Male	Recovering	crystal meth Marijuana	Unemployed	4 years

Figure 4.2.1

The demographic data of primary participants reveal that the research focused on young people who are in substance abuse, 7 of 8 participants were males and only 1 female. The ages of participants were 16-25 years and 26-35 years, which means that both teenagers and young adults suffer from substance abuse in the community. While most of the participants were in the process of recovering from substance abuse, a few had made only recent cessation, which indicates that they had relevant lived experiences to the study. Marijuana and crystal meth, turned out to be the major substances of abuse, though other drugs such as broncleer syrup and nicotine pouches were also mentioned, which reflects the growing drug availability and diversity among young people. Most of the participants were without jobs whereas a few were attending schools and working as self-employed which indicates the possible connection between unemployment, economic difficulties and substance abuse. Duration of substance abuse for some participants was as long as two to five years, which means that for many substance use has become a long-term issue rather than a short-lived behavior. Overall, demographic traits indicate that substance abuse is a widespread problem among young economically vulnerable youths belonging to the most productive age groups.

4.2.2 Demographic information for key informants

Key informant code	**Gender**	**Professional role**	**Number of years in work related to addressing substance abuse**
KI 1	Male	Psychiatric nurse	12 years

KI 2	Female	Social worker	5 years
KI 3	Male	Police officer	18 years

Figure 4.2.2

The demographic information of key informants reveals that the study engaged professionals who are directly linked to handling substance abuse; these include a psychiatric nurse, a social worker, and a police officer. There was a male and female mix of professionals which enriched the study with various views of the issue. The key informants were working for 5-18 years in the field of substance abuse proving their deep practical knowledge and understanding of the issue. Due to their various professional training, the study was enabled to obtain different perspectives such as medical, psychosocial, and law enforcement on youth substance abuse. For instance, the psychiatric nurse shared ideas on drug addiction healing and therapy, the social worker explained social and familial problems whereas the police officer talked about drug offenses and public security. The demographic makeup of key informants enhanced both the reliability and the richness of the study results by including experiences of different sectors fighting substance abuse.

4.3 Psychosocial Factors Contributing to Substance Abuse among Young People in Chipadze.

4.3.1 Peer Pressure and Social Influence

Peer pressure was identified as a significant psychosocial factor that drives young people in Chipadze to substance abuse. Results from both primary participants and key informants showed that many young people first get into drug and substance abuse when they befriend and hang out with peers who consider drug and alcohol use as normal in their social circles. Participants shared that one of the reasons youths get exposed to such risky behaviors like substance abuse is the need to fit in, be accepted and keep their friendships going. Primary participant 2 disclosed that,

"I got into drugs due to peer pressure and it was cool by then"

Then again, Primary participant 3 pointed out that he was also introduced to substance abuse by his peers. Data shows that peer groups are now the main venues where youth develop their identities and ways of life. Young people in Chipadze dedicate most of their time with peers who steer their decision-making and conduct, mainly in places where drugs are readily available and substance abuse is seen as socially acceptable. One of the key informants noted that in many cases

young people try to act like their friends to get accepted or if not they are afraid of being rejected by their peers. This means that substance abuse among the youth is not just an isolated act of a person but a socially influenced behavior that is carried on through friendship networks and community interactions. Some youths have been found to abuse substances even though they know the dangers of substance abuse because they are afraid of being left out or excluded from their social groups. Substance abuse turns out to be a mode of belonging and a way of establishing one's social identity for the youths of the Chipadze community.

The results also revealed that the more a young person interacts and socials with a group of peers that use substances, the higher is the likelihood for the youth to experiment and even become a regular drug user. One key informant pointed out that if in the neighborhood environment there is easy access to drugs and alcohol, then the chances of young people getting involved in substance abuse increase as such behaviors are welcomed and recreated among them. These findings explain how behavior is affected by social interactions within the closest social settings such as peer groups, schools and communities. The findings harmonize with those of Hawkins et al. (2020) and UNODC (2022) who noted that teenagers and youths only try substances because their friends are already using as they consider substance abuse as a normal thing within their social groups. Viner et al. (2019) also maintain that peer pressure works not only through direct encouragement, but also through indirect means that is perceived expectations within the group of friends. These findings indicate that the close contacts of the youth in Chipadze really influence their decisions to abuse substances. The socioecological perspective brings a good explanation to these findings by demonstrating that behavior is influenced by the incessant interaction between individuals and their social environment. On one hand, peer relationships at the interpersonal level cause pressure and expect certain behaviors, while, at the community level, drugs are normalized in social spaces thereby leading to youth substance abuse. Because of this, the findings call for initiatives that tackle substance abuse among young people to not only concentrate on individuals but also on peer networks and community environments that support and normalize substance use behaviors.

4.3.2 Family Dynamics and Exposure to Substance abuse

Family related problems also emerged as significant psychosocial factors contributing to substance abuse among young people in Chipadze. Participants revealed that conflict within families, poor communication neglect lack of supervision and exposure to substance

use at home contributed to their involvement in substance abuse. Primary participant 1 explained that,

> *"Being raised in an environment where drug and substances are easily accessed affected me badly."*

Implying that being exposed to substance abuse in the family setting is the first step towards adopting similar behaviors. One of the informants shared,

> *"Apart from peer pressure, family problems are also one of the main factors that lead to drug abuse."*

Another primary participant remarked that young people who experience conflict, neglect and poor communication within the family tend to turn to substance abuse for escapism. These results suggest that the family environment is extremely important in determining the emotional, behavior and coping capability of the young people. Participants also indicated that some youths use substances as a coping mechanism for dealing with painful family's situations and unstable home environments. In homes where there are insufficient parental oversight and emotional support, young people become more susceptible to going in the wrong direction due to peer and community influences. The finding shows that family drug abuse results to drug abuse becoming part of the lifestyle of the children because they learn drug abuse through observation and interaction with family members.

