Infusion of Marginalised Voices in Peer Counselling Strategy to Alleviate Drug Abuse in Rural Learning Ecology: Need Analysis

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Abstract: The study was necessitated by the absence of a peer counselling strategy formulated by and for the stakeholders in Chivi, Zimbabwe rural learning ecologies. Reviewed literature substantiated that peers had the capacity to influence one another to avoid drugs and the use of drugs, using a peer counselling strategy. I realised that there was a gap in terms of a specific peer counselling strategy in relation to drug abuse in rural learning ecologies. The research study involved participants within Zimbabwean rural learning ecologies in formulating a peer counselling strategy that was culturally grounded. That gave voice to the marginalised and brought transformation on how previous peer counselling strategies are formulated. The study adopted Critical Emancipatory Research (CER) as a lens. CER allowed participants from rural learning communities, who are marginalised, to participate in formulating a peer counselling strategy in Zimbabwe. I adopted the Participatory Action Research (PAR) approach, which buttresses the theoretical framework CER as they advocate CER. Both PAR for empowerment and emancipation of the marginalised members of the rural learning community. I used the Free Attitude Interview to generate data. The researcher analysed the data, made findings, determined implications, and did strategy formulation. The research results revealed that there was a need for peer counselling strategy formulated through the inclusion of views of rural learning communities. Moreover, the research found that, most peer counselling strategies in Zimbabwe are western in nature and lack suitability to assist rural learners. Furthermore, I noted that there are threats to peer counselling strategies, such as lack of peer counselling trainings. The significance of a peer counselling strategy was portrayed in Zimbabwe urban learning communities. This shows conflict of power, domination and social injustice perpetuated by urban dwellers on the rural communities in terms of formulation of a peer counselling strategy.

Key Words: Peer counselling, rural learning ecologies, strategy, critical discourse analysis, participatory action research, participants, formulation, theoretical framework, learners, community, marginalised

I. INTRODUCTION

This study was aimed at the need of formulating a peer counselling strategy to alleviate drug abuse in rural learning ecologies. In this study, peer counselling strategy is a technique used by rural learners to counsel and give guidance to other learners dealing with problems such as drug abuse. I realised through literature and working as a peer counsellor coordinator in that there is no specific peer counselling strategy formulated by rural learners to solve drug abuse in their communities. The background of the study was dealt with at first, focusing on the need for a peer counselling strategy formulated by rural communities to alleviate drug abuse in their rural learning ecologies. I also introduced the research theoretical framework, which is Critical Emancipatory Research (CER) and Participatory Action Research (PAR). The drug abuse problem is affecting rural learners. This is supported by the evidence in the research study by Cooper (2009:135), who confirmed that a “study on adolescent drug use assessed by teachers should that alcohol use was the most serious drug problem in Zimbabwe”. In addition, the Department of Basic Education in South Africa (2013: iii) reported that “[s]ubstance abuse, binge drinking and tobacco use have a negative impact on learners’ academic performance, being linked to learning difficulties, absenteeism and school dropout”. The abuse of drugs by rural learners creates the need to formulate a peer counselling strategy to alleviate drug abuse in rural learning ecologies. This peer counselling strategy will be used only in rural learning ecologies; it cannot be used in towns and other countries because of factors such as different cultures of learners. I am of the view that a peer counselling strategy is effective to alleviate drug abuse, as proved by Oliha (2014:2), who asserted that “the alarming evidence in the prevalence of drug abuse, the effects and consequences of substance abuse among students have called for concern and challenge to all helping professions to mount strategies of equipping youth with skills of living devoid of substance abuse”. After meticulously analysing voluminous literature on peer counselling, I realised that there was a gap in terms of a specific peer counselling strategy in relation to drug abuse in Zimbabwe. The peer counselling in Zimbabwe still needs to be explored as revealed by Chireshe (2013:253), who indicated that: “status of peer counselling in Zimbabwe schools has not been fully investigated”.

