

# ILLCIT DRUG USE AND TRADE: AN ETHNOGRAPHIC STUDY OF KUMASE (2000–2018)

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## ABSTRACT

The illegal drug trade is a world phenomenon, which has had some adverse impact on societies. Significantly, the impact is damning in developing economies in Africa and Ghana in particular. This paper therefore seeks to address the causes and effects of the use and peddle of these illegal drugs in three communities in the capital city of the Asante Region of Ghana. It further ascertains the extent to which these drugs burden the security agencies in the communities and the country in general. We have used documentary and non-documentary sources to arrive at some postulations on this important social question which has wider ramifications on Kumase, Asante, Ghana and Africa in general.

**Keywords:** *Illegal Drugs, Addiction, Crime, Drug Trade, Ghana.*

## INTRODUCTION

Globally, the illegal drug trade has been a major challenge to humanity. Both the twentieth and twenty-first centuries have not been spared from the headline, “drug use on the rise”. The effects of illegal drug-use have been issues associated with violence, money laundering, early death and madness (De La Rosa *et al.*, 1990). The sale and use of drugs in Ghana have persisted over time. For example, the production and use of marijuana domestically and for other parts of the world has subsisted since the 1960s (Acheampong, 2005). The 1980s saw the trafficking of cocaine and heroin through Accra. Since then, Ghana has experienced the spill-over drugs trade and their consumption of same (Bernstein, 1999). Series of

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policies have been increasingly applied to the drug market economy where illegal drug trade is on a high scale. Since the 1980s, scientific studies on the harm illicit drugs can cause remain limited. More so, in the twenty-first centuries smaller steps have been taken concerning the eradication of same (Acheampong, 2005). Statistics show that, by 2014, about 50,000 Ghanaians, particularly the youth, abused hard drugs (GhanaWeb, 2015). Research has shown that Ghana ranks third, behind Papua New Guinea and Micronesia in the world, on marijuana consumption and export (Adu-Gyamfi and Brenya, 2015; GhanaWeb, 2015). In their study in 2014 on street children, Oppong-Asante and his peers reported that 12% and 16.2% of street children in Ghana were reported to have used alcohol and marijuana respectively (Oppong-Asante *et al.*, 2014).

However, research conducted on drug trafficking shows that the phenomenon has a high potential to affect the transit-cities negatively, including adverse health and social impacts. These include the disruption of health care provision to drug users, increase in risk behaviour associated with infectious disease transmission and overdose as well as exposing unaffected areas to harm associated with the use of drugs (Acheampong, 2005; USAID, 2013). It is imperative to note that, systematic information and analyses of the political economy of drug production and trade in contemporary Africa is rare. Available literature on drugs in countries like Nigeria and South Africa are primarily focused on legal and medical issues. Thus, there is scant literature concerning the use of drugs and organised crime in Africa. This is in sharp contrast with knowledge of drugs production and trade in Southeast Asia and Latin America. Ghana presents a particularly interesting case for several reasons although few studies have been done on drug related matters.

The literature on illicit drug market examines the transportation of drugs from their production bases to streets in the United Kingdom, the United States of America and Australia (Cockayne and Williams 2009; Bernstein, 1999). It also argues that, foreign-based importation groups, some of whom are Africans, have link with UK-based distribution. Nigerian and Ghanaian drug dealers have been exporting locally produced marijuana to Europe in such large quantities that attracted official attention in a sustained manner (Ellis, 2009). Some of these marijuana barons had by the 1980s proceeded to deal in cocaine and heroin business world-wide. The successful Nigerian and Ghanaian drug barons established networks in other West African countries like Benin and La Côte d'Ivoire and in most parts of the world (Ellis, 2009). Estimates from the Narcotic Control Board of Ghana showed that about 50 percent of the domestic production of cannabis in Ghana was exported from the 1980s. In 1992, a publication by the Daily Graphic, a Ghanaian newspaper, stated that, by the beginning of the 1980s, Ghanaians had negligible knowledge of drugs like heroin, cocaine or other complex synthetic drugs. The publication further indicated that the situation had by 1990 changed entirely and that between 1984 and 1990 as many as 1,744 illegal deals in narcotics were reported in Ghana (Acheampong, 2005).

Writing in an earlier period, Zahn and Bencivengo as well as Monteforte and Spitz reported that there is a correlation between illicit drugs and crime. Drugs and crime have been related for about a hundred years and that scientific inquiry has been done to establish the link between the two for over a quarter of a century (Zahn and Bencivengo, 1974; Monteforte and Spitz, 1975). Until the mid-1980s, research into drug induced violence were conducted from the individual level perspective. This perspective analysed drug-violence as the physical or psychological impact of drug addiction or to the violent outcome of the quest by drug addicts to acquire the needed economic resources to support their habit (Goldstein, 1985). These individual-level perspectives were largely replaced by systemic violence model following the proliferation of crack-cocaine markets in the United States during the 1980s (Goldstein, 1985).

The systemic violence model does not view drug related violence as a function of drug use or dependence on it. Rather the way the market for illicit goods is structured is viewed as the system that produces drug related violence. The business of drugs involves large sums of money which raises the stakeholders' standards. Meanwhile, it unfolds in an illicit market which is regulated by no legal regime. There is thus no legal recourse for economic actors to resolve disputes (Goldstein, 1985). Building on the systemic violence model, Alfred Blumstein (1995) hypothesized that the increasing demand for crack cocaine in the late 1980s and early 1990s essentially generated the rising rates of homicide during the period. The market produced low-priced crack cocaine which attracted a new layer of low-income drug users. These users were habitual "one-hit" drug buyers at a time. This trend increased the volume of market transactions in a context of a market that had no legal regime to regulate market transactions. Individual players on the market thus deemed it appropriate to use firearms and violence as an instrument to protect their interest and to resolve conflicts (Blumstein, 1995). Blumstein argues further that these developments generate some sort of 'arms-race' in the community as both drug market activists and non-drug users move to acquire firearms to protect themselves and to signify their status. This arms race among drug market participants and communities increase the probability that a complex web of disputes will be resolved through violent means. Disputes between drug users; between drug and non-drug users, and disputes between community members could all receive violent resolutions. This study essentially highlights the relationship between drug market and drug-use with violence and the conceptualization of this relationship.

Several authors have conducted research concerning the use of illicit drugs. Previous studies like that of Monteforte and Spitz, 1975; Sandwijk et al., 1991; Acheampong, 2005; Cockayne and Paul, 2009; Adu-Gyamfi and Brenya 2014; 2015; Schmidt et al., 2016; Mack et al., 2017; Peacock et al., 2018; Johnston et al, 2019 have discussed the subject under review under case studies of institutions and territories spanning several decades but have failed to produce concrete and

accurate report concerning the causal elements of the emergence and functioning of the drug market in Africa and Kumase in particular.

Attention has thus not been paid to examining the illicit drug issue on communities like Bantama, Asawase and Ashanti New Town (Ash Town) in Kumase. The current research focuses on illegal drug market in the three communities in Kumase with wider ramifications and generalizations on Asante, Ghana and Africa. It teases out the drivers for the use and sale of the illicit drugs and its impacts on the people of Kumase with wider ramification on the African continent. It further discusses the challenges of the security agencies concerning drug-related issues. Attention is also paid to the responses from users and traffickers of the drugs. Interviewees and respondents have been duly anonymized. Again, the paper traces the causal elements of the violent activities and discusses the effects of drug use on the people in the communities that were studied within the period under review.

