The Impact of Substance Abuse on Learners from Dysfunctional Families at Ipelegeng Location in Schweizer-Reneke

By

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RESEARCH DISSERTATION

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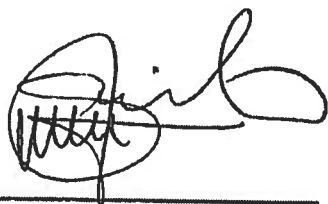
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DECLARATION

I declare that **The Impact of Substance Abuse on Learners from Dysfunctional Families at Ipelegeng Location in Schweizer-Reneke (dissertation)** hereby submitted to the University of Limpopo, for the of Master of Arts in Social Work has not previously been submitted by me for a degree at this or any other university; that is my work in design and in execution, and that all material contained herein has been duly acknowledged.

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Masilo, DT, (Mr.)

28 /11/2012

Date

DEDICATION

This study is dedicated to my daughter, Resegofetse Isago Letshabo. Moreover, I also dedicate this research project to myparents Morris Masilo and Eva Masilowho have never failed to give me financial and moral support, for giving all my needs from my early age of development and for teaching me that even the largest task can be accomplished if it is done one step at a time.There is no doubt in my mind that without their continued support and counsel I could not have completed this process.

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ABSTRACT

Substance abuse among learners and their families is a growing concern in South Africa. The use of alcohol and other substances by parents and other family members serves as a contributing factor for children within dysfunctional families to become users or abusers of substances. The aim of the study was to investigate the impact of substance abuse on learners from dysfunctional families. To achieve this aim of the study, the objectives were formulated and explored the extent to which substance abuse affects school performance on learners from dysfunctional families, to establish how substance abuse destroy parent child relationships,to describe how substance abuse influences learners to play truancy and lastly to explore how substance abuse by parents yields to violence and abuse

Qualitative data through semi-structured interviewsusing an interview schedule was collected from learners, their parents/guardians and Life Orientation educators. To achieve the objectives of the study, the researcher utilized purposive sampling to select the subjects of the study. Furthermore, data was analyzed thematically and was informed by appropriate literature. The findings of the study confirmed the problem statement, namely that alcohol and drug abuse by school-going young people is a serious problem because it negatively affects their school performance. Learners who use alcohol and drugs are likely to perform badly at school. It can be concluded that dysfunctional families have no problem solving skills to an extent where they try to avoid their problems by using substances. It is recommended that social workers should be employed in the Department of Basic Educationand should strengthen and encourage healthy parent-child relationships within families. A future study can be conducted on the strengths and resilience of dysfunctional families due to substance abuse.

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CHAPTER 1

GENERAL ORIENTATION FOR THE STUDY

1.1 INTRODUCTION

The scourge of substance abuse continues to ravage communities, families and, the youth. Substance abuse is a growing problem amongst the majority of young people in South Africa, especially school learners. According to Dube (2007:1) majority of adolescents are experimenting with drugs and the experimentation normally results in abuse. The abuse of substance is not only a concern to individuals, groups and families, but a serious concern to the entire nation. Most families in South Africa end up being dysfunctional as a result of substance abuse. Substance abuse goes together with poverty, crime, reduced productivity, unemployment, dysfunctional family life, escalation of chronic diseases, and premature death. Substance abuse does not respect an individual on the basis of economic status, class, race, colour, gender or the professional status of an individual (National Drug Master Plan - NDMP, 2006-2011:1)

1.2 MOTIVATION FOR THE STUDY

As a social worker working in the Department of Health and Social Development in the North West Province, the researcher is often confronted with different cases of children with uncontrollable behaviour, child neglect, school absenteeism, marital counseling, and family disputes. The rationale of singling out substance abuse is based on the case load the researcher has observed which indicates that a large number of learners abuse substance and that the majority of those learners come from dysfunctional families.

Learners and educators at Itshupeng Secondary School were very open and enthusiastic about a research study on substance abuse in their school as it is a major problem which negatively affects them. Based on the cases presented to the social worker at Itshupeng Secondary School, the researcher's experience is as follows:

- A large number of learners consume alcohol and smoke dagga and cigarettes.
- Most of the learners taking alcohol and drugs are from dysfunctional families, as some family members in such families also take alcohol and drugs.
- Learners smoke cigarettes and dagga in the school toilets during school hours.
- Most family members of these learners are aware of the situation

The researcher has also observed that the majority of male learners take alcohol, cigarettes and dagga.

1.3 BACKGROUND TO THE PROBLEM

According to the NDMP (2006-2011:1) the scourge of substance abuse continues to ravage communities, families and, particularly, the youth. This is so because it is related to poverty, crime, reduced productivity, unemployment, dysfunctional family life, escalation of chronic diseases and premature death. Substance abuse does not respect economic class, race, colour, gender or the professional status of an individual. Fast-paced social, economic and technological changes present a challenge to the stability and influence of the family. The family is often viewed as the basic source of strength, providing nurture and support for its individual members as well as ensuring stability and generational continuity for the community and culture. Families can have a powerful influence on shaping the attitudes, values and behaviour of children. The question is, how do these children compare with their peers in terms of influence on drug taking? The influence of peer groups, which is usually strong during formative years, may be stronger than that of parents in some cases. Prevention of drug problems can employ Knowledge about family dynamics can be used in the prevention of drug problems to address personal and social concerns of family members that wouldotherwise lead to drug abuse, both with respect to dysfunctional as well as intact families (UNDP, 1993:1). In this regard, it is important to avoid assuming that parents are either responsible for the problems experienced by their children or that substance users can be blamed for all the problems experienced by the families in which they live (UNDP, 2005:10). Children of

substance abusers may develop inadequate social skills which often limit their social interactions. They also withdraw from the public, in order to avoid exposing their situations, friends inclusive. The health and socioeconomic consequences of substance use, abuse and dependency, particularly the abuse of alcohol and drug trafficking, undermine democracy and good governance and have a negative impact on the environment (NDMP, 2006-2011:8).

1.3.1 Theoretical Framework

According to Motepe (2006:261), theories and models help people to understand how a particular phenomenon is developed or formed and how it affects other phenomena that are linked to it. Helpers who are social workers need a guiding theory to help them make sense of the complex helping process. The main value of a theory is to give direction in the research study. For the purpose of this study, the eco-systems theory was used as the theoretical framework. The relevance of eco-systems theory is that it emphasizesthe relationship between and amongst various systems such as the family, the community, school, churches, and other religious, social, educational, and cultural systems.

1.3.1.1 Eco-systems theory

The eco-systems theory suggests interdependence and relationships between different organisms and their various environments (Khumalo, 2007:30). DuBois and Miley (2005:42) state that using eco-systems theory, social work practice is directed at improving the transactions between people and environments in order to enhance adaptive capacities and improve environments for all who function within these environments.Furthermore, Sheafor, Horesji and Horesji (2000:91) posit that an ecosystems perspective maintains the social worker's focus on the concept of person-in-environment in a practice situation.

Human beings are responsive to their surroundings as well as to systems surrounding them. Khumalo (2007:30) explains the ecosystem as having layers and each having an

effect on the individual. According to Khumalo (2007:30), the eco-systems theory is used to better understand the way in which people and the environment influence each other.People are, therefore, not merely a product of their environment, but through interaction with it, they are able to influence and change it.

The researcher used the ecosystems theory to establish the impact of substance abuse on learners from dysfunctional families, by taking into consideration the learners and relationships within the family as well as the schools, churches, peer group and their community. Families are the primary agents of socialization hence children learn most of their behaviours from their parents. The Environmental systems in which learners live in also influence them. The environmental systems in this case refer to the family environments, school environments and the community environments.

Given the fact that, amongst others, respondents of this study were learners from dysfunctional families, the researcher was of the opinion that the environment that was not conducive for normal upbringing contributes to the use of alcohol and drugs by learners as they learn this behaviour from their parents or guardians. People who live in an environment where drugs and alcohol are part of their lives are easily tempted to take drugs and alcohol. For the purpose of this study, the ecosystems perspective was paramount as learners and their families need to adapt in the environments of which they are part. In order to adapt and cope, parents or learners may unwittingly decide to take drugs and alcohol. Germain and Gitterman (1980:22) point out that the adaptive processes, the people and the environment shape each other.

Problems experienced by an individual within a family can easily affect the whole family. This is supported by Tshiwula (1998:86) who notes that the basic premise of the ecosystems theory is that all members of the family participate in the system and therefore, carry part of the responsibility for survival, and sometimes their failure results in family dysfunction. The use of alcohol and drugs by parents does not only affect the user, but it affects also the children. For instance, learners whose parents take alcohol and drugs may find it difficult to cope at school due to their parents substance abuse.

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Parents may be unable to take care of their children's school needs. This can be seen in a situation where parents are unable to pay school fees for their children.

Learners depend on the school, family members and their peers for information and support. As part of the school as a system, learners depend on education (information) that is passed on to them for coping with life challenges. A school depends on the availability of learners to exist, and if learners drop out of school due to the impact of substance abuse, the school is negatively affected. Once that happens, educators will have no work or minimal work to do hence, the researcher was of the view that the school and learners are interrelated and interdependent.

1.3.1.2 Statement of the problem

The researcher believes that it is important to understand the impact of substance abuse on learners and their families. Families become dysfunctional due to the abuse of substance by its members. Alcohol and drug abuse by school-going young people is a serious problem because it affects their school performance negatively. Learners who use alcohol and drugs are likely to perform badly at school. According to the Department of Health as cited in Baloyi (2006:27), children are beginning to use and abuse alcohol and other drugs at a much younger age. A national survey indicates that 34% of Grade 6 learners experienced peer pressure to use dagga while 51% experienced pressure to drink alcohol. The Department of Health, as cited in Baloyi (2006:27), further states that the earlier the young person starts using drugs, the more likely he or she is to experience dependency and go on to other hard drugs. Cigarette smoking is the gateway drug to hard drugs and peer pressure plays a big role in the abuse of drugs by learners.

Tlhoaele (2003:2-3) states that alcoholism leads to dysfunctionality in the families. Since such families face problems of alcoholism, the focus is on addiction rather than on the needs of the children. Young people, whose family members experience substance abuse problems, suffer from neglect, economic hardship and even abuse in these kinds of settings.

The researcher has observed that most young people, especially learners at Ipelegeng Location, Schweizer-Reneke in the North West Province use alcohol and drugs. In most cases this happens while they are in taverns on weekends. It is clear that the abuse of these substances by learners is a serious problem that needs to be addressed accordingly. Tlhoaele (2003:3) asserts that:

"Children from such families may adapt to the symptoms of alcohol abuse and carry them along as a way of life. They may identify with the abusive patterns as a coping mechanism, which can lead to other dysfunctional patterns such as criminal activities. They might also do anything, including resorting to criminal activities to obtain alcohol".

Glanz as cited in Tlhoaele (2003:4) agrees that there are apparent factors which lead to delinquent behaviour among young people, which originate particularly from within their family systems. These factors include family dysfunction (broken homes), parent child relationships, substance abuse by parents, poverty, unemployment, truancy, violence and abuse.

1.4 AIM AND OBJECTIVES OF THE STUDY

The aim and objectives of the study were as follows:

1.4.1 Aim of the study

The aim of this study was to investigate the impact of substance abuse on learners from dysfunctional families at Ipelegeng Location in Schweizer-Reneke.

1.4.2 Objectives of the study

The objectives of the study were as follows:

- To explore the extent to which substance abuse affects school performance in learners from dysfunctional families
- To establish how substance abuse destroy parent child relationships
- To describe how substance abuse influences truancy in learners
- To explore how substance abuse by parents leads to violence and abuse

1.5 SIGNIFICANCE OF THE STUDY

According to Brennen (1992:93), significance of the study focuses on the contribution of the study to the social work profession, on the policy and programme development and to the community where the study will be conducted. The findings of the study will add to the knowledge base of the social work profession with special reference to the impact of substance abuse on learners from dysfunctional families. The policy makers may use the findings to formulate or improve on the existing policies on the prevention of substance abuse on school learners and young people in general. The study may also enhance the knowledge of learners regarding substance abuse and its effects on their future.

1.6 ASSUMPTIONS OF THE STUDY

The assumptions of the study were as follows:

- Substance abuse has a negative social effect on learners from dysfunctional families
- Learners from dysfunctional families which indulge in substance abuse play truant
- Substance abuse leads to violence in dysfunctional families
- Substance abuse affects parent-child relationship
- Substance abuse affects school performance in learners from dysfunctional families
- Unemployed family members tend to indulge in substance abuse

1.7 RESEARCH METHODOLOGY

According to Lobelo-Ratefane (2005:29) research methodology is a scientific process following the statement of the problem, formulation of objectives and hypothesis. The process includes the research design, methods of data collection, sampling, rationale, analysis and interpretation of data and finally reaching a satisfactory conclusion.

The following are the methods and procedures that the researcher utilised to carry out the objectives of the study.

1.7.1 Type and approach of the study

For the purposes of this study, the researcher opted for applied research (empirical study). With regard to the approach of the research study, the researcher used qualitative research approach. According to Schurink as cited in De Vos, Strydom, Fouche and Delport (2005:277) qualitative research is aimed at understanding social life and the meaning people attach to everyday life. It is regarded as a subjective exploration of reality from the perspective of the insider.

1.7.2 Research design

Mouton in Makhubele (2008:110) states that research design is a blueprint, plan, structure and a strategy of investigating and answering the research questions and it describes how, when and where data are to be collected and analysed. For the purpose of this study, the researcher used exploratory research design. Bless and Higson-Smith (1995:42) explain that the purpose of an exploratory research is to gain insight into a situation, person or community. Grinnell (1993:119) describes exploratory designs as per-experimental or non-experimental as they only explore the research question or problem area. Their purpose is not to produce statistical data but to build a foundation of general ideas and tentative theories that can be explored later with more precise and complex research design.

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1.7.2.1 Population

Bless and Higson-Smith (2000:85) state that population is a set of elements that the research focuses upon and to which the obtained results should be generalised. Furthermore, De Vos *et al.*, (2005:194) indicate that population is the totality of persons, events, organization units, case records or other sampling units with which the research problem is concerned. For the purpose of this study, population consisted of learners, educators and parents/guardians whose children attend at Itshupeng Secondary School.