The study results showed that strong and supportive family ties could effectively be a buffer against substance abuse, whereas dysfunctional family setups tend to increase the susceptibility of youths to substance abuse. One of the key informants pointed out that supporting and communicative families are more likely to shield young people from the temptation of substance abuse. Family conflicts, neglect, and parents' indulgence in substance abuse tend to increase the likelihood of youths demonstrating similar behaviors. Some of the study participants indicated that substance abuse is often a way out of escaping emotional pain resulting from family issues. Such results are consistent with those of Caldern et al. (2021) and WHO (2021) who found that parental neglect, weak parent-child relationships, and lack of supervision much increase the risk of substance abuse among adolescents. In the same way, Moyo and Chikoko (2021) observed that the disintegration of families and weakening of family structures in Zimbabwe have led to

increased vulnerability of young people to substance abuse. These findings suggest that family is one of the most important social environments that have a bearing on the behavior of young people. The socioecological perspective indicates that behavior is the product of various interactions that take place in different environmental systems, mainly within close social relationships such as those in families. At the interpersonal level, family relationships have an impact on emotional wellbeing, behavioral patterns, and coping strategies of youth. When families are not able to provide emotional support, guidance, and positive role models, young people are exposed to the risk of resorting to harmful behaviors like substance abuse. The research results highlight the need to strengthen family relationships, increase parental involvement, and develop supportive home environments that foster positive youth development as strategies for dealing with substance abuse among young people in Chipadze.

4.3.3 Emotional Distress and Trauma

Emotional distress, trauma, and mental health problems were identified as key psychosocial aspects leading to the substance abuse of young people in Chipadze. Youths mentioned that the feelings of loneliness sadness stress trauma emotional pain, low self-esteem and self-doubt are what lead most young people to abuse substances in their search for a viable mechanism to cope. Participant 1 narrated his experience of how trauma and emotional pain are the main causes of substance abuse. Participant 2 also mentioned loneliness as one of the feelings that led him to substance abuse. P4 took it a step further by saying that,

> *"When I felt sadness, stress and loneliness, I looked for something to provide me with a temporary relief from those feelings."*

These results show that a large number of young people in Chipadze merely rely on drugs and alcohol for short-term relief as a way of coping with unresolved emotional pain and psychological distress. Participants disclosed that substance abuse usually starts as an attempt to get away from negative feelings and life circumstances full of stress. Still, even though the use of alcohol and drugs may help someone to forget their problems for a while, the findings suggest that soon they worsen the psychological condition of young people and lead to dependency. The results point to a fact that emotional suffering and mental health problems are main reasons for substance abuse among youths in Chipadze.

The results also reveal that psychological stressors like negative thoughts, low self-esteem and emotional imbalance are major reasons why young people continue to abuse substances. One participant explained that,

> *"Being unable to handle negative thoughts, the feeling of loss of esteem, and self-doubt made it even more difficult for me to maintain emotional balance so I resorted to substance use as a means of temporary escape from those feelings."*

Depression and stress were also pointed out by one key informant as the main psychosocial causes of substance abuse among youths. many young people do not have healthy coping mechanisms or emotional support systems to help them handle stress, trauma, and psychological problems, so drugs become the means through which they manage their emotional pain and distress. These results are in line with Degenhardt et al. (2019) and WHO (2021) who indicated that mental health issues like depression, anxiety, and trauma are tightly linked to substance abuse since people often rely on drugs and alcohol to alleviate their negative emotions and difficult life situations. These results advocate the already established principle that how a person behaves is determined by a combination of his/her personal experiences and environmental conditions. A socioecological approach reveals that emotional health depends on various factors that interact with one another such as family relationships, peer networks, economic conditions, and community support systems. When young people are emotionally distressed in a socially and economically disadvantaged environment, they are at a higher risk of substance abuse as their environment does not offer them the necessary emotional support and protection. The results expose that in reality eliminating substance abuse among youths in Chipadze without addressing the wider emotional and psychological problems of the young people in their families and communities will be ineffective.

4.3.4 Poverty, Unemployment and Difficult Living Conditions

Poverty, unemployment, and difficult living conditions also emerged as major psychosocial factors contributing to substance abuse among young people in Chipadze. Participants revealed that harsh socioeconomic conditions create stress, frustration, hopelessness, and emotional suffering which eventually push many youths into substance abuse as a coping mechanism. Primary participant 1 explained that difficult living conditions caused by poverty contributed to substance abuse. Primary participant 3 also highlighted stress due to unemployment as one of the emotional

experiences that influenced involvement in substance abuse. Furthermore, the participant went on saying,

> *"I have a degree, but look at me now no job, no hope. I'm just walking up and down the streets, just like others who did not even attend school at all."*

These findings indicate that economic hardships within the community have negatively affected the emotional wellbeing and daily lives of young people. Participants revealed that lack of employment opportunities and inability to meet basic needs often create feelings of hopelessness and worthlessness, leading some youths to resort to drugs and alcohol to escape their realities. The findings also demonstrate that poverty increases exposure to risky environments where substance abuse becomes common among unemployed and idle youths.

One key informant stressed further that societal factors like unemployment, poverty, and scarcity of opportunities play a big role in youth drug abuse since most young people get frustrated and hopeless when they keep trying to deal with a harsh economic environment. These results indicate that drug abuse among the youth is deeply linked to the structural and socioeconomic challenges at the community level. These results are consistent with World Bank (2022) and UNODC (2022) that indicated that poverty and lack of jobs are the key drivers of substance abuse as the limited opportunities lead to frustration, hopelessness, and social exclusion of the youth. Moyo and Chikoko (2021) pointed out that the high rate of youth unemployment in Zimbabwe leads to psychological distress and limits the access to positive support systems is exposing the youth to drug abuse. The socio-ecological approach sheds some light on the role of the overall societal and environmental contexts on an individual's behavior. At the community and societal levels poverty unemployment, and lack of opportunities not only are the sources of stress but also increase the youth's susceptibility to substance abuse. The results reveal that drug abuse among the youth in Chipadze should not be considered as an individual problem only but rather a mirror of the broader socioeconomic disparities and community challenges that impact the lives and welfare of the young people.

4.4 Challenges Faced by Community Stakeholders in Addressing Substance Abuse Among Young People

4.4.1 Limited resources, weak coordination and environmental constraints

Community stakeholders consistently highlighted that their efforts to address substance abuse among young people are significantly constrained by a combination of limited resources, weak coordination among implementing actors, and broader environmental conditions that continue to facilitate substance abuse. The findings reveal that even where there are willingness and commitment to intervene, structural limitations at institutional and community level undermine the sustainability and effectiveness of interventions. A social worker clearly captured this reality by stating that, lack of resources, stigma and discrimination made it difficult for stakeholders to address substance abuse effectively and openly.

