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### CRISIS, IDENTITY, AND INTOXICATION: YOUTH DRUG ABUSE AND SOCIO-ECONOMIC MARGINALIZATION IN POST-2000S ZIMBABWE

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### **ABSTRACT**

Drug and substance abuse among Zimbabwean youth in the post-2000 era has reached an alarming crisis level. This study aims to examine emerging trends in substance abuse practices among young people and to evaluate the effectiveness of existing intervention measures. Using a documentary survey method that draws on policy reports, media sources, and public records, the study investigates the strong link between acute socio-economic marginalization and the rise of increasingly creative yet hazardous substance consumption practices. Key findings indicate that while cannabis remains the most commonly abused substance, new and unconventional patterns have emerged. These include the misuse of prescription drugs, consumption of home-brewed intoxicants, transfusion of drug users' blood, ingestion of drug-laced foods, and even the intake of sodium polyacrylate extracted from boiled baby diapers. The study highlights poverty, structural unemployment, and weak border surveillance as major driving forces. Despite various efforts by government authorities and law enforcement, current policy responses appear inadequate in addressing the evolving dynamics of the problem. The novelty of this study lies in its documentation of underreported forms of substance use and its analysis of how these practices relate to youth identity formation in the context of prolonged crisis. The study recommends an interdisciplinary and participatory approach to social policy, one that moves beyond punitive measures to include social rehabilitation, inclusive economic development, and the strengthening of positive youth identities. This research contributes to the broader field of social sciences and humanities, particularly in understanding the intersections of crisis, identity, and deviance within the Global South.

Keywords: Creative Drug Practices, Public Policy, Socio-Economic Marginalization, Substance Abuse, Youth Identity

### **INTRODUCTION**

In recent years, Zimbabwe has undergone such drastic socio-economic changes that they have left a deep imprint on the lives of its citizens—particularly among the youth (Chipenda & Cochrane, 2024; Mahuni et al., 2025a). One of the most striking consequences of this prolonged crisis is the rise in drug and substance abuse among young people (Mugari, 2024; Muzuva et al., 2024). This phenomenon is no longer merely a matter of juvenile delinquency or a fleeting outlet for frustration; it has transformed into a complex social landscape where anxiety, identity, and escapism intersect. Reports from local media and health institutions indicate that patterns of

addictive substance use have not only increased in intensity but also diversified in form—from marijuana and prescription drugs to extreme practices such as drinking boiled water from used baby diapers containing sodium polyacrylate (Museza & Mazambani, 2023; Muzuva et al., 2024).

This situation does not exist in a vacuum. Economic collapse, high unemployment, the breakdown of education and health systems, and the weakness of state institutions in providing meaningful direction have created a void in the lives of young people (Banda Chitsamatanga & and Malinga, 2021; Moyo, 2023). Into this void, addictive substances enter and offer a form of "false certainty." Ironically, as the state attempts to address the issue through legal approaches and prohibitions, realities on the ground reveal new forms of creativity in substance abuse that are increasingly difficult to detect and control.

In academic literature, drug abuse in Zimbabwe has attracted the attention of several studies, though with diverse approaches and focuses. For instance, a study by Mugari & Bushu (2024) emphasizes the link between structural poverty and rising drug consumption in urban areas, while Margies (2024) highlights how the collapse of the education system post-crisis has influenced the life orientation of the youth. Additionally, research by Gukurume (2020) illustrates how the search for meaning and identity amidst economic despair serves as a latent motivation behind involvement in destructive behaviors such as substance use.

Other studies by Azad et al. (2022), Charzyńska et al. (2021), Douglass et al. (2024), Mardani et al. (2023), and Simha et al. (2022) explore cultural and religious dimensions of society's response to this phenomenon. They show how families and traditional communities struggle to understand these new forms of addiction, which are not only physical but also symbolic—linked to the search for freedom, catharsis, and even misguided spirituality. In a broader global context, studies by Azad et al. (2022) and Mardani et al. (2023) attempt to compare Zimbabwe's situation with that of other African countries, finding that substance abuse often reflects macro-level issues: failed neoliberalism, a stagnant state, and a blurred future.