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II. REVIEW OF THE RELATED LITERATURE

Specific peer counselling strategy to alleviate drug abuse in rural areas

Following the adoption of the recommendations of the 1999 Presidential Commission of enquiry into Education and Training, the Ministry of Primary and Secondary Education in the year 2005 came up with Director Circular Minute Number 23 which sought to strengthen and institutionalise guidance and counselling in Zimbabwe schools (Chimonyo, Mapuranga & Runganye, 2015). The Nziramasanga Commission (1999) indicated that, after research studies, peer counselling were introduced in schools. However, after a close evaluation of peer counselling policies, one will note that there is no specific, well-defined peer counselling strategy formulated by rural stakeholders that addresses drug abuse among learners in rural learning ecologies. This is social injustice – rural learners have the right to protection against drug abuse. Nkoane (2010:113) wrote that “CER’s social justice is opposed to any classroom practice that undermine the rights of students, in other words, justice maintain a particular focus on the critical pedagogy principles of dialogue and dialectic voice”. Moreover, the absence of a specific peer counselling strategy in the curriculum, calls for the emancipation of rural disadvantaged community members to bring about transformation in the school curriculum to include peer counselling strategies. I concur with Nkoane (2010:113), who argued that “the transformative curriculum looks at existing social conditions within and beyond classrooms to critique dominant arrangements to enable the participation of marginalised students”. This confirmed the impact of a preventive peer counselling strategy, as reflected by the evidence of research studies in Australia. Even in South Africa, a peer counselling strategy is employed to mitigate drug abuse in schools. The Department of Basic Education of South Africa (2013:21) explained that “[C]APS further allow for the integration of drug and substance abuse into co-curricular activities and through peer-to-peer programmes where learners are allowed to define and discuss drugs and substance use and encouraged to find solutions to the problem”. In addition, Morojele, Parry and Brook (2009:23) stated that “research has shown that peer led strategies are effective in preventing substance abuse amongst young people, as adolescents are often more willing to listen and take advice from others with similar experience”. I realised, through literature review on the status of peer counselling in Zimbabwe, that there is a demand of a peer counselling strategy to mitigate drug abuse. The importance of research evidence of the need for formulating a peer counselling strategy, is supported by the United Nations Office of Drugs and Crime (2004a), that “prevention activities should be scientifically accurate, objective and free of value judgements”. From the many literature sources submitted in this study, I concluded that there is lack of substantive evidence reflecting the presence of specific peer counselling strategies in relation to alleviation and prevention of drug abuse in rural learning ecologies. In some countries, governments embarked on research studies in order to ascertain the relevance of peer counselling in the educational sector. Bett (2013:478) stated the following: “[T]he Ministry of Education, through the Report of the Presidential Working Party in Education and Manpower Training for the next Decade and Beyond (The Kamunge Report, 1988) and the Commission of Inquiry into the Education System of Kenya (The Koech Report, 1999) recommend that peer counselling service be established in all Educational Institutions to motivate youth to express their desire to protect themselves against HIV/AIDS and other social and psychological problems.