#### METHODOLOGY

The research is based on a qualitative research approach. Semi-structured interview guide was used to obtain data from the various participants. In all, thirty-six people were interviewed from all the three communities. Twelve respondents were selected from each of the three communities in Kumase (Bantama, Asewase, and Asante New Town). Ten of the twelve participants in each of the communities were purposefully selected based on the fact that they had knowledge concerning the use and proliferation of drugs in their respective communities. Two marijuana addicts were also interviewed from each of the communities included in the study. All interviewees were duly anonymized. On average, each interview took about twenty-five (25) minutes. Prior to the commencement of the interviews, both written and spoken consent were sought from the respondents. The researchers verbally received the consent of the inhabitants of the three communities that were included in the study on the basis that their responses would be duly anonymized to hide their identity. On the part of the police, consent was given by respondents. Data from the interviews was recorded and later transcribed, filtered and sorted manually by playing each recording not more than five times to capture all the ideas including the experiences of the respondents as reported in the recording. As hinted earlier, the authors adopted a semi-structured interview approach which allowed them to probe respondents for further insights on the subject matter. The interview guide contained questions that required informants to trace their awareness of the existence of hard drug use and sale in the communities. Informants were also required to identify the repercussions hard drugs levies on the community.

The criteria for selection was premised on the fact that each individual selected was either a user of at least one hard drug or had in-depth knowledge on the subject matter. The criteria were also due to the fact that respondents were members of the community in which there is a general awareness of illicit drug market. The sample size was made up of more males than females. This is because, from our observation on the field, the male respondents were more willing to contribute to the subject matter. The female respondents were reluctant to give relevant information even when they had adequate knowledge concerning the subject matter. While only two males declined to participate, eight women declined the request to be interviewed. The Interviews were conducted from November to December 2018. Interviewees were interviewed in their respective homes or abodes. Several interviewees felt the subject matter was sensitive and were sometimes very cautious when responding to questions. However, interviewers asked related questions to address areas that covered initial questions which had less or inadequate responses. Significantly, informed consent was sought through the display of institutional identity Card. Respondents were also informed that the purpose of the study was for purely academic reasons.

The researchers also relied on the use of ethnography to obtain relevant information about the people in the study area. The social practices and interactions of the people were thoroughly observed. As natives and residents of Kumase, the researchers observed and interacted with the *study's* participants in their environment to gather required information. As observers, the living patterns of the people in the communities have been examined over time by the researchers to ascertain the nature of the sale and use of illicit drugs in the communities. Essentially, the authors observed the situation concerning the activities of drug use in the communities to develop a comprehensive view on the problem. Observing the members of the communities at a close range aided the researchers to be able to identify and analyse the issues concerning drugs that appeared obvious to the authors. Using ethnography as an approach was challenging. While it required continuous interaction and engagement with the community members, it was also difficult for the researchers to reminisce some past cases of the use and sale of illicit drugs in the three communities.

A focus group discussion was conducted by the authors with individuals within the law enforcement agency to obtain an in-depth understanding of the issues concerning the use and sale of illicit drugs in the three communities. This instrument was used to glean information from six anonymized police members from a police division in Bantama. The discussion lasted for about forty minutes. Information was also gleaned from relevant books and articles pertaining to the subject matter. Information from these secondary materials and the interviews corroborated each other and were presented thematically.

## RESULTS

### 1. GEOGRAPHICAL DESCRIPTION OF THE STUDY AREA

The Asante King, Osei Tutu (I) founded the city of Kumase in the 1680's to serve as the capital of the Asante State (Maxwell, 1928; Baeyens, 2012). Following the defeat of Asante by the British in 1874, Kumase came under British control during the 1900s (Kilby, 1968). The city of Kumase expanded geographically in terms of population (G.S.S., 2005; 2012). Its social life and economic activities also flourished. The geographical location of Kumase has rendered it both as the major transport terminus, and a major transit point for commuters around the country (Baeyens, 2013). Kumase therefore plays a crucial role in the vast and lucrative distribution of goods and services in Ghana and beyond (Baeyens, 2012). It started with three communities, Krobo, Bompata and Adum, and has expanded in a concentric form to occupy an area of approximately ten (10) kilometres in radius (K.M.A. n.d.). The city of Kumase has been rapidly growing with an annual growth rate of 5.47 per cent (K.M.A. n.d.). It has about 90 suburbs, many of which were adjoining townships which were absorbed into it as a result of the process of growth and physical expansion (K.M.A., n.d.). The population of the city stood at 1,170,270 per the 2000 Population Census (G.S.S., 2005).

Kumase is located about 270 km north of the national capital, Accra and is in the transitional forest zone. It lies between latitude 6.35°–6.40°; and longitude 1.30° – 1.35°; an elevation which ranges between 250–300 meters above sea level and has an area of about 254 square kilometres (K.M.A., n.d.). The city's rate of infrastructure development and service has been surpassed by the high rate of population growth coupled with the high migrant numbers. Most of the facilities have exceeded their carrying capacities (Baeyens, 2012; G.S.S., 2005). The Central Business District (CBD) of Kumase Metropolis, in particular has in recent times been experiencing both human and vehicular traffic congestion (Baeyens, 2012; K.M.A., n.d.). The principal streets have been taken over by hawkers due to the dominance of the distributive trade in the city's economy (Baeyens, 2012). Several factors explain why Kumase has attracted such a large population. It is the regional capital, in addition to being the most commercialized centre in the region (Baeyens, 2012). Other factors include the centrality of Kumase with major arterial routes linking it to several parts of the country. Kumase is also an educational centre with several universities, Teacher Training Colleges, Senior High Schools and a host of Basic Schools (Maoulidi and Ibrahim, 2010).

The structure of the city's economy consists of service, commerce and industry (Frimpong, 2006). The 2000 census showed that the economically active members of the region constitute 19 percent of the population and fall within the ages of 15 and 64 years (G.S.S., 2005). The economically active population refers to those who worked for at least one in seven days. 16.0% of the population in the

Kumase Metropolis were unemployed (G.S.S., 2005). The 2010 population and housing census showed that there was about 32.3% increase in the population in the Asante region which includes Kumase (G.S.S., 2012). However, the rate of unemployment remains pronounced in the metropolis than the remaining urban areas (G.S.S., 2012). This was the trend for both sexes and may be explained by the high rural urban drift, ostensibly in search of non-existent jobs. In terms of demographic distribution of the economically inactive in the region, students formed the highest proportion followed by the aged and the retired (G.S.S., 2012).

## 2. CHARACTERISTICS OF THE RESPONDENTS

All participants were interviewed once. Out of the total sample size, 34 representing 94.4% were males, the remaining 2 representing 5.6% were females. Twenty of the respondents (55.6%) fell within the age range of 21–30 years. Also, 9 (25%) respondents from the various communities fell below the age of 20 and 27. 19.4% informants fell within the age range of 31–40. The study targeted people within the age range of 21–40. The reason being that our preliminary interaction with the people in the three communities (Bantama, Asewase and Asante New Town) in Kumase showed that people within this age range were active and used or sold illegal drugs. Aside from the two respondents who admitted to be regular users and addicts of illicit drugs, the rest of the informant did not admit that they have been using or used illicit drugs before. Although informants initially gave us a lead to illicit drug users within the study areas, the “perceived consumers” only presented themselves as mere informants and not consumers of illicit drugs. The marital statuses of the participants revealed that twenty-six participants (72.2%) were single, four (11.1%) were married and six (16.7%) reported that they were either divorced or separated.