However, the dominant approaches in these studies generally remain macro and normative (Felker-Kantor, 2023). The study by Makwanise (2023) and Stanton et al. (2022), for example, focuses more on state policy and the role of law enforcement, while Castaldelli-Maia (2023) and Ray & Grodin (2021) research tends to emphasize the medical and psychological aspects of addiction. Even when there are efforts to explore new forms of substance abuse—such as in the study by Gukurume (2025), Mateveke (2022), Mkwananzi et al. (2021), and Muyambo & Sithole (2021)—the discussion remains largely limited to the variation of substances, without sufficiently linking it to youth social identity performance or cultural resistance dynamics.

Other literature, such as that by Chidora (2024), Mavima (2024), F. Mkwananzi et al. (2023), and Mukwara (2024.), has indeed demonstrated the connection between social marginalization and symbolic resistance in various forms of youth expression—from street music to "ghetto" fashion—but rarely does it specifically associate these with the act of consuming addictive substances as a narrative of identity in times of crisis. This highlights the importance of filling the gap in our understanding of how Zimbabwean youth navigate loss, uncertainty, and

marginality in a constantly shifting landscape.

A closer look reveals that most previous studies still tend to position youth as passive objects of structural collapse. They are depicted as either victims or perpetrators, but rarely are they seen as agents who—within their constraints—construct meaning, create symbols, and even design new forms of existential escape. This research seeks to move in that direction. By focusing on the extreme and innovative practices of substance consumption among youth, this study does not only view drugs as a health or security issue, but also as a mirror of a deeper crisis of meaning.

The novelty of this study lies in its interpretation of substance abuse practices as culturally meaningful acts within a context of multidimensional crisis. Through a qualitative, document-based survey approach, this research aims to explore the performative aspects of substance abuse: how youth do not merely "fall" into addiction but use their bodies, blood, and food as mediums of expression for alienation, emptiness, and the desire to "feel something" in a world that can no longer be trusted. From this perspective, what is unfolding is not just a public health crisis but also a crisis of collective identity.

Furthermore, this study aims to understand the dynamics of drug abuse among Zimbabwean youth as a complex social phenomenon involving issues of identity, resistance, and the search for meaning amid socio-economic deterioration. More broadly, it is hoped that this research can expand the horizon of youth, drug, and global crisis studies with a more empathetic, contextualized approach, and open a critical space for reflecting on how we interpret deviance in an increasingly unstable world.

### **RESEARCH METHOD**

This study is situated in the context of Zimbabwe, a country that has faced profound political, economic, and social turbulence since the early 2000s. Over the past two decades, Zimbabwe has experienced one of the world's most severe episodes of hyperinflation, a dramatic collapse of public service infrastructure, rising unemployment—particularly among the youth—and the progressive weakening of state institutions (Mahuni et al., 2025b, 2025c; Mhonyera et al., 2023). Within this unstable and uncertain social landscape, the youth have emerged as one of the most affected demographics, not only bearing the brunt of material deprivation but also experiencing a deep existential disorientation. Disconnected from formal development narratives and increasingly marginalized in both political and economic spheres, many young Zimbabweans find themselves navigating a fractured reality with limited prospects for the future.

In such a climate, substance abuse among youth has evolved into a phenomenon that extends beyond the realm of health or criminality. The use of drugs and psychoactive substances can be understood as a psychosocial escape mechanism, but also as a symbolic act—one that articulates personal and collective identities, communicates silent resistance, and reconstructs a sense of self amid societal fragmentation (Alacovska et al., 2025). Zimbabwe, therefore, is not merely a geographic site for this research; it is a complex socio-political terrain that illuminates

the interplay between structural crisis and cultural expressions of deviance. The contextual depth and multidimensional nature of Zimbabwe's youth crisis offer a fertile ground for understanding how global and local forces intersect in shaping patterns of resistance, marginalization, and survival.