This describes a scenario where the programs still exist but their effectiveness is drastically reduced by shortages of funding, skilled staff, infrastructure, and operational capacity. Another key informant pointed out that community stakeholders are struggling with complex social problems like lack of coordination among stakeholders, limited resources, negative attitudes within the community, low community awareness, which means that the challenge is a multidimensional problem and not a single sector or institution issue.

The substance abuse intervention is taking place in fragmented systems where different stakeholders work in isolation, often without shared structures, communication channels or coordinated strategies, as what is coming from these sources. This leads to some areas having repeated efforts while others have no services at all, creating uneven intervention coverage. The literature is in line with this as many low and middle-income settings are illustrated as having the chronic shortages of rehabilitation facilities, trained professionals, and community-based prevention structures, which break the care pathways continuity and effectiveness (WHO, 2021; World Bank, 2022; UNODC, 2022). In Zimbabwe, these issues are worsened by the macroeconomic situation, which limits both government and community ability to fund long-term prevention and rehabilitation systems (Moyo & Chikoko, 2021). Using the socio-ecological system, these limitations are at the structural and institutional levels, where the availability of resources and the quality of systems play a direct role in the operation of community and interpersonal interventions, which in turn result in individual recovery outcomes.

4.4.2 Normalization of substance use, accessibility of drugs and community environment

The findings show that normalizing substance use in the community, with making drugs easily reachable, is why for both the continuation of substance use and the struggle of young people in achieving long-term recovery. Participants noted several times that substance use is not only a reality but has become part of the community's social fabric, mostly among friends. One respondent said that being around community members who still use drugs is something that contributes to relapse, while another pointed out that surrounding yourself with people who are still drug users is very tempting and recovering is very difficult.

Respondents also pointed out that the ubiquity of substances makes it even more difficult to resist, suggesting that exposure to drugs, both physically and socially, is also a challenge. This highlights how the respondents viewed sustainable recovery as almost unattainable without changing the environment. The substance use is not just deeply rooted in the social environment but physically as well, where one is exposed all the time and abstinence calls for extraordinary self-control against the influences around. In these cases, peer groups work as strong conditioning agents that make drug use seem normal, downplay the risks, and persuade individuals to either try the drug again or relapse. The literature supports these conclusions, indicating that community instability, alcohol and drug proliferation, as well as ineffective law enforcement, are major factors that increase the risk of drug use among youths, in particular in places where there are no organized recreational offerings (Hawkins et al. 2020; UNODC, 2022). The lack of youth-friendly venues worsens the issue by depriving the young people of alternate means of socializing, this way exposing them more to dangerous surroundings. These events correspond to the community and environmental levels of influence within the socioecological structure. Norms availability, and patterns of social interaction directly affect individual behavior, decisions, and recovery paths.

4.4.3 Hopelessness among youths

A social worker noted that, many young people are losing hope about their future due to unemployment and poverty and continue turning to drugs and substances as a coping mechanism. This reflects a broader structural reality in which economic exclusion becomes a key driver of psychological vulnerability and behavioural risk. Rather than being an isolated personal failing, substance abuse is positioned as a response to prolonged exposure to deprivation, uncertainty, and limited life opportunities.

Another key informant pointed out that economic problems like poverty and unemployment holding back prevention and rehabilitation efforts were a major contributor to the substance abuse problem formulation. It looks like economic hardship not only causes substance abuse but also makes recovery difficult as it reduces access to support systems and alternative livelihoods. Youth who have no source of income or education are very likely to fall into substance abuse cases and at the same time, they will have an increase in frustration and psychological distress. Literature has shown clearly how socioeconomic disadvantage often means substance abuse through such factors as stress, marginalization and limited access to protective social networks (World Bank, 2022; UNODC, 2022). In the socioecological model, this challenge is seen as a structural one where economic systems and labor market conditions influence individual behavior by restricting opportunities for meaningful engagement and recovery.

4.4.4 Lack of Knowledge, Stigma and Inadequate Psychosocial Support Systems

The study also identified inadequate knowledge among stakeholders, persistent stigma, and weak psychosocial support systems as key barriers to effective substance abuse intervention. A police officer highlighted that,

> *"There is lack of knowledge on drugs and substance abuse which limits the capacity of enforcement and community actors to identify early signs of substance use and respond appropriately."*

This knowledge gap reflects broader systemic weaknesses in training and capacity-building initiatives, which leaves many stakeholders ill-equipped to deal with the complexity of substance-related challenges.

In addition, key informants pointed to strong stigma and negative community attitudes noting low community awareness, education, and negative attitudes within the community. These attitudes contribute to silence, concealment, and delayed help-seeking among affected individuals, thereby worsening outcomes. One primary participant expressed unmet emotional needs including more consistent emotional and psychological support, therapy saying,

> *"I need someone to talk to and I also want to be accepted by the community and the family members as well to encourage me giving me hope in this life which seem dull to me."*

These responses highlight a significant gap in psychosocial care systems within the community context. Several studies have been conducted which show that stigma and lack of skills among the stakeholders are major obstacles for early intervention and also lead to the ineffectiveness of community responses, as people suffering from substance abuse, instead of being supported, are more often judged (WHO, 2021; Caldern et al. 2021). As a result, young people end up withdrawing themselves from the support systems and keep on abusing substances alone. When talking about the socioecological structure, these problems are at the interpersonal and community levels, where the influence of relationships, attitudes, and perceptions is so direct that they determine the person's behavior in seeking help, the support for recovery, and the ability for the long-term reintegration.

4.4.5 Weak Coordination among Stakeholders and Fragmented Interventions

The findings further reveal that weak coordination among community stakeholders is a major barrier to effective substance abuse intervention, resulting in fragmented and inconsistent service delivery. Participants indicated that various actors including health workers, law enforcement, schools, and community leaders often operate independently without structured collaboration mechanisms. A key informant emphasized that, lack of coordination among stakeholders which results in duplication of efforts in some areas while leaving gaps in others.