## 3. LEVEL OF EDUCATION

Education plays a very important role in the development of a country. The educational background of respondents was used as a basis for inference. Out of the 36 respondents from the various communities, 19 (52.8%) have attained primary education, 15 (41.6%) have secondary education certificate and two (5.6%) of the respondents have schooled up to tertiary level. Concerning the 19 who ended their education at the primary level, it was reported that they stopped schooling due to financial constraints. As argued by a twenty-six-year-old respondent:

...my younger siblings and I had to drop out of school because our mother could no longer pay for our school fees. This was as a result of my father's death during our infancy, which broke our home. Since I am the first born of my family; I had to cater

for my younger siblings. In effect, I had to drop out of school to do manual and menial jobs in order to make income for our upkeep.

#### 4. NUMBER OF YEARS RESPONDENTS HAVE STAYED IN THE STUDY AREA

The connection of people to respective communities was found to be very important to the study. It was therefore necessary to strategically select people who have strong affiliations and have lived in the three communities for a long time. The participants selected for the study were cognizant of the daily activities that characterized the three communities.

Majority of the people from all the three communities (Asante New Town, Bantama and Asewase) are natives of the communities and have been living there for a period not less than three years. In Asante New Town, 4 (33.3%) of the respondents have lived in the community for 5-10 years. Also, 3 participants (25%) have lived in the community for less than 5 years. 5 of the participants (41.7%) have also lived in the community for over 10 years. In Bantama, majority of the respondents (4) representing (33.3%) have lived in the community between 5 to 10 years. 2 (16.7%) of them have lived in the community for less than 5 years. In a similar manner, 6 (50%) of the respondents have lived in the community for over 10 years. Deeper insights were gained because majority of the informants have lived in the communities long enough to aid the researchers to elicit relevant information.

## DISCUSSIONS

This section of the study looks at the various causes of illegal drugs trade and how same impact the lives of users. It also studies the awareness of the people concerning illegal drugs and the depth of their knowledge on same. It further discusses the challenges of the security agencies concerning drug-related issues.

### 1. AWARENESS OF ILLEGAL DRUGS IN THE COMMUNITIES

The study attests to the fact that majority of the indigenes of the various communities under review were aware of the proliferation of illegal drugs in Kumase. Information gathered from the field shows that thirty-four (94.4%) of respondents in the three study areas have knowledge about the use and or trade of illegal drugs in their respective communities. In Asewase, all the twelve (100%) participants affirmed that they knew about illegal drugs utilization and its market in their community. In Bantama, aside the two (16.7%) respondents who claimed to have never heard or seen someone indulged in the use and trade of illicit drugs, ten (83.3%) affirmed that they were aware of illegal trade in both marijuana and

cocaine in their community. Elsewhere in Asante New Town, all the participants (100%) revealed that they had used or heard and at least seen some people indulging in the use and trade of illicit drugs. The literature on drug use in Ghana has highlighted the awareness of drugs and their uses in the society. A school survey conducted by the Ghana Health Service and the World Health Organization shows that about 23% of Ghanaian school pupils had tasted drugs at least once (Agbemava, 2019). Although Ghana is facing a challenge in presenting an accurate data concerning drug use and abuse, it has been put forward by the ECOWAS drug news that, about 1.25 million Ghanaians are drug users and abusers. In a similar manner, the Narcotic Control Board of Ghana is of the view that there are about 70,000 illegal drug abusers within the ages of 15-50 in Ghana (NACOB, 2014). Comparatively, it has been reported that, an estimated number of 275 million people (about 5.6%) in the world aged between 15-64 use hard drugs (Agbemava, 2019). Both the existing literature and the analyses of this section of the field work have proven that at least some sections of the Ghanaian society are aware of the use and sale of illegal drugs.

## 2. COMMON ILLEGAL DRUGS FOUND WITHIN THE STUDY AREA

It is difficult to get accurate information on Ghana and Kumase in particular concerning the use of drugs like cocaine and heroin. In view of this, the annual amount imported or sold is unknown. Significantly, the exact number of cocaine and marijuana users in Ghana is not reported. Unlike the United States of America where most of the people self-report their consumption and sale of illicit drugs, majority of the hard drug consumers in Ghana and Kumase in particular are silent. In the United States of America, people are fond of often reporting their indulgence in drugs (Oakley and Ksir, 2004). This notwithstanding, our research exposed us to some of the users of illicit drugs. They hinted that, they are afraid to own up as consumers and traders of illicit drugs because their activities are associated with crime and it is unlawful within the country.

The common hard drugs that are found in Ghana include cocaine, heroin, methamphetamines and other regularly abused drugs such as tramadol and codeine (Agbemava, 2019). This notwithstanding, it appears that marijuana and cocaine are the benchmark of the widely used illicit commodities in Kumase and its environs. This is based on the fact that none of the thirty-six respondents from all the study areas emphasized heroin or any other known hard drug in the communities. A total number of thirty-two (88.8%) respondents from all the three communities hinted that marijuana is the most popularly seen and used drug in various communities apart from the study areas. Two (5.5%) of the 36 respondents chose cocaine as the most accessible drug within the three communities in Kumase. Information gleaned from the field research indicates that marijuana is the most commonly used and traded illegal commodity in the three communities. This is

premised on the fact that marijuana is widely produced locally and has therefore become very accessible and affordable to purchase compared to cocaine and heroin (Adu-Gyamfi and Brenya, 2015). One thing that promotes the accessibility and affordability of marijuana is the fact that people have been growing it secretly within and outside the study areas. In an interview with a respondent from Asewase, he argued that marijuana is common in his community because he knows of several people who cultivate the cannabis plant. It is important to note that information gathered from all the study areas support the view that “the dealers in the community are cannabis farmers themselves or have farmers who grow it for them. In an interview, a cocaine addict hinted that:

...I was exposed to drugs in Zongo. Drugs such as *tabaa*, codeine and cocaine are very common in the Zongo to the extent that a class one boy can even identify the *tabaa* if he sees one. There is this confidential spot here where all sorts of illicit drugs like the *tabaa* and cocaine are mostly sold. I even know a friend that grows and cultivates some of the *tabaa* in his house. For the cocaine, I have no idea about where it comes from; mine is to visit the spot and buy some when my body yearns for it.

We infer from the responses of the interviewees that the dealers who engage in the trade have farmers who are paid to grow the marijuana for them; mostly in the villages. Furthermore, some grow the marijuana also referred to as “ganja” in their houses. This explains why marijuana appears to be the most accessible of all the illegal drugs known in the three communities within the period under review. Significantly, this finding is in line with the work of Adu-Gyamfi and Brenya (2014) which draws our attention to the domestic production of marijuana or cannabis which is consistent with practices in the United States of America and Canada. In a similar manner, a woman from Bantama hinted that:

I think marijuana is the most common illegal drug you can find here in Bantama. This is because the “wee” is less expensive here. I think you can purchase one for just fifty pesewas (GH 50p) so the boys who use these drugs easily get access to it unlike the other drugs such as the heroin and cocaine which are more expensive.