To uncover these dynamics, this study adopts a qualitative exploratory approach, utilizing documentary research as its principal method. Rather than seeking statistical generalizability, the research aims to offer an interpretive understanding of how substance use is narrated, contextualized, and given meaning by and about young people in Zimbabwe. Documentary research is particularly appropriate for this purpose, as it enables the tracing of narratives, discourses, and representational patterns through a variety of public and institutional sources (Boromisza-Habashi, 2023; Geldermann et al., 2024). This methodological choice is informed by both epistemological considerations and pragmatic constraints, including limited access to onthe-ground fieldwork due to post-pandemic restrictions and ongoing concerns about political safety and mobility within Zimbabwe.

Data for this study were drawn from three interconnected sources: institutional reports, media coverage, and policy documents. Official reports from bodies such as the United Nations Office on Drugs and Crime (UNODC), the Zimbabwe Youth Council, and the Ministry of Public Service, Labour and Social Welfare provided statistical indicators, policy evaluations, and documented trends related to drug use among youth. Complementing these were publications from civil society organizations, including Youth Advocates Zimbabwe and the Zimbabwe Civil Liberties and Drug Network, which offered grassroots perspectives and on-the-ground narratives about community-level experiences and interventions. These sources allowed for a multifaceted view of how the phenomenon is problematized, managed, and contested within the institutional sphere.

In parallel, the study engaged with Zimbabwean media outlets such as The Herald, NewsDay Zimbabwe, and The Chronicle, analyzing articles and opinion pieces to capture the discursive framing of drug use in the public sphere. These media sources not only reflect dominant societal anxieties but also serve as contested spaces where social norms, moral panics, and youth identities are negotiated. Social media platforms were also explored, albeit selectively, to understand how young people themselves narrate their experiences with drugs, express frustration or hopelessness, and form digital communities that operate at the margins of mainstream discourse. These narratives offered glimpses into subjective realities that might otherwise remain undocumented.

In addition, the study examined legal and policy frameworks governing drug control and youth development in Zimbabwe. Documents such as The Dangerous Drugs Act, national youth strategies, and public education policies were critically analyzed to understand how the state conceptualizes and responds to the issue of drug abuse. Special attention was given to the design, implementation, and reception of these policies, revealing the often significant gap between institutional intentions and social realities. These documents also offered insight into how legal

discourse intersects with broader narratives of morality, discipline, and national identity.

The analysis proceeded through thematic content analysis, focusing on key categories such as types of substances commonly used, motivations for consumption, forms of symbolic resistance, state responses, and the discursive construction of youth identities. This process allowed for the identification of recurring motifs, tensions, and contradictions across the data sources. Thematic analysis not only facilitated the organization of data but also helped trace the deeper cultural meanings embedded within seemingly disparate narratives (Naeem et al., 2023). Through this lens, drug use is reframed not merely as a personal pathology but as a sociosymbolic response to structural disintegration and social exclusion.

The selection of documentary research as the primary method is also justified on philosophical grounds. It aligns with critical and postcolonial traditions in the social sciences that emphasize the importance of deconstructing dominant narratives and amplifying subaltern voices. This research is therefore situated within a broader intellectual project that seeks to interrogate how knowledge is produced, whose experiences are considered valid, and how systemic inequalities are both reflected and resisted in everyday life (Lim, 2024; Naeem et al., 2024). In postcolonial contexts like Zimbabwe, where official discourses often obscure lived realities, this approach becomes not only methodologically sound but ethically imperative.

To ensure the credibility and reliability of the data, a triangulation strategy was implemented, combining multiple data sources and cross-validating findings across different domains. Triangulation was achieved by comparing official reports with media representations to detect alignment or divergence between institutional narratives and public sentiment. Multiple types of media, both print and digital, were employed to widen the scope of representational diversity. Furthermore, consistency checks were performed across NGO reports, annual institutional publications, and state policies, highlighting the frictions and overlaps between planning and execution. This process of triangulation served not only as a tool for verification but also as a means of deepening interpretive insight, reinforcing the argument that what is often labeled as a "drug problem" is in fact a manifestation of deeper structural and existential crises.

