

THE PERCEPTIONS OF BOYS REGARDING SUBSTANCE ABUSE AMONGST ADOLESCENTS

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ABSTRACT

South Africa is overwhelmed by the increase of substance abuse among adolescents. Having consulted the literature, South Africa is not the only country faced with this problem. It raises concerns with regard to the social health of adolescents in this country. In order to develop effective intervention strategies to reduce the wide spread abuse of substances, it is important to first understand how adolescents perceive this problem. In this study the perceptions of boys will be explored with regard, to substance abuse among adolescents. A purposive sampling method was used to select the participants. The eleven participants were interviewed by means of a semi structured interview; an interview guide was applied to collect the relevant information. The goal of the study was to explore the perceptions of boys regarding substance abuse amongst adolescents. After data collection which was indicated by the saturation of the data, the recorded data was transcribed. Transcripts were analysed to determine the emerging themes from the collected data. The main findings of the study were interpreted and discussed according to the themes and sub themes, which were derived from the participants' narratives. Based on the research findings, recommendations have been suggested for service providers with regard to substance abuse amongst adolescents.

Key Words

Abuse

Adolescents

Boys

Parental influence

Peer pressure

Perceptions

Risk behaviour

Substance abuse

Substances



Declaration

I, *Leretsene Florence Nkgudi* declare that The *perceptions of boys regarding substance abuse among adolescents* is my own work, that it has not been submitted for any degree or any examination in any other university; and that all the sources I have used or quoted have been indicated and acknowledged by complete references.

Name: Leretsene Nkgudi Date: 15 November 2009

Signature:.....



Dedication

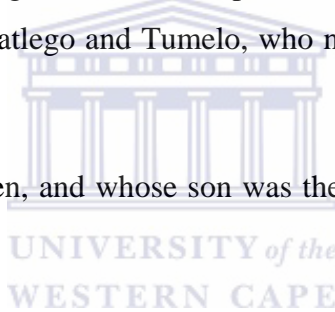
In the struggle to fight substance abuse amongst adolescents and trying to understand the mind set of boys. And also to find ways on how best to help these victims of substance abuse; this mini – dissertation is dedicated to:

All parents who are faced with problems of substance abuse in their families

My family who supported me throughout the hardships I faced during the study. To my husband Tsoane and children Boitumelo, Katlego and Tumelo, who never got tired of me when I related my problems to them.

My sister Margaret and her children, and whose son was the motivation for me to embark on a study of this nature.

To my mother, Kgaugelo Sarah Makhafola, for her unconditional love and support. Thank you for playing the role as my pillar, a role model as a real example of a mother.



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The **management and staff** of the Child and Youth Care Center for granting me the permission to conduct this study. To **the children** at the Child and Youth Care Center for their support and agreeing to participate in the study.

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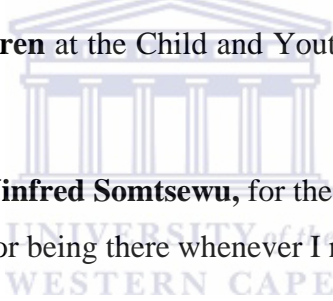


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CHAPTER ONE

1.0 CONTEXT AND ORIENTATION TO THE STUDY

1.1 Introduction

The involvement of adolescents in substance abuse has been increasing in the recent years. This statement is supported by several researchers, namely Saluja, Grove, Tyapati, Mattoo, Bash, (2005:455) Ljumbotina, Galic, Jukic, (2004: 95), Parry, Meyer, Morojele, Flisher, Bhana, Donson, Pluddermann (2004:369 -374)); Townsend, Flisher, King, (2007:308), Morojele and Brooks (2005: 1164). It is difficult though to give accurate statistics with regard to adolescents' involvement in substance abuse as some of the studies referred are more than three years old. The visible pressure which fosters substance abuse in South Africa is the high profile advertising, linking substances (alcohol especially) to the glamour of sport (Taylor, Jinabhai, Kleinschmidt, Dlamini, 2003: 137). This inculcates values that promote alcohol use. Substance abuse has been shown to be the problem since the abuse of substances can have adverse consequences both in short and long term on the health of adolescents, as well as detrimental effects on their education (Taylor, Jinabhai, Kleinschmidt, 2003: 137).