A drug addict from Asewase, also hinted that:

...I was not really exposed to drugs until I started going out with my friends. We have been friends since senior high school days. They were the first to introduce me to the “Kush”. I have so many corners in Bantama but I cannot show you the exact place. I also indulge in the cultivation of the “ganger” at a corner of my house. From what I know, the “Kush” is a plant that grows well in Kumase. Most farmers from the neighbouring villages around Kumase are active dealers.

The origin of marijuana as the most accessible drug cultivated and used in Ghana is traced to cocoa farmers’ response to the decline in the world market price for cocoa from 1958, who felt compelled to diversify to include the cultivation of marijuana. The use of marijuana has been increasing with musicians and students

joining (Acheampong, 2005). Through time, locally produced marijuana started to be exported to Europe on a scale large enough to attract the attention of officials (Ellis, 2009). It is therefore not surprising that marijuana is the most common drug found in the three communities in Kumase. This finding confirms the United Nation Office on Drugs and Crime's report on drug use in Africa (UNODC, 2010). The report indicates that cannabis is the most commonly used narcotic in the region followed by Amphetamine-type stimulants (ATS). The report further indicated that the annual occurrence of cannabis use in Africa, particularly in West and Central Africa, is much higher than the global average (UNODC, 2010).

Similarly, studies from various sources have shown that in Africa, marijuana is very common (Adu-Gyamfi and Brenya, 2015; Duvall, 2017; Beadle, 2019; Agbemava, 2019). In her article, "*Highlighting Rising Effects of Drug Addict among the Youth*," Agbemava (2019) argued in support of the assertion that majority of the –1.25 million Ghanaians who are– drug addicts use marijuana. In 2015, Adu-Gyamfi and Brenya reported that in 2007, 884 patients reported to health facilities on marijuana related challenges and complications (Adu-Gyamfi and Brenya, 2015).

### **3. How People in the Community are influenced to Use Illegal Drugs**

The drug addicts included in the study were asked to indicate if they were influenced by anyone to consume illicit drugs. This was to ascertain whether people in the community were motivated by addicts to use illegal drugs. Significantly, a majority of the users hinted that as a result of their addiction, some people within their proximity have been enticed to use drugs. A drug addict hinted:

I was introduced to drugs by my friends. I started using the drug when I was nineteen years old and that was during my secondary school days. We wanted to be Rastafarians and as Rastafarians we had to use the herbs as it is perceived by a lot of people. I was not smoking it initially but as time went on, I started smoking and have been smoking it for seven years now.

The findings of De la Rosa *et al.* (2016) support the fact that religious involvement and cultural affiliations have the tendency to make one a drug user. In that respect, the high consumption of marijuana, despite its prohibition, can be explained culturally. Beadle has reported that cannabis consumption has been seen as a requirement of the life of the Rastafari religion (Beadle, 2019).

## **4. FACTORS THAT INFLUENCE ILLEGAL DRUG TRADE AND USE**

The causes of illegal drug trade in these three communities have been analysed based on self-reported cases from the respondents and observations made during the survey as well as responses from the drug addicts. A majority of the addicts interviewed showed no remorse for engaging in activities pertaining to illicit drug marketing and the use of same. This is as a result of the reported direful rate of unemployment that has characterized Ghana over a period of time. Some

users argued that their dealers will continuously sell the drugs to them since they have no better alternative. Significantly, eighteen (50%) of the respondents in the communities argued that unemployment and the desire to get rich quickly were some of the motives for their indulgence in the production, supply and demand of illegal drugs and the associated trade in the three communities. An addict reported:

“I think laziness on the part of some of us and inadequate job opportunities in particular are the main reasons that illicit drugs have taken over our societies. You and I know that the rate of unemployment is very alarming in this country and Asewase in particular. Those with degrees are even fighting to get jobs how much more those of us who have never entered the classroom? What do you expect our barons and sellers to do when they stop growing the weed?”

Comparatively, among Mexican Americans, De la Rosa and his contemporaries are of the view that higher rates of unemployment associated with the burden of poverty contribute to the increased incidence of illicit drug use in the United States (De la Rosa *et al.*, 2016).

Twenty-eight (77.7%) respondents in the community noted that lack of education, poor parental care and guidance, peer pressure and curiosity are other motives of illegal drug trade in the communities. Findings from the field interviews confirmed that, over the years, peer influence and curiosity have been the major drivers for the act of initiating new users into hard drugs consumption. This finding is consistent with some of the findings of Adu-Gyamfi and Brenya (2015). They discussed how the youth in Ghana influenced their peers to abuse drugs and how peer pressure in particular has persistently dictated the rate of influencing the youth to use marijuana (Adu-Gyamfi and Brenya, 2015).

##### 5. THE REPERCUSSIONS OF ILLICIT DRUGS ON USERS AND THE COMMUNITIES

It is important to note that there is a link between the effects of hard drugs on both users and the communities they reside. In this study, we have reported the effects of these drugs on the users and the communities they reside based on the experiences and thoughts shared by the interviewees. Personal observations and data from statistical reports of drug related cases from health institutions in Ghana as well as information from the Narcotics Control Board (NACOB) in Kumase were utilised.

###### **Negative Impacts**

Illicit drugs have several negative effects on users. The works of scholars such as Oakley and Ksir, 2004; Adu-Gyamfi and Brenya, 2015; De La Rosa *et al.* 2016; and Duvall, 2019 have proven that hard drugs contain certain substances that can have negative impacts on the human body. The abuse of these drugs can be very dangerous especially when they are taken in excess for a long period or with the wrong combination. The sections below discuss these impacts.

### *Impacts of Drugs on health*

The use of illicit drugs has negative impacts on the user's health. Significantly, between 2007 and 2011, there has been increasing numbers of both male and female patients admitted and treated at hospitals in relation to hard drug use and abuse. In 2007, out of 1,475 patients, there were 1,407 male patients and 68 female patients. In 2008, there was a total number of 1,792 patients, out of that, 1,697 were male and 95 females. In 2009, a total number of 1,945 patients were recorded, with 1,868 males and 77 females. 2010 also recorded 2,086 male patients and 130 females representing a total of 2,216. In 2011, 2,814 male and 95 female patients were recorded (Adu-Gyamfi and Brenya, 2015). Some of the impacts that accompany the use of drugs include madness, cancer and sometimes death. Our findings revealed that of all the impacts, mental health challenges were the most common cases. Significantly, a majority of the respondents (31) accounting for (86.1%) hinted that, using drugs causes mental disorders. Similar views have been shared in the works of Adu-Gyamfi and Brenya 2014; De La Rosa et al., 2016 and Bernstein, 1999. It has been scientifically proven that the existence of delta-9 tetrahydrocannabinol (THC) in marijuana has the potential of causing harm to the human brain (Adu-Gyamfi and Brenya, 2014). Significantly, it has been revealed by scholars that high amount of THC alters the hippocampus of the brain not to function effectively and can as well lower the Intelligence Quotient (IQ) of an individual (U.S. Department of Justice, 2013; Adu-Gyamfi and Brenya, 2014).