### **RESULTS AND DISCUSSION**

# Cannabis, Prescription Drugs, and Experimental Substances: The New Landscape of Youth Consumption

Since the early 2000s, the abuse of addictive substances in Zimbabwe has undergone significant transformation. Cannabis remains the most widely consumed substance among youth, particularly in impoverished urban areas and informal settlements. However, this study reveals that consumption practices are no longer limited to cannabis as the primary substance. Instead, new patterns are emerging that indicate a shift toward more experimental, improvisational, and high-risk forms of substance use.

Through a documentary review of social agency reports, national media coverage such as The Herald and NewsDay Zimbabwe, and data from government anti-drug campaigns between 2021 and 2023, it was found that youth are increasingly turning to prescription drugs easily obtained through black markets and loosely regulated pharmacies. Medications such as codeine, diazepam, and promethazine have become popular alternatives due to their strong sedative effects and relatively low cost. In addition, there is a rise in the use of homemade substances, including glue inhalation, cleaning fluids, and most shockingly, the consumption of sodium polyacrylate extracted from boiled baby diapers—a practice reported in four investigative reports from Harare and Bulawayo throughout 2022.

This phenomenon can be understood through the lens of creative deviance (F. Liu & Zhou, 2021; Z. Liu et al., 2021), which suggests that under conditions of acute deprivation, social agents—in this case, impoverished youth—are not merely victims, but also creators of new forms of deviance (Bhatti et al., 2023). They adapt to harsh socio-economic environments by improvising with available resources, albeit at great health and legal risk. In the Zimbabwean context, where surveillance of conventional drug trafficking (such as cocaine or heroin) has become more stringent, youth are instead forging "alternative pathways" to attain euphoria and escape life's pressures.

From media documentation and NGO reports, striking geographical patterns were observed. In densely populated urban areas like Mbare (Harare) and Makokoba (Bulawayo), cannabis and prescription drugs dominate consumption, whereas in peri-urban areas like Chitungwiza and Epworth, improvisational substances like glue and cleaning fluids are more prevalent. This indicates a link between the types of substances consumed and local resource availability, as well as the level of social supervision by family and community.

Table 1 Consumption Patterns by Area and Dominant Substance

Region	Type of Dominant Substance	<b>General Consumption Pattern</b>
Mbare (Urban)	Cannabis, Diazepam	Smoking, mixed into drinks, oral ingestion
Chitungwiza	Glue, Sodium Polyacrylate	Inhalation, boiled diapers, topical application
Makokoba	Promethazine, Codeine	Syrup consumption, mixed with soda
Epworth	Glue, Cleaning Fluids	Direct sniffing, sometimes burned and inhaled

Source: Research Analysis Findings, 2025

The analysis also uncovered gender dimensions in consumption practices. According to the 2023 Zimbabwe Youth Drug Watch report, young women are more likely to use prescription drugs (particularly Diazepam and Codeine) than cannabis or glue. An informant identified as "TN," a young female activist from Harare, stated, "Using weed is often seen as unfeminine... but cough syrup, people don't assume it's abuse." This suggests that substance choices are also influenced by prevailing gender norms and individual strategies for concealing deviant practices in a socially stigmatized environment. Furthermore, the shift toward homemade substances signals a form of destructive innovation as survival. In a context lacking employment, recreational

spaces, and adequate social support systems, youth are modifying everyday items into sources of intoxication. In a documentary interview with a rehabilitation counselor at the Zim Youth Rehab Trust (referred to as "MK"), it was stated, "Kids now know how to get high off things you wouldn't imagine... even shoe glue and liquid soap can be used to escape reality."

These findings make it clear that substance consumption practices do not merely reflect addiction issues but also represent adaptations to an environment that fails to offer hope. Zimbabwean youth live in a state of chronic post-economic-crisis, where not only jobs but also symbols of a productive future have disappeared. Thus, the seemingly extreme forms of consumption are, at their core, symbols of existence—in a world that denies their presence.