This lack of integration significantly reduces the overall impact of interventions, as services are not aligned or reinforced across different levels of community engagement. What this essentially indicates in real terms is that prevention programs established in one location are not continuously backed up in other places, and even those who receive treatment may find that their care is interrupted while living in the community. The problem of substance abuse is so complicated and involves so many sectors, the literature indicates that it needs a coordinated response from different institutions. If there is weak collaboration, then both the efficiency and effectiveness of interventions will be compromised (WHO, 2021; UNODC, 2022). Looking at it through a socioecological lens, it is the failures of system-level interaction that result in institutional fragmentation weakening the connections between structural support and individual-level outcomes, and as a consequence, the overall effectiveness of community responses is diminished.

4.5 Strategies for Strengthening Community Services to Address Substance Abuse Among Young People

4.5.1 Community Development that is Youth Friendly

Participants have pointed out that communities need to come up with youth-friendly programs and environments that will enable young people to be directly involved in prevention and intervention initiatives. One participant stressed that communities should be introducing outreach programs, exposure and youth-friendly community development (Community development that is attractive to young people). Another participant was of the opinion that there should be community centers with mentorship programs, training centers where young people can be occupied and professional centers for youth should be opened. The participants' views in these results reveal that they link the absence of youth-centered programs and supportive environments with young people's substance abuse in Chipadze.

The results show that the youth need a secure and supportive environment where they can get counseling mentorship psychosocial support, and recreational activities. The participants consider the youth-friendly community structures as a key thing in lessening the problem of idleness, encouraging positive peer interaction, and empowering young people with life skills that may be a deterrent to substance abuse. The focus on outreach programs also reflects the necessity of community interventions that engage young people in their social settings, rather than waiting for them to seek help independently.

The results relate well to the studies in chapter two of the literature, which are proving community-based programs targeting young people are more effective when these are participatory, and youth-centered. Hawkins et al. (2020) advocate that youth mentorship programs, recreational activities, and life skills development initiatives constitute major components in the prevention of risky behaviors like substance abuse. The World Health Organization (2021) observed that prevention programs achieve better sustainability when communities create environments that support healthy behavior among young people. Youth-friendly community development initiatives can be a very useful avenue for strengthening protective factors against substance abuse.

The results can be interpreted by using the socioecological theory that states behavior is a result of an individual's interaction with his/her social environment. At the community level, lack of social

support structures could bring increased young people's susceptibility to substance abuse but, positive community environments may encourage healthy behavior. That's why, youth-friendly community development initiatives could reduce substance abuse not only by fortifying social support systems but also by generating opportunities for young people that are positive in nature.

4.5.2 Awareness and Educational Programmes

Participants emphasized the importance of awareness and educational programs in strengthening community responses to substance abuse. One primary participant stated that, there should be more awareness and education programs in schools and communities that teach young people about the dangers of substance abuse. Another key actor called attention to the need for community leaders to be educated and raise awareness. These results imply that participants think that lack of knowledge and limited awareness are factors causing the increase of drug abuse among youth.

The results are evidence that awareness campaigns are a possible means of educating young people and their surroundings about the harmful effects of substance abusing. The results also point out that schools, family members and community leaders should be engaged in the prevention activities. The participants' main idea seemed to be that if communities are made aware of the risks of substance abuse, then they will probably get involved in the prevention actions and also support the individuals that are affected.

These results align well with the literature that was reviewed which for one thing mentions that prevention programs prioritizing awareness raising and community education are proven to be effective in reducing substance abuse among young people and but the United Nations Office on Drugs and Crime (2022) stresses that community awareness campaigns increase understanding of substance abuse issues and lead to early intervention. Along the same lines, WHO (2021) reminds us that educational programs in schools and communities assist young people in forming educated attitudes and in gaining skills that help them make the right decisions on substance use.

Based on the socioecological theory, awareness and educational programs are able to change the attitudes, beliefs, and behaviors of the social environment by working on interpersonal, community, and societal levels. That's why, the young people's behavior may be influenced by community leaders, teachers, and parents who send the message that drug use is wrong and encourage positive social behavior. In this way, the evidence presented here highlights the

significance of working together on awareness programs to prevent substance abuse among young people.

4.5.3 Economic Empowerment and Employment Opportunities

The study established that participants viewed unemployment and lack of economic opportunities as major contributors to substance abuse among young people. One primary participant stated that

> *"People need jobs and activities that keep us away from drugs."*

and further explained that

> *"Most of my friends I do drugs with are educated and I personally have a master's degree but I do not have a job."*

Another primary participant emphasized the need for youth empowerment from the government. These findings reveal that participants associated substance abuse with frustration, hopelessness and economic hardships experienced by young people within the community.

The findings show that unemployment impacts not only uneducated young people but also educated ones who, even with their qualifications, do not get the chance to work. The respondents indicated that, being idle and without any meaningful engagement can lead young people to be more prone to substance abuse. The answers also imply that some youths might resort to drug and substance abuse to deal with the stress, disappointment, and feelings of social exclusion that come with being unemployed.

These results echo what was found in the literature reviewed. Poverty, unemployment, and social inequality were major factors that led to substance abuse among the youth. Caldern et al. (2021) does point out that youth who face socioeconomic hardships get stressed and despair, and because of this, engaging in substance abuse is a way for them to escape. WHO (2021), has pointed out that youth programs and skills training maybe one of the ways to address the issue of substance abuse as it would give them economic engagement and boost their self -esteem.

Based on socioecological theory, behavior is influenced by a combination of social and economic conditions. From the angle of a society, lack of employment and poverty can be blamed for the kind of environments that are vulnerable to drug use. In that case, adding more strength to

initiatives of economic empowerment, creation of jobs, and youth development programs may be the way to go in reducing substance abuse among the youth in Chipadze.

4.5.4 Professional Support Services and Rehabilitation

Participants emphasized the importance of strengthening professional support services within communities. Responses included the need for trained personnel, therapists, and professional centers for youth. Another primary participant stated that, substance abuse is a health issue rather than an offence. These findings suggest that participants viewed substance abuse as a health and psychosocial issue requiring professional intervention and rehabilitation support.

Participants' feedback pointed out that current community services are falling short in meeting the wide-ranging needs of substance abuse individuals. The call for specialists and staffs who can offer therapies suggests that the communities might be missing the professional counseling, rehabilitation, and psychosocial support skills. The primary participants underlined the value of safe rehabilitation facilities free from the fear of stigma or discrimination as conducive to recovery.