Comparatively, in the US House of Representatives' record (1924) concerning the hearing before the Committee on Ways and Means to prohibit the importation of opium, a physician testified that some individuals will have their mental equipment permanently destroyed as they indulge in the use of hard drugs. These people according to the physicians are the ones who will go out and commit crime (US House of Representatives' record, 1924). It is proven that the use of marijuana and especially the influence of the Tetrahydrocannabinol (THC) can compromise the short-term memory of the user (House of Representatives, Congressional Records, 1924). In the same vein, people who use cannabis frequently are more likely to increase the risks of experiencing psychosis (Hall, 2006; Fernandez-Artemendi *et al.*, 2011). The cannabis-induced psychosis is characterized by more crazy behaviour, violence, panic, more hypomanic symptoms and agitation, incoherent speech and hysteria. This is in line with the findings from the study areas as interviewees hinted that, those who use these drugs always behave in a violent manner.

Our study also clearly revealed that cancer could be a prize for the use of hard drugs. The Cancer Research Centre of UK argues that the question is not a simple one. However, they stressed that there are a number of factors that suggest that cannabis can cause cancer. They point to three things that have the potency of causing cancer. These are; the substance present in cannabis smoke, the way people smoke cannabis, and the smokers' lifestyle as those factors that have the potential

to cause cancer (Cancer Research Centre of UK, n.d.). In a like manner, a study conducted in 2007 in New Zealand reported that, the use of or the smoking of marijuana has resulted in about 5% of the lung cancer cases in the country (U.S. Department of Justice, 2013). The ultimate prize in this discourse is death. Nine interviewees hinted that death is the final effect of drug abuse. In many instances, users of illicit drugs die untimely from drug overdose and/or other drug-related illnesses (U.S. Department of Justice, 2010).

#### *Drugs and Armed Robbery*

Ideally, users of illicit drugs have been found to have the problem of non-conformity to tenets that guide society. Sociologists have argued that drug-using youngsters are often part of a deviant culture (Oakley and Ksir, 2004). The use of illicit drugs has been seen in the communities to fuel crime and insecurity, while undermining human rights and posing significant public health risks. Same view and more are shared by Zahn and Bencivengo, 1974; Monteforte and Spitz, 1975 and Oakley and Ksir, 2004. Oakley and Ksir (2004) postulate that there are several bases to argue that drugs fuel and drive crimes, but the most frightening possibility is that drug-use somehow changes the individual's personality in a lasting way, making him or her a criminal type. From the three communities, many of the participants associate and perceive of drug users as armed robbers and rapists. In the words of an interviewee:

...these hard drug takers are the reason why this area is insecure especially during the nights. There has been about five consecutive robbery cases in this area. Today it is neighbour A's house, tomorrow it is neighbour B's and it follows. And for me, I will never bother thinking and suspecting anybody aside from the "wee" smokers. They just do not have sympathy for people. They see this robbery as their main occupation.

Criminals and criminal activities in the world are always connected with increased substance misuse (De La Rosa *et al.*, 2016). Our finding from the field is in line with this argument. A 46-year-old woman hinted:

All the domestic violence and crime in our community is mostly as a result of these boys using these drugs. When they smoke the drug, they feel they are on top of the world, hence have no respect for elderly people. They refuse to listen to anyone, but rather do anything that they like in the community including robbery.

Comparatively, the United States' Centre for Disease Control and Prevention has reported that, those who smoke marijuana are twice as likely to carry weapons and thrice as likely to have unprotected sex making them vulnerable to sexually transmitted infections (U.S. Department of Justice, 2010). Similarly, it has been reported in the United States that almost all the distributors and growers of marijuana carry firearms (US Department of Justice, 2013). Their presence, according to the department, has also resulted in an increase in home invasion robberies over the years (US Department of Justice, 2013). The Ghanaian situation

is not dissimilar as amply highlighted from the earlier responses of our informants during the field study.

*The Tendency of initiating other users*

The findings of the US department of Justice indicate that in 2008, the use of illicit drug was so rampant that nearly 8,000 individuals were initiated per day (US Department of Justice, 2010). Our findings from the field denoted a growing fear that several men within the active population in the communities might join the “addiction class”. In a discussion with a 36-year-old man in Asewase, he opined that:

Sooner or later, the men in our community will be turned into drug addicts because the rate at which the young boys are using these illegal drugs is very serious and I am afraid that our community will lack leaders who can help develop this community in the foreseeable future.

Highlighting the effects of drugs on users, an addict in Asante New-Town concerning hinted that:

I am experienced, I think it won't have any effect on me and I don't have problems with my peers, maybe one day it will have effect on me like it has on others but once I have been in drugs for twelve years, and nothing has happened to me, I am not sure that it can have any effect on me. It is only those who just entered the “movement” who mostly have problems.

We infer from the respondents that the rate at which people are influenced and initiated daily to consume illicit drugs in the communities under review is alarming. Our findings from the field however revealed that being close to drug users can affect the society. Some first-time drug users were influenced by those they observed using drugs daily. As pointed out by an addict: “at the age of fifteen, I started smoking tobacco because my father used to smoke it too. However, I could not smoke it openly because I was scared my parents will find out. This notwithstanding, I have been smoking it for ten years now”. Another addict also hinted that:

From where I grew up, it will be very difficult not to indulge in smoking because almost everyone around smoked either the “ganja” or tobacco. Till date, all the boys are now into serious consumption and utilization of the hard drugs. It is therefore not surprising that I ended up being like this... all-in-all, I have no regrets being like this.

Related studies have reported that, in the United States of America and other western countries, the life of celebrities in movies and music video clips coupled with knowledge, beliefs and attitudes, serve as the major factors that draw several people to use hard drugs (Oakley and Ksir, 2004). Comparatively, the literature on Africa also puts forward that the imitation of film stars and other teenage idols within the community and the world at large has been a major means of initiating new users into the use of hard drugs (Abudu, 2008). Consistent with our findings,

Kendler (2019) has reported that geographical proximity and social interactions with drug users have the tendency of influencing daily initiation of new drug users (Kendler *et al.*, 2019).

#### *Stigmatization*

Drug use leads to social alienation. Drugs have the tendency of breaking down social connections (De La Rosa *et al.* 2016). In the long run, many users of drugs have been disowned by their parents and families. Twenty-one (58.3%) drug users and non-consumers included in the study reported that many of the drug addicts have lost their social coherence and are usually neglected from important matters pertaining to the wellbeing of their communities. An informant argued, “why include ‘wee’ smokers in decision making, when we all know that they are mad”. In this respect, it has been found that drug use has negative impacts on the family, friends and people whom the users have contact with. Similarly, Room (2005) has argued that those who are addicted to drugs and alcohol are mostly marginalised and stigmatized in the society. As hinted by an addict, “The use of drugs has had effect on me because I have been neglected by my family and no one wants to see me come home but I do not care because I enjoy doing it. I hear of people going mad after using it but I do not think it is as a result of smoking the “ganja”, it might be cocaine. It is rare to get cocaine in Asewase and I have not inhaled, ingested or injected it before, so I cannot say much about it. However, the marijuana does not have much effect on me aside what I have told you. I believe it rather makes me stronger”.