The high prevalence of drug abuse among learners

The United Nations on Drug Control (2010:23), stated that “[i]licit drug users in Africa make up roughly 17% to 21% of global illicit drug users and the majority of treatment demand in Africa is for cannabis abuse (63%).” This statistical data paints a gloomy picture and call for strategies that are inclusive of all stakeholders’ views in order to fight this epidemic. Moreover, Soobruyan (2013: i) mentioned the following “[D]rug abuse has been linked to academic difficulties, absenteeism, thus negatively impacting on the attainment of quality basic education. It is also associated with a host of high risk behaviours, including unprotected sex, crime and violence, traffic accidents, mental and physical health problems” More so, Chidarikire (2017:196) argued that: “The negative effects of drug abuse are numerous it has devastating effects on the academic performance of learners, and leads to unacceptable behaviours and health negative effects and the devastating repercussions of drug abuse in the well-being of learners and other stakeholders are of such high proportions, one cannot afford to ignore them”. Many research studies have been done in Zimbabwe that reflect that there is a culture of high drug abuse in Zimbabwe. For example, the research study by Mutsvanga (2011:65) indicated that “the substance use culture in Zimbabwe is fast spiralling out of control, sucking into its vortex, adolescents”. Another research study that substantiated drug abuse in Zimbabwe, was done by Maseko, Ngwenya and Maunganidze (2014:185), who found that “reports in Zimbabwe are consistent in telling remarkable expansion in students’ interest in drugs and use of substances”. From another angle, Oliha (2014:2) claimed that “many drug abuse behaviours are heavily tied to peer culture, as children learn from and imitate the peers they like and admire”. This resonates with literature, which states that there is a high level of drug abuse in rural learning ecologies; for example, the study done in rural areas by Cooper (2009:136), who confirmed that “rural secondary pupils should an 18.5% prevalence rate of tobacco usage at 42.9% admittance rate of smoking and alcohol consumption among the patients”. In addition, this year, at Mucheke High School in Zimbabwe, the headmaster wrote in the school newsletter informing parents about school children who are expelled from school after abusing drugs. The Mucheke High School Newsletter (2016:2) reported that “this year (2016) four form 3 students are excluded for taking alcohol and
drugs” Furthermore, Kisii University (2016:1) affirmed: Research has shown that alcohol and binge are prevalent drugs of abuse among University students. Certain factors like peer pressure, easy availability of drugs and substances, parental and societal influences, emptiness in life, print and news media, pressure among many, play a leading role in drug abuse”. The above empirical data generated, as the presence and negative impact of drug abuse on rural learners was perceived. The high prevalence of drug abuse by rural learners, as shown by the above evidence, concurs with views in this research study, which motivated the study to seek ways to mitigate drug abuse. This justifies the need of a peer counselling strategy to alleviate drug abuse in rural learning ecologies. The active community engagements should pay attention to the identified peer counselling strategy gaps to immediately address them. This leads to the formulation of a peer counselling strategy as a solution. To mitigate this drug abuse problem affecting learning ecologies, I used the PAR methodology and the CER theoretical framework. PAR and CER recognise that different stakeholders should give their inputs in creating a peer counselling strategy, as Dube (2016:64) postulated that “PAR allows multiple voices and players to engage in dialogue through emphasis of the principles of CER such as emancipation, social justice and recognition”. In addition, on the emancipatory perspective of PAR, Kemmis and McTaggart (2008:88) argued that PAR “helps people recover and release themselves from the restrictions of irrational, infertile, unjust, and unsatisfying social structures that limit self-development and self-determination”.

III. THEORETICAL FRAMEWORK

This study is premised on CER theoretical framework with main thrust on principle of social justice. Social justice is explained by Connell (2012:681): “[It] concerns quality in the distribution of an education service, and it also concerns the nature of the service itself and the consequences for society through time”. The research study by Dal et al. (2016:1) stated that “[c]ritical studies generally rest upon a quest for social justice, conflictual views and efforts to reveal a hidden political agenda”. Therefore, in this research study, social justice in CER enabled the researcher and participants to articulate and diffuse tensions and conflicts of power between the people in the Zimbabwean rural learning ecologies and policymakers in the identification of the need and formulation of a peer counselling strategy in the alleviation of drug abuse in their community. In considering social justice, Brady (2010:8) alluded that “social justice is a learned response fostered by progressive human and faith development. Building upon the inherent human dignity of every person, social justice involves working together to establish a just society”. The social justice principle in CER is enhanced when the researcher provides opportunities of active participation for marginalised rural community members, as recommended in Corbett, Francis and Chapman (2007:86): “researcher and the participants [to] join together to explore power inequalities and imbalances”. In this study, the rural education participants were emancipated through being involved in the whole research process, including identifying the need of peer counselling, the data generation process and the formulation of a peer counselling strategy. Social justice is against exclusion of rural community members in the identification of drug abuse problem and provide solution to mitigate drug abuse. Social justice concept in CER gives rural participants right to discover their problems and power to mobilise resources to solve them. In support of the above Nkoane (2010:113-114) argued that: “it opposed to any classroom practices that undermine the rights of students. In other words, in light of social justice maintain particular focus on the critical pedagogy principles of dialogue and dialectic voice”. The involvement of Zimbabwean rural learners and adults together in this research study played a role in dealing with social injustice. However, Sengani (2015:37) described that “in most African cultures, elders have, over the years, used power bestowed upon them to make critical statements to their children, for this reason, there have been silent wars in the families and communities”. The above view is supported in the research study of Schmidt (2006:24), who posited that “some African Chiefs, headmen and male elders are power assigned and manipulated by colonial state”. However, through the lens of the CER theoretical framework, which I use to interrogate issues, this is a challenge because it promotes exclusion of women and children in decision-making. In Zimbabwean rural learning ecologies, there are strong cultural beliefs; elders’ words are highly respected and children are not allowed to disagree or challenge elders. The use of CER in this study emancipated learners and adult participants through gaining knowledge of unequal power relations, respect of one another’s views, regardless of age or gender, and to find ways to demystify social injustice. In addition, Penuel (2016:1) stated that participation “transforms the ways that people imagine themselves and expands their possibilities for action and Critical Emancipatory Research emancipates the participants engaged in the strategic action from the dictates of compulsion, tradition, precedent, habit, coercion and deception”. Therefore, through CER, rural disadvantaged members, such as children and women, are empowered to exercise their right to speak their issues concerning drug abuse and lack of a peer counselling strategy, and to offer solutions. CER is anchored in anti-oppressive philosophy, as Hlalele (2013:103) posited that “CER advances the agenda of human emancipation, regardless of status and strives for the attainment of peace, freedom, hope, justice and equity in all its forms”. It is my view that CER breaks all racial, gender, economic, cultural, educational, and professional statuses – makes everyone equal and allows participants to reach levels of desired peace, freedom and justice. In addition, the agenda of CER is explained by Hlalele (2013:104), who argued that “it is to identify and change the causes of oppression and pays more attention to the causes of oppression and not the signs of oppression”. In Zimbabwe, I noted that the causes of oppression are on the societal structures that hinder community members, such as learners and female participants, to actively participate in issues that
concern them. The emancipatory and empowerment agenda is that the CER method will enable participants to be in total control of their circumstances and they are accorded respect in the research study.