1.7.2.2 Sampling

The researcher utilized purposive sampling. De Vos *et al.*, (2005:202), state that this type of sample is based entirely on the judgement of the researcher, in that a sample is composed of elements that contain the most characteristics, representative or typical attributes of the population. For the purposes of this study, there was no need to sample as participants were few. Interviews were conducted with participants until saturation level has been reached. Automatically, parents/guardians of the learners who have been identified and consented to participate in the study were drawn in followed by life orientation educators from Itshupeng Secondary School. The researcher chose the respondents based on the following characteristics:

- Learners from dysfunctional families who were referred to the social worker.
- Parents of the learners from dysfunctional families who were referred to the social worker.
- Life Orientation educators at Itshupeng Secondary School formed part of the sample, however, other educators who were willing participated in the study.

1.7.3 Data Collection

The researcher used the following instrument to collect data.

1.7.3.1 The semi-structured interview schedule

The researcher used semi-structured interview schedule with the respondents to collect data. A semi-structured interview is a useful technique used during an exploratory research process as it helps to clarify concepts and problems as well as creating possible answers or solutions to a problem (Bless & Higson-Smith, 1995:110). Through the use of semi-structured interview schedule, the researcher was able to present specific themes to the respondents so as to allow them to furnish the necessary information and also to allow them to provide more information without restrictions or without being influenced.

1.7.3.2 Data collection procedures

The following are the procedures utilised to collect data.

1.7.3.3 Document analysis (literature review)

The researcher utilised journal articles, text books, dissertations, and annual reports for this purpose. Whilst reviewing the literature, the researcher also considered theories, perspectives, and paradigms related to the study in understanding the behaviour of the sample to be studied.

1.7.3.4 Individual interviews (one-to-one interviews)

For the purposes of this study, the researcher used the following: individual interviews and document analysis (literature review) to collect data. Individual interview incorporate the direct personal or one-on-one contact with the participant who is asked to answer questions relating to the research problem (Bless, Higson-Smith, & Kagee, 2006:116). This allows the researcher to gain a detailed picture of the respondents' beliefs about, or

perceptions of, substance abuse (De Vos, Strydom, Fouche, & Delport., 2002:302).In a qualitative study, the focus of the researcher is on spoken and written representatives and records of human experience, using multiple methods and multiples sources of data (Punch, 2005:168).

1.7.4 Data Analysis procedures

Data analysis is also the process of bringing order, structure and meaning to the mass of collected data (De Vos *et al.*, 2005:333). Marshall and Rossman (1999:150) motivate this statement by indicating that qualitative data analysis is a search for general statements about relationships among different categories of data. Creswell (1998:142-165) believes that the process of data analysis and interpretation can best be represented by a spiral image - a data analysis spiral. The researcher moves in analytic circles rather than using fixed linear approach. For the purpose of this study, the researcher followed the steps of data analysis procedure outlined by De Vos *et al.*, (2005:334), which are:

- Planning for recording of data
- Data collection and preliminary analysis
- Managing or organizing data
- Reading and writing themes
- Generating categories, themes and patterns
- Coding the data
- Testing the emergent understandings
- Searching for alternative explanations
- Representing and visualizing (writing the report)

1.8 LIMITATIONS OF THE STUDY

The study was confined to one school in Ipelegeng Location in Schweizer-Reneke. Therefore, the findings cannot be generalized to a large population or other areas.

1.9 OPERATIONAL DEFINITION OF CONCEPTS

According to Morena (2004:6) a definition of concept is provided in order to clarify and simplify the words and phrases with which the reader might not be familiar.

1.9.1 Substance abuse

According to NDMP (2006-2011:47) substance abuse refers to the misuse and abuse of legal substances such as nicotine, alcohol, over-the-counter drugs, prescribed drugs, alcohol concoctions, indigenous plants, solvents and inhalants, as well as the use of illicit drugs. For the purpose of this study, this definition is adopted.

1.9.2 Impact

For the purpose of this study, an impact means a forceful consequence or a strong effect due to indulgence in substance abuse.

1.9.3 Learner

According to Thompson (1995:774) and Tullock (1996:868), a learner is a person who is learning a subject or skills. Hornby (2000:731) concurs with the aforementioned explanation when stating that a learner is a person who is finding out about a subject or how to do something. In this study, a learner refers to any person from a dysfunctional family engaged in a learning activity under the age of 21.

1.9.4 Dysfunctional families

In this study, dysfunctional families refers to those families in which conflict, misbehaviour, and often abuse, either physical, emotional, psychological and sexual on the part of individual family members occur continually and regularly due to misuse or abuse of substances.

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1.10 ETHICAL CONSIDERATIONS

The following ethical considerations were taken into account in this study. The researcher asked for permission to conduct the study from the relevant authorities at the University of Limpopo and at Itshupeng Secondary School. Mboniswa (2005:11) indicates that people should never be exposed to situations that might cause serious or lasting harm. Harm to subjects can be physical or emotional, and emotional harm to respondents is often more difficult to predict and to determine than physical discomfort (Motepe, 2006:46). The researcher ensured that the respondents are not exposed to any harm. In this study, the respondents signed a consent form indicating the aim, objectives of the study and the fact that participation is voluntary and that respondents may withdraw from the study at any time when they feel so.In this study, the repondents did not complete any particulars in the questionnaire to maintain confidentiality and anonymity. The research result will be made available to Itshupeng Secondary School and the University of Limpopo through a mini-dissertation or article which will allow the respondents access to the results.

1.11 OUTLINE OF THE STUDY

The research report is organized as follows:

Chapter 1: General orientation for the study

Chapter 2: The impact of substance abuse on learners from dysfunctional families

Chapter 3: Data Presentation, Analysis and Interpretation

Chapter 4: Major Findings, Conclusions and Recommendations

1.12 CONCLUSION

In this chapter an overview of the study was presented. The researcher indicated his rationale for undertaking the study, the problem statement, aim and objectives of the study, significance of the study, research methodology, ethical considerations, limitations of the study, definition of concepts and outline of the study. In order to realise objectives of the study, the literature reviewed and theoretical framework in this regard.

CHAPTER 2

THE IMPACT OF SUBSTANCE ABUSE ON LEARNERS FROM DYSFUNCTIONAL FAMILIES

2.1   INTRODUCTION

This chapter presents the literature and theoretical framework supporting the dominant idea of this study, which is, the impact of substance abuse on learners from dysfunctional families. Cresswell (1998:20) states that literature in a research study achieves several purposes, namely, that it firstly, shares with readers prior studies closely linked with the study being reported; secondly, relates a study to the larger ongoing dialogue on the topic as well as filling gaps and extending prior studies. Thirdly and lastly, it provides a framework for establishing the significance of the study and a benchmark for comparing the results of a study with other findings.

Cresswell (1998:21) further states that in qualitative research, literature should be used inductively as the study is exploratory. For this reason Cresswell (1998:24) further argues that the decision on whether literature findings and theoretical perspectives should be presented before or after data-collection, depends on the strategy of the inquiry. The option could be put on a continuum on 'before-after' with the possibility of both. The inductive form of reasoning should, however, not be sacrificed in this decision. For the purpose of this study, the researcher opted to start with literature relevant to the topic under study in the beginning of this chapter. The literature in this chapter will comprise the following sections:

- Substances abused by the society and their effects on the abusers
- Identification of substance abusers amongst learners
- Initiation of learners in substance abuse
- Reasons why learners indulge in substances of abuse
- The effects of substance abuse on learners and their families

• Social work intervention in substance abuse

2.2 SUBSTANCES ABUSED BY THE SOCIETY AND THEIR EFFECTS ON THE ABUSERS

Tobacco and alcohol are the most substances of abuse and affect the user's brain, causing self administration of that substance to be repeated(Sweetney & Neff, 2001:4).In support of this notion Mhlongo (2005:27) indicates that the substances mostly used by adolescents are tobacco, alcohol, marijuana, glue, paint, thinners, and aerosols and polish remover.The repeated use of the substance can lead to sensitization of motivational circuits in the brain and ultimately to dependence. The outcome of the psychoactive substance is influenced by the user's biological, social and cultural factors (Sweetney & Neff, 2001:4).

2.2.1 Tobacco (Cigarettes smoking)

Tobacco is a substance of abuse and can be smoked, can be taken orally or nasally. According to Yuji (2001:9),tobacco smoking is an established cause of a significant number of diseases, disabilities and deaths worldwide. It is not only harmful to the individuals who smoke but also to those who are passively exposed to tobacco smoke. Tobacco contains thousands of substances and nicotine is the one most frequently associated with dependence because it is the component that is psychoactive. Observable behavioural effects, such as mood changes, stress reduction and enhancement of performance, are common. Saiduddin (2003:21) states that when the alarming problems of smoking are recognized, theycan be addressed as an individual, social, economic and environmental burden at the family, community, national, regional and global levels.

Mhlongo (2005:27 indicates that cigarettessmoking is the gate-way to other drug abuse. Cigarette smoking regularly serves as the starter drug-delivering agent and the addictive substance contained in cigarettes is called nicotine. Children become hooked on

cigarettes at any age for various reasons such as stimulation of other people using the substance, curiosity and the desire to experiment. Nicotine has demonstrated dose related euphoric effects similar to those of cocaine and morphine (Henning, Miyasato & Jasinski, 2004:16).According to Ronald and Davis (2004:5) cigarettes cause the worst of all drug habits found in the smoking of tobacco. The first step towards addiction may be as innocent as a boy's puff on a playground. Tobacco holds a special status as a gateway to the development of other drug dependencies not only because tobacco use reliably precedes use of illicit drugs, but also because tobacco use is more likely to escalate to dependent patterns of use of more other dependence producing drugs.

Wood (2004:14) concur by stating that cigarettes' toxic chemicals impair impulses and ethical controls, that is, cause addiction, brain damage, aboulia (impaired reasoning, ethical controls, and will power). Children may have conduct disorders and difficult temperaments resulting from the manner they were brought up. For instance, if the parents and other family members engage in substance abuse, children are likely to develop a range of affective, behavioural, cognitive and social problems. Many of these children present poor school readiness and performance, low bonding and attachment to school (Barber, Bolitho & Behand, 2003:14).

Mansell and Liu (2003:50) state that chronic drug use is mostly prevalent among adolescents whose parents face many challenges that limit their ability to provide for the physical and/or emotional needs. These challenges include drug addiction, scarce financial resources, unstable housing, family history of substance abuse and lack of social support from family and friends. Mansell and Liu (2003:50) further indicate that, on average, children affected by maternal addiction are susceptible to a high level of risk. From the time of their conception and continuing through childhood, their environment has been characterized by an accumulation of factors known to place children at an increased vulnerability for physical, academic, and socio-emotional problems.

2.2.2 Alcohol

Alcohol is the most readily available drug on the market and is not illegal to use or to be possessed. Alcohol is considered as a drug but unlike other drugs, it is legal and acceptable because consumption of alcohol is as old as man himself (Leteka, 2003:2). Indiscriminate use of alcohol is now a universal problem. To date, cultures from many parts of the world have used alcoholic beverages to celebrate important events. Alcohol has been consumed as medicine, as a form of magic and part of worship services. The use of alcohol has major public health consequences because of its relationship with many acute and chronic physiological, psychological and behavioural problems. Many studies have shown that alcohol is the most prevalent substance that is used worldwide and is also responsible for pervasive health, social and economic consequences, more so when young people are involved. The accidental deaths and crimes committed while under the influence of alcohol have created social as well as health problems (Taylor and Miller, 1995:32). Alcohol abuse is one of the most difficult problems to deal with because the use is accepted at any social function and alcohol amongst Africans has socio-cultural and religious significance. In spite of its social acceptability, it is a depressant and a sedative and becomes addictive when ingested in large amounts and at regular intervals. It slows down the activities of the nervous system that control bodily functions, causes drowsiness, lack of concentration, slowness in thinking, impaired interpersonal relationships and leads to economic dysfunction and poverty (Dube, 2007:18).A person who drinks and always stays drunk has an attitude of 'who cares'. As a result of being drunk, a person's self esteem is boosted and he becomes less inhibited. Of all the drugs, alcohol is the most commonly abused by the people from all walks of life (Lesejane, 2004:15).

According to the National Drug Master Plan (2006-2011:7), alcohol remains the primary abused drug in South Africa. Indications are that between 7.5% and 31.5% of South Africans have an alcohol problem or are at risk of having such problem. A drinker at risk is someone whose health is likely to be affected by drinking or who is likely to become an alcoholic. Risky drinking during weekdays involves on average 7, 5% of the population

and is more prevalent during the weekends ("binge drinking") with an average of 31, 5% of those aged between 25 and 54 at greatest risk. A binge drinker can be expected to drink nine tots of spirits, a bottle or more of wine or more than two litre of beer a day. Alcohol abuse of this nature costs the country in the region of R10 billion each year. In a study conducted by Dube (2007:18), the dangers of too much alcohol consumption include:

- Mental deterioration.
- Lack of alertness, thus people under the influence of alcohol are prone to accidents.
- Damage of organs like liver, kidney and others; also permanent damage to the foetus if the abuser is pregnant.
- Blackouts.
- Convulsions.
- Sever psychological dependence.
- Death (from over dosage)

A study by Rehn, Jenkins and Cristal(2001:107-108)highlights that alcohol affects the person in many ways. They indicate that alcohol makes the individual care-free and sociable. It causes slurred speech and it impairs motor skills, inthat for those who are supposed to drive, it means that the individual cannot coordinate well enough to drive a car. It also causes confusion as at this stage, the individual cannot recognize things around him well. Alcohol also causes the individual to go into a stupor, and a coma. They finally highlighted that it causes respiratory paralysis that is connected with the gag reflex. This means that when the individual vomits, he cannot get rid of the vomit because of the comatose state and death may likely to occur.

