

## Chapter 15

# The Increase in Women Who Use Drugs in Zimbabwe

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### Introduction

Three reasons account for women's involvement in the illegal drug trade in the context of Zimbabwe's grave economic and political crisis: as consumers of drugs, drug selling/trafficking and women as intermediaries in illicit drug use.

The chapter provides a brief overview of the involvement of women in illicit drug use, exploring how engagement in the illicit trade reduces them to second class citizens vulnerable to discrimination, abuse, violence and sexual violence within a deeply patriarchal society that marginalises the voice and role of women.

### Women as Drug Consumers

Due to the grave economic situation in Zimbabwe, significant numbers of women have become involved in sex work and/or cross border entrepreneurial activities in order to support household incomes, including in South Africa, Botswana, Zambia, Namibia and Mozambique. This in turn has brought increased exposure to, and use of, drugs. Substances that include broncleer (a cough syrup) and marijuana are used to aid women involved in sex work, including to alleviate mental and physical pain. According to Sarudzai, not her real name

as a woman, you must be strong and use some illicit drugs like marijuana to indulge in an intimate affair even with someone whom you do not love and know to ensure that you survive. It's a skill for survival. (Hamunakwadi S, personal communication, 5 November 2019)

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**The Impact of Global Drug Policy on Women: Shifting the Needle, 141–145**

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Sex work exposes women to violence and exploitation, including by men not paying for sex. Disease risks related to HIV, hepatitis C and other sexually transmitted infections are also high, with men paying not to use condoms. Although there are a number of organisations that sensitise women on sexual reproductive health rights issues, demand outstrips supply and the financial needs of women erode their sexual and reproductive health considerations.

According to Zala, not her real name, 'after being abused by a male counterpart, I ended up abusing my own child because of stress' (P. Zala, personal communication, 28 October 2019). Before going out for her usual sex work, she would give an overdose of broncleer to her one-year-old baby. The baby would sleep overnight until the following morning.

In Bulawayo, Zimbabwe's second largest city, women have been involved in vuzu parties (The Chronicle, 2019). These are street parties that involve mainly young men and women, including young girls, where different types of drugs are taken. These 'parties' can involve sexual competitions usually without condom use, in which the woman who sleeps with most men on the day goes away with the highest prize which in most cases is a lot of cash in American dollars.

## **Women as Drug Sellers/Traffickers**

Financial vulnerability, including as single heads of households, has led some Zimbabwean women to engage in drug trafficking. Zimbabwe is a cosmopolitan society where most citizens have relatives dotted across the globe. This has led some women to act as carriers of drugs such as cocaine and cough syrups such as histalix, either unwittingly or to secure modest financial reward (Africa Report, 2011).

Reports from the local media from 2012, indicate that more than 50 women were arrested for trafficking activities into Zimbabwe, with the Africa Report finding six Zimbabwean women have died in the act of trafficking by swallowing packages (The Herald, 2017). Zimbabwean women are in jails across the world due to drug trafficking. Portia, not her real name, confided that drug trafficking is not an easy option with women vulnerable to rape or threatened with death if they refuse to cooperate when caught with their contraband.

The Zimbabwe/South African border was cited as one such point where border jumping was rampant but at the same time dangerous for women. Portia confided that 50 or more rape cases happen per day and that these go unreported as women do not want to disrupt trading or face risk of arrest. Most of these abuses happen in the most remote corners of the border with high rates of HIV. At times, security forces guarding the borders and *amalaicha* (name for runners who assist border jumpers) usually abuse these women. At times, she further explained, her consignment of drugs would be confiscated for good by corrupt officials or she would be forced to split and share the consignment with corrupt border officials.

## **Women as Drug Intermediaries**

Whilst trafficking is rampant across Zimbabwe's porous borders, most drugs found on Zimbabwe's streets are a result of the intermediary role played by

desperate but nevertheless entrepreneurial women. 'Big fishermen' come along with drugs and medicines such as cocaine, broncleer, diazepam and ecstasy and distribute them to these women to sell. Increasingly, women in high-density suburbs package these drugs in small quantities and sell them on the streets of Zimbabwe. A bottle of broncleer is selling for 15 Zimbabwean bond and one woman can sell as many as a hundred boxes per week.

In their role as intermediaries, women are in the front line of law enforcement. Tanaka not her real name, has boasted to this author that women always get their freedom either by paying kickbacks or in exchange for sex with the police (L. Tanaka, personal communication, 20 October 2019). Most usually, this is unprotected and with the risk of HIV exposure. In a workshop held by Zimbabwe Civil Liberties and Drug Network in a local suburb in Zimbabwe, one woman confided that the police were to blame for the illicit drug trade in Zimbabwe, acting effectively as partners in crime (New Zimbabwe, 2018).