The findings resonated with the literature that calls for substance abuse interventions to have trained staff, rehabilitation service, and well-integrated mental health support system. For instance, Degenhardt et al. (2019) have revealed that if one strengthens rehabilitation facilities, it will lead to more recovery in substance abuse victims. Along the same lines, UNODC (2022) indicated that community-based rehabilitation programs achieve better results if they offer a combination of psychosocial support, counseling, and reintegration services.

The results also relate to the socioecological theory which advocates for intervention at different levels such as individual family community, and supportive institutions. Professional rehabilitation services could be a great tool for recovery as they would be addressing psychological, social, and environmental issues that lead to drug abuse.

4.5.5 Strengthening Law Enforcement and Drug Control Systems

Participants also raised the point that drug control systems and law enforcement inside communities need to be ramped up. One informant mentioned that drug-related problems could be reported to the police, while a primary participant 7 stressed the importance of stopping the source of drugs before they reach the community. What just said points that participants associated the

availability of drugs and the enforcement system which is not functioning well as being the major aspects that lead to drug abuse among youths.

The findings indicate that participants recognized that communities, by themselves, would not be able to deal with effectively substance abuse without the participation of law enforcement agencies and government structures. The deregulation and poor supervision of drug distribution networks tend to increase the presence of illegal drugs in communities, exposing young people to substance abuse.

These findings match closely to spotlight that poor drug control policies and lack of coordination in drug control between institutions also contribute to the increased presence of drugs in communities. UNODC (2022) pointed out that substance abuse prevention efforts can be effective through the collaboration of communities, health institutions and law enforcement agencies. The findings confirm that handling the problem of drug abuse will necessitate multi-sectoral and inter-sectoral coordinated efforts.

Socioecological theory, societal structures and policy environments also have a bearing on individual behavior. In this case, poorly regulated systems may produce circumstances that lead to substance abuse while heavy police presence, and good policy implementation may lower drug availability and substance abuse among youths.

4.6 Chapter Summary

This chapter presented, analyzed and discussed on the research results about substance abuse among youth in Chipadze. The results showed that peer pressure, problems within the family, emotional suffering, poverty, and lack of job opportunities are the main psychosocial factors that lead young people to abuse drugs. Also, the chapter found out that community stakeholders encounter problems like scarcity of resources stigma poor coordination, and lack of support systems when trying to deal with drug abuse. The respondents pointed out youth-friendly programs, awareness campaigns, economic empowerment, professional rehabilitation services and strengthened law enforcement as the most significant elements to leverage community responses towards drug abuse. The results were analyzed and discussed with the existing literature and the socioecological theory was used as the theoretical system.

5 CHAPTER 5: SUMMARY, CONCLUSION AND RECOMMENDATIONS

5.1 Introduction

This chapter is a summary of the whole research work, draws some conclusions from the results, recommendations, and implications for social work practice, and finally presents a proposed model for empowering communities to effectively combat substance abuse among young people. The chapter mainly relies on the findings reviewed in chapters one up to four and presents a brief overview of the major issues that were revealed by the research. It identifies the significant psychosocial factors that lead to substance abuse among the youth of Chipadze, the difficulties that community stakeholders encounter in tackling the problem, and the ways that the community response can be strengthened. The chapter outlines the conclusions, recommendations for future research. In the last, it introduces a community capacitation model that the research has uncovered and which follows the principles of the socioecological theory.

5.2 Summary of Findings

The research looked into substance abuse among young people in Chipadze and targeted identifying the psychosocial factors that lead to substance abuse among young people. It also studied the difficulties community stakeholders have in combating drug and substance abuse among young people and came up with possible intervention strategies within the community. The literature review showed that elements such as peer pressure unemployment family influence, emotional stress and drug exposure are the main factors leading to substance abuse among youth. A qualitative research method was implemented to obtain data from in substance abuse who have been identified through the snowball sampling technique and purposive sampling technique was used for community stakeholders who are actively involved in addressing substance abuse. Due to the discomfort of the primary participants in group discussions, individual in-depth interviews were the only option. Key informants were interviewed using semi-structured questions. As the results, substance abuse causes young people, families, and communities to suffer social psychological economic, and health consequences at the same time. The research also showed that community stakeholders encounter problems such as lack of resources stigma lack of rehabilitation services and poor coordination when they are trying to combat substance abuse. The community has to be strengthened through measures like community empowerment, job creation, vocational

training, awareness campaigns, psychological support, rehabilitation programs and stakeholder collaboration to be able to deal with substance abuse among young people effectively.

5.3 Psychosocial drivers of substance abuse among young people in Chipadze, Bindura

Data from the field cannot deny that the life of the youth in dense urban areas is really a cause of concern. Substance abuse emerges as one of the symptoms of a triple set of problems including peer-group influence, family break-up, and unassisted emotional wounds. Among the most shocking revelations was the extent to which hindrance of ambition psychologically hurts a person. One of the participants pointed out that the problem even affects those with the highest qualifications like master's degrees, whose economic situation remains unchanged. When one's academic success does not lead to a better social status, the consequent feeling of being a failure is a perfect situation for turning to drugs. At the same time, in Chipadze, drugs like mutoriro (Crystal Meth), besides their recreational use, have a purpose, though it's a harmful one, of time compression for the idle as well as the numbing of the deep pain of an existence with no prospects. This acts as a proof of the socioecological theory, demonstrating how failures at the level of macro-economics (Exosystem) can have a very direct effect on the psychological condition (Ontogenic level) of the individual.

5.3.1 Stakeholder Challenges in addressing substance abuse in Chipadze, Bindura

The psychiatric nurse, social worker, and police officer's interviews unravel a picture of an overworked, understaffed professional environment. The results suggest that the main issue is the absence of inter-professional collaboration. The Zimbabwe Republic Police (ZRP) mainly see drug abuse as a criminal issue and focus on the supply side, whereas health workers see it as a disease needing medical treatment. Importantly, these two areas hardly meet in a joint way. Also, the drug trade's becoming a part of daily life in Chipadze is a very difficult situation since some dealers have turned into informal social welfare providers by giving small loans and jobs to some community members who, in turn, become dependent on them and even view them as helpful. This economic involvement makes the conventional community policing approach fail to be effective without a strategy that tackles poverty at its root, which is the situation exploited by the dealers.