2.2.3 Marijuana

According to Rehn *et al.,* (2001:112) marijuana is an addictive hallucinogenic drug, which is smoked by the abuser. It causes an unnatural thirst or hunger, uncontrolled mood swings, talkativeness, impaired perception, disturbed judgment, mind disorders, a feeling

of well being and euphoria (pleasant feeling of excitement and of escaping reality) and it alleviates anxiety. A study by Dube (2007:20) highlights that the dangers of the use of marijuana include:

- Excessive aggression when combined with alcohol.
- Accidents due to distorted perception.
- Physical damage in the form of bronchial irritation, risk of lung cancer, chromosome damage, and ultimately, brain damage.
- It is usually the first step of addiction before abusers move to hard drugs.

2.2.4 Household substances (Glue, paint, paint thinners, aerosols and polish removers)

As it is illegal to possess marijuana and other hard-drugs in the Republic of South Africa, and that it is too expensive to obtain,abusers, therefore, tend to abuse substances that are more readily available and not illegal to buy, such as household substances. Dube (2007:20) indicates that household inhalants are an assortment of chemicals and toxins that when inhaled, are poisonous to the brain. They include common household items such as spray paints, air fresheners, glues, correction fluids and hair spray. Inhalants can cause disorientation, hallucination, memory loss and lack of coordination. Lopez(2001:12) indicates that the homeless and poor often abuse these substances.The author further highlights that these substances have a depressant effect on the abuser when they are inhaled. They cause slurred speech, inability to focus, stupor and seizures. The individual tends to move slowly as if lethargic and has a "drugged appearance". The individual sometimes tends to become hostile and aggressive. With regard to polish remover,WHO(2002:13) indicates that it slows down the activities of the nervous system that control the body functions.In a study by Dube (2007:21) the following signs may occur after the use of household substances:

- Breath and clothing that smell like chemicals.
- Spots or sores around the mouth.

- Paint or stains on body or clothing dazed or glassy eyed look.
- Nausea or loss of appetite.
- Slurred speech.
- Red and running nose.

2.2.5 Cocaine

South Africa has a cocaine user population of about 265 000 who use 4, 6 metric tons annually with a street value of R1 430 million. Cocaine sells on the street at over R300 a gram. The drug enters the country from South America primarily through OR Tambo International Airport with air freight and couriers which are the preferred form of transport. Some cocaine is transshipped from South Africa to the United Kingdom and Australia directly by air passengers and crew or via Asian countries (National Drug Master Plan, 2006-2011:7). According to UN-ODCCP (2002:45), cocaine is an extremely addictive drug and is illegal to possess or deal in. The effects of cocaine appear almost immediately after only a single dose and disappear within minutes. It makes the user feel euphoric, energetic, talkative and mentally alert, especially to the sensations of sight, sound and touch. It can also temporarily decrease the need for food and sleep. The short tem physiological effects of cocaine include constricted blood vessels, dilated pupils, increased body temperature, increased heart rate, and an increase in the blood pressure. Large amounts of cocaine may lead to bizarre (strange in appearance), erratic (unreliable) and violent behaviour. The signs of cocaine dependence include:

- Small constricted pupils.
- Injection marks.
- Bruises on the arms, thighs, groins, ankles and neck.
- Unnatural calmness.
- Drowsiness.
- Personality changes.
- Sexual drive.

2.3 IDENTIFICATION OF SUBSTANCE ABUSERS AMONGST LEARNERS

It is important for parents,educators and learners to identify the physical and psychological signs and symptoms of substance abuse. The earlier the identification, the greater the success of the intervention programme, (Rutherford in Jeram, 2009:14). There are various signs and symptoms according to different situations. Jeram (2009:14), argues that the learner who abuses drugs may show, inter alia, the following symptoms:

- The learner experiences deterioration in scholastic performance. The learner achieves low grades and may display hostile, defiant and unco-operative behaviour towards others in school. The learner may also experience a drop in motivation, concentration, general achievement, interest in sport and extra-mural activities. Under these circumstances school is of no interest to the learner and truancy often results (Jeram, 2009:14).

- Jeram (2009:14) highlights that the learner may be involved in constant conflict situations and may experience a breakdown in communication and a general deterioration in interpersonal relationships. The learner may become withdrawn, depressed, sleepy, tired, manipulative and self-centered.

- The learner may begin to tell lies, keep secrets, steal or borrow money or engage in sneaky and suspicious behaviour. He may even be found in the company of suspicious individuals (Jeram, 2009:14).

- Jeram (2009:14) found that the learner may experience extremes of behaviour. He/she may either become extremely aggressive or unusually docile. On the other hand he/she may be defiant, unco-operative, moody, cranky, or verbally abusive and on the other hand he may be jovial, pliable, sociable and agreeable.

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2.4 INITIATION OF LEARNERS IN SUBSTANCE ABUSE

The use of substances is a common part of socialization in many rural communities (Manale, 2006:33). In the past, rural people used to indulge in substances which were not synthetic though of late, these hard drugs are being introduced to rural communities. Again, in rural communities, the use of substances is a sign of the right of passage to adulthood. Children learn through assimilation and observation. Whatever adults do in the presence of children, it can be in their leisure time or otherwise, has a direct influence on their behaviour. One could assume that children from parents who abuse substances are likely to abuse it as well. This is supported by Manale (2006:34), who indicates that alcoholism is a family disease that is likely to occur among children of alcoholics. Young substance abusers often have parents who are substance abusers too. If children use substances at an early age, there is a likelihood that they will become chemically dependent and have alcohol or other drug abuse problems during adolescence. According to Page, Scanlan and Gilbert (1999:13), parents are responsible for their children's behavior as it reflects the way they were socialized. The WHO (2003:9) states that when adolescents feel connected to their families and when both parents are involved in their children's lives, it influences how adolescents feel about themselves, and the choices they make about behaviours that affect their health.

Manale (2006:34) found that as substance abuse is sometimes based on cultural ceremonies and attitudes, certain factors such as environment or poverty may play a role towards its abuse. It has further been noted that consumption may increase or decrease in accordance with the extent of norms that prescribed drinking habits, as one's behaviour is defined by others. Manale (2006:24) further found that in communities where manhood and womanhood are simply determined by one's attendance of an initiation school, irrespective of a person's age, children as young as 8 years may attend such ceremonies and therefore, become men and women who can then freely indulge in adult activities such as smoking, drinking and sexual intercourse without inhibition.Malaka (2005:8) stated that young initiates often return to school and pose

problems to teachers as they want to be viewed as adults who can freely smoke, drinking and be sexually active with willing and/or unwilling partners of their choice.

2.5 REASONS FOR LEARNERS TO INDULGE IN SUBSTANCE ABUSE

There is a variety of reasons advanced in relation to why learners indulge in substance use and eventually abuse. These reasons include, amongst others: good feeling, emotional pain, peer group pressure, curiosity, boosting self confidence, personality, family networks, interaction and home environments and socio-economic status.

2.5.1 Good feeling

As part of the human society learners need to feel good, raise their confidence so as to be acceptable in their in-groups. For them to attain this 'feeling good' status, they indulge in substance abuse. Feeling good after one has taken psychoactive substance is what most substance abusers need. When people first try a drug or alcohol they get a "rush". They feel powerful, smart and full of energy. They may stay active for days, if that "good" feeling subsides, they feel like having it again and again and it can leads to addiction (Morena, 2004:13).

2.5.2 Emotional pain

There are life events, man-made or natural, which could cause emotional pains to learners and these are death and bereavement, failure at school and lastly, domestic violence. Some people start to take drugs because they are depressed. Loss of a loved one, failing exams or family violence are some of the problems that people try to deal with by using drugs or alcohol. This temporary way of solving problems leads to a permanent way of dealing with pain and leads to addiction (Morena, 2004:14). Wegscheider-Cruse (1992:252) indicates that "children in dysfunctional families learn to repress and deny their feelings". Negative or painful emotions are particularly seen as "bad" (frame of reference), and these children do not learn healthy ways to deal with

anger, hurt, and other emotions, hence they decide to abuse substances in order to deal with their emotions.

According to Robinson and Rhoden (1998:60) upbringing in substance abusing family leaves children with many emotional and sometimes physical wounds. The most common emotions that children from substance abusing family experience are anger, fear, anxiety, guilt, sadness, depression, confusion, embarrassment, isolation and grief. Cloud and Townsend (1992:220) point that people disguise pain when they are emotionally injured or were neglected as children by abusing substances. They may use substances to distract from the real pain of feeling unloved, unwanted and alone. If they are to stop using these disguises, their isolation would be intolerable. Olwagen (2003:87) also found that people who do not know how to handle their emotions due to parental absence, poor parental role modeling and no opportunity to express emotions, may resort to pretending that their feelings do not exist. In this instance, people abuse substances in order to feel connected and to suppress emotions that they could not deal with.

2.5.3 Peer group pressure

New patterns of behaviour can have both short and long term consequences are formed during adolescence. Many thoughts are tried for the first time, such as involvement in crime and experimentation with drugs. Drug abuse can be a cause or a consequence of peer relationship since adolescents tend to emulate peer behaviour and seek reinforcement from their peers, frequent drug use by friends often influences one's own level of drug use. Peer relationships among high intensity drug users are likely to revolve around drug-related activities rather than around close, emotional bonding (Sempe, 2007:38-39). Peer influence can be positive or negative. It is positive when an influential adolescent's behaviour is accepted by the society and it is negative when the most influential adolescent's behaviour is not accepted by the society (Pama 2008:26). Peer pressure is the most influential factor in the sense that if one is associated with a group of friends who use and abuse alcohol and drugs, he or she is likely to try alcohol and

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drugs and ultimately use and abuse them so as to be accepted and not treated as an exception in the group (Pama, 2008:26). A study conducted by Morena (2004:14) revealed that one of the most common reasons given by learners who are drug addicts is that all their friends are taking drugs. As such, they want to fit into their peer group by taking drugs. In support of that, Walter (2002:3) indicates that chemically dependent adolescents gradually change their peer group to include drinking and drug-using friends. Sempe (2007:39) further says that peer influence on behaviour reaches a peak during adolescence. Peers provide the social context in which drugs are used. Most young people are first initiated into the use of marijuana and other illegal substances by their peers.

2.5.4 Curiosity

Young people always want to explore adult ways of behaving and satisfying needs and the challenges and the risk these adult ways entail. One of the reasons why learners indulge in substances of abuse is curiosity. Curiosity normally goes together with copycat behaviour, which usually occurs when young people are continually exposed to drug-related ways of behaviour in a home environment (Twala, 2005:15-16). Pama (2008:27) noted that curiosity among learners is one of the most influential factors that contribute to drug use. It is one of the common reasons to use and abuse substances by learners because they tend to think that by using substances, one would feel good.

2.5.5 Boosting self confidence

A young person has a responsibility to prove his or her ability and worth as he/she journeys in life. The adolescent is often accompanied by intermittent periods of stress and tension. The need for high self-confidence creates an artificial sense of well being, and offer a temporary refuge from the realities of the real world. Whilst young people try to cope with the demands of life, some fail to cope and they start to go astray. Mostly, they survive by taking drugs. They continue to use drugs to suppress their inner conflict, insecurity and anxiety and these result in addiction (Twala 2005:16).

2.5.6 Personality

Twala (2005:16) indicates that the personality might also be a problem especially to young people with regard to substance abuse. It is indicated that individuals who are introverts, submissive and feel inferior, who lack confidence in themselves and others, and who have a great need for recognition may take drugs to acquire a sense of well being

2.5.7 Family networks, interaction and home environments

Tlhoaele (2003:3) defines socialization as a process by which one acquires social skills to participate effectively in the society in which one lives and through which one feels accepted and special. The way in which children relate to other socializing agencies is partly influenced by the family of which the child is part.Bezuidenhout (2004:122) indicates that adolescents with substance abusing parents experience a higher rate of parent and/or family problems than adolescents whose parents do not abuse substances. This may cause poor parent-child attachments. According to Twala (2005:17), poor parent-child attachments lead to a lack of commitment to conventional activities, and this in itself is a reason why adolescents resort to drug taking.

In families where alcoholism is a problem, the whole family system is rendered into a dysfunctional entity. Such families are unable to nurture and protect children as well as inability to meet the needs of the children. Young people, whose family members experience substance abuse problems, suffer from neglect, economic hardship and even abuse in these family settings (Bartollas, 1993:266). Tlhoaele (2003:3) comments that children from such families may adapt to the symptoms of alcohol abuse and carry them along as a way of life. They may identify with the abusive patterns as a coping mechanism, which can lead to other dysfunctional patterns such as criminal activities to obtain alcohol.

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According to the National Drug Master Plan (2006-2011:8),youths with poor home support tend to seek support and understanding outside the home. Many find affection, understanding and support in the lifestyle of a subgroup whose members are drug abusers. Unfortunately,for poverty stricken families, their children are easily lured by the drug lords to sell drugs for them in schools and in the community. Moreover, Schaefer (1996:130) asserts that external pressures, especially the media, have an influence on substance abuse among the youth. According to him, the amount of time young people spend watching television has a negative influence on their behaviour. The author goes on to say that pressure to use alcohol and tobacco has greatly increased as young people are continually bombarded with the message that these drugs are the answer to all their problems.

2.5.8 Socio-economic status

Researchby Saiduddin (2003:23) shows that the socio-economic status of the family can contribute to adolescent use and abuse of drugs. This argument also shows that drugs are used and abused by the persons of low socio-economic status, as well as those from the upper class status (Pama 2008:28). Pama (2008:28-29) is of the view that the socio-economic status of the family can contribute to learner drug use and abuse in many ways. For example, if a family is unable to provide material needs for the learner, that learner may end up resorting to drugs use and abuse because they think that by using drugs they are solving the situation. In some instances, even in the learners from rich families where materials things are available learners tend to use and abuse drugs because they have easy access them.Rammala (2009:19) points that marijuana and cigarettes are easily accessible to learners and this becomes more difficult for educators to control such learners.

