

SUBSTANCE USE IN SOUTHERN AFRICA

Knowledge, Attitudes, Practices and Opportunities for Intervention



As part of the United Nations International Drug Control Programme (UNDCP) and the World Health Organization (WHO) project on the Global Initiative on Primary Prevention of Substance Abuse, baseline assessments were conducted during 2001 in participating sites in South Africa, the United Republic of Tanzania and Zambia. The assessments examined the status of substance use, the resources in the community and interventions that could be used to address the problem. The findings from the assessments show that substance use was common in all sites, with alcohol, tobacco and painkillers being the commonest substances. However, the range of substances was wide and included substances taken by injection. Use was particularly widespread in settings where trade in substances offered a means of survival and where commitment and institutional resources for preventing substance use were limited. The social circles within which young people lived also promoted substance use. These were characterized by the availability of substances, substance use by older persons and peers, and general approval by the community of the use of alcohol, tobacco and sometimes cannabis. Young people reported taking substances at places where there was little censure, such as in taverns, secluded places and in the company of friends. These findings suggest the need for interventions that give equal weight to (a) supply and demand reduction (b) target young people as well as their peers and seniors (c) improve young people's living conditions and (d) ensure that community members including young people, participate in preventive action.



Substance Use in Southern Africa

Knowledge, Attitudes, Practices and Opportunities for Intervention

Summary of baseline assessments in the Republic of South Africa, the United Republic of Tanzania and the Republic of Zambia

WHO/UNDCP Global Initiative on Primary Prevention of Substance Abuse "Global Initiative"





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FOREWORD

Due to the rapid pace of change in the economic and social sphere and prevailing political instability in many African countries, alcohol and other psychoactive substance use and related problems are becoming major public health concerns. Research indicates that substance use begins in youth, that it can be prevented and that various prevention programmes exist. However, there are gaps in knowledge about the applicability of these programmes to the African context.

The World Health Organization African Regional Office (WHO/AFRO) is pleased to have three countries in Southern Africa involved in the WHO/UNDCP Global Initiative on Primary Prevention of Substance Abuse. The initiative aims at developing model community-based projects. As an evidence-based approach to the implementation of projects at local level is essential, we opted for situation assessments to create information for use in prevention efforts.

This document summarizes the baseline assessments in the three countries that are participating in the project. A local research institution conducted the assessment of the pre-intervention conditions in each country. This baseline assessment will be compared with the post-intervention assessment in order to evaluate the effects of the interventions.

This publication points to the need for a comprehensive approach to primary prevention of substance use. It is also an important step towards documenting activities of the initiative in the three countries involved. In addition it provides a sound empirical basis for policy and programme development in the participating countries.

It is hoped that this document will assist in raising awareness about not only substance use among youth, but also the importance of multilevel assessments of the local situation before interventions are developed and implemented.

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PREFACE

In 1997, the World Health Organization (WHO) and United Nations International Drug Control Programme (UNDCP) jointly initiated a project on the primary prevention of substance abuse among young people with a view to mobilizing communities for prevention work and developing model projects for adaptation or replication wherever feasible. Problems related to substance use among young people are linked to and often precipitated by adverse socioeconomic factors. Thus, in many developing countries prevention services are limited, in particular at the point of first contact with health care providers. The major constraints are lack of trained personnel, lack of information on effective strategies for prevention and lack of successful programmes that can be replicated. To date, most information on primary prevention projects and their cost effectiveness comes from developed countries. However, as they have been devised for different cultural conditions, the effective interventions cannot adequately be replicated in developing countries.

Through the WHO/UNDCP Global Initiative local partners in the Republic of South Africa, the United Republic of Tanzania and the Republic of Zambia are receiving support on planning and implementing evidence-based prevention strategies. The foundation of good primary prevention initiatives depends on a well thought out strategic project plan with monitoring and evaluation components. The baseline assessments carried out by local research institutions at two sites in each participating country provide reference points for impact assessments.

To permit easier access to information for a broad reader audience, only summaries of the findings are presented. However, detailed research information can be obtained at the project web-site cited in this document. It is my sincere hope that the information presented in this document can contribute towards greater awareness and a more efficient response to the problem of substance use among young people in Africa.

Finally, this project prides itself in sound collaborative efforts among all key players, namely the Government of Norway (the funding agent), the WHO and UNDCP headquarters and regional and country offices, local research institutions, non-governmental organizations (NGOs) and other United Nations (UN) agencies.

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