IV. METHODOLOGY

I used PAR as research methodology, Jacobs (2016:1) stated that the participatory nature of PAR “embodies a democratic approach to research in which participants work collaboratively in the co-generation of new knowledge to address a specific issue or problem”. PAR operates on a multidisciplinary and collectively conceptual framework which participants are involved in. It assisted us to be broadly inclusive. Mthiyane (2014:6) made the following claim: “[E]mpowerment is a mechanism, a multidimensional social process which can assist individuals, groups and communities gain control over their lives. It fosters power to act for those who are less powerful on issues they define as important to them, and counter oppression by dominant culture, values and language”. This means that participants are active participants and are empowered in the research study. The principal researcher and participants discussed issues and collectively agreed on solutions to address the problems bedevilling their societies. Therefore, learners and all participants participated on an equal footing, in collaboration with the main researcher, and are empowered throughout the research study process. The PAR methodology allowed participants, and gave them the opportunity, to discuss our problems and offer solutions to mitigate the problems. These discussions were held in a non-threatening environment that was free of fear. Khan (2014:30) argued that “positivism uses larger than qualitative sample/representative. The interpretivist has a small sample size, small/purposeful/ respondents with important information/not meant to be representative”. The success of PAR is premised on total cooperation and a high level of commitment from participants, who are a source of information that we later use to generate data through focus group discussions using free attitude interview technique. The marginalised and oppressed participants were empowered in this research study through giving their views, and listening to and being actively involved in identifying the need and formulating a peer counselling strategy to solve drug abuse problems in their learning environments. My above respective perspectives are supported by Tshelane (2013:414), who stated that the core value in PAR refers to “research done with mutual respect for individual needs and differences and with recognition of one another as equal members and values the contributions of the participants”. The participants in this study had an opportunity to air their ideas about issues of formulating a peer counselling strategy and took ownership of the research study results. I was confident that PAR was appropriate in this study because it allowed collaborative inputs in formulating an effective and culturally acceptable peer counselling programme that would have a buy-in from all stakeholders. It permitted all stakeholders in peer counselling to identify and acknowledge the problem, study the problem, analyse it, and formulate peer counselling strategies to solve the problem. Zvirevo (2013:34) reckoned that the “research participants should be members of the community who are knowledgeable about the problem, have technical skills and something in common like culture and geographical location”. These participants are selected for the following reasons: they came from the same geographical location, and the same socio-economic and cultural backgrounds; they had technical knowledge that was useful in this study; and they also had influence on policymaking decisions. PAR is a paradigm shift from the traditional research approaches which give more power to the main researcher over the participants. This research study focuses on empowering the community. Nkoane (2013:394) made the following remark: “[S]ocial justice becomes a norm in this kind of relationship because it is about respect and addresses issues of equity, freedom, peace and hope. CER values the contribution of the participants and, as such, the research becomes transformational and problem-solving. The marginalised in this research study are learners, teachers, counsellors, social workers, educational psychologists, members of parliament, and chiefs. Their involvement in formulating a peer counselling strategy empowered them and assisted them in eradicating inequitable learning conditions. They are autonomous and owned the research process, and I did not exert an influence on them on how they formulated the peer counselling strategy for the alleviation of drug abuse in their community. The participation of learners particularly increased the democratic space in this research study. This is supported by the Department of Basic Education (2013: iv): [W]hile the policy mandate is substantive, focus now needs to be shifted towards implementation. International policies, including the UN Convention on the Rights of the Child, and the African Youth Charter, mandate signatories to protect children from the use of substance, and their involvement in production and trafficking of substances. Furthermore, the Zimbabwe Constitution (2013:25) stipulated that “children have a right to education, health and protection from drug abuse.