According to Pama (2008:28), there is a some relationship between socio-economic status and the use and abuse of drugs by adolescents. For instance, if a learner is from a poor family, he or she may tend to use drugs as a solution to the problem. In some instances, learners who are from well to do families use and abuse drugs because they

have money to purchase drugs. Substance abuse knows no boundary. It affects people irrespective of their race, political and economic standing, sex and sexual orientation, socio-educational standing and age. However, Pama (2008:29) states that adolescents from the lower socio-economic class are more often than not alcohol and drugs users and abusers than those who belong to most affluent or well to do social groups. This may mean that adolescents who are mostly vulnerable to drugs are those who are economically disadvantaged than those who are economically advantaged. In other instances such adolescents may be hired to sell and smuggle drugs by drug dealers. It is, however, important to note that from the findings of Pama (2008:29) that socio-economic status of the family cannot be separated from family and other family characteristics such as family cohesion, love and support. This may indicate that family closeness and love which boosts a child's self-esteem may be an important factor in whether the adolescent abuses drugs or not.According to Saiduddin (2003:23), dysfunctional families aggravate learners' inability to meet the required standards that will enable them to gain university entrance.

2.6 FACTORS AND EFFECTS OF SUBSTANCE ABUSE ON LEARNERS AND THEIR FAMILIES

Children with a family history of criminality or anti-social behavior are more likely to use drugs and alcohol than those without such a history. Teesson, Degenhardt and Hall (2002:45) state that the family relationship is a key component in the adolescent's ability to resist substances. They mention that the nature of the family relationship influences the adolescent's likelihood of using substances. Biggers (1998:33) reiterates the fact that the example set by parents regarding substance usage is a major determinant in the attitude of their teenagers toward substances.Children born or raised in a home where there is a history of alcoholism, have an increased risk of developing alcohol and other drugs problems. For example, boys born in an alcoholic family are two to four times more likely to become alcoholics than boys born in non-alcoholic families (Manale, 2006:39).

2.6.1 Factors for substance abuse on learners

Substance abuse can negatively impact the stability of the family, hence, Tlhoaele (2003:28), indicates that the family structure is related to socio-economic status and, undoubtedly, to other aspects of the quality of family life. Nonetheless, it is not the key element in the development of adolescent alcohol abuse and other deviance. Rather, the quality of parental socialization is the key predictor of adolescent outcomes-namely; nurturing parents who monitor the whereabouts of their children and have open lines of communication are more likely to have adolescents with fewer problem behaviours than substance abuse families, regardless of their socio-demographic and family structural conditions.

A person who abuse substances cannot be seen and treated in isolation. Members of the family influence one another and are also influenced by the events taking place in their social context. When one member of the family develops a substance abuse problem, it is not only limited to him/her alone, but affects the entire family system (Benshoff and Janikowski, 2000:148). According to Lewis (1994:143), similarly, the family system has a reciprocal effect on its stability and change towards the problems experienced by its members. Tlhoaele (2003:32) states that there is a variety of factors which upset the structure of the alcoholic family. According to Tlhoaele (2003:32), such factors can be discussed as follows:

2.6.1.1 Protracted conflict between parents

In families where substance abuse is present, parents might end up getting involved in constant conflict situations and this can negatively contribute towards a healthy development of children. Furthermore, these children might identify themselves with the aggressive behaviour of their parents and constantly get themselves into similar behavioural patterns (Tlhoaele, 2003:32). Substance abuse by young people is associated with juvenile delinquency and is often an expression of the emotionally disturbed adolescent's inner conflict, including feelings of worthlessness and guilt,

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because their parents ill-treat, violate and assault them (Bartol, 1991:338). According to Skolnick and Skolnick (1994:325), when parents are violent due to the influence of alcohol and drugs, they develop poor moral standards so much that they are likely to make sexual advances to their own children in this case especially the father to the daughter. From this perspective, it is natural to predict that children will display consistently negative behavior. As a result, of this aggressive behaviour, they are more likely to bully others in school and run a clearly increased risk of later engaging in other problem behaviours such as criminality, alcohol and dagga (Huesman, 1994:100).

2.6.1.2 Parental non-involvement with the children

Some parents do not show interest in social or educational the activities in which their children are involved. Owing to their substance abuse behaviour, most of their time is spent on feeding such a behaviour rather than getting involved in their children's lives. They would rarely bother to find out more about their children's emotional, social, psychological and spiritual well-being (Tlhoaele, 2003:32). Non-involvement of parents is a contributing factor for children to abuse substances. Supporting this is Moraba (1996:119) whose participants reported that to continue schooling was difficult because their parents did not support them and they (children) found resorting to drinking alcohol and smoking dagga as a solution to their misery. Smith (1996:12) states that "learners from such a situation are likely to manifest a lack of intellectual stimulation from home". Kheswa (2004:3) shares his views by indicating that "when parents/caregivers fail to provide the highly expected warmth, love, and supports to their adolescent-children, the family becomes dysfunctional and confusion and insecurity reign amongst the children. As a result the children entertain the idea of starting to use substances and leaving school". Olwagen (2003:72) notes that the absenteeism of the substance abusing parents results in family members having very poor coping and bonding skills and an inability to constructively deal with negative emotions. This leads to repetitive patterns of substance abuse in order for them to deal with negative emotions such as bitterness, loneliness, stress, no sense of belonging and a lack of self esteem.

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2.6.1.3 Lack of discipline

In substance abuse families, there is often inadequate supervision and discipline. When parents are under the influence of substances most of the time, children tend to take advantage of the situation. They think that they may do whatever they wish, because their parents do not see them or do not care about them. If only one parent is constantly under the influence of substances and the disciplining and supervising of the children is the responsibility of only one parent, this can be a frustrating and exhausting exercise. Therefore, it is most likely that children end up making wrong choices of friends and becoming involved in criminal activities due to lack of proper supervision and discipline (Tlhoaele, 2003:33).

Children from dysfunctional families that do not practise good discipline as a measure of influencing good behavior, can easily use alcohol and drugs. This is because there are no guidelines from parents andtherefore they do not know what to expect. According to Sprey (1990:59), these children are without primary educators, who are parents, to guide and discipline them. In support of the above, the findings of a study conducted by Mohasoa (2010:96) indicates that parents who allow their children to go to taverns without reprimanding that type of behavior encourage them to abuse substances. Children from such families are free to use substances because no one corrects such behavior or even guides them.

2.6.1.4 Substance abuse due to financial pressure

A family system may undergo a phase of economic tension due to unemployment, which often result in poverty. Tlhoaele (2003:33) is of the view that when parents experience financial pressure, they may abdicate their parental responsibilities by resorting to substance abuse, alcohol in particular, and finally develop a lack of cohesion within the family structure which includes the spouses and children. Furthermore, Tlhoaele (2003:34) emphasizes that substance abuse poses a serious threat towards child-rearing within the family system. Levy and Rutter (1992:57) support the latter statement by indicating that children including newborns and infants, are very often abandon by their

alcoholic parent. They further state that grandparents, especially grandmothers, have to care for their grand children after their parents abandoned them because of drug dependency. According to Lewis (1994:59), this can result in children starving and families disintegrating because parents spend all their money on their addictions.

Moraba (1996:115-116) indicates that economically deprived children's parents are unemployed, and they experience dissatisfactory life circumstances and cramped home conditions. They therefore, might feel pressurized to start earning money for themselves to overcome feelings of shame, insecurity and hopelessness. Furthermore, Robertson and Greenblatt (1992:280) are of the opinion that lack of money could be the reason forcing young people to seek employment. However, this adventure impacts adversely because in most cases significant decline in their school performance is manifested. Bee and Boyd (2003:305) reveal that the harder the adolescents work and the more they use alcohol and dagga, the more aggression they show to peers and the more arguments they have with parents. Supporting the above mentioned statements, Kiiru (2004:55) indicates that youth from rich families abuse substances because they can afford them, while some from the poor families, due to frustrations abuse cheap substances such as alcohol and drugs. In addition, frustrations arising from lack of school fees and other basic needs may lead learners to abuse substances based on the false believe that use or abuse of substances will make one forget his/her problems.

2.6.2 The effects of substance abuse on learners and their families

The following effects have been discussed:

2.6.2.1 Socio-economic effects of substance abuse

According to the National Drug Master Plan (2006-2011:8), socio-economic consequences of substance abuse are associated with low self-esteem, emotional immaturity, depression and social isolation. This is further exacerbated by unemployment and unstable local environments. With regard to tobacco, the National Council of

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Smoking estimates that about 25 000 smoking related deaths occur annually in South Africa and that 2.5 million workdays are lost due to absenteeism arising from tobacco related illness. Tobacco smoke affects smokers as well as non-smokers; hence the legislation prohibiting smoking in the workplace. The overall prevalence of alcohol abuse could be as high as 30% in certain groups and as low as about 5% in others and is linked to age, gender, socioeconomic status, and degree of urbanization. Binge drinking among the youth, especially males, is high (more than 25% in many communities).

2.6.2.2 Poor parenting style due to substance abuse

Payne (2009:20) indicates that "parenting style can be thought of as being the environment in which parents raise their children, and in which the family operates as a whole". Furthermore, Martin and Corbeck (1997:291-293) have identified the effects of parenting in a situation where either one parent or both are dependent on dependency producing substances. The stress of child rearing can contribute to an increased dependency on alcohol and drugs. In stressed families, where fathers abuse dependency producing substance, the mothers tend to offer inconsistent discipline and are less supportive to their children. The resultant effects are child neglect and abandonment, children assuming adult-like responsibilities at a very young age and children becoming rebellious in order to get attention.According to Dube (2007:28) the devastating effects of drug abuse on the family are those that pose the greatest threat to the family at large. When one member of the family abuses substances, every member suffers because it causes disruption and disharmony within the family. Dube (2007:29) is of the view that when younger children see the older person or parent using drugs, they may wrongly believe that it is normal and acceptable to take drugs. In other words, these authors are indicating that younger children will learn the behaviour of using drugs from their parents.

Preboth (2000:5) states that substance abusers often become so obsessed with the habit that everything going on around them is ignored, including the needs and situations of other family members, leading to a breakdown of the family as an entity. The author

further maintains that besides possible criminal behaviour brought into the home by the drug user, the family suffers varying degrees of personal anguish both physically and psychologically. In families where parents are heavy users of drugs and alcohol, their children are more likely to become drug abusers at adolescence. If parents involve their children in their drug using behaviour, such as selling liquor at home, sending them to buy beer, liquor, or drugs for them, the risk to abuse substances is increased. In families where parents fail to set their expectations of behaviour clearly, or fail to monitor their children or have excessively severe and inconsistent disciplinary practices, children are at a greater risk of delinquency and frequent drug use in adolescence. Positive family relationships appear to discourage initiation into drug use (Manale, 2006:39).

2.6.2.3 Anti-social behaviour by learners

Being brought up in an environment where substance abuse were more prevalent and the way of life, learners may assume that indulging in substances of abuse is a normal and acceptable way of life. To this end, anti-social behavior might develop. In the context of this study, anti-social behavior refers to the behavior of young people which is characterized by elements of stealing and violence due to the usage of alcohol and drugs. This type of behavior is not socially acceptance According to Manale (2006:39), this factor is particularly pronounced among boys who are five to seven years old. They manifest aggressive behaviour which is combined with withdrawal or isolation or do not play well with other children. Such children are at a risk of both delinquency and drug use in adolescence. In support of this, the findings of a study conducted by Jeram (2009:77-78) revealed that learners who abuse substances exhibit unacceptable behavior such as mugging, stealing, handbag snatching and violence to acquire money to satisfy and maintain their habit, whilst other may resort to prostitution.

2.6.2.4 Poor school performance and deviant behaviour

Manale (2006:40) indicate that for children in the fourth, fifth and sixth grade, academic failure is a factor that might increase the risk of both drug abuse and delinquent

behaviour. Drug use is a problem for the school-going adolescents because it undermines a learner's academic ability and performance. For children in the elementary grades, social adjustments are more important than academic performance as a predictor of later delinquency and frequent drug use. This is also associated with a low degree of commitment to school. Adolescents who hate school and are not committed to getting education, are at a high risk of substance abuse. Children who have low commitment to school often feel different or like outsiders. As a result, such children may develop a rebellious attitude that increases the risk of problems with drugs in late adolescence. In the USA, for example, learners who use marijuana regularly are twice as likely to get below-average marks or failing grades, and school dropouts are twice as likely to be frequent drug users (United States of America Government Gazette, 1998:29-34). According to USA Government Gazette (1998:29-34) drugs can disrupt the entire school in that when several students in a class abuse drugs, or absent themselves because of the drug abuse, the progress of all the students is impeded. In addition, drug use brings into the school environment illegal practices connected to the drug use, namely prostitution, theft and selling of drugs to others. None of these practices are conducive to the development of a healthy, productive life. A study conducted by Dube (2007:44) reveals that illegal use of substances affects the education of learners and their school activities.

Furthermore, Mohasoa (2010:36), indicates that school children who use substances often suffer from impairment of short-term memory and other intellectual faculties such as impaired tracking ability in sensory and perceptual functions, preoccupation with acquiring substances, adverse emotional and social development and thus generally impaired classroom performance. Reduced cognitive efficiency leads to poor academic performance, resulting in a decrease in self esteem in which the adolescent may eventually drop out of school altogether. This contributes to instability in an individual's identity which, in turn, is likely to contribute to further substance consumption, thus creating a vicious circle. Gouws, Kruger and Burger (2000:173) indicate that alcohol and drug use affects the nervous system and interferes with intellectual and thought processes, impairs perception, sensory-motor co-ordination and thinking speed and

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prevents the individual to function normally. Levett (1994:240) is of the view that substance abuse causes deterioration of scholastic performance. Learners' motivation, concentration and general performance drop drastically. Under these circumstances, the school rapidly loses any positive value for the child and this normallyleads to an increase in truancy.

2.6.2.5 Poor interpersonal relations and communication

Malherbe (1993:321) indicates that children who grew up in families affected by substance abuse are more vulnerable to emotional, physical and relationship problems. Family interactions set the tone and quality of the kinds of relationships children will have with others outside their homes. They have limited abilities to maintain healthy interpersonal relationships and their interactions are marked by co-dependency (relying on something outside the self for comfort). Substance abuse is known as a family disease. Substance abuse thus affects how each member of the family functions and causes harmful effects that can last a lifetime. This, in turn, affects family functioning, and can totally disrupt family life. Children experience difficulties in their lifestyles and in their personal relationships. Families in which one or both parents abused substances were found to display more negative interactions between members. They showed lower levels of warmth, cohesion and direct communication. They engaged in greater levels of openly expressed anger and therefore, family problem-solving discussions do not occur naturally and smoothly (Reddy, 2009:42).