5.3.2 The Proposed Intervention Model

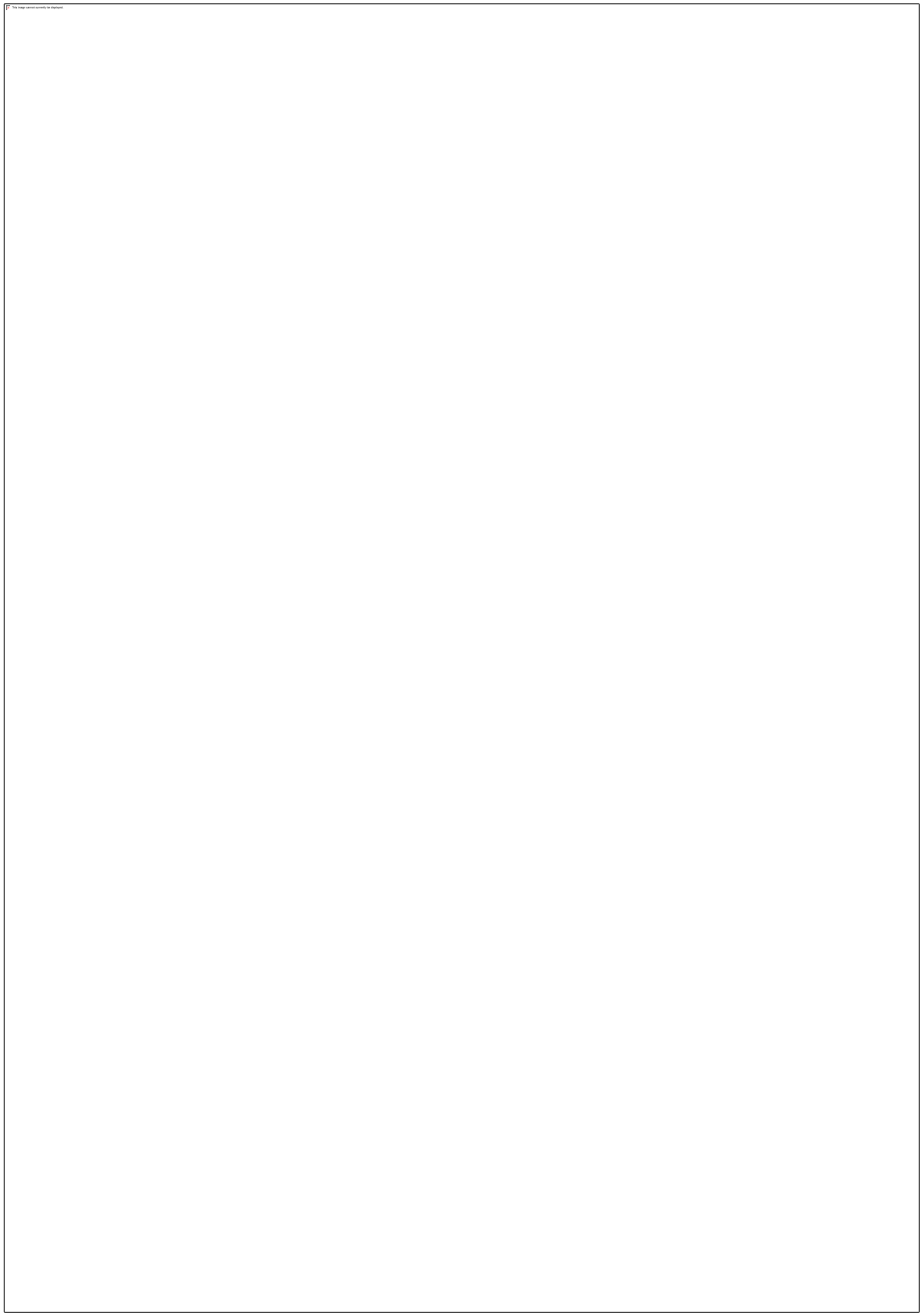


Figure 5.3.2: The Proposed Intervention Model

5.4 Conclusions

The study reveals that youth substance abuse in Chipadze goes deeply beyond mere personal decisions. It involves a host of suffering psychosocial issues that lead to substance abuse. The data indicate very clearly that it is a mix of very strong peer pressure, violent or indifferent parental figures, and serious mental breakdowns that drive the youth to the use of drugs like marijuana and crystal meth. With absolutely no jobs around, even the educated young ones end up in a state of mental idleness and despair, so getting involved in substance abuse which is just a temporary escape from their economic problems. This is exactly what the findings indicate as per Bronfenbrenner's socioecological theory and also reflect the stance of researchers Degenhardt et al. (2019) and Moyo and Chikoko (2021) who say that youth exposure to addiction is influenced by peer groups, broken family situations, and socio-economic factors at large.

When it comes to the fight against this problem, the study finds that the community stakeholders are still struggling with major structural and social barriers so that the grassroots interventions remain scattered and hardly effective. On one hand, community stakeholders such as social workers, healthcare officers and police are more than willing to get involved, but lack of finances, shortage of proper training and no coordination at all among departments are the main reasons that make them helpless. Drug and substance availability is so common in the area that it has almost become the norm and this, coupled with drug addicts being shunned by the community, forces the affected families to hide the problem in silence rather than seeking the early intervention. These results back up the text of WHO (2021) and Hawkins et al. (2020) that show how low-resource communities are continuously challenged in keeping up with the prevention or rehabilitation programs when individuals work in isolation and also pale in comparison about infrastructure.

In the end, the paper finalizes that totally dealing with youth substance abuse is easier said than done with top-down, reactive measures. Rather, it should be a context-specific and community-driven capacity-building model that will uplift the community that has been targeted for a long time. Empowering the community to establish youth-friendly spaces with active mentorship, conducting unified school-and-neighborhood awareness campaigns, creating real job or skills training opportunities, and professionalizing local therapy services to compensate while new supply controls are strictly enforced are all aspects that must be changed if the community is to experience success over a long period of time. When these multi-level strategies are combined, the

suggested model successfully links the high-level policies with the day-to-day, grassroots realities of the people of Chipadze. This ending idea is in line with the recommendations of the United Nations Office on Drugs and Crime (2022) and Caldern et al. (2021) which stress that effective substance abuse intervention relies completely on local ownership, multi-stakeholder collaboration, and customized approaches that are based on the lived experiences of the community.