V. DISCUSSION AND FINDINGS

Absence of a peer counselling strategy formulated by rural communities

Educational psychologist alluded that: “We acknowledge that there is no peer counselling strategy formulated by rural community members. We have never being in engaged by program formulators. The responsible authority just gave us strategies that are formulated in town or other foreign lands. Sometimes we are even trained on how to use these foreign counselling technics.”

Local Chief explained that: “Today is my first time to be invited to participate in formulating peer counselling strategies that will help our children to deal with drug abuse. There is no peer counselling strategy that was formulated by people in my community, I am a gate keeper and all program
formulators and implementers requested my permission to do their work”.

Parent C explained that: “we are marginalised in the formulation of educational programs of our children because they (program formulators) think that we are ignorant and cannot contribute sensible information concerning what our children should learn. However, there are no programs that succeed without parents’ support”.

Hence, the participants stated that they had never seen the current or previous peer counselling strategy being used to specifically deal with drug abuse in rural learning ecologies. Therefore, they are not aware of its contents. On the other hand, peer counselling in Zimbabwe is still at infant level and needs to be explored deeper. This was verified by the research studies conducted by Chireshe (2013:253) that confirmed that “the status of peer counselling in Zimbabwe secondary schools has not been fully investigated”. Peer counselling strategy should be formulated through collectively and actively engaging disadvantaged rural community members who are important stakeholders in the education of their children. I agree with the principle of the ability and increased involvement of disadvantaged societies in solving their problems, as noted by the Hidden Curriculum (2014:1), which observed that increasingly, “schools are being more intentional and proactive about involving a greater diversity of stakeholders, particularly stakeholders from disadvantaged communities and backgrounds or from groups that have historically been underserved by schools”. Moreover, Higginbottom and Liamputtong (2015:3) explained that PAR “has origins in Latin American political activism and bottom-up approaches to challenging the oppression produced by poverty and illiteracy”. The involvement of the disadvantaged rural communities in this study concurs with the above literature reviewed, on the other hand I agree, to a lesser extent, with the view that learners and other rural participants have a limited understanding of peer counselling strategies in their learning environments. The view of rural communities’ lack of understanding of peer counselling strategies is based on the evidence that some people in rural areas are not formally educated, due to poverty and marginalisation. To mitigate the lack of knowledge of peer counselling strategies in oppressed rural communities, I allowed the active participation of community members, such as learners and others, to get adequate knowledgeability of peer counselling strategy planning, preparation and adhering to peer counselling strategy needs.

The current peer counselling strategy is foreign to rural learning contexts

Social worker in this research study said, “The peer counselling strategy being used in was not formulated by us. The one I am using was formulated in Sweden. I find it difficult to use it because it has lot of foreign concepts and objectives that cannot be achieved in rural contexts. I have tried to improvise but results are not coming by. This real frustrates me in my work”.

Learner A commented that, “I am a peer counsellor for the past three years however; I am struggling to use the current foreign made peer counselling strategy to help my colleagues to deal with drug abuse in at our school and in the community. The challenges emanate from the language used – deep vocabulary and expressions that cannot be translated adequately in our vernacular language”.