The findings of a study conducted by Olwagen (2003:72), revealed that substance abuse by one or both parents influences the family's interaction. This negative interaction results in patterns of ineffective communication. Communication is characterized by negative verbal messages or no verbal communication at all. Parents' ineffective communication presents poor role modeling, which results in a circular pattern of substance abuse, escape, no communication and no safe emotional climate. Ineffective communication styles occur in dysfunctional families. This ineffective communication style of the substance abusing parents and subsequent ineffective communication within

the family, result in the inability to constructively deal with conflict. Family members adopt dysfunctional communication styles and will therefore, avoid conflict or deal with it in an aggressive or destructive way.

2.7 SOCIAL WORK INTERVENTION IN THE FIELD OF SUBSTANCE ABUSE

Roberts and Greene (2002:819) define Social Work intervention as "who we help, how we provide the services and the degree to which we encourage collaboration". In addition Zastrow (2000:48) indicates that "Social workers are called to work with individuals, families, groups, organizations and communities to address the concerns that limit their social functioning". Therefore the focus of social work is on the improvement of the social functioning of people with their environment. With special reference to the impact of substance abuse on learners from dysfunctional families, the researcher will discuss social work intervention in the context of roles of a social worker in addressing substance abuse, life skills in the context of a helping process in working with clients affected by substance abuse and lastly, prevention prorammes.

2.7.1 The roles of a social worker in addressing substance abuse

Social workers perform several roles in rendering their services as determined by socio-cultural and economic situations, clientele, models, perspectives and approaches of intervention. According to Mkhize (2006:79), social workers in their intervention with client systems, take cognizance into the characteristics of the client system and the impinging forces from the client systems' environment. They perform a wide range of roles that define responsibilities for the social worker and their client systems. These roles explicate the nature of the interaction between clients and social workers at various system levels. In the context of this study, the researcher will discuss the following roles of the social worker, namely; the roleof a teacher, enabler,counsellor and a broker.

2.7.1.1 Therole of a teacher

The purpose of the teacher's role, as outlined by Sheafor, Horesji and Horesji (2000:58) is to provide clients or communities with knowledge and skills required to prevent problems or improve social functioning. Zastrow (1991:15) explains that the role of a teacher involves giving information to clients and teaching them adaptive skills. In order to accomplish this, the social worker must be well informed and be a good communicator (Zastrow, 2004:78). The educator's role makes use of learning strategies to improve the clients' knowledge framework in order to empower them for growth. Education is a powerful tool in mastering life's tasks and can help the client system improve role performance (Miley, O'Melia and DuBois, 2004:19). The three functions of the teacher as outlined by Sheafor *et al.,* (2000:58) are: teach social and daily living skills; facilitate behavior change and primary prevention. Specifically for substance abuse services, information is needed to assist learners, families and community members in general in making informed decisions and help them to overcome the scourge of substance abuse. Detailed information in educating learners, families and communities about substance abuse should include the causes, effects and moreover the available resources such as substance abuse rehabilitation centers that are available within their communities.

2.7.1.2The role of an enabler

The New Social Work Dictionary (1995:25) defines the enabler's role as a "role in social work where tasks are carried out with the purpose of encouraging or facilitating self-sufficient action of client systems which will promote the interactions between individual and environment". Meyer (2006:48) indicates that the social worker utilizes the enabler's role to carry out the task of promoting and sustaining or strengthening individual's motivation to deal with stress associated with life transitions. Potgieter (1998:169) explains that the enabler role aims to help individuals discover their own strengths and resources to make the needed changes and reach their goals. Emphasis is put solely on the client - his/her abilities, involvement, strengths and efforts. The client's concern or unease utilized to release his/her potential and provide the drive to sustain the change

effort. The social worker's focus on this role is mainly to createfavorable conditions and systems which would empower learners and their families to overcome the problem of substance abuse. Compton and Galaway (1994:77) describe some of the ways in which this role can be employed:

- Encouraging expression of thoughts and feelings
- Providing for ventilation of feelings
- Examining relationship patterns
- Offering support and encouragement, and
- Engaging in logical discussion and rational decision making

The enabler's role is relevant when working with learners and dysfunctional families as they need support and encouragement in order to try new coping strategies.

2.7.1.3 The role of a Counsellor

According to Sheafor et al (2000:59, the role of a counsellor is to help the client to improve their social functioning by assisting them to understand their attitudes, change their behavior and teach them to deal with problematic situations. Potgieter (1998:169) mentioned that the counsellor's role provides support on an extended basis and includes activities to help the client systems to understand the relationship between themselves and other systems. In view of the above, the social worker should provide counseling to affected families and help learners and their families to deal with substance abuse problem and to focus on their strengths, recognize their potential for change and improve their social functioning.

2.7.1.4 The role of a Broker

Potgieter (1998:166) states that as brokers, social workers link clients with available resources by providing information about resources and by making appropriate referrals. To carry out the broker's role, Scheafor et al., (2000:56) point out that the social worker

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identifies the clients' needs, assesses their motivation and ability to use different resources and assists them to gain access to community resources. According to Compton and Galaway (1994:429), serving as a social work broker requires general knowledge of community resources and services as well as an understanding of the procedures for accessing those resources.It is therefore, important for social workers as brokers to identify the needs of learners and their dysfunctional families due to substance abuse and link them with resourceful institutions such as rehabilitation centers.

2.7.2Social Work Substance abuse prevention programmes

The New Social Work Dictionary (1999:374) defines prevention as actions taken by the social workers and others to minimize and eliminate those social, psychological or other conditions known to cause or contribute to physical and emotional illness and sometimes socio-economic problems. Prevention includes establishing those conditions in society that enhance the opportunities for individuals, families, and communities to achieve positive fulfillment". Skidmore (1994:332) mentions that prevention is the process of action taken to minimize anti-social behavior or to see to it that it does not arise at all. The New Dictionary of Social Work (1999:381) describes the programme as a plan and guidelines about permanent procedure designed to meet ongoing client needs, which are more flexible and short term in scope.

According to the National Drug Master Plan (2006-2011:22), preventive programmes can be divided into primary, secondary and tertiary programmes, which are defined as follows:

- Primary prevention attempts to curb the supply and to prevent the new use of illicit drugs. This type of programme is known as "preventing initiation". The focus is mainly on the individual, groups, such as families or society at large. In addition to other actions, primary prevention works towards the protection and upliftment of

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all people and communities by promoting the well-being of families as well as encouraging and supporting people to take pro-health decisions.

- Secondary prevention is aimed at persons who display the early stages of problem behaviour associated with the AODs. Secondary prevention attempts to avert the ensuing negative consequences by persuading such persons to cease their AOD use through counseling or treatment. This type of programme is often referred to as "early intervention".

- Tertiary prevention strives to end compulsive use of AODs and to ameliorate their negative effects through treatment and rehabilitation. This type of programme is most often referred to as "treatment" but also includes rehabilitation and relapse prevention.

For the purpose of this study, the focus of social work substance abuse prevention programmes will be limited to life skills, which is at primary prevention level.

2.7.2.1 Life skills in context of a helping approach in working with clients affected by substance abuse

According to WHO (1997:2), life skills are abilities and positive behavior that enable individuals to deal effectively with the demands and challenges of everyday life. Anderson and Okoro (2000:19) note that life skills are self helping skills that enable people to help themselves. According to Nelson-Jones (1995:2) life skills are people-centered aimed at assisting clients to develop self-help skills.

Nelson-Jones (1993:227) states that social workers are in a strong position to teach life skills because of their intensive and extensive skills training and knowledge. Social work practitioners use life skills to help meet the needs of their clients. For social workers to enhance the social functioning of people affected by the scourge of substance abuse, they should teach them life skills as a way of empowering them. In the context of this

study, the focus will be on the following life skills: communication skills, interpersonal relationship skills, assertive skills, problem solving skills, decision making skills, conflict resolution skills and critical thinking skills. The stated skills will be discussed in details as follows.

- ***Communication skills***

According to Hoelson and Van Schalkwyk (2001:261), communication is a cluster of skills that forms the foundation of other life skills. Parents need to communicate not only the effects of substance abuse to their children but also how they can avoid being the users or abusers of alcohol and drugs. For families to be stable, it is important that they communicate effectively hence, Motepe (2006:289) indicates that effective communication is essential for good relationships. Communication is effective when the idea or message, as it was initiated and intended by the sender, corresponds closely with the message that it is perceived and responded to by the sender (Motepe, 2006:289).

By teaching learners and their families effective communication skills, social workers will be enabling them to communicate social problems such as substance abuse, HIV and Aids and teenage pregnancy effectively. This will result in a functional family rather than a dysfunctional one. Effective communication will assist the family members to change a behavior that is not acceptable. Anstey (2002:179) emphasize that communication is the process of creating meaning between two or more people through the expression and interpretation of messages. It occurs when people send message to one or more receivers with the conscious intent of affecting the receivers' behaviour. Families should concentrate on issues that affect their social functioning by communicating them to each other. Hoelson and Van Schalkwyk (2001:260) state that good communication occurs when two or more people focus their attention on the same issue at the same time and understand the meaning of the expressed comments. This type of communication generates understanding, spreads information and is the means of achieving problem solving. Social workers should encourage families affected by substance abuse to listen

to one another in order to bring harmony in the family and this will enable them to develop and sustain a healthy family relations.

- *Interpersonal relationship skills*

According to Hoelson and Van Schalkwyk (2001:263), interpersonal skills involve a cluster of skills necessary for establishing, maintaining and ending relationships, and are closely interconnected with communication skills. They are regarded as one of the major keys to decreasing self defeating behaviour and increasing self enhancing behavior (Brack and Hill, 2000:10). Interpersonal skills help people to relate in positive ways with the people they interact with. The most important characteristic of interpersonal communication is that participants continually provide feedback or response to each other's messages (Motepe, 2006:291). Discussing substance abuse with family members or peers is an example of interpersonal communication. This may signify that one is able to keep healthy relationships which is of great importance on one's social well-being. Keeping a healthy relationship within a family system is important as this shows that the family is stable. Furthermore, in the helping relationship, social workers encourage individuals, families and communities to interact socially and affectionately.

Doyle (1992:179) indicates that communication support is an important relationship skill. The attitude and effective use of attending and clarifying responses demonstrate support by showing a real interest in someone. This skill involves actively providing positive feedback, communicating feelings of security, reassurance and reaffirming the one's sense of self. Supportive and reassuring responses stress faith and believe in others; believe the other person's ability to resolve issues; have an understanding of the frailty of human condition; and respect the dignity and worth of every individual.

- *Assertive skills*

Steinberg (2003:90) notes that sometimes problems are created in relationships with friends or family because people lack the communication skills needed to express

emotions, needs, and opinions assertively. People may choose to bury them or unleash them uncontrollably. Assertiveness training skills are utilized to assist individuals who are unduly hesitant about expressing their wants or feelings, or in standings up for their personal rights (Gillis, 1999:41). Steinberg (2003:90) defines assertiveness as "verbalizing your position on an issue for purposes of achieving a specific goal". The specific goal is for the person to express himself/herself in such a way that he hurt neither himself nor others. Assertiveness involves the ability to express feelings and opinions openly and honestly without offending others. Assertiveness training aims at teaching clients to stand up for their rights (Anderson & Okoro, 2000:24).

Assertive individuals are those who act in their own best interests without too much anxiety and without infringing on the rights of others. Assertive people are aware of their rights; communicate their opinions, needs, and feelings in appropriate ways; and make reasonable demands on others. Being assertive involves listening to the other person, validating what the other person has said, believing in your right to present a point of view and being prepared to express a point of view. Unassertive individuals on the other hand allow themselves to be treated as persons of little or no consequence (Geldard and Geldard, 1999:173). Learners who are unassertive can easily be tempted by their peers to take alcohol and drugs, while those who are assertive are able to refuse to succumb to peer pressure to use substances. It is therefore imperative to encourage learners to be assertive when intervening in cases of substance abuse.

Steinberg (2003:92) notes that training people to improve assertive behavior is not easy however, it is certainly worth for their social functioning. Assertion training is concerned with the building of self confidence and esteem, as well as the ability to translate this into improving communications and relationships. Doyle (1992:139:140) also emphasizes that learning to be assertive is hard work and has suggested the following steps to helpan individual to be assertive:

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- Help the client to recognize that his or her inhibitions are causing a great deal of tension and unpleasantness. The client system must be able to overcome these inhibitions.
- Obtain all detailed descriptions of all the situations that are related to unassertive behavior, identify specific instances of unassertiveness and causes.
- Help the client arrange a hierarchy, from the situations where the client has a higher probability of being assertive to those where the client is unassertive.
- Teach the client the distinction between assertiveness and aggression.
- Develop a plan to teach the client more assertive behavior.
- Implement the plan. The social worker needs to be systematic and provide positive feedback and reinforcement.
- Encourage the client to evaluate his or her own behavior and any changes that have taken place. Plan to follow up with the client.

- ***Problem solving skills***

Myrick (1997:161) states that a problem is any unsatisfactory or undesirable condition that needs to be corrected. All people experience problems. Some need immediate action, while others need careful thought and time before they can be resolved. Without adequate information, people tend to go for quick solutions that aggravate the condition since it addressed the symptoms rather the real issue. Some people may attempt to rationalize their problems away or to ignore them in the hope that they will disappear. Many of the conditions that people encounter are as a result of inadequate problem solving capacities. It is therefore of utmost importance that people should be taught problem solving skills (Swart, 2000:356). Substance abuse is a family problem that makes most families dysfunctional. Families that do not have problem solving skills continue to be ravaged by substance abuse. The abuse of substances in families is also caused by other social problems (poverty, family conflict) that are affecting them and they are unable to solve them, hence they use substances as a coping mechanism. Indulgence in substance abuse due to other social problems is an indication that some

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families lack problem solving skills. It is therefore, important for social workers to educate their clients about problem solving skills.