5.5 Areas for Future Research

Future academic research should explore how encrypted social media platforms facilitate drug dealing in small urban centers. Special research on female drug users in Zimbabwean high-density suburbs should be conducted to highlight the intersection of motherhood, domestic violence and substance use. Evaluation of the potential of converting drug dealers into informal business through micro-finance.

5.6 Recommendations

5.6.1 To the Bindura City Council and Local Government

Establishment of Productive Hub, transition underutilized community halls into maker spaces or vocational incubators. These hubs should focus on 21st-century skills (digital marketing, sustainable urban farming, and artisanal crafts), ensuring that youth are occupied during the high-risk window of 08:00 to 16:00. Environmental Design for Crime Prevention implement safe zone mapping to reclaim drug hotspots. This involves physical upgrades such as solar street lighting, the installation of outdoor gyms, and the clearing of overgrown lots to remove the physical cover that dealers rely on.

5.6.2 To the Ministry of Health and Child Care

Decentralize psychiatric care by establishing a Low-Threshold Drop-in Centre within the suburb. This removes the institutional barrier of hospitals, providing a neutral ground for confidential counselling and referral. Peer-Led Recovery Navigators: Set up a program that formally trains long-term recovering persons as peer navigators for leading recovery circles. In the same way that professional staff are sometimes regarded as lacking, their first-hand knowledge gives them an authenticity that is very effective for reaching current drug users.

5.6.3 To Law Enforcement (ZRP Bindura)

Development of a localized, highly confidential reporting system that bypasses the fear of dealer retaliation. Restorative Justice Dialogues: Transform the current approach so that small-time drug users are removed from the criminal justice system and channeled into the Chipadze Help Desk for treatment, and at the same time all police efforts are focused on dismantling the highest level drug cartel syndicates.

5.6.4 To the Chipadze Community and Families

Revitalize the extended family watch-system by training neighbours to recognize the early warning signs of withdrawal or behavioural shifts, the community can intervene before addiction becomes entrenched. Local religious and educational institutions must integrate substance abuse literacy into their programs to dismantle the myths around substance abuse.

5.7 Implications for Social Work Practice

This research is an important warning prompt for the social work profession in Zimbabwe to go back to Community Organization which is their origin. It reveals that clinical, micro-level interventions cannot be the only solution for systemic crises. Social workers should be changing into macro-practitioners community-level policy advocates, economic youth facilitators and even family clinicians. A contextualized social work that sees the joining point of post-colonial poverty, mental health, and urban design is what the results call for.

5.8 Chapter Summary

To sum up, the research reveals that though the people of Chipadze are resilient in their fight against substance abuse, the lack of coordination and resources is currently limiting them. Through the community capacitation and integration model which puts economic hope, interprofessional harmony and environmental change at the forefront, the community can stop seeing itself as a victim and start one of healing. The fight with substance abuse in Bindura cannot be won by a single person, it is the people of Chipadze who through their streets, homes and collective will win.

References

African Union Commission. (2020). *Continental epidemiological report on drug use and health in Africa*. African Union Commission.

African Union Commission. (2020). *Continental epidemiological report on drug use and health in Africa*. African Union Commission.

Babbie, E., & Mouton, J. (2013). *The practice of social research* (South African ed.). Oxford University Press Southern Africa.

Babbie, E., & Mouton, J. (2013). *The practice of social research* (South African ed.). Oxford University Press Southern Africa.

Baxter, P., & Jack, S. (2008). Qualitative case study methodology: Study design and implementation for novice researchers. *The Qualitative Report, 13*(4), 544–559. https://doi.org/10.46743/2160-3715/2008.1573

Baxter, P., & Jack, S. (2008). Qualitative case study methodology: Study design and implementation for novice researchers. *The Qualitative Report, 13*(4), 544–559. https://doi.org/10.46743/2160-3715/2008.1573

Braun, V., & Clarke, V. (2021). *Thematic analysis: A practical guide*. SAGE Publications.

Braun, V., & Clarke, V. (2021). *Thematic analysis: A practical guide*. SAGE Publications.

Calderón, R., Santos, J., & Gomez, M. (2021). Community-based risk and protective factors in adolescent substance use. *Journal of Community Psychology, 49*(3), 215–230. https://doi.org/10.1002/jcop.22451

Calderón, R., Santos, J., & Gomez, M. (2021). Community-based risk and protective factors in adolescent substance use. *Journal of Community Psychology, 49*(3), 215–230. https://doi.org/10.1002/jcop.22451

Creswell, J. W. (2021). *Steps in conducting a qualitative research study* (5th ed.). SAGE Publications.

Creswell, J. W. (2021). *Steps in conducting a qualitative research study* (5th ed.). SAGE Publications.

Creswell, J. W., & Creswell, J. D. (2018). *Research design: Qualitative, quantitative, and mixed methods approaches* (5th ed.). SAGE Publications.

Creswell, J. W., & Creswell, J. D. (2018). *Research design: Qualitative, quantitative, and mixed methods approaches* (5th ed.). SAGE Publications.

Creswell, J. W., & Poth, C. N. (2018). *Qualitative inquiry and research design: Choosing among five approaches* (4th ed.). SAGE Publications.

Creswell, J. W., & Poth, C. N. (2018). *Qualitative inquiry and research design: Choosing among five approaches* (4th ed.). SAGE Publications.

Degenhardt, L., Stockings, E., Patton, G., Hall, W. D., & Lynskey, M. T. (2019). The epidemiology of adolescent substance use and its outcomes. *The Lancet Child & Adolescent Health*, *3*(4), 251–264. https://doi.org/10.1016/S2352-4642(19)30007-5

Degenhardt, L., Stockings, E., Patton, G., Hall, W. D., & Lynskey, M. T. (2019). The epidemiology of adolescent substance use and its outcomes. *The Lancet Child & Adolescent Health*, *3*(4), 251–264. https://doi.org/10.1016/S2352-4642(19)30007-5

Delanty, G. (2018). *Community* (3rd ed.). Routledge.