Whilst performing intermediary roles, women had faced death threats and extortion. Women have not found survival easy in the drug selling business. It impacts on their safety and dignity. Women have become a source of ridicule in their communities.

## **Understanding the Impact of Illicit Drug Use on Women in Zimbabwe**

At a workshop held by Zimbabwe Civil Liberties and Drug Network under the theme 'Impact of Illicit drug use from a Woman's Perspective' a consultative dialogue meeting was held in 2017 in Harare. Most women stated that illicit drug use had destroyed their social, political and economic lives. The consultative dialogue sought to share an overview of the illicit drug use situation in the country and the multi-dimensional effects of illicit drug use.

The dialogue aimed to establish the challenges faced by female drug users while also highlighting the daily lived experiences and realities of women across the board. It aimed at collectively mapping the way forward on what needs to be done in terms of advocacy and at grassroots level to promote harm reduction in Zimbabwe.

Half of the women who participated agreed that illicit drug use had a negative effect on their social lives and three quarters agreed that Zimbabwe needed to put a drug master plan and policy in place to help women who use drugs. All the participants agreed that illicit drug use had destroyed their marriages and there was a stereotyping of women who use drugs in Zimbabwe. One touching story was of a woman who uses drugs who narrated her story:

Mercy from Mufakose gave a very powerful testimony narrating how she started using drugs. Being a single mother, who was no longer able to cope with the daily financial demands of her family, she sought solace from drugs. She spoke of how she would find temporary comfort in her situation at the time when she was high. She however said she regretted using drugs after she found out that

her 14-year-old son was also in the same predicament where he was taking broncleer. She spoke of how illicit drug use had affected her health as she had developed diabetes, a development which had been recently confirmed by doctors. While she had stopped using drugs, her medical condition was now permanent and irreversible, and she regretted using drugs. She echoed how women illicit drug users need urgent attention in the country as the drug dependency was resulting in chronic illnesses such as sugar diabetes (Zimbabwe Civil Liberties and Drug Network Programs).

Women at the dialogue were divided into two groups and tasked with identifying their challenges. Key points articulated by the women included:

- Women who use drugs (WWUD) are using without information on the composition of drugs and potential health implications.
- Drugs were contributing to increased incidences of divorce as WWUD were viewed as a nuisance and neglectful of parental roles and responsibilities as they prioritise drugs.
- The employment system does not accept anyone with a criminal record or with a history of illicit drug use and this affected the rehabilitation process.
- WWUD were engaging in sex work from a young age.
- Families or mothers of WWUD were victims of shaming within their communities.
- WWUD engaged in criminal activities such as stealing valuables from their homes and communities to raise money to buy drugs.
- Religious institutions demonised WWUD, worsening their exclusion and stigmatisation.
- Drug use has increased poverty among WWUD.
- WWUD were deprived of social and health services, most particularly in prisons.
- Female offenders in drug-related crimes receive harsher penalties compared to their male counterparts.
- Women involved in drug supply found it difficult to be role models for their children and could not reprimand them for drug use in which they were the source of the drugs.
- WWUD suffered unwanted pregnancies, opportunistic infection chronic illnesses and frequently abandoned medication and/or developed drug resistance.
- Illicit drug use fuelled corruption as law enforcement agents targeted drug suppliers.
- Illicit drug use is a cost on women as they had financial responsibility for paying the fines of male drug using family members.

## **The Way Forward**

Women's struggles in the illicit drug trade epitomises a system where local structures are not strong enough to improve the socio-economic environment

of women in their struggle for social and financial autonomy. In most cases of female drug use, the push factor identified is opportunities for female autonomy being closed off by male counterparts.

People who use drugs are characterised as criminals and thieves who do not have rights. Zimbabwe is currently looking at introducing its first drug master plan. Whilst the process may take some time to bear fruit, it is important to note that there has been a change in the narrative with organisations like Zimbabwe Civil Liberties and Drug Network calling for policy reform and the introduction of harm reduction strategies to help people who use drugs. An inter-ministerial committee to look into the current drug laws is now in place. This is another positive step in the drug policy reform crusade to Zimbabwean women and drug users in general.

Whilst a lot of programming is being done to change the narrative in Zimbabwe's illicit drug use landscape, much still needs to be done as the country evolves from the authoritarian government of former President Mugabe. The current administration has at least opened some doors of hope for people who use drugs. Dialogue is ongoing, with the crafting of the first drug master plan for Zimbabwe and which has involved civil society and women's groups.