The fact that the use of more than one substance may encourage the use of more harmful substances is also an issue of concern. Adolescents are sent to rehabilitation centers, with the aim of returning to their normal life. However, it is always complex as substances do not easily wear off from the system. This results in adolescents relapsing after rehabilitation. Examples of substances that are abused are marijuana, cocaine (crack), mandrax, alcohol, tobacco and inhalants such as methamphetamine (known as Tik) (Department of Social Development Intake Files, 2007).

A number of studies that were accessed on adolescent risk behaviour and more specifically those that involved substance abuse were mostly of a quantitative nature. They indicated a high prevalence rate of substance use and abuse among adolescents (Flisher, Ziervogel, Chalton, Robertson, 1993:469 -497; and Flisher, Parry, Evans, Muller, Lombard 2003:58 -65). However, Morojele, Brook, and Kachieng'a (2006: 215) conducted a qualitative study on adolescents' perceptions on substance abuse and at -risk sexual behaviour in the Sub-Saharan Africa. In the

study conducted by Pluddermann, Flisher, Matthews, Carney, Lombard (2007) on at-risk behaviour in secondary schools in Cape Town, a significant difference between female and male risk behaviour was found, specifically regarding substance abuse. 63 per cent of males as compared to 45 percent of females reported having tried to use substances. This is one of the few qualitative studies of this nature conducted. According to the White Paper for Social Welfare (1997: 92), early intervention is needed in the lives of individuals who are at risk of developing social problems, before the situation becomes critical. Therefore, more qualitative studies on the perceptions of adolescents, and boys in particular with regard to substance abuse, are needed to gain insight into this social phenomenon.

The Alcohol and Drug Abuse Research Unit of the Medical Research Council is conducting an ongoing substance abuse Surveillance System. The study is aimed at monitoring the extent of substance abuse-related cases at the Departments of Social Development offices in the Western Cape. For the period between April and July 2008, 126 substance abuse cases were reported, particularly on alcohol and substance abuse problems, and 49 (39 percent) were under the age of 20 years (Burnhams, Fakier, Myers, Cerff, (2008): unpublished, 2008).

The abovementioned information poses significant challenges for social service delivery, for both governmental and the non-governmental sector. The Department of Social Development (where the researcher is employed) could therefore benefit from the findings of a qualitative study in order to develop their concept paper for a substance abuse programme. This would support efforts to develop, strengthen and enhance service delivery regarding the awareness and prevention of substance abuse amongst adolescents.

The literature accessed for this study was predominantly on the prevalence of substance abuse among adolescents. According to the findings of these studies there is a significant difference between boys and girls at-risk behaviour, specifically regarding substance abuse. Boys pose a high percentage of substance abuse compared to girls. Incidences of substance abuse among boys are increasing. In consulting the literature review significant research is required to deepen the understanding of helping professions in terms of substance abuse amongst adolescents, and in particular boys. Therefore, the researcher proposes to explore and describe the perceptions of boys regarding substance abuse among adolescents by means of a qualitative research.

1.2 Literature Review

The history of substance use and abuse, date back to the early 1950s, according to Pham- Kanter (2001). Alcohol and drug abuse was grouped under the sociopathic personality disorders, which was thought to be symptoms of deeper psychological disorders or moral weakness of an individual.

Substance abuse was first recognised in the 1980's, these included alcohol and drug abuse and substance dependence as conditions separate from substance abuse alone, bringing in social, cultural and environmental factors. The definition of dependence emphasised tolerance to drugs, and withdrawal from them as key components to diagnosis, whereas abuse was defined as problematic use with social, physical and emotional impairment, but without withdrawal or tolerance. It is also indicated by continued use despite knowledge of having a persistent or recurrent social, occupational, educational, psychological or physical problem that is caused by recurrent use in situations in which it is physically dangerous (Pham- Kanter, 2001).

According to the World Health Organization (2000:1) the prevalence of substance abuse is seen as a major component of at- risk behaviour among adolescents. It is also recognised as one of the greatest health and social problems in South Africa (Children in 2001: 83). According to Ljumbotina *et al.* (2004:95), South Africa is not the only country that is concerned with the problem of substance abuse among adolescents. In a study conducted in Croatia, Zagreb, it was found that about 43 percent of adolescents who took part in the study abused substances.

The general perception of the adolescents who was involved is that the use and abuse of substances fulfilled their personal values, and those who consumed the substances frequently thought that they were less harmful. In a further study conducted by Saluja *et al.* (2005:455), substantial evidence is available on the extent of the problem of substance abuse among adolescents in the eastern world, specifically in India. According to this study substance abuse is not uncommon amongst Indian adolescents; as they constitute 37 percent of substance consumers.