This social seclusion of illicit drug users from certain activities is not only limited to the society which one lives. It has been argued that stigmatization prevents drug users from accessing healthcare due to the fear of poor treatment as well as trouble with authorities or healthcare providers (Link *et al.*, 1997). The work of Ahern *et al.* (2007) reveal that the deviant social status is always conferred on drug users. In the long run, the users might be discouraged from undertaking certain acts in the society (Ahern *et al.*, 2007). They continue to argue that, stigmatizing drug users tend to render a direct influence on their physical and mental health stemming from the fact that they are always discriminated against in the society (Ahern *et al.*, 2007). It has been generally argued that people within the society are mostly unwilling to interact with drug addicts and also there is the decreased intention to help and support drug addicts (Yang *et al.*, 2018). In the long run, drug addicts begin gradually to lose their status in their communities.

#### **POSITIVE IMPACTS**

In spite of the negative perceptions about the intake and consumption of hard drugs, some users argue that the drugs they consume have positive impact on them.

They argue that their economic power is boosted, hence their productivity. In support of the claim above, a respondent argued,

...yes, it has affected me but it is a positive one. Since I do manual work which requires plenty of energy, I take the marijuana and eat well to become much stronger. I am therefore able to work well, so this encourages me to even smoke the marijuana the more.

In a similar manner, an informant from Asewase noted that:

Oh yes! I see the effects it has on people every day, especially among friends who are addicts but for me it has not happened to me. I pray it does not happen to me, but I cannot quit because I am so much in love with the “wee”. I have to smoke it almost every two hours or else I will not feel comfortable and it will be very difficult to even tackle my daily activities. I am aware it has negative effects but I do not feel any of such impacts. It rather boosts my capacity to do my work as a farmer.

Scholars have indicated that marijuana, which is popularly known in Ghana as “Wee” and “Obonsam Tawa” was largely used by ex-service men and certain onerous and hazardous occupations. They include such occupations like farming, night-soil business, prostitution, armed robbery, and fishing (Adu-Gyamfi and Brenya, 2015). In contrast, the findings of the U.S Department of Justice indicate that productivity is rather challenged as people consume and trade in illicit drugs. Their findings suggest that, there are cases of premature mortality, illness associated with hard drug intake, injury leading to incapacitation, and imprisonment of those apprehended. All of these reduce the society’s contribution (U.S. Department of Justice, 2010). The literature on Africa suggests that premature death has had a major toll on many drug abusers in South Africa (Liebenberg *et al.*, 2016). This notwithstanding, Degenhardt *et al.* (2004) argue that cannabis has no link with mortality in Africa.

The above notwithstanding, it has been argued that some hard drugs such as cannabis serve as panacea for the treatment of diseases (Mancall, 2004; Svrakic *et al.*, 2012). Historically, cannabis has been used in different cultures because of its medicinal quality and its potency of serving as a therapy for diseases such as fever, insomnia, cachexia, headache, constipation, rheumatism and malaria (Hirst *et al.*, 1998; Svrakic *et al.*, 2012). It is reported that, there are various medicinal products present in cannabis. In view of this, industries have been established to produce and provide natural cannabinoids for pain relief (Mahonen, 2018). Svrakic *et al.* (2012) have reported that dronabinol, nabilone, sativex are all synthetic cannabinoids derived from the cannabis plant. It is reported that the dronabinol for instance is very therapeutic in serving as an appetite stimulant for weight loss/decreased food intake in AIDs patients. The nabilone is also accepted for the treatment of nausea and vomiting in chemotherapy patients who have not

responded to conventional antiemetic. In a similar view, Hirst *et al.* (1998) reported that the use of nabilone is used to induce sleep at night. The sativex on the other hand is a liquid extract from the cannabis plant which is used as an oral spray for the treatment of neuropathic pain, emesis and overactive bladder (Svrakic *et al.*, 2012). In Australia, due to its medicinal nature, amendments were made in February 2016 to the Narcotics Drug Act of 1967. This has allowed the Department of Health to regulate the cultivation of cannabis for medicinal and scientific use (Mahonen, 2018).

## 6. THE EFFORTS OF THE SECURITY SERVICE AND RELATED CHALLENGES

Per our study, the security service is confronted with the persistent challenge of illegal drug trade and use. Over the years, the security service has been accused of taking bribes from these drug dealers making it difficult to arrest them. Some security personnel in Ghana and Kumase in particular have been accused for engaging or aiding the drug trade. A case has been made concerning the complicity of senior police personnel in the illicit drug business in Ghana. Various reports indicate either the disappearance or replacement of seized cocaine by the police with other substances. The incident in 2006 involving the police handling of cocaine seized from a vessel MV Benjamin is a case in point. The police received intelligent report that the vessel with loads of cocaine was entering Ghanaian waters. The seventy-six parcels of cocaine seized eventually disappeared and the vessel set on fire. A commission of inquiry instituted by the Government of Ghana and headed by Chief Justice – Georgina Wood implicated several individuals including some members of the police and three crew members of the vessel (GNA, 2014). Significantly, all the officers who were implicated were absolved from all charges. They continue to offer their professional policing duties for Ghana.

Almost all the drug addicts from the study areas admitted that bribery and corruption on the part of the security personnel are promoting their indulgence in hard drugs. Of primary significance to this discourse is the fact that the security service in Ghana has a lot of responsibility on its hands in her quests to curtail or stop the tide of illegal use and sale of drugs in Ghana. Coupled with this is how some officers have been accused or named as aiding such occurrences. In an interview with a drug addict from Asante New Town, he hinted:

I think the security personnel and especially the police are not doing their jobs effectively because they take bribes from the drug dealers when they are caught. When they see us smoking the “ganja”, they take money from us and they take nothing less than 20GH Cedis.

In a like manner, an interviewee hinted that:

As a matter of fact, those who sell these drugs to us are very careful; they don't sell to you when they don't know you. Not anyone can go there and buy the drugs. Also, when they are caught by the police, they bribe them and walk away. Some of the drug dealers even have personal relationship with the police.

This notwithstanding, the Ghanaian security service also faces several challenges in controlling illegal drug trade. An opinion was also sought concerning the challenges the divisions in charge of controlling illegal drug trade faces. In a focus group discussion at Bantama, it was revealed that lack of support and vital information to arrest the illicit drug peddlers and users from the community posed a threat to the institutions in charge of illicit drug affairs. The challenges were thus summarized by a police officer as:

...bribery and corruption, nepotism and favouritism and lack of motivation are the major challenges facing our division. Some of these major drug barons have established strong links with some members –of higher ranks- in the police department and thus, these officers have a way of defending them (illicit drug traders) whenever they are apprehended by the junior rank police officers. Aside this, the people in the community themselves do not want to assist the police with relevant information when it comes to investigations on drug use and trade in the community. I do not know, but I think it is as a result of cultural reasons.

The literature on drugs and drug abuse postulate that the major challenge of the various institutions fighting the proliferation of drugs at both local and international levels are revealed to be weak law enforcement capacity and corruption. Concerning corruption, it is reported that it exists within all the institutions of the state which give drug suppliers and producers the impetus to always keep their market in a resilient shape (UNODC, 2018).