According to Swart (2000:356), problem-solving skills enable people to deal constructively with problems in their lives. Significant problems that are left unresolved can cause mental stress and give rise to accompanying physical strain. Problem solving is described as a step by step method of dealing with problems by following a formal reasoning process. In this process, problems are identified and a series of decisions are made to improve the situation. The counsellor provides the necessary guidelines during the learning process. Anstey (2002:135) suggests that problem solving involves the following steps:

- Identifying the problem and establishing goals. Counseling skills are used to identify and clarify the problem and determine goals.
- Generating alternative solutions. The client system is encouraged to brainstorm every possible means of achieving the goals.
- Choosing the best alternative.
- Developing a plan.
- Implementation. The client system acting upon the plan.
- Follow up to evaluate how the solution (s) worked.

- *Decision making skills*

Decision making is an extension of the problem solving process. According to Gillis (1999:48), the procedure is similar, except that it provides a structural basis for making choices, rather than for finding solutions. The ability to make decisions helps prevent problem conditions. Making good decisions involves choosing between two or more options. The need for effective decision making is an ongoing process throughout the life span of an individual and it is also something that everyone must do every-day (Potgieter, 2004:219).Geldard and Geldard (1999:178) note that adolescent decision-making processes are often influenced from peer groups to conform; they may also be

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influenced by beliefs about other people's motives, abilities and characteristics. They are likely to make decisions impulsively and/or defensively in response to situational demands without carefully following a properly thought out decision making process. Learners from dysfunctional families are unable to make informed decisions and therefore, they easily conform to their peers' influence as a result the abuse substances. Furthermore, Geldald and Geldald (1999:178) indicate that helpers need to help people to use their own resources for arriving at decisions. They need to be encouraged to make the best possible choices taking into account their personal values and the objectives they wish to achieve.

Values and attitudes play a vital role in the process of decision making (Tsatsi, 2001:39). The presence of values removes the association that there are right or wrong answers or outcomes. Learning decision making skills increases the possibility of an individual attaining what he or she values. Young people are made aware that every decision made has consequences of the decisions made. Being made aware that they should at times be capable of taking their own decisions affecting their own lives will boost their self confidence and assure them that they have the right to exert some control over their lives (Motepe, (2006:297). It is imperative for social workers, to encourage them to value their education,when dealing with learners who are abusing substances this move will enable learners to realize the danger of abusing substances.

The decision making process involves a systematic working through a series of steps. When helping young people to make decisions it can be useful for a helper to identify for them the following stages of decision making: define the problem, examine the possible choices and the consequences of each choice, select the best choice, act on your decision and evaluate their decision. The role of the helper is not one of making decisions for the client systems, but to give them the skills to deal with the present concerned, and also to deal effectively with future problems (Doyle, 1992:80).

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- *Conflict resolution skills*

Conflict in a family affected by substance abuse is inevitable. Potgieter (2004:233) indicates that conflict is part of life of all systems. The closer the ties between people, and the more frequent their contact, the greater the chances of getting irritable and annoyed with one another. Conflict is defined as a struggle between two or more people over values and claims to scarce status, power and resources in which the aims of the opponents are to neutralize, injure or eliminate reviles (Anstey, 2002:5). Conflict exists in a relationship when parties believe that their aspirations cannot be achieved simultaneously, or perceives that a divergence in their aspirations cannot be achieved simultaneously, or perceives a divergence in their values, needs and interests. Members of a system cannot come to an agreement about the events, rules, goals, behaviours, task performances or the decision making that affect their lives together. Therefore, they employ their power in an effort to defeat change each other to protect or further their interests in the interaction. Because there is conflict, it does not necessarily mean that the relationship is doomed. Positively managed conflict can produce remarkably positive results (Clearly, 2004:51).

Substance abuse is a significant factor for conflict within families. Domestic violence takes place in families when family members are under the influence of substances. To manage conflict in families, social workers through their professional knowledge and techniques should teach families the strategies on how to deal with conflict. According to Potgieter (2004: 236:237) the following strategies can be used to manage conflict:

- Mutual respect. Understanding and respect for each other's point of view is a basic requirement during conflict resolution.
- Ability to pinpoint "the issue". People should develop the ability to identify an issue behind an event or a complaint.
- Focusing on facts in the present. This requires the ability to distinguish between facts and emotions and to concentrate on what is relevant in the situation.
- Conflict resolution needs the co-operation of both parties.

- Strive for a collaborative two-winner approach. Losing creates bitterness and triggers feelings of revenge. A two winner approach requires the ability to understand the viewpoint of the other.

- Address the issue in small steps. Arguments and conflicts are less likely to become overheated if issues are address once at a time.

- Mastering the ability to make request. Many conflicts are the result of the inability of parties to openly express their needs in clear and direct request.

When conflicts are managed constructively, they have many desirable outcomes. People discover that their relationships are strong enough to withstand an honest level of challenge. Constructive conflict can help people understand each other and keep the relationship clear of irritations and resentments. Conflict management skills are vital in sustaining healthy relationships (Johnson & Johnson, 2003:380:382).

- *Critical thinking skills*

According to Nelson-Jones (1994:248) critical thinking skills can help people to think before they act. Critical thinking skills are described as the ability to analyze information and experiences in an objective manner (Brack and Hill, 2000:10). The ability of learners and their families to think critically will enable them to recognize and assess factors that influence them to abuse substances and this will enable them to deal with those factors accordingly. Motepe (2006:301) notes that people with critical thinking skills are able to recognize and define problems, gather information, form tentative conclusions and evaluate these to make decisions. The following is a brief description of thinking skills areas as outlined by Nelson-Jones (1995:361-362).

- Owning responsibility for choosing. People should be aware that they are the author of existence and can choose how to think, act and feel.

- Using coping self-talk. Instead of taking themselves negatively before, during and after specific situation, people can make self-statements that can calm them down and coach them on how to cope.

- Choosing realistic personal rules.
- Choosing to perceive accurately. Being able to distinguish between fact and influence and make inferences as accurate as possible.
- Explaining cause accurately. Develop the skills of explaining the causes of events accurately.
- Predict realistically. Be realistic about risks and rewards for future actions. Assess threats and dangers accurately.
- Setting realistic goals. Short and long term goals should reflect values, be realistic, specific and have a time frame.
- Using visualizing skills. People think in pictorial images as well as in words.
- Realistic decision making. Confront rather than avoid decisions.
- Prevent and managing problems. Anticipate and confront problems. Assess the thinking and action you require to deal with issues.

2.8 CONCLUSION

This chapter has established that substance abuse continues to have a negative impact not only to individuals, but also on the family and communities at large. Substance abuse as a social problem destroys families to an extent that they become dysfunctional entities, and the effects are much more on the learners whose future is affected. There are several reasons why young people are taking alcohol, and in most cases peer pressure plays a major role.Furthermore, the background and socialization of families appeared to be serious contributing factors that should be taken into consideration when dealing with families who are dysfunctional due to substance abuse.

The researcher has moreover, discussed social work intervention in the field of substance abuse, in this chapter. The researcher indicated how learners and their families and also the school systems are interdependent and interrelated. From the eco-systems theory point of view, it is evident that substance abuse as a phenomenon does not only affect the family of the affected learner, but the school as a system is also affected and this can affect the overall academic performance of the school.

CHAPTER 3

DATA PRESENTATION, ANALYSIS AND INTERPRETATION

3.1 INTRODUCTION

In this chapter, data that was collected from the respondents is presented, analyzed and interpreted. The researcher will present data from the Life Orientation Educators, learners and lastly, the parents/guardians of the learners. Since the study was qualitative in nature, presentation, analysis, and interpretation of datais done thematically from participants.

3.2 RESPONSESFROM LIFE ORIENTATION EDUCATORS

Five (5) Life Orientation Educators were interviewed, an issue-base was followed and the analysis and interpretation of the data hereunder is thematically presented:

3.2.1 Responses on the extent of substance abuse in the school

According to the respondents, substance abuse is extremely high in the school, as most of the learners show change in their behaviour when they come back from the toilets. The other respondents indicated that learners in their school have a tendency of being absent from school often on Mondays and Fridays. Searll (2002:145) states that the incidence of substance abuse in South African schools has increased dramatically over the last few years. Newspapers have carried numerous reports about learners taking drugs and dealing with them on the school property. Furthermore, Sookha (2006:5) adds that in many schools learners have ready access to a range of harmful street drugs, among them mandrax, cocaine, heroin and ecstasy. It is very common to find high-school learners who are already chronically addicted to drugs and alcohol.

3.2.2 Responses on the school performance of learners who are taking alcohol and drugs

Majority of the Life Orientation educators agreed that the performance of learners who are taking alcohol and drugs is low as compared to those who are not taking substance abuse. They continued to indicate that these learners do not do their school work such as assignments, home workand projects. These findings clearly outline that substance abuse has negative effects on the school performance of learners and the total school performance is affected due to poor academic performance by learners.This is corroborated by Nxumalo (2004:20) who states that in classes, learners who are actively drinking alcohol and taking substances, lack concentration and when asked questions pertaining to the lesson, they distort the subject matter which is being taught, and give out irrelevant responses.

3.2.3 Responses on the social effects of substance abuse on learners

Life Orientation educators indicated that learners who indulge in substance abuse manifest delinquent behaviourand become violent and bully other learners in the school. They stated that learners also develop negative attitudes towards their educators as well as their family members. Moreover, their academic work is affected by their indulgence in substances. In most instances learners who are using substances, do not realize the importance of building their future through education as they do not perceive a need for that. While other respondents believe that crime by young people is influenced by substance abuse as they may do so under the influence of substances. Agreeing to the above claim is Fourie (2000:33) who maintains that property crimes committed by learners are widely associated with an addiction to illegal substances. Drug abuse and even alcohol use directly contribute to violent crime if it is taken in excess especially if taken in a group context where there is a strong pressure to conform to the group's rules. They further indicated that teenage pregnancy is one of the social effects associated with substance abuse.   Moreover, learners who have used substances are unable to differentiate between right and wrong decisions,as in most cases they may decide to

have unprotected sex and subsequently become pregnant or be at a risk of sexually related infections.

3.2.4 Responses on the economic effects of substance abuse on learners

Life Orientation educators indicated that learners compromise their pocket money and spend it on substance abuse. Furthermore, they indicated that learners are unable to buy themselves basic academic materials such as pens, pencils and rulers, since they sell these materials to other learners in order for them to have money to buy drugs and alcohol. Jeram (2009:14) indicates that learners who abuse substances may begin to tell lies, keep secrets, steal from other learners, steal or borrow money and sell their assets.

3.2.5 Responses on the effects of substance abuse on learner-educator relationship

Unanimously, Life Orientation educators stated that substance abuse has negative effects on the learner-educator relationship. According to them, learners are in most cases not co-operative in class and sometimes learners become rude. Furthermore, Life Orientation educator indicated that learners manifest disruptive behavioursuch as making noise and this makes it impossible for educators to provide quality teaching. According to Mack (2007:130), learners are rude and they have no respect for teachers in the manner that they address and talk to them. This lack of respect can give rise to a breakdown of teaching and learning.

3.3 RESPONSES FROM LEARNERS

Based on the case load of the researcher who too is a social worker in the school, fourteen (14) learners were interviewed, and discussion was done thematically, hence the following analysis and interpretation:

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3.3.1 Responses on the factors that influence learners to take alcohol and drugs

Peer pressure was mentioned by the respondents as a major factor that influences them to use alcohol and drugs. In support of this notion, Twala (2005:15) notes that peer group is mainly an influence because a young person has an increasing need to conform his/her normality by being with it in the sense of participating in whatever their friends do. Another important issue mentioned by learners was that growing up in a single parent family influences them to use substances. In most instances, single parents are unable to instill discipline on their children and the most affected families are those who do not have a father figure. Children who are from single parent families, especially males who stay with their mothers, are likely to use substances and displays delinquent behaviours. One of the respondents cited stress caused by his family's living conditions which has influenced him to use substances especially *nyaope*. Learners indicated that they temporarily forget their challenges when they are under the influence of alcohol and drugs. Furthermore, learners also mentioned low-self esteem as an influencing factor to use substances.

3.3.2 Responses on the usage of alcohol and drugs by parents/guardians/family members

Learners mentioned that the usage of alcohol and drugs by parents/guardians or family members plays a role in encouraging them to be the users as well. Taking this finding into consideration, the researcher is of the view that the usage of alcohol and drugs by family members is a phenomenon that affects learners to an extent whereby they take negative decisions about their lives and future. A dysfunctional family which result from substance abuse makes children learn unacceptable behavioural patterns such as also being the users of substance through poor role modeling by parents or significant others in the family. Rocha-Silva (1998:53) confirms the latter statement by emphasizing that parents are regarded as role models for their children. However, it is evident that when parents abuse alcohol and drugs, it is most likely that children will imitate that behaviour pattern and act it out in one way or another. In addition, Manale (2006:39) indicates that

in families where parents are heavy users of alcohol and drugs, their children are more likely to become substance abusers. If parents involve their children in their drug using behavior such as selling liquor at home, sending them to buy beer or drugs for them, the risk is increased.

3.3.3 Responses on the description of the learners' relationship with parents/guardians

Learners indicated that their relationship with their parents or guardians is not good, as in most instances, they indicated that they fight due to indulgence in substances. Other respondents indicated that they are having a good relationship with their parents as they are all using substances, as no one is reprimanding the other about the use of substance. This clearly indicates that those who are using substances, together with their parents, are not well disciplined. The use of substances by both learners and parents within the family indicates that there is a poor supervision and discipline in the family. This is supported by Tlhoaele (2003:33) who indicate that in alcoholic families, there is often inadequate supervision and discipline. When parents are under the influence of alcohol most of the time, children tend to take advantage of the situation. They think they may do whatever they wish, because their parents do not see them or do not care about them.