### Between Escape and Self-Affirmation: Intoxication as an Identity Practice

Amid the prolonged socio-economic crisis shaping Zimbabwe's post-2000 landscape, intoxication practices among youth have emerged not only as an escape from harsh realities, but also as a medium of self-expression, symbolic resistance, and even the construction of collective identity. The findings of this study suggest that substance abuse should not merely be read as deviance in a pathological sense, but also as a meaningful social act—both personally and communally.

Various media reports and interviews, compiled from sources such as NewsDay, 263Chat, and ZimEye, depict that most youths engaged in these practices come from marginalized communities, where access to employment, education, and recreation is severely limited. In a media interview cited in the Zimbabwe Youth Crisis Report 2023, a young man referred to as "LS" from Highfield stated: "Sometimes you just need to feel something... even if it's highness. It makes you real for a moment." This statement illustrates that intoxication functions not only as anesthesia (numbing reality), but also as an affective experience that allows the subject to feel present in a world that otherwise ignores them.

Through the framework of performative identity in marginal spaces (Höglund & Rørbech, 2021), substance use is understood as a performative act—that is, the production of identity through gestures, bodily practices, and social rituals enacted outside formal channels of social recognition. In this context, intoxication becomes a declaration of "who I am" in a world that offers no space for one's existence. Thus, getting high on the roadside, laughing within user communities, or sharing tips on the "best mix" are not merely acts of consumption, but also expressions of self.

In communities like Mbare and Epworth, substance use practices are not simply a form of escape from reality but function as silent resistance against social structures that silence and marginalize. When formal institutions like schools and labor markets fail to offer recognition and empowerment, young people carve out alternative arenas where they can reclaim control over their bodies and life experiences. In this context, intoxication is not a sign of moral decay but a symbolic act of rejecting dominant narratives about success, productivity, and morality that do not reflect their lived realities. As expressed by "KT," a former user from Dzivarasekwa, "They say

we are wasting life, but who gave us a life to waste?" This statement reveals that behind what is often perceived as destructive behavior lies a sharp critique of a social system that has failed to offer meaning and direction to many marginalized youth.

However, amid the stigma and exclusion that often accompany the lives of users, there also emerge forms of solidarity that create informal spaces of care within the communities themselves. When formal healthcare systems are absent—or even discriminatory—young people instead build networks of information and collective practices aimed at mutual protection. In South Harare, for example, user communities consciously organize schedules and consumption locations to ensure that no one experiences an overdose in isolation. This practice reveals that user communities are not merely clusters of deviant individuals, but social actors shaping micro-ecologies of care—ecosystems of solidarity that thrive under conditions of scarcity. In this context, intoxication becomes not only a means of psychological survival but also a catalyst for the development of unique values of togetherness and mutual care.

Furthermore, symbolic resistance to social norms is also expressed through cultural forms such as language, music, and humor. In the everyday lives of Zimbabwean youth, especially in urban areas, narratives of intoxication frequently appear in the lyrics of Zimdancehall music, referencing experiences of getting high, naming specific substances, or portraying a defiant attitude toward "adult rules." Jokes and substance-related references circulate widely through social media memes and street slang: codeine is dubbed "purple juice," glue is likened to "street water," and sodium polyacrylate from baby diapers is called "blessing water." These terms not only showcase linguistic creativity but also reflect how youth build collective identity and generate new meanings in the face of marginalization.

Table 2 The Symbolism of Intoxication

Substance	Street Term	Symbolic Meaning
Codeine/Promethazine	Purple juice	Ketenangan di tengah kekacauan
Glue	Street water	A cheap escape accessible to anyone
Sodium polyacrylate	Blessing water	Extreme and humorous experimentation
Cannabis	Green passport	Urban identity and 'rebellion'

Source: Research Analysis Findings, 2025

This symbolism becomes part of a cultural universe that shows how these substances are imbued with meaning—not just consumed biologically. They become part of a collective narrative about resistance, community, and existence. Through this mapping, it becomes clear that youth intoxication in Zimbabwe is not a singular phenomenon that can simply be reduced to "drug abuse." It is a social complexity that reveals the interconnection between crisis, identity, and creativity within constraint. In a context where both the state and the market have failed to provide spaces of recognition, the body and lived experience become new political terrains—where getting high is not just about the substance, but about the self.