Teacher B opined that: “In the current peer counselling strategy we use games as one of the techniques to counsel learners. Some of the games are designed to be played in snow but in Zimbabwe there is no snow. This one example for aspects that are foreign and do not apply to our context because there is no snow here and we do not have the equipment to use. We need counselling techniques that uses indigenous games”.

Hence, current Western content in peer counselling strategies is difficult to use in Zimbabwe because it is devoid of the voice of indigenous people. This means that rural learning communities are not involved in the formulation of peer counselling strategies and are not trained in using a Western peer counselling strategy to alleviate drug abuse. Participants are demotivated to engage in research studies because they feel their views are not being captured when formulating and implementing peer counselling strategies. One of the philosophies of the PAR methodology and CER theoretical framework is to ‘decolonise’, as Higginbottom and Liamputtong (2015:12) asserted: “in response to the ongoing legacy of colonization, key theorists have challenged the dominant hegemonies and conceptualised decolonising methodology that reject Western world views, lenses and ethno-cultural orientations, and instead, often draw upon collective rather than highly individualistic approaches.” Furthermore, Dube (2016:100) explained that an approach that has foreign origins “does not fit appropriately in the context of Africa”. Therefore, my argument, underpinned in the CET, is that I should formulate a peer counselling strategy through collaboration and emancipation of rural communities. Additionally, this view is supported by Charerna and Shizha (2008:45): “[T]he influence of Eurocentric counselling theory, research and practice among the Shona people has demonised and oppressed individuals and groups whose culture lies outside the Eurocentric counselling culture. It might be worthwhile for all community leaders, traditional healers, pastors and counsellors to employ the multicultural. The unfortunate part is that there are some who think that Western knowledge is associated with high prestige. In relation to this, Shizha (2005:5) commented that “colonial education managed to corrupt the thinking and sensibility of the Africans; it filled their minds with abnormal complexes which de-Africanised and alienated them from their socio-cultural milieu”. The research findings of Shizha concurred with the findings in a research study done in Zimbabwe by Muchenje and Gorongwa (2013:887), who wrote that “there is a
Chinese scholars are associated with knowledge. Their view is that Western-based knowledge in peer counselling should not be used to demoralize the rural community’s knowledge of peer counselling used to formulate a peer counselling strategy to alleviate drug abuse in rural learning ecologies. I concur with the view that PAR researchers are intellectual activists, as suggested by Loewenson et al. (2014:14), who argued that “PAR escalates social agency and encourages activism in an intellectual approach”. In this research study, the participants and I took the position of intellectual activists in addressing intellectual inequalities. The aspect of the emancipation and active participation of rural communities agrees with literature submitted above. 

Zimbabwe, as a country, was colonised by Britain. Therefore, most of the policymakers are trained in westernised education systems and peer counselling educational materials are Western. This means that current peer counselling strategies used in rural learning ecologies are made in foreign lands and contain components that are not in line with rural contexts. This creates an environment that needs an indigenous peer counselling strategy to address the issue of drug abuse within the context of rural learning ecologies.

**Emancipation of rural communities in formulation of peer counselling strategy through using PAR AND CER**

Teacher D explained, “Today I feel empowered to contribute my views on the type of peer counselling strategy that we want to use. I feel appreciated and my knowledge is being valued. I hope my views are going to be factored in the new peer counselling strategy being formulated.”

The social worker stated: “We are uncomfortable of using peer counselling strategies that are imposed on us and I feel powerless to transform these peer counselling strategies to meet the Zimbabwe context because we, the workers, are not empowered by our authorities to make any changes. This complices our work, thereby, we fail to alleviate drug abuse in our rural learning ecologies.”

Learner 3 echoed the following sentiments: “This experience of participating in peer counselling formulation enhances my self-esteem and confidence as a peer counsellor. Learners who have drug abuse related problems usually do not want to be helped by someone without adequate knowledge and understanding of peer counselling. This is important training and experience I needed to sharpen my skills.”