According to The Department of Health (2003), adolescents are particularly vulnerable to using substances such as alcohol and marijuana (dagga). These substances are accessible to them

through a variety of sources, such as street markets in the communities, shebeens and house parties (Morojele and Brook, 2005). The above statements are confirmed by Flisher *et al.* (1993: 480; Flisher *et al.* 2003:58 -65) as they raised a greater concern that adolescents' substance consumption has increased in quantity and frequency, with the age at which adolescents begin to use substances declining. And the rates of substance abuse are significantly higher in male adolescents, than females. Staton, Leukefeld, Logan, Zimmerman, Lynam, Milich, Martin, McClanahan, Clayton (1999:4) and Parry *et al.* (2004:369 -374) on the other hand, state that the increasing substance abuse problem among adolescents in recent years has been related to other at-risk behaviour such as frequent experimentation which leads to addiction. According to Ziervogel, Morojele, Van Der Riet, Parry, Robertson (1998); and Morojele and Brook (2006:215- 219), substance abuse can easily be generalized as the greatest health risk among adolescents in the townships in Cape Town.

According to Morojele and Brook. (2006: 215-219); substance use was considered to exacerbate underlying vulnerabilities to at- risk behavior, mainly due to substance effect on adolescent's inhibitions, rational thinking and negotiation skills. Substance abuse impairs adolescent's judgment and their ability to recognise and comprehend what they do while under the influence. It is further stated that adolescents who abuse substances may not be concerned as the adolescents who do not abuse substances about the long term consequences of substance abuse in their lives (King, Flisher, Noubary, Reece, Lombard, 2004). Townsend, Flisher, King (2007: 308) found that substance abusing adolescents tend to abandon their learner/ student role and drop out before they can complete their high school education.

In studies conducted by Saluja *et al.* (2005: 455), Brook, Morojele, Brook (2006), Flisher *et al.* (1993) Flisher *et al.* (2003: 61-63), it was clearly indicated that there is a higher prevalence of substance abuse among male adolescents, than females. In a study conducted in Kwazulu – Natal, South Africa, on 16 years and older adolescents, it was indicated that 32 per cent of male adolescent as compared to 11 percent of female adolescents used and abused substances Boys are also referred to as male adolescents, but for the purpose of this study the two terms will be used interchangeably. Frosh, Phoenix and Pattman (2002:2) attempted to address the questions relevant to the understanding of how boys are dealing with social change. It is also reported that the studies on boys are not new, although the ways in which boys in middle childhood and early

adolescence construct their masculine identities received little attention. In this respect, Frosh *et al.*, (2002: 3) reports that a gap in our current understanding of boys is of complex notions of what it means to do boy in a specific context, that how boys are made.

Boys look up to their peers for social acceptance and popularity, relative to their peer group. Their development of self understanding is influenced by large cultural expectations of what it means to be a man, and also their perceptions of themselves in relation to their peers (Way, Chu, and Kimmel, 2004: 219). According to Way *et al.*, (2004: 222) the adolescence stage is a difficult period in a human lifespan, and it may be more difficult for adolescent boys from poorer backgrounds and high risk environments. A boy from a disadvantaged background may find it difficult to develop positively, due to barriers to full opportunities for personal growth (Way *et al.*, 2004: 222). They are confronted by physical and social changes, and decisions they make often do not reflect societal, parental or the community expectations (Morojele *et al.*, 2005).

The likelihood of substance abuse among male adolescents may be influenced by many factors. According to Brook, Morejele, Brook, (2006) and Morojele and Brook, (2005) environmental factors such as unemployment, violence and crime, worsening HIV/ AIDS pandemic, parental drug use, association with deviant peers serve as behavioural models, and may predict the adolescent boys' behaviour.

Continued substance use, despite having persistent or recurrent social or interpersonal problems, may cause arguments with family members, no interest in physical hygiene, school drop outs, physical fights and other at-risk behaviours, such as sexual risk behaviours of having sexual intercourse with multiple partners without protection, contracting the HIV virus etc (Brook *et al.* 2006). This might also result in legal problems where the adolescent might be arrested for substance-related disorderly conduct, such as stealing.