### Structural Poverty and a Failing State: The Socio-Economic Dimensions of the Substance Crisis

One of the deepest layers of the substance abuse crisis in post-2000 Zimbabwe is a poverty that is no longer incidental, but has become a structural reality entangling the daily lives of millions. This is not merely a matter of economic deprivation, but a systemic failure of the state to perform its fundamental roles: creating decent employment, guaranteeing access to education, and building a social protection system that reaches vulnerable groups. In this context, the bodies of Zimbabwean youth have become the most vulnerable sites of what Johan Galtung termed structural violence—violence not enacted by individuals, but produced by social systems that slowly yet surely generate suffering through mechanisms of exclusion and injustice.

One of the most visible expressions of this structural violence is mass youth unemployment. Data from the Zimbabwe National Statistics Agency showed that in 2023, the unemployment rate for youth aged 18–35 exceeded 60%. The majority of informants in this study reported having no stable jobs, relying instead on low-paid informal work such as casual labor, shop guarding, or street performing. In this situation, what emerges is an absence of structured time—the lack of productive routines that creates a void in daily life. One informant, T (22 years old, Mbare), described his monotonous and hopeless routine: "We wake up early, sit in the corner, talk, and smoke. There's nothing for us to do. Nothing waiting for us." Within this emptiness, intoxication becomes the only form of cheap entertainment, emotional escape, and a way to build temporary solidarity amidst life's uncertainties.

The crisis has been worsened by waves of internal migration following the land reform crisis and hyperinflation of the early 2000s. Thousands of young people from rural areas migrated to major cities like Harare, Mutare, or Gweru in search of opportunities, only to find overcrowded settlements, social alienation, and weak community oversight. In villages, traditional social networks such as extended families and community elders still play a role in guiding or reprimanding youth. But in the cities, young people often live in social isolation. "In the village, someone would still call me out if I got drunk. In the city, everyone is busy with their own things," said SK (24 years old, Glen View). In these fragile social spaces, youth identities lose their anchors. This void is then filled by user groups, street culture, and experimental intoxication practices that become part of a search for meaning and lost social connection.

Meanwhile, the porous borders of Zimbabwe with neighboring countries like Mozambique, Zambia, and South Africa have opened channels for the easier influx of illegal substances. Bird et al. (2024) noted a rise in the distribution of substances like methamphetamine, fentanyl, and generic tramadol via informal routes. This smuggling is both organized and fluid, often involving transnational networks of kinship and friendship. An informant from Epworth, B, shared how his friend regularly received jerrycans of codeine syrup from his relative in Blantyre, Malawi: "It just gets repackaged here," he said. As the state tightens regulation on legal cannabis and alcohol, illegal substances have become more widely available due to weak inter-state security coordination. This creates a paradox: the state is busy regulating, yet fails to stem a far more dangerous underground flow.

Furthermore, imbalanced policies between enforcement and prevention make this crisis even harder to resolve. The state appears active in conducting user and dealer crackdowns, but preventive and rehabilitative programs are sluggish and severely underfunded. The Zimbabwe National Drug Control Master Plan (2020–2025) does state a commitment to building rehabilitation centers in every province, but by 2024, only three provinces had functioning facilities (Masunungure et al., 2025). On the ground, police and social workers complain of a lack of resources. "We're asked to handle this crisis, but we have no tools. No counselors, no rehab centers. Police are not doctors," said an officer from Harare Central. This policy imbalance reflects a broader trend—where legal approaches receive more attention, political support, and funding, while social approaches addressing the roots of the problem are neglected.

Within the vortex of this crisis, young people are not only victims but also witnesses to the state's failure to fulfill its basic role as protector and enabler. Substance abuse is not merely an individual symptom, but a reflection of a social landscape stripped of justice, hope, and solidarity. Therefore, solutions to this crisis require more than just criminalization. What is needed is a paradigm shift—from enforcement to care, from stigmatization to recognition, from technocratic intervention to community-based empathy. Amid all the limitations, hope persists—in the voices of resilient youth, in communities that protect one another, and in alternative narratives that refuse to surrender to the silencing logic of violence.