My view is that the PAR methodology used in this study, permitted stakeholders to fully participate in the formulation and implementation of the peer counselling strategy. Dube (2016:1) alluded that “the PAR approach stresses justice and empowerment of all individuals and a collaborative approach to problem solving”. In addition, Setlalentoa, Ryke and Strydom (2015:1) alluded as follows: “[C]ommunity support networks or service providers such as social workers and police officers and/or the police service have the responsibility to intervene to reduce alcohol abuse and the problems associated with it, in partnership with community members. The community members provide services in communities, with an intention to bring different skills, knowledge and experience to combat the problem of alcohol abuse and are referred to as community support networks”. The power relations between the main researcher and the participants were diffused through the use of CER and PAR in the research study. I noted that there was colonisation of peer counselling strategies by western-inclined formulators. There is an unequal power relationship between the peer counsellor formulators and the rural community members who are implementers. Taylor and Francis (2014:34) made the following remark: Counselling and guidance techniques developed from the Western world may not be appropriate for many African countries, where cultural influences, government policies and the availability of resources can have significant implications for service delivery. In order to develop more robust techniques, researchers and practitioners need rigorous analysis of professional practice across the nations of Africa. This implies that the peer counselling strategy used was not taking into consideration the views of the rural learning ecologies and that they are disempowered in participating in creating solutions to their problems. The current foreign-based peer counselling strategies are no longer appropriate; they need to be revisited and adjusted to suit rural situations, demands and cultural values. The peer counselling strategy formulated by rural communities should infuse their cultural values, attitudes and beliefs, as alluded by Mahoso and Kuyayama-Tambura (2014:252), who argued that it “should promote the attitudes, values and beliefs cherished by parents so that there is harmony and cooperation between the school and parents…[and] cater for the interests and needs of children”. The rural communities should be actively engaged to formulate their own peer counselling strategies to alleviate drug abuse in their learning ecologies. The above observations are supported by literature cited in Chapter three, which reveals that PAR has the principle of teamwork in finding solutions to community problems. The issues raised by participants in this research study, show that rural community members are not involved, and do not actively participate in the formulation of peer counselling strategies to alleviate drug abuse in rural learning ecologies. Zimbabwe communities, both rural and urban, are the main contributors to the education system through the building of schools and other roles. This is attested by Tsikira (2014:178), who affirmed that “education was provided by the community in a collective manner”. Rural communities cannot be bystanders in issues of their children’s education. Semali and Stamback (2007:67) postulated that “it took a village to raise a child. The community’s interests are considered more important than those of the individual”. This is why this research has an
empowering agenda. Sinnerbrink (2012:12) stated that CER is “a theory that seeks to transform society, especially those oppressive and dehumanising structures of society and curriculum, and replace them with the ones that emancipate people”. The literature reviewed in this study pointed out that CER, used in this study, empowers the participants in this study. Conversely, the active participation of the community in research is one of the values of Participatory Research, as explained by Cargo and Mercer (2008:328), who defined PAR as “a systematic inquiry, with the collaboration of those affected by the issue being studied, for the purpose of education and of taking action or affecting change”. In contrast, some researchers in Zimbabwe are not actively engaging rural community members. This has been noted as one of the demotivating factors that make it impossible to eradicate or significantly reduce drug abuse in rural learning ecologies. One could note the participants’ frustration with policymakers and peer counselling strategy formulators who design policies without their involvement. This causes the peer counselling strategy to fail to meet its target, according to Jansen and Sayed (2010:11), who stated that “policy failures arise from non-consultation with stakeholders and the consequent lack of ownership of such educational policies”. In spite of this, there is clear evidence that PAR is consultative, brings equality and perpetuates ownership.

VI. CONCLUSION AND RECOMMENDATIONS

The findings showed that there is no specific peer counselling formulated by rural community members in Chivi to alleviate high prevalence of drug abuse in their learning ecologies. Although the data was gathered from Chivi rural areas, its conclusions can be generalised to all rural communities in Zimbabwe since they have similar cultural values, norms and beliefs. Some that challenges observed in this study was lack of active participation of rural education stakeholders in the formulation and implementation of peer counselling in rural learning ecologies; no peer counselling trainings being offered to teachers; peer counselling strategies should be in vernacular languages to be easily understood by counsellors and counselees and lack of participation of rural communities in the formulation of peer counselling strategy to alleviate drug abuse. I recommend that, curriculum and program developers should include rural education stakeholders such as learners, local traditional leaders and parents in the formulation of peer counselling; training workshops for peer counsellors and teacher counsellors and counselling materials should be in vernacular languages.

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