Delanty, G. (2018). *Community* (3rd ed.). Routledge.

Denzin, N. K., & Lincoln, Y. S. (Eds.). (2018). *The SAGE handbook of qualitative research* (5th ed.). SAGE Publications.

Denzin, N. K., & Lincoln, Y. S. (Eds.). (2018). *The SAGE handbook of qualitative research* (5th ed.). SAGE Publications.

Etikan, I., Musa, S. A., & Alkassim, R. S. (2016). Comparison of convenience sampling and purposive sampling. *American Journal of Theoretical and Applied Statistics, 5*(1), 1–4. https://doi.org/10.11648/j.ajtas.20160501.11

Etikan, I., Musa, S. A., & Alkassim, R. S. (2016). Comparison of convenience sampling and purposive sampling. *American Journal of Theoretical and Applied Statistics, 5*(1), 1–4. https://doi.org/10.11648/j.ajtas.20160501.11

APPENDIX 1

INTERVIEW GUIDE FOR PRIMARY PARTICIPANTS

Informed Consent Form

Title of Study

A Model Capacitating Communities to Effectively Address Substance Abuse in the Zimbabwean Context: The Case of Chipadze, Bindura.

Researcher: Elizabeth Ngwenya

Purpose of the Study:

This study seeks to explore the capacity of communities to address substance abuse in Zimbabwe, using Chipadze as a case study, in order to develop a model that can strengthen community services.

Voluntary Participation:

Your participation in this study is voluntary. You may withdraw at any time without penalty or negative consequences.

Procedures:

You will be asked to participate in a one-on-one interview lasting approximately 7–10 minutes. With your permission, the interview will be recorded.

Confidentiality:

Your identity will be kept confidential. Pseudonyms will be used in the report, and all recordings will be stored securely.

Risks and Benefits:

There are no anticipated risks. Your participation may help improve community services and support sustainable recovery for youth affected by substance abuse in Zimbabwe.

Consent Statement:

I have read and understood the information above. I voluntarily agree to participate in this study.

In-depth interview guide for Primary participants (Youth recovering from substance abuse)

SECTION A: Demographic information

QUESTION	RESPONSE			
Age range	16-25 years		26-35 years	
Gender	Male		Female	
Area of residence				
Current status	Recovering		Recently stopped	
Type of substance(s) previously used				
Current occupation				
Duration of substance abuse				

SECTION B: Psychosocial Factors Contributing to Substance Use

1. How have social factors influenced your decision to abuse substances?

   _____

   _____

2. In your opinion, what emotional experiences influenced your decision to substance abuse?

   _____

   _____

3. In your own opinion, what psychological stressors contributed to your decision of substance abuse?

   _____

   _____

SECTION C: Challenges Faced in Overcoming Substance Abuse in the Community of Chipadze

1. In your opinion, what are the challenges do you face as you try to overcome substance abuse within your community?

   _____

   _____

2. How do these challenges affect your recovery process?

   _____

   _____

3. What kind of support do feel you need for your recovery but you are not currently receiving it?

   _____

   _____

SECTION D: Strategies for strengthening community services to effectively address substance abuse recovery among youth in Zimbabwe

1. In your opinion, what improvements do you think community should make to better address substance abuse among young people?

   _____

   _____

2. In your own opinion, what resources should communities have to improve their services in addressing substance abuse?

   _____

   _____

3. What type of support do you think is needed in your community to effectively address substance abuse among young people?

   _____

   _____

4. Is there anything else you would like to share about your experience with substance abuse or community services?

   _____

   _____

   _____

   _____

   _____

Thank you for your participation to this study

APPENDIX 2

INFORMED CONSENT FORM

Title of Study

A Model Capacitating Communities to Effectively Address Substance Abuse in the Zimbabwean Context: The Case of Chipadze, Bindura.

Researcher: Elizabeth Ngwenya

Purpose of the Study:

This study seeks to explore the capacity of communities to address substance abuse in Zimbabwe, using Chipadze as a case study, in order to develop a model that can strengthen community services.

Voluntary Participation:

Your participation in this study is voluntary. You may withdraw at any time without penalty or negative consequences.

Procedures:

You will be asked to participate in a one-on-one interview lasting approximately 7–10 minutes. With your permission, the interview will be recorded.

Confidentiality:

Your identity will be kept confidential. Pseudonyms will be used in the report, and all recordings will be stored securely.

Risks and Benefits:

There are no anticipated risks. Your participation may help improve community services and support sustainable recovery for youth affected by substance abuse in Zimbabwe.

Consent Statement:

I have read and understood the information above. I voluntarily agree to participate in this study.

Semi-Structured Interview Guide for Key Informants (community stakeholders)

SECTION A: Demographic

QUESTION	RESPONSE
Date	
Gender	
Professional role	
Number of years involved in work related to addressing substance abuse among young people	

Section B: Psychosocial Factors Contributing to Substance Abuse Among Youth

1. In your opinion, what are the psychosocial factors contributing to substance abuse among youth?

   _____

   _____

2. How do social relationships influence youth substance abuse?

   _____

   _____

3. How do societal pressures influence youth substance abuse?

   _____

   _____

Section C: Challenges Faced by community stakeholders in in addressing substance abuse among young people

1. How do you perceive the challenges the community stakeholders face in providing effective treatment of substance abuse among youth?

   _____

   _____

2. What community related challenges are there in addressing substance abuse among young people in Chipadze?

   _____

   _____

3. In your opinion, how do these challenges affect the efforts to address substance abuse among young people in the community of Chapidze?

_____

_____

_____

_____

Section D: Strategies for strengthening community services

1. In your own opinion, what changes do you think are needed to strengthen the capacity of community to address substance abuse?

_____

_____

2. In your own opinion what should an ideal community model include to effectively address substance abuse?

_____

_____

3. What changes do you think are needed to strengthen the capacity of communities to address substance abuse?

_____

_____

4. In your own view, what policy improvements are needed to strengthen community services to effectively address substance abuse among the youth?

_____

_____

5. Is there anything else you'd like to add regarding substance abuse among the youth?

_____

_____

Thank you for your participation

APPENDIX 3

Approval to conduct research