Those researchers, who studied boys from diverse backgrounds such as Way *et al.*, (2004); Brook *et al.*, (2006); Flisher *et al.*, (2003) suggest that boys' experiences vary from within and across cultural contexts. Like girls, boys are also influenced by environments in which they develop. Thus, understanding how boys respond, experience, perceive, resist and influence these cultures and contexts is critical to understand their development. To understand how boys

perceive and give meaning to the world around them, one must start from boys' own perspectives, especially by including the voices of boys from disadvantaged backgrounds (Way *et al.*, 2004)

The researcher aims to enhance understanding of the ways in which boys give meaning to how they perceive substance abuse among adolescents. Boys will be the active participants in the study process, in that the researcher will try to understand how they perceive substance abuse among adolescents, from their own point of view (Frosh *et al.*, 2002:4)

1.3 Problem Statement

It is evident from the preliminary introduction that substance abuse among adolescent boys has become an international, as well as a national concern. The literature conducted for the purpose of this study indicates that there is limited research on adolescent boys who abuse substances.

The literature accessed for the purpose of this study was predominantly on the prevalence of substance abuse among adolescents. According to the findings of these studies there is a significant difference between boys and girls at-risk behaviour, specifically regarding substance abuse. Boys pose a higher percentage as compared to girls. Incidences of substance abuse among boys are increasing. What the researcher confirmed as drawn from the literature review is that much research is required to deepen the understanding of researchers and helping professions on boys and substance abuse. Therefore the researcher proposes to explore the perceptions of boys regarding substance abuse among adolescents by means of a qualitative research.

1.4 Research Question

In qualitative research there is often limited knowledge with regard to a phenomenon, making it impossible for the researcher to develop a hypothesis. The quantitative researcher draws on initial observations of a phenomenon, as well as previous research findings, to formulate a research hypothesis that is a specific prediction about the effects of the variables in an experimental study (Graziano and Raulin, 2000:175). However, in qualitative research, the lack of prior research and knowledge means that it is not possible to make such predictions and a

research question is formulated rather than a hypothesis (Creswell, 2003:70). The research question for this study is as follows:

What are the perceptions of boys regarding substance abuse amongst adolescents?

1.4.1 Goal and Objectives

Goal: The goal of this study is to explore and describe boys' perceptions of substance abuse, amongst adolescents.

1.4.2 Objectives

- To explore perceptions of boys regarding substance abuse amongst adolescents by means of semi-structured individual interviews.
- To describe perceptions of boys regarding substance abuse amongst adolescents by means of writing a research report.
- To draw conclusions and make recommendations regarding substance abuse in order to existing substance abuse programme managers at NGOs, as well as the governmental sector re- enhancing service delivery.

1.5 Research Methodology

For the purpose of this study, a qualitative approach was employed. Qualitative research is defined as a set of research methods that emphasis on in-depth understanding, and explore a deeper meaning of human experiences and perceptions in order to understand and describe their behaviour (Babbie and Mouton, 2007: 270).

In view of the research question and aim of the study, a qualitative methodology as rooted in a constructive thinking and reasoning appeared to be the appropriate method for this study. The qualitative researcher is concerned about learning and explaining how people perceive and give meaning to social issues around them, at a specific point in time (Merriam, 2002:4) The researcher, therefore, is concerned with how boys perceive substance abuse among adolescents around them not how they were taught to see it. The researcher thought it would be of

importance to first define what qualitative approach means, and the difference between qualitative approach and quantitative approach.

Shaw and Gould (2001:118), define qualitative research as the study in which the investigator carries out semi-structured interviews, which are taped and transcribed. Themes are then derived from the transcribed interviews around which the results will be discussed. Qualitative researchers recognise that knowledge and understanding are contextually and historically grounded. Qualitative studies provide rich descriptive and explorative accounts of social interactions, in a specific context Shaw and Gould (2001:118).

Denzin and Lincoln (2000:6) define qualitative research as a set of interpretive activities that has no theory or paradigm that is distinctly its own, nor does it privilege a single methodology over another. It is based on an interpretive epistemology, which means that knowledge is generated and shaped through interaction between those involved in the research process. It is also reported that qualitative research helps to surface hidden theoretical assumptions, and suggest new possibilities and connections. It can also be used to reaffirm, revise or expand an existing theoretical framework. It addresses questions not readily answered by quantitative methods (Hammell 2002:175 -184). The researcher therefore, generated knowledge by interacting directly with the participants, using semi -structured individual interviews.

According to Creswell (2003:21 -22), the nature of the research problem determines the nature of the methodology to be used for the research study, for example if the topic is new and never been researched before, an exploratory research will be best. To enable the researcher to explore the perceptions of boys regarding substance abuse among adolescents a qualitative approