

Malawi Youth Mental Health Newsletter: August 2022

We are currently conducting a systematic review on the [determinants of adolescent substance use in Africa](#) (DASA). In the context of this review, substance use refers to intake of substances such as alcohol, cigarettes, illegal substances, prescription medications, inhalants, and solvents. Determinants are defined as a range of factors that influence substance use among individuals or populations. This month's newsletter provides an overview of the review, addressing key aims and how they relate to the current issue of substance use among youth in Malawi.

Substance abuse is a growing problem in Malawi and across Africa more broadly, making it a growing major public health concern on the continent. Unfortunately, evidence around the true extent and the reasons why adolescents abuse substances across many settings in Africa is not well documented despite the known negative health and social consequences on affected individuals and their communities. The existing knowledge seems to point towards a complex interaction of personal and socio-environmental factors, competing health priorities and limited treatment options. Broadly speaking family, social networks and peer pressure are key influencers of substance abuse among adolescents. For example, several African studies indicate having family or friends who use substances is a key risk factor of adolescent substance use. Childhood trauma and adverse experience like physical, emotional and sexual abuse is another significant risk factor for substance use. Other demographic and socioeconomic risk factors have included being male, of younger age, lower education grades, adolescents from divorced parents, and private school attendance. Some differences have been noted between urban and rural adolescent populations. For urban areas in Nigeria, having friends who use substances and a mother with tertiary education are risk factors whilst parental disapproval of substance use is a protective factor. Our aim of conducting this systematic review is to explore the determinants and associated factors that influence adolescent substance use in Africa.

In Malawi, we are aware of the issues that harmful drug and alcohol use can trigger in young girls and boys. Problematic behaviours like school non-attendance or violence, students being suspended or expelled from school because of vandalising school property or being found in possession of substances like chamba (cannabis) or under the influence of alcohol. Wider social problems linked to substance use include theft, engaging in unprotected sex, personal injury, medical problems and impaired relationships with family and friends. Sadly, these are becoming common stories in our society. Underage drinking is on the rise, easy access to cheap alcoholic beverages is a contributing factor and despite having a national alcohol policy to help counter the deep-rooted problem, there is a lot more to be done.

In sub-Saharan Africa alone, the prevalence of any substance use among adolescents is 42% with alcohol and tobacco being the most common substance of choice ([link to full paper](#)). There is also evidenced use of other drugs like Khat (a flowering plant native to East and Southern Africa containing a stimulant believed to cause excitement, loss of appetite and euphoria) in east Africa only and tranquilisers in South Africa. Looking at Malawi, we can relate to substances that are common, cheap and readily available. The government took an initiative to ban all cheap alcohol sachets in 2015 amid growing concern over alcohol abuse among the youth and reports of children drinking in class. But this ban was quickly countered by the manufacturing companies who turned to making 5 litres bottles, [sold to groceries and road side shacks at wholesale prices](#). These retailers then decant them into smaller quantities to sell to their consumers. Health consequences from consuming these strong cheap liquors are deadly, with increased risk of acute liver failure and immunocompromising effects being observed.



Chamba and tobacco smoking is also common among young people in Malawi, both readily available in Malawi. Despite Malawi legalising the growing of industrial and medicinal hemp, smoking chamba is illegal and if found in possession without a license, the law will take charge. In terms of mental health, chamba is associated with severe psychosis if used for a long period of time. Other effects include increased vulnerability to stress and anxiety, memory problems, impaired judgement, paranoia and hallucination. Malawi is one of the ten largest producers of tobacco in the world. Despite the warning signs of the hazardous effects and restrictions to those who can purchase tobacco products in shops, underage tobacco cigarette smoking always cuts its way through, and is a big challenge to control.

Adolescent substance use is linked to disability adjusted life years (DALY) lost in young people. The DALY rates in Africa are 2.5 times higher than in high-income countries. One DALY represents the loss of the equivalent of one year of full health. Young people who misuse alcohol and drugs experience more medical symptoms such as appetite changes, weight loss, headaches, sleep disturbance and depression than their counterparts. It also comes with negative effects on learning and development of an individual. Despite having these devastating effects, the Malawi government do not seem to prioritise youth in relation to health issues as there is a general public perception that the youth are typically strong and healthy.



This work began in 2020 with a team of four; Sandra Jumbe, Tony Kamninga, Ukwuori Kalu and Isaac Mwalwimba. Over time, the DASA team has expanded to those below



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We are now in the final stages of data analysis and writing up. As things progress, we shall be sharing snippets of specific review findings. If you are interested to be part of this work, contact us using the following emails: jnyali@mu.ac.mw or s.jumbe@qmul.ac.uk