Most of the respondents indicated that substance abuse destroys the relationship within their families. According to the learners, it is due to the use of alcohol by their parents, that their school needs are not taken into consideration as most of the time their parents are under the influence of alcohol. Failure to attend school meeting by parents was mentioned as one of the challenges experienced by learners whose their parents or family members are taking alcohol. Another problem indicated by the learners is that they have poor communication with their parents and other family members. The researcher is of the opinion that poor child-parent relationship, due to substance abuse in families leads a family to be dysfunctional and learners tend to use substances. For the family to maintain equilibrium there must be an effective communication.

Communication within the family system means striving to maintain the existing relationships and ensure that new acceptable behavioural patterns are established and enhanced. Ineffective communication patterns within the family system impacts negatively in the family relationship and its social functioning. When the family members are unable to communicate problems affecting them, they resort to substance abuse as their coping mechanism. Other learners indicated that they are having a good relationship with their parents as they are all using substances. Therefore no one is reprimanding the other about the use of substances. This indicates that those who are using substances, together with their parents, are not welldisciplined

3.3.4 Responses on the impact of substance abuse on the school performance of learners

Learners indicated that substance abuse has a negative impact on their school performance as they sometimes do not do their school work such as home work and assignments. This hasbeen echoed by Life Orientation educators. Most of the respondents indicated that they play truant from school in order to satisfy their craving for alcohol and drugs. Learners who are absent from school because of substance abuse are unable to perform well at school as they are lag behind with what has been taught while they were not at school. When learnersare absent from school as a result of indulging in substance abuse, they do not ask for assistance from those who were present and ultimately they are left behind in terms of their school work. One of the respondents said that": *ke paletswe ke go falola mophato o ke leng mo go ona makgetlho a le mararo ka ntlha ya tiriso ya bojalwa le diritibatsi"* (due to substance abuse, he has failed his current grade for three consecutive academic years). Given the above views of the respondents, the researcher believes that substance abuse by learners at schools is a phenomenon that has negative effects on the school performance of learners and their future in general. According to Rammala (2009:55), there are sporadic indications of substance abuse of alcoholic beverages and dagga, which are easily accessible, which tend to destroy down the acceptable behavior and eventually affect performance not only of the unruly ones but for the whole class.

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3.3.5 Responses on the financials effects of alcohol and drugs on learners

It was mentioned by learners that they are not able to use their money effectively like buying food during the break, as they use it to buy alcohol and drugs. According to them, if they do not receive money from their parents, they end up stealing valuable items such as cellular phones from other people and sell them with the purpose of getting money to satisfy their desire for substances. Mvimbi (1999:21) states that some of the learners who take alcohol and drugs go to the extent of stealing school property and selling it to the community in order to get extra money to go and buy alcohol and drugs. Davies (1991:23) emphasizes stealing as one of the characteristics of substance abusers. He affirms that when abusers are out of money, they prefer stealing so as to buy more alcohol and drugs.

3.3.6 Responses on the impact of substance abuse on learner-educator relationship

Learners indicated that they have a negative relationship with their educators due to their involvement in alcohol and drugs. It was found that learners are violent towards their educators whilst under the influence of substances. Respect and obedience towards their educators becomes poor. Though educators at school represent parents, learners who are under the influence of substances disregard this aspect. One of the learners said" *bontsi jwa rona baithuti ga re na tirisano mmogo le barutabana e bile ga re batlhompe"* (many of the learners do not cooperate with educators and we do not have respect for them). On a study conducted by Rammala (2009:54-55), learners acknowledged that learners who are under the influence of dagga or liquor tend to be unruly and do not cooperate with educators. Nxumalo (2004:77) concludes that learners taking alcohol and drugs are uncontrollable and cause trouble in classes. Furthermore, they do not have a good relationship with their educators.

3.3.7 Responses on the contribution of the environment in the usage of substances by learners

Learners indicated that the environment in which they live in contributes to the use of substance by learners. There are many taverns and shebeens within reach from the school premises.Many people smoke and others drink alcohol within the neighborhood. Even during breaks, learners are able to access alcohol and some use breaks to smoke dagga in the toilets. Learners learn the smoking behaviour and alcohol drinking from those who are already doing that, as most people in their community are doing it. These findings are supported by Twala (2005:15) who emphasizes that the behaviour that is learnt through observing the external events has influence on substance abuse by young people.

In addition, the home environment from which learners comes, may influence them to use substances, as they may be learning this type of behaviour from their parents/guardians or their family members. Learners tend to look at their parents/guardians or family members as their primary role models, hence they may end up displaying the behaviour that they copy from them. According to Jacobs (2008:14) an environment where alcohol and drugs are freely available contributes to the adolescent experimenting more readily with alcohol and drugs because it is not difficult to obtain them. Craig (2004:16) concludes that the availability of alcohol and drugs within a particular environment can worsen alcohol and drug-taking behavior in young people.

3.4 RESPONSES FROM PARENTS/GUARDIANS OF THE LEARNERS

Fourteen (14) parents/guardians of learners were interviewed, and the analysis and interpretation of data is thematically presented too.

3.4.1 Responses on thefactors which influence parents to use substances

Parents and guardians mentioned divorce as a major influence for them to use substances.They further mentioned unemployment as a reason to use substances. It is evident through the researcher's case load that most of the people who are taking substances are those who are unemployed. The researcher is of the opinion that when couples divorce, the other partner may find it difficult and challenging to accept that and resort to substance abuse as a coping mechanism for the problems he or she has. In support of this, Twala (2005:16) is of the opinion that the high rate of substance abuse is associated with negative life events such as divorced parents and conflict between parents. Tlhoaele (2003:34) notes that a family system may undergo a phase of economic tension due to unemployment, which result in poverty. When parents experience financial pressure, they shirk their parental responsibilities by resorting to substance abuse and finally develop a lack of cohesion within the family structure. Parents and guardians also mentioned poverty as a cause for them to use alcohol and smoke dagga. According to Newman and Newman (1997:425) frustration and anger at being poor may give way to feelings of weakness, victimization, and loss of control. These factors are often expressed as pessimism, loss of hope, depression, dagga and alcohol use.

3.4.2 Responses on the effects of substance abuse on child-parent/guardian relationship

Parents and guardians mentioned that substance abuse makes the family to be dysfunctional. Furthermore, they agreed that they do not take into consideration the needs of their children and this include those who are still attending school. According to the respondents, conflict is inevitable in their families due to substance abuse and they end up not taking responsibility for the future of their children.Bezuidenhout (2004:122) indicates that adolescents with substance abusing parents experience a higher rate of parent and or family problems than those adolescents whose parents do not abuse substances.

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3.4.3 Responses on the contribution of the environment in the usage of substances by parents

Parents and guardians indicated that the environment in which they live contribute to the use of substances. According to them, substances such as alcohol and drugs are easily accessible in their community, and furthermore, they were also raised in families in which parents were using substances and they learned that behaviour from them. Pretorious and Le Roux (1998:284) mentioned that "the availability and obtain ability of alcohol and drugs in particular societies are factors which contribute to increased substance usage of individuals".

3.4.4 Responses on the effects of substance abuse on the family, especially learners

Parents and guardians indicated that substance abuse does not only affect the parents but it has severe effects on learners as well. They stated that learners are uncontrollable at home, rude and disruptive as a result of substance abuse. It was highlighted that learners start to use substances after observing such from their parents. In addition, Tlhoaele (2003:32) indicates that some parents do not show interest in the activities in which their children are involved. These activities may either beeducational or social. Owing to their alcoholic behaviour, most of their time is spent on feeding such a behaviour rather than getting involved in their children's lives. They would rarely bother to find out more about their children's emotional, social, psychological and spiritual well being. It is evident that substance abuse by one or both parents or other family members cause dysfunction in the family system and it leads children to have a poor sense of belonging. This leads to a difficulty within the interpersonal relationships and children tend to use substances in order to cope.

3.5. CONCLUSION

The primary aim of this chapter was to qualitatively present, analyze and interpret data collected during the study. The results were confirmed by the researcher using the existing literature in the field of substance abuse. From the views of the respondents in this study, it was found that peer pressure is a major factor that contributes to the usage of substances by learners. Poor family communication pattern by the family as a system indicates that substance abuse destroys families to an extent where they become dysfunctional hence the family relationships are affected. A poor role modeling by parents also contributes to the use of substances by learners as parents are unable to display positive behavioural patterns to their children. In addition, educators indicated that the school performance of learners who are using substances and those from dysfunctional families deteriorates to an extent where the overall school performance is affected.

CHAPTER 4

MAJOR FINDINGS, CONCLUSIONS ANDRECOMMENDATIONS

4.1 INTRODUCTION

This study focused on the impact of substance abuse on learners from dysfunctional families. Substance abuse within the family system, either by children, parents and other members of the family was reported to be causing conflict and as a result the family becomes dysfunctional. Furthermore, the effects of substance abuse do not only affect the abuser, but the whole family system as well.

The researcher has conducted semi structured interviews with the purpose of gathering qualitative data from the Life Orientation educators, learners and their parents/guardians. Relevant literature was used as part of data collection and to corroborate the views of the respondents. In this chapter, restatements of the problem, aim and objectives of the study as well as the assumption will be presented. Subsequently, major findings of the study in relation to the objectives and assumptions will be presented as well. Finally, conclusions based on the findings and recommendations will be made.

4.2   RE-STATEMENT OF THE AIM, OBJECTIVES AND ASSUMPTIONS OF THE STUDY

4.2.1 Aim of the study

The aim of this study was to investigate the impact of substance abuse on learners from dysfunctional families at Ipelegeng Location in Schweizer-Reneke.This aim has been achieved. The researcher explored elements such as how substance abuse affects the parent- child and leaner educator relationships. Poor academic performance, deviant

behavior and crime by learners were reported to be the impacts of substance abuse on learners.

4.2.2 Objectives and Assumptions of the study

Objectives and assumptions of the study are synthesized so as to confirm the findings

- To explore the extent to which substance abuse affects school performance on learners from dysfunctional families:

This objective was achieved and the assumption positively confirmed because it was found that substance abuse has a negative social effect on learners from dysfunctional familiesand that these learners from dysfunctional families indulge in substance abuse and becometruant. Learners who are using substances in most instances do not realize the importance of building their future through education as they do not perceive a need for that. It was indicated that learners who indulge in substance abuse manifest delinquent behaviour and become violent and bully other learners in the school. They stated that learners are also developing negative attitudes towards their educators as well as their family members(cf. 2.3; 2.6.2.4 and 3.2.2).

- To establish how substance abuse destroy parent-child relationships:

This objective was achieved and assumption positively confirmed as it was revealed that substance abuse leads to violence in the already dysfunctional families. It also negativelyaffects parent-child relationship.The data proves that learners' relationship with their parents or guardians is not good as in most instances they indicated that they fight due to substances. Other respondents indicated that they are having a good relationship with their parents as they are all using substances, therefore no one is reprimanding the other about the use of substances (cf. 2.5.7, 2.6.2.2 and 3 (3.3.3).

- To describe how substance abuse influences learners to play truant:

The data indicated that when learners play truant, it was revealed that their school work suffers and this is how the objective was achieved and positively confirmed the assumption. It was found that substance abuse is extremely high in the school as most of the learners show change in their behaviour when they come back from the toilets. The other respondents indicated that learners in their school have a tendency of being absent from school, often on Mondays and Fridays(cf. 2.3 and 3.2.1).

- To explore how substance abuse by parents leads to violence and abuse:

It was found that most family members particularly parents were unemployed and tended to indulge in substance abuse. It was revealed that substance abuse makes the family dysfunctional. Furthermore, they agreed that they do not take into consideration the needs of their children and this include those who are still attending school. According to the respondents, conflict is inevitable in their families due to substance abuse and they end up not taking responsibility for the future of their children. The usage of substances by both learners and parents within the family indicates that there is a poor supervision and discipline in the family (cf. 6.1.1and 3.4.2). Both the objective and assumption were positively attained and confirmed.

4.3 SUMMARY OF THE MAJOR FINDINGS

Hereunder are the major findings of the study:

- The findings of the study confirmed the problem statement, namely, that alcohol and drug abuse by school-going young people is a serious problem because it negatively affects their school performance. Learners who use alcohol and drugs are likely to perform badly at school. From the findings of the study it is evident that learners who abuse substances do not perform well at school. The study further confirmed that learners who abuse substances play truant and eventually dropout of school.

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- Substance abuse has been reported as one of the reasons for learners to display violent behaviour at school. Learners who use or abuse substances do not respect their educators when they are under the influence of these substances. Violent behaviour by learners shows that learners are uncontrollable when they are under the influence of substances and they can also be involved in criminal activities. These findings confirm a study conducted by Tlhoaele (2003) and Fourie (2000) which revealed that young people who have whose association was based on substance use have also indulged in criminal involvement particularly, property crimes. Drug abuse and even alcohol use directly contribute to violent-crimes if taken in excess, especially if taken in a group context where there is a strong pressure to conform to the group's rules.

- The researcher found that learners compromise their pocket money in order to maintain their habit of using and abusing substances.

- Poor parent-child relationship is a factor that is contributing to learners' abuse of substances. In dysfunctional families, there is poor communication between the family members and as a result problems experienced by those family members are not solved, thus other members of the family resort to substances as a coping strategy.

- Peer pressure remains the main cause for learners to use and abuse substances. Learners do this with the purpose of belonging to a certain peer group. These findings confirmed study by Johnson (2001) and Bickel and DeGranpre (1996) who indicated that peer pressure is the most influential factor that can lead young people to substance use and abuse. They alluded that friends also have influence on young people substance abuse as they can influence their peers during social occasions such as rave parties and evening shows.

- The usage of alcohol and drugs by parents or other members of the family influence learners to be the users as well. In families children learn behaviors from their parents and other members of the family. This study confirmed a study by

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September(2008) which indicates that the family unit also contributes significantly to the socialization of the individual and his or her likelihood to experiment and use substances.

- The environment in which the respondents live in contributes to the usage and abuse of alcohol and drugs. This is because substances are easily accessible especially alcohol and dagga in their community. The study further confirmed that learners from single parent household are likely to be involved in alcohol and drugs.

4.4 MAIN CONCLUSIONS

Based on the findings of the study, the following conclusions have been drawn:

- There is no support system in place at the school level to deal with the multifaceted problems caused by indulgence in substances by learners.