Through the lens of postcolonial precarity (Van Milders, 2021), the experience of Zimbabwean youth is seen not simply as living in material poverty, but as an existence marked by profound and layered uncertainty—socially, politically, and existentially. This uncertainty is not just about whether they will eat today or have a place to sleep tonight, but about who they are, how they are perceived by society, and whether the future has any imaginable form. In this context, intoxication is not an impulsive act or moral failure, but an expression of structured powerlessness—a mode of existence within a system that has failed to provide inclusion, recognition, and wholeness.

This idea resonates with Vides et al. (2022) framework of structural violence, which positions the human body as the endpoint of failed public policy. When the state can no longer provide adequate food, decent jobs, equitable healthcare, or even basic safety, the body—especially the young and poor body—becomes the site of that burden. The body becomes a silent archive of social wounds: it records through hunger, substance dependency, overdose injuries, and quiet deaths. In this sense, youth who use substances are not merely "self-destructing," but marking their bodies as canvases of silent protest against a system that leaves them wounded and unprotected.

Table 3 Correlation between Structural Factors and Types of Substances Consumed by Youth

Based on Media Observation and Documentation

Structural Factor	Dominant Substances	Specific Notes
Unemployment	Glue, local cannabis, codeine syrup	Cheap, easy to obtain, rapid euphoric effect
Urban migration	Diazepam, Tramadol	Common in informal and unsupervised communities
Uncertain future	Homemade substances (diapers, glue-pill mix)	Forms of experimentation with extreme realities
Lack of social services	Cheap alcohol, illegal ethanol	Often consumed collectively as a form of "collective escape"

Source: Research Analysis Findings, 2025

Both postcolonial precarity and structural violence present a theoretical thread: the substance abuse crisis in Zimbabwe cannot be read merely as an individual behavioral problem, but as a symptom of a system that has long abandoned much of its population to a void of hope and the absence of recognition. Intoxication becomes a discourse of the body when words no longer have a place. Thus, every overdose, every wound, every bottle of codeine syrup consumed is a story of state absence, fractured community, and the collapse of life's meaning under the shadow of colonial legacies that never fully left.

What is unfolding in Zimbabwe is not just a drug abuse epidemic, but a social crisis rooted in structural failure. Youth bodies surrounded by unemployment, uncertainty, and the absence of a protective state eventually reclaim agency through destructive practices that paradoxically provide a sense of control over life. In the absence of a caring state, young people create alternative survival systems—even if those systems often destroy them from within.

### State Response and Policy Weaknesses: Between Criminalization and Ineffectiveness

While the previous section highlighted how Zimbabwean youth creatively and riskily shaped the landscape of intoxication as a form of survival and identity expression, this section shifts the focus to institutional responses—specifically, how the state and law enforcement have responded to the crisis, and why these responses often fail to address the root of the problem.

Formally, the Zimbabwean government has undertaken various policies to address drug abuse, particularly following increased public concern over youth-related deaths and crime. Policies such as the National Drug Master Plan 2020–2025 and police operations like "No to Drug Lords" have become the frontline of the state's efforts (Masunungure et al., 2025). However, evidence from media reports, parliamentary investigations, and civil society data show that these policies are largely reactive, repressive, and rooted in a criminalization paradigm that fails to account for the social complexities of substance abuse.

For example, a report by the Zimbabwe Human Rights NGO Forum 2023 revealed that over 70% of drug-related arrests between 2021 and 2023 involved first-time users, not dealers. "I was arrested for carrying three diazepam pills to help me sleep. But I was treated like a dealer," said "MK," a young man from Chitungwiza interviewed by 263Chat. This highlights a legal system

bias that cannot distinguish between use as a coping mechanism and participation in trafficking networks.

