

October 2022

MALAWI YOUTH MENTAL HEALTH NEWSLETTER



CANNIBUS USE  
AMONG YOUTH IN  
AFRICA



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A Warm Welcome

This month's newsletter focuses on a medical student's dissertation, Shahzaib Asghar who was supervised by Dr Sandra Jumbe. His thesis focused on the risk factors and determinants of cannabis use among youth in Africa. We also provide some good news and research funding opportunities.

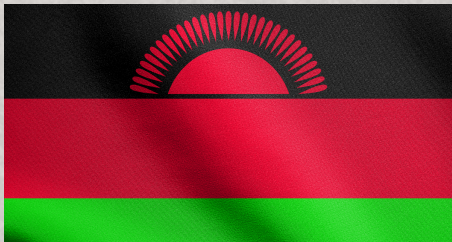


A Literature Review

Assessing the risk factors and determinants of cannabis use among adolescents in Africa

Since the ancient times, herbs and other plants have been used as medicinal products and drugs. Cannabis is one of these drugs. Dating 1000BC ago, a cannabis strain called "Ganja" was realised in India. Through the ages, this strain was known for its effect on the human body, causing trance like states that people would use for rituals or even pleasurable recreations. Cannabis use spread out to all corners of the world. It has been used for medicinal purposes such as pain relief however the most common use among people who consume it is recreational, to get high. From the 1300s, the damaging health effects noted when over consumed like on cognitive impairment, respiratory malfunctioning and drug dependence have caused cannabis use to be restricted and criminalised in most parts of the world till date.

The highest levels of cannabis production in the world take place on the African continent ([UNODC report](#)). Despite being criminalised in most parts of Africa, approximately 8% of the adult population consume the drug each year – far higher than the 3.8% global prevalence of cannabis users aged 15 to 64. The health consequences of cannabis use in Africa are largely unknown because of limited and non-systematic research, but there is no reason to expect that biological effects on African populations would be substantially different to what has been observed in other places.



There is little evidence to understand why cannabis use is so popular, especially among younger Africans. This led Shahzaib Asghar, Dr Jumbe's medical student to conduct a literature review exploring the risk factors (determinants) of cannabis use among the youth of Africa. His key objectives were to:

1. define the term cannabis use and understand statistics of cannabis use in the African region
2. identify the risk factors and determinants of cannabis use among youth (13 to 19-year-olds) in Africa
3. compare identified risk factors and determinants with other regions around the world
4. Assess the extent to which risk factors and determinants can be managed and dealt with to reduce rates of cannabis use in the youth

In this month's newsletter, we focus on key findings from **objective 1**

### Identified relevant studies

Below is a brief outline of how articles were found and collated:

Two databases, PubMed and African Journals Online (AJOL) that cover medically related abstracts and papers globally and on the African continent were searched. 1078 articles were screened using the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) method. Duplicates from the two databases were removed leaving 683 papers. Using the inclusion exclusion criteria available, 61 papers were left. Relevance of papers was realised from abstracts leaving 21 papers after screening.

Finally, after reading through the remaining papers, seven were found to be appropriate for this literature review. The inclusion criteria were mention of cannabis usage within places in Africa, English text, within the last 15 years (2006-2021). Variation among these seven papers was noted. Some discussed the whole of Africa whereas others would discuss certain African regions or countries. Some exclusively discussed cannabis use whilst others included other substances.

### Terms used for Cannabis in Africa

To understand cannabis use in Africa, it is important to understand the youth culture that contains this behaviour. For instance, things like knowing how young people perceive cannabis, exploring the actual names and words used to describe the drug. According to included studies in this literature review, words like hemp, weed, Jah, ganja, and ahabammmono are commonly used by 13-19-year-olds to describe cannabis. This is like Malawi's context, where cannabis is known by various local names, the commonest being Chamba. Some call it Naz, Hebebe, fodya wankulu, kanundu just to mention a few. Each name is recognised in all regions but hebebe is mainly used in the Northern region. Beyond chamba, the other local terms are mostly used by the cannabis users.





### Understanding the statistics on cannabis use in Africa

Africa produces a quarter of the cannabis found on the globe ([UNODC report](#)). This correlates with consumption as most of this produced cannabis is consumed within the continent. Consumption differs across regions in Africa and dependent on settings. Research shows that there is more cannabis use in urban settings as compared to rural populations, suggesting that increasing cannabis use is perhaps part of urban youth culture.

Differences in use among various ages were apparent, with greater consumption by adolescents (aged 14-21) than the adults. This suggests adolescence as a potential risk factor for consumption of cannabis. Papers specifically presenting evidence of cannabis use among adolescents in this literature review generally found higher consumption among boys than girls and older adolescents. Only one of the seven papers from Zambia found contradicting evidence where girls used more cannabis than their male counterparts ([Siziya et al.,](#)).

In Malawi, research findings draw a conclusion that agrees with most of the information from Shahzaib research. One of the most used substance is marijuana or as more locally known chamba ([Mzumara 2018](#)). Among adolescents, this substance is mostly used by males ([Mzumara 2018](#); [Jere et al, 2017](#); [Jumbe et al, 2021](#)). The biggest influencing factors found in almost all the papers seem to be peer pressure and family or sibling use of drug or substance.



Our mental health literacy research project at Millennium University led by Dr Sandra Jumbe and conducted in collaboration with Queen Mary University of London has been featured in The Guardian, a world leading British newspaper. The article titled '[Failing to cope': Malawi faces surge in young people with mental ill health'](#) highlights increasing mental health problems in Malawi coupled with a lack of mental health workforce and services

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### Project TEAM

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## Research Funding Opportunities

### Global Innovation Fund (GIF)

Improving lives through social innovation- GIF believe that innovation (any solution that has potential to address an important development problem more effectively than existing approaches), can come from anyone, anywhere. GIF accept applications from teams working in any sector in any developing country and from any organisation.



Funding stages: Pilot (up to \$230,000), Test and transition (up to \$2.3 million), Scale (up to \$15 million). For more information, [visit link](#)

### United States Agency International Development



This supports development innovations that improve the lives of people living in poverty in the developing world. The scheme provides tiered funding to pilot, test and transition to scale innovations that demonstrate evidence of impact, cost-effectiveness and the potential to scale. DIV supports innovations across all countries and development sectors in which USAID operates, including health, education, water, energy and economic development.

Funding stages: Stage 1: Pilot (up to \$200,000), Stage 2: Test and transition (up to \$1.5 million), Stage 3: Scale (up to \$5 million). For more information, [visit link](#)  
Closing date is 31st October 2022

### Master's Studentships in Humanities and Social Science



Apply to one of these Master's programmes in the United Kingdom if you want to develop humanities or social science research skills and train in an area of health. The application can be done before graduation under the condition of obtaining your degree (or equivalent) before taking up the award. Each Master's Award is for one year. Support includes a student stipend and approved tuition fees, according to the rate charged by the training university (approx. studentship stipend scale of £16,000 if based outside London and £18,000 if based in London). Please note, funds are provided at rates charged to UK/EU students rather than the overseas student rate.

For more information, [visit link](#)