- The current generation has lost the moral fibre of the society such as respect and there is a need to resuscitate what used to strengthen and build families, communities and societies.

- Pressure exerted by abused substances and influences from peers, lead these learners to compromise their health by not getting nutritional food in order to buy substances of abuse.

- It can be concluded that dysfunctional families have no problem solving skills to an extent where they try to avoid their problems by using substances.

- It can be concluded that the environment full of outlets selling substances of abuse is not conducive to proper upbringing of children.

- The researcher concludes that the manner in which children behave in most instances is influenced by the behaviour of their family members.

- Taking into consideration the environment in which substances such as alcohol and drugs are easily accessible, it can be concluded that the majority of learners from dysfunctional families become victims of substance abuse.

4.5 RECOMMENDATIONS

- Awareness campaigns on substance abuse should be launched on schools and communities, and they should be continuous.

- Parents and guardians of the affected learners should held regular meetings in order to assess the extent of the problem and be encouraged to take responsibility for the education of their children. This can also be achieved by continuous school visits by parents and guardians.

- Dysfunctional families should be identified, and an arrangement be made for them to be taught life skills so that they can be able to deal with their problematic situations effectively as they arise.

- Moral regeneration programmes should be developed and be implemented to teach children acceptable morals and values that will build their future.

- Social Workers should strengthen and encourage healthy parent-child relationships within families.

- There should be social workers employed in schools (school social workers) so that they can intervene in the social problems experienced by learners.

- A future study can be conducted on the strengths and resilience of dysfunctional families due to substance abuse.

- A future study can be conducted on the strengths and resilience of dysfunctional families due to substance abuse.

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APPENDIX A : LETTER TO REQUEST PERMISSION

UNIVERSITY OF LIMPOPO

Turfloop Campus

Department of Social Work

Department of Social Work

Private Bag x 1106

Sovenga

0727

SOUTH AFRICA

Tel: 015) 268 2291

Fax: 015)268 2866

Email: makhubelej@ul.ac.za

TO   :   The Principal: Mr. D. Moroke

Itshupeng Secondary School

Schweizer-Reneke

2780

SUBJECT   :   REQUEST TO CONDUCT A RESEARCH STUDY AT ITSHUPENG SECONDARY SCHOOL

Dear Sir

1. The above matter refers

2. I am a student at the University of Limpopo (Turfloop Campus) presently pursuing a programme for a Master of Arts in Social Work. I am obliged to undertake a research project in fulfillment of this programme. The title of my study is: **The impact of substance abuse on learners from dysfunctional families** with Dr. J.C. Makhubele as my supervisor.

3. I hereby request for access to 5 Life Orientation Educators and 14 Learners in your school to complete the interview schedules, Life Orientation educators will assist with

project in fulfillment of this programme. The title of my study is: **The impact of substance abuse on learners from dysfunctional families** with Dr. J.C. Makhubele as my supervisor.

3. I hereby request for access to 5 Life Orientation Educators and 14 Learners in your school to complete the interview schedules, Life Orientation educators will assist with the identification of learners who will participate in the study. The study will be conducted after school hours and moreover it is strictly for academic purposes. Attached find herewith the interview schedules for educators and learners for your attention. The researcher wishes to conduct the study before the 30th of November 2011.

I hope this request will receive your considerate response.

Thanking you in anticipation.

Daniel Tuelo Masilo
M.A. Social Work Candidate
University of Limpopo- Turfloop Campus

Date _____

APPENDIX B: INSTRUCTION TO LEARNERS

University of Limpopo (Turfloop Campus)
Faculty of Humanities
School of Social Sciences
Department of Social Work

Dear Learner,

My name is Daniel Tuelo Masilo. I am a Masters' student (M.A.) in social work at the University of Limpopo –Turfloop Campus. The research study is part of my MA (SW) degree programme. As part of the study, I am expected to collect data from identified participants and that includes you. I am studying the impact of substance abuse on learners, families and the school. During the interview, the researcher will make use of a schedule, as a guide.

You are kindly invited to be a participant in this study. The session will take approximately one (1) hour. You are requested to be open and honest in answering the questions. You are also kindly requested to read and sign the informed consent provided to you.

Thanking you in anticipation.

_____   _____
Daniel Tuelo Masilo   **Date**
M.A. Social Work Candidate
University of Limpopo- Turfloop Campus

Thanking you in anticipation.

_____   _____
Daniel Tuelo Masilo   **Date**
M.A. Social Work Candidate
University of Limpopo- Turfloop Campus

APPENDIX C: CONSENT LETTER FOR LEARNERS

TOPIC: The Impact of Substance Abuse on Learners from Dysfunctional Families at Ipelegeng Location in Schweizer-Reneke.

DECLARATION OF CONSENT (LEARNER)

I, the participant, hereby give permission to voluntarily participate in this research study with the following understanding:

The Nature of the Research

- The Social Worker, Mr. Daniel Tuelo Masilo, from University of Limpopo (Turfloop Campus) is conducting the research.

- The research forms part of the requirements for Mr. Masilo's Master's degree in Social Work.

- Information will be collected by means of interviews.

My rights as the participant:

- I cannot be forced to participate in this study.

- I have the right to withdraw from the study at any given time.

- I have the right to decline to answer any question(s) I am not comfortable with.

- I will remain anonymous and my name and identity will be kept from public knowledge.

- Any information I reveal during the process of this study shall remain confidential, shall only be used for the purposes of this research and for publication in Mr. Masilo's dissertation, and relevant or appropriate publications.

- I grant permission for any information I reveal during the interview process, with the understanding that data collected will remain in possession of the interviewer, Mr. Masilo and his supervisor.

- The identification particulars such as surnames and names will be kept securely safe in Mr. Masilo's office and thereafter the list will be destroyed.

- I, ………………………………………………………………………… (the learner), agree that I should participate in this study.

SIGNATURES

_____
Learner

In case the learner is under the age of 18, the parent should co-sign this consent form

_____
Parent

_____
Mr. Daniel Tuelo Masilo
M.A. Social Work Candidate
University of Limpopo –Turfloop Campus

APPENDIX D: INTERVIEW SCHEDULE (LEARNERS)

The respondents will focus on the following themes as part of the semi-structured interview.

1.Indicate factors that influence you to take alcohol and drugs

1.1._____
1.2._____
1.3._____
1.4._____

2. Does any of your parent/guardian drink alcohol?

_____

_____

If yes, please explain.

_____

_____

3. Does any of your parent/guardian smoke?

_____

If yes, please explain.

_____

_____

4. . Does any of your family member drink alcohol?

_____

_____

If yes, please explain.

5. Does any of your family member smoke?

If yes, please explain.

6. How would you describe your relationship with your parents/guardians?

7. Do you think substance abuse has an impact on your relationship with your parents/guardians ?

If yes, please explain.

8. Do you think substance abuse has an impact on your relationship with your family members ?

If yes, please explain.

9. Do you think substance abuse affects your school performance?

If yes, how?

10. Where do you get money to buy alcohol and drugs?

11. How does alcohol and drugs affect you financially?

_____

_____

12. Do you think substance abuse by parents/guardians affect your school performance?

_____

_____

If yes, please explain. _____

13. Do you think your indulgence in substance abuse can affect your school performance?

_____

_____

If yes, please explain.

_____

_____

14. In which ways substance abuse affects your relationship with educators?

_____

_____

15. To what extent do you think the environment in which you live in contributes in your abusing substances?

_____

_____

16. What do you think is the most damaging impact of substance abuse on learners?

_____

_____

Thanks for your time and information provided.

_____   _____
Daniel Tuelo Masilo   **Date**
M.A. Social Work Candidate
University of Limpopo- Turfloop Campus

APPENDIX E: INSTRUCTION TO PARENTS/GUARDIANS

University of Limpopo (Turfloop Campus)
Faculty of Humanities
School of Social Sciences
Department of Social Work

Dear Parent(s)/Guardian (s)

My name is Daniel Tuelo Masilo. I am a Masters' student (M.A.) in social work at the University of Limpopo –Turfloop Campus. The research study is part of my MA (SW) degree programme. As part of the study, I am expected to collect data from identified participants and that includes you. I am studying the impact of substance abuse on learners, families and the school. During the interview, the researcher will make use of a schedule, as a guide.

You are kindly invited to be a participant in this study. The session will take approximately one (1) hour. You are requested to be open and honest in answering the questions. You are also kindly requested to read and sign the informed consent provided to you.

Thanking you in anticipation.

_____   _____
Daniel Tuelo Masilo   **Date**
M.A. Social Work Candidate
University of Limpopo- Turfloop Campus

Daniel Tuelo Masilo
M.A. Social Work Candidate
University of Limpopo- Turfloop Campus

APPENDIX F: LETTER OF CONSENT FOR PARENTS/GUARDIANS

TOPIC: The Impact of Substance Abuse on Learners from Dysfunctional Families at Ipelegeng Location in Schweizer-Reneke.

DECLARATION OF CONSENT (PARENT(S))

I, the participant, out of my free will, hereby agree to voluntarily participate in this research study with the following understanding:

The Nature of the Research

- The Social Worker, Mr. Daniel Tuelo Masilo, from University of Limpopo (Turfloop Campus) is conducting the research.

- The research forms part of the requirements for Mr. Masilo's Master's Degree.

- Information will be collected by means of the interviews.

My rights as a participant:

- I have not been forced to participate in this study.

- I have the right to withdraw from the study at any given time.

- I have the right to decline to answer any question (s) I am not comfortable with.

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- I will remain anonymous and my name and identity will be kept from public knowledge.

- Any information I reveal during the process of this study shall remain confidential, shall only be used for the purposes of this research and for publication in Mr. Masilo's dissertation, and relevant or appropriate publications.

- I grant permission for any information I reveal during the interview process, with the understanding that data collected will remain in possession of the interviewer, Mr. Masilo and his supervisor.

- The identification particulars such as surnames and names will be kept securely safe in Mr. Masilo's room and thereafter the list will be destroyed.

- I,...(the participant), agree to participate in this study.

SIGNATURES

_____
Parent

_____
Mr. Daniel Tuelo Masilo
M.A. Social Work Candidate
University of Limpopo –Turfloop Campus

APPENDIXG: INTERVIEW SCHEDULE (PARENTS/GUARDIANS OF LEARNERS)

The questions will focus on the following themes as part of interview.

1. What are the factors which influence parents to abuse substances?

1.1._____
1.2._____
1.3._____
1.4._____

2. How does substance abuse affect your relationship with your child/children?

_____

_____

3. How does the environment contribute to the abuse of substance abuse by parents?

_____

_____

5. In your opinion, how does substance abuse by parents affect the family, especially learners?

_____

_____

Thanks for your time and information provided.

APPENDIX H: INSTRUCTION TO LIFE ORIENTATION EDUCATOR

University of Limpopo (Turfloop Campus)
Faculty of Humanities
School of Social Sciences
Department of Social Work

Dear Life Orientation Educator,

My name is Daniel Tuelo Masilo. I am a Masters' student (M.A.) in social work at the University of Limpopo –Turfloop Campus. The research study is part of my MA (SW) degree programme. As part of the study, I am expected to collect data from identified participants and that includes you. I am studying the impact of substance abuse on learners, families and the school. During the interview, the researcher will make use of a schedule, as a guide.

You are kindly invited to be a participant in this study. The session will take approximately one (1) hour. You are requested to be open and honest in answering the questions. You are also kindly requested to read and sign the informed consent provided to you.

Thanking you in anticipation.

_____   _____
Daniel Tuelo Masilo   **Date**
M.A. Social Work Candidate
University of Limpopo- Turfloop Campus

questions. You are also kindly requested to read and sign the informed consent provided to you.

Thanking you in anticipation.

_____   _____
Daniel Tuelo Masilo   **Date**
M.A. Social Work Candidate
University of Limpopo- Turfloop Campus

APPENDIX I: LETTER OF CONSENT FOR LIFE ORIENTATION EDUCATOR

TOPIC: The Impact of Substance Abuse on Learners from Dysfunctional Families at Ipelegeng Location in Schweizer-Reneke

DECLARATION OF CONSENT (Life Orientation Educator)

I, the participant, out of my free will, hereby agree to voluntarily participate in this research study with the following understanding:

The Nature of the Research

- The Social Worker, Mr. Daniel Tuelo Masilo, from the University of Limpopo (Turfloop Campus) is conducting the research.

- The research forms part of the requirements for Mr. Masilo's Master's degree programme.

- Information will be collected by means of interviews.

My rights as a participant:

- I have not been forced to participate in this study.

- I have the right to withdraw from the study at any given time.

- I have the right to decline to answer any question (s) I am not comfortable with.

- I will remain anonymous and my name and identity will be kept from public knowledge.

- Any information I reveal during the process of this study will remain confidential, and will only be used for the purposes of this research and for publication in Mr. Masilo's dissertation or appropriate publications.

- I grant permission for any information I reveal during the interview process, with the understanding that data collected will remain in possession of the interviewer, Mr. Masilo and his supervisor.

- The identification particulars such as surnames and names will be kept securely safe in Mr. Masilo's room and thereafter the list will be destroyed.

- I,...(the participant), agree to participate in this study.

SIGNATURES

_____

Life Orientation Educator

_____

Mr. Daniel Tuelo Masilo
M.A. Social Work Candidate
University of Limpopo –Turfloop Campus

APPENDIXJ: INTERVIEW SCHEDULE (Life Orientation Educators)

The questions will focus on the following themes as part of the interview.

1. What is the extent of substance abuse problem by learners in your school?

_____

_____

2. How is the school performance of learners who take alcohol and drugs?

_____

_____

3. In your opinion, what are the social effects of substance abuse on learners?

_____

_____

4. In your opinion, what are the economic effects of substance abuse on learners?

_____

_____

5. Do you think substance abuse affects the learner-educator relationship?

_____

_____

6. If yes, to what extent?

_____

_____

Thanks for your time and information provided.

_____   _____
Daniel Tuelo Masilo   **Date**
M.A. Social Work Candidate
University of Limpopo, Turfloop Campus