Existing literature highlights the argument that the existing institutions established to fight the drug trade in Ghana lack the capacity to work effectively. These institutions include NACOB and police personnel, judges among others. They are considered to still lack the requisite skills, equipment and personnel among other things to investigate and prosecute drug cases. Again, the various institutions do not properly and actively coordinate their activities to enable the Ghanaian state fight the drug menace effectively. These security and law enforcement agencies, including the Bureau of National Investigations (BNI), NACOB, the Ghana Navy, the Narcotics Unit of the Ghana Police Service, the Ghana Immigration Service, CEPS and the EOCO among others, lack a culture of working as a team and often contradict one another when handling particular drug related cases (USAID, 2013). To adequately fight the proliferation of drugs in Ghana, there must be a reform of the whole law enforcement system; they should also be willing to shy away from circumstances or tendencies that fuel corruption (USAID, 2013).

## CONCLUSION

From the field work and the existing literature, we infer that the sale and use of illegal drugs have negative impact on Ghana and Kumase in particular. The evidence from the field interview shows that some communities in Kumase sell, grow, and/or use marijuana as well as cocaine and other related drugs. Countrywide, the study postulates that the security services faces a herculean challenge in their quest to eradicate the proliferation of drugs. It was revealed that, those who recklessly take the habit-forming illicit drugs are eventually enslaved by them. The unscrupulous sellers of these drugs are thus assured a steady market, whereas the users endanger their own health and further undermine their mental strength. Closely linked to this is the fact that it results into emotional disturbance. This is because users are rejected or stigmatised by responsible societal members (Link, 1997). The related crimes so far as users of these drugs are concerned are instigated by profit motive among others. Quite often, the intent was to make money to enable them have the purchasing power to purchase illicit drugs. They sometimes burglarised a house or stole a car among other things. Organized crime, like most concepts in the social science, is highly contested even among criminologists and law enforcement agencies (Bernstein, 1999). A dominant conceptualization of drugs production and trade coincides with hierarchically structured organizations involved in organized crimes. Some premise their conceptions of organized crime networks on its size, while others emphasize the frequency of organized crime activities (Lyman, 2019; Lacher, 2012). Notwithstanding these differences, a common perspective views the phenomenon from the extent of both domestic and international networks in relevant countries (Cockayne and Paul 2009). This explains the increasing use of the expression 'cross-border crime or 'transnational', or even global crime networks.

The coca plant and cannabis are harvested in remote parts of the world – as highlighted in the study – and transported through a variety of routes, managed through processes and mechanisms, and eventually delivered to consumers in the most lucrative markets like Europe and the USA. This fosters the global and transnational character of drug markets (Cockayne and Paul 2009). Adu-Gyamfi and Brenya (2014) have argued that, it is the illegal market of these substances that enhanced their use and made them more expensive. It is reported that, upon a fruitful debate in the parliament of the Republic of Ghana, awaiting the assent of the president; the industrial and medical use of cannabis shall become permissible (MyJoyOnline; March 2020). For future research, we contemplate the extent to which this bill which shall soon become a legislation, impact the use of cannabis for leisure by individuals, the security challenges and concerns about drug-related crimes as well as the profit that shall accrue to individuals, industries, and the government with its concomitant challenges in the future.

Significantly, we also found from the study that some people try to impress others by living dangerously, which eventually lead them to illicit drug use as a way to exhibit their estrangement to the society. Aside this, drug users initiate large volumes of people into the use and trade of drugs. In this respect, we concur with the argument that the strategies on substance misuse prevention and interventions need to target people who are either “at risk” of becoming involved or are already involved with criminal activities (De la Rosa *et al.*, 2016).

## REFERENCES

- ACHEAMPONG, EMMANUEL. (2005). *African affairs: Diaspora and Drug Trafficking in West Africa*, Oxford: Oxford University Press.
- ADU-GYAMFI, S. AND BRENYA, E. (2014). “Re-Hushing Commentaries on the Effects and Potential Benefits of Cannabis: Lessons Ghana Can Learn From USA and Canada.” *Global Journal of Interdisciplinary Social Sciences*, 3 (3), 10–20.
- ADU-GYAMFI, S. AND BRENYA, E. (2015). “The Marijuana Factor in a University of Ghana: A Survey,” *Journal of Siberian Federal University, Humanities and Social Sciences*, 11(8), 2162–2182.
- AHERN, JENNIFER *et al.* (2007). “Stigma, Discrimination and the Health of Illicit Drug Users” *Drug and Alcohol Dependence*, 88, 188–196.
- BAEYENS, ANNE. (2012). *Kumasi, Ghana: Critical Study of an African Urban Structure*. Universiteit Gent.
- BEADLE, ALEXANDER. (2019). The Great Potential of the African Cannabis Market. Analytical Cannabis. <https://www.analyticalcannabis.com/articles/hemp-vs-marijuana-is-there-a-difference-311880>.
- BERNSTEIN, HENRY. (1999). “Ghana’s drug economy: some preliminary data”. *Review of African Political Economy*, 26 (79), 13–32.
- BERNSTEIN, MICHAEL. (1990). “Defining organised crime in Australia and the USA.” *Australian & New Zealand Journal of Criminology*, 23(1), 39–59.
- BLUMSTEIN, ALFRED. (1995). “Violence by Young People: Why the Deadly Nexus”, *National Institute of Justice Journal*, 229, 2–9.
- CANCER RESEARCH UK. “Does Smoking Cannabis Causes Cancer”, Available online at <http://www.cancerresearchuk.org/about-cancer/cancers-in-general/>
- COCKAYNE, JAMES AND WILLIAM PAUL. (2009). “The Invisible Trade: Towards an International Strategy to deal with Drug trafficking through West-Africa”, *IPI Policy Papers*.
- DE LA ROSA, MARIO *et al.* (eds). (1990). *Drugs and Violence: Causes, Correlates, and Consequences*. NIDA Research Monograph 103.
- DE LA ROSA, MARIO *et al.* (2016). “Sociocultural Determinants of Substance Misuse among Adult Latinas of Caribbean and South and Central American Descent: A longitudinal study of a community-based sample” *J Ethn Subst Abuse*, 17(3), 303–323. Available online at <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5638709/#R13>
- DEGENHARDT, LOUISA *et al.* (2004). “Illicit drug use”. Comparative quantification of health risks: global and regional burden of disease attributable to selected major risk factors, 1, 1109–1176.
- DUVALL, C. S. (2017). Cannabis and Tobacco in Precolonial and Colonial Africa. In Oxford Research Encyclopedia of African History. DOI:10.1093/acrefore/9780190277734.013.44
- ELLIS, STEPHEN. *West Africa’s International Drug Trade: African Affairs*, Oxford University Press, 2009.
- FERNANDEZ-ARTEMENDI, SERGIO *et al.* (2011). “Cannabis and Mental Health” *Actas Esp Psiquiatr*, 39(3), 180–190.

