

The Friendship Bench: Grassroots intervention and the opioid crisis in Zimbabwe

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Background



- Drug abuse is increasingly becoming the leading cause of mental illnesses, death, unproductivity, and the disintegration of families



- Illicit drug use among adolescents is correlated with poor academic performance and may be a risk factor for unsafe sexual practices



- In low-income countries such as Zimbabwe, over 90 percent of people don't have access to evidence-based talking therapies or modern antidepressants.



- 57 % of all admissions to psychiatric institutions were attributed to substance abuse, with over 80 % of these admissions being between the age of 16 to 40



- In Zimbabwe, there are only 14 clinical psychiatrists. for a population of 14 million people

Methodology



- Due to the COVID-19 pandemic, my research was conducted remotely using primary and secondary scholarly databases

Research Findings



- The Friendship Bench uses a task-sharing approach to deliver mental health services to remote communities by training lay health workers to recognize mental illness..



- Numerous studies support the efficacy of cognitive behavioural therapy (CBT) for the treatment of alcohol and drug use disorders

Conclusions

- Recovery outcomes are modulated by several factors, including the legality of substances, the intensity of substance abuse, and societal perceptions.
- The zero-tolerance policy to drug abuse in Zimbabwe deters young people from seeking help
- The harsh socioeconomic realities of the Zimbabwean context provided an essential perspective for exploring sustained sobriety and life change processes in a different context from those from which much of the research on the recovery from substance abuse originates.
- Policy changes are imperative in supporting sustained recovery from drug abuse

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