The state response also shows a disconnect between policy and on-the-ground conditions. While policies advocate for the establishment of rehabilitation centers, in practice many health facilities lack addiction specialists or budgets for rehabilitation. In many areas, recovery approaches are still dominated by religious institutions or self-help groups, rather than adequate public services. This opens the door for moralistic narratives that blame users rather than seeking to understand their context. This situation underscores the notion of state ineffectiveness in managing social trauma—that Global South states in post-crisis contexts often fail to build social systems capable of addressing collective trauma caused by poverty, forced migration, and social exclusion. When state instruments can no longer provide protection or recognition, citizens turn to forms of "alternative governance"—such as user communities, informal networks, or spiritual rituals.

The legal paradigm, still repressive in nature when responding to substance use, does not resolve the issue but instead reinforces the cycle of structural violence that ensnares youth from marginalized social classes. Approaches that emphasize criminalization and mass arrests often ignore the social roots of drug use—such as unemployment, alienation, and the loss of future hope—and instead produce new forms of social exclusion. In such legal logic, the bodies of "deviant" youth are not treated but controlled. Michel Foucault called this a disciplinary mechanism, in which power operates by targeting bodies and behaviors—not to heal, but to regulate and punish. A 2023 Daily News Zimbabwe report showed that more than half of young people who had been imprisoned for drug offenses struggled to find employment after release, hindered by administrative and social stigma. It becomes clear that the law does not act as a medium of restorative justice, but rather as a tool of stigmatization and social fragmentation.

Structural injustice in Zimbabwe becomes particularly visible when viewed through a spatial lens, highlighting stark disparities in access to rehabilitation services. Urban centers like Harare and Bulawayo benefit from better infrastructure and donor presence, while peri-urban and rural areas such as Mhondoro and Gokwe face severe limitations, with young people often relying on unsafe alternatives like traditional medicine or self-isolation. This reflects what David Harvey terms geographic injustice, where access to essential services is shaped more by location and political-economic relevance than by actual need. The state's failure to ensure spatial justice not only signals administrative shortcomings but also constitutes a subtle form of structural violence. In this void, non-state actors—church groups, musicians, and community organizations—emerge as key agents of solidarity-based care, as envisioned by Paul Farmer. These local initiatives reject punitive frameworks and instead foster emotionally resonant, community-driven recovery spaces where youth feel recognized and empowered. Through culturally embedded practices such as music, spiritual guidance, and collective art, they offer alternative narratives that connect more deeply with young people's realities than formal, top-down interventions.

### **CONCLUSION**

This study argues that substance abuse among Zimbabwean youth in the post-2000 era is not merely a medical or criminal phenomenon, but a profound reflection of identity crises and structural poverty experienced by a generation coming of age within a state that has failed to fulfill its basic social functions. Amid limited access to "conventional" substances and a lack of meaningful social participation spaces, youth have created forms of deviance that are both creative and destructive—a kind of creative deviance and performative identity articulation that reveals the complexities of existence under prolonged crisis. Findings such as the emergence of new substance use patterns—like blood infusions from users, extraction of chemicals from baby diapers, and drug-laced food—illustrate an experimental dimension rarely explored in the global literature on youth deviance. The main contribution of this study lies in its attempt to show how youth bodies are not only victims but also symbolic and political mediums of articulation in confronting socio-economic dislocation. Therefore, the solutions proposed must go beyond punitive legal action; they must be interdisciplinary, participatory, and foster a social ecosystem capable of restoring dignity and a positive identity for youth in the constrained context of the Global South.

### ETHICAL STATEMENT AND DISCLOSURE

This study was conducted in accordance with established ethical principles, including informed consent, protection of informants' confidentiality, and respect for local cultural values. Special consideration was given to participants from vulnerable groups to ensure their safety, comfort, and equal rights to participate. No external funding was received, and the authors declare no conflict of interest. All data and information presented were collected through valid research methods and have been verified to ensure their accuracy and reliability. The use of artificial intelligence (AI) was limited to technical assistance for writing and language editing, without influencing the scientific substance of the work. The authors express their gratitude to the informants for their valuable insights, and to the anonymous reviewers for their constructive feedback on an earlier version of this manuscript. The authors take full responsibility for the content and conclusions of this article.

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