- GOLDSTEIN, P.J. (1985). "The Drug Violence Nexus: A Tripartite Conceptual Framework," *Journal of Drug Issues*, 15(4), 493–506.
- HALL, W. (2006). "The Mental Health Risks of Adolescent Cannabis Use" *PLoS Med*, 3(2), 0159–0162.
- HIRST *et al.* (1998). "Pharmacology and Potential Therapeutic Uses of Cannabis" *British Journal of Anaesthesia*, 81, 77–84.
- JOHNSTON, L. D., *et al.* (2019). Monitoring the future national survey results on drug use 1975–2018: Overview, key findings on adolescent drug use. Ann Arbor: Institute for Social Research, University of Michigan.
- K.M.A., "Kumasi Metropolitan Assembly," Available online at [www.ghanadistricts.com/home/district/20](http://www.ghanadistricts.com/home/district/20)
- KANDEL, DENISE AND FAUST, RICHARD. (1975). "Sequence and stages in Patterns of Adolescent Drug Use." *Archives of General Psychiatry*, 32(7).
- KENDLER, KENNETH S *et al.* (2019). "Geographical proximity and the transmission of drug abuse among siblings: evaluating a contagion model in a Swedish National Sample." *Epidemiology and psychiatric sciences*, 29 (51). Doi:10.1017/S2045796019000453
- KILBY B. PETER. (1968). "The Anglo-Asante War of 1873-1874: A Narrative and Analysis". *A Dissertation Submitted to the Department of History of Simon Fraser University in Partial Fulfilment for the Requirements of a Master of Arts Degree in History.*
- LACHER, W. (2012). *Organized Crime and Conflict in the Sahel-Sahara Region*. The Carnegie Papers.
- LIEBENBERG, J. (2016). "Fatalities involving illicit drug use in Pretoria, South Africa, for the period 2003–2012" *SAMJ*, 106 (10), 1051–1055.
- LINK, B.G. (1997). "On Stigma and Its Consequences: Evidence from a Longitudinal Study of Men with Dual Diagnosis of Mental Illness and Substance Abuse" *J. Health Soc. Behav.*, 38. 177–190.
- LYMAN, MICHAEL D. (2019). *Organized Crime*. 7<sup>th</sup> (Ed). Pearson. NY: New York.
- MACK, KARIN A. *et al.* (2017). "Illicit drug use, illicit drug use disorders, and drug overdose deaths in metropolitan and nonmetropolitan areas—United States". *American Journal of Transplantation*, 17 (12), 3241–3252.
- MAHONEN, SUVI. (2018). "A Nation in Pain: Can Medicinal Cannabis Help?" *Australian Quarterly*, 9 (3), 3–7.
- MAOULIDI, MOUMIÉ AND IBRAHIM HARUNA. (2010). "Education Needs Assessment for the City of Kumasi, Ghana" *MCI SOCIAL SECTOR WORKING PAPER SERIES*.
- MAXWELL, JOHN. (1928). "Ashanti: Kumasi—the Garden City of West Africa," *Journal of Royal African Society*, 27, (107), 219–233.
- MONTFORTE, J.R. AND SPITZ, WIL. (1975). "Narcotic Abuse among Homicide Victims in Detroit," *Journal of Forensic Science*, 20 (1), 186–190.
- OAKLEY, RAY. (2004). "How the Mind Hurts and Heals the Body." *American Psychologist*, 59(1).
- OAKLEY, S.R., AND KSIR, CHARLES. (2004). *Drugs, society, and Human Behaviour*. New York, NY: McGraw-Hill.
- OPPONG-ASANTE, K. (2014). Substance use and risky sexual behaviours among street connected children and youth in Accra, Ghana. *Subst Abuse Treat Prev Policy*, 9(45). <https://doi.org/10.1186/1747-597X-9-45>
- PEACOCK, AMY, *et al.* (2018). "Global statistics on alcohol, tobacco and illicit drug use: 2017 status report." *Addiction*, 113 (10), 1905–1926.
- ROOM, ROBIN. (2005). "Stigma, Social Inequality and Alcohol and Drug Use," *Drug and Alcohol Review*, 24(2), 143–155.
- SANDWIJK, J. P *et al.* (1991). *Licit and illicit drug use in Amsterdam*. Report of a household survey in Netherlands.
- SCHMIDT, AXEL J., *et al.* (2016). "Illicit drug use among gay and bisexual men in 44 cities: findings from the European MSM Internet Survey (EMIS)." *International Journal of Drug Policy*, 38, 4–12.

- SVRAKIC et al. (2012). "Legalization, Decriminalization and Medicinal Use of Cannabis: A Scientific and Public Health Perspective" *Future Review*, 109(2), 90–98.
- U.S. DEPARTMENT OF JUSTICE. (2010). "Impacts of Drugs on Society –National Drug Threat Assessment." Available at <https://www.justice.gov/archives/ndic/pubs38/38661/drugImpact.htm>
- U.S. DEPARTMENT OF JUSTICE. (2010). National Drug Threat Assessment. Access online at <https://www.justice.gov/archive/ndic/pubs38/38661/drugImpact.htm>
- WEST, J.H. et al. (2010). Does Proximity to Retailers Influence Alcohol and Tobacco Use Among Latino Adolescents? *J Immigrant Minority Health*, 12, 626–633. <https://doi.org/10.1007/s10903-009-9303-2>
- YANG, LAWRENCE, et al. (2018). "Stigma and Substance Use Disorders: An International Phenomenon" *Curr Opin Psychiatry*, 30(5), 378–388.
- ZAHN, M.A AND M. BENCIVENGO. (1974). "Violent Death: A Comparison between Drug Users and Non-Drug Users, Addictive Diseases," *An International Journal*, 1(3), 283–296.
- GHANA STATISTICAL SERVICE. (August, 2005). Population Data Analysis Report, *Socio-Economic and Demographic Trend Analysis, 1*.
- FRIMPONG, E. (November 3, 2006). "Welcome to Kumasi, the Garden City of Africa" *The History of Kumasi*. Friday. Available at <http://enochdarfahfrimpong.blogspot.com/2006/11/kumasi-garden-city-of-africa.html>
- ABUDU, VASCO. (23<sup>rd</sup>–25<sup>th</sup> July, 2008). "Young People and Drug Abuse," *A Paper Presented at the 8<sup>th</sup> Biennial International Conference on Alcohol, Drugs and Society in Africa*. Abuja, Nigeria.
- UNODC. (October 2010). Global SMART Update Volume 4, Global SMART Programme, United Nations Office on Drugs and Crime (UNODC).
- UNODC. (March 2012). Global SMART Update Volume 7, Global SMART Programme, United Nations Office on Drugs and Crime (UNODC).
- GHANA STATISTICAL SERVICE. (May, 2012). "2010 Population and Housing Census: Final Results."
- U.S. AGENCY OF INTERNATIONAL DEVELOPMENT. (April, 2013). "The Development Response to Drug Trafficking in Africa: A Programming Guide".
- U.S. DEPARTMENT OF JUSTICE. (April, 2013). "The DEA Position on Marijuana".
- GHANAWEB. (30 June, 2015). "50,000 Ghanaians abuse drugs" *General News of Tuesday*. Available online at: <https://www.ghanaweb.com/GhanaHomePage/NewsArchive/50-000-Ghanaians-abuse-drugs-365613>
- AGBEMAVA, EYRAM. (26/06/2019). "Highlighting Rising Effects of Drug Addiction among the Youth" *Project Lead, Compassion in Action*. Available online at <https://www.myjoyonline.com/opinion/2019/June-26th/highlighting-rising-effects-of-drug-addiction-among-the-youth.php>
- MYJOYONLINE. (21 March 2020). "Parliament legalises growing of some cannabis for health use" Ghana News. Available online at <https://www.myjoyonline.com/news/parliament-legalises-growing-of-some-cannabis-for-health-use/>.
- GHANA NEWS AGENCY, (2014). "M.V Benjamin Cocaine Man Jailed" 14<sup>th</sup> April, 2014, <https://www.ghananewsagency.org/human-interest/mv-benjamin-cocaine-man-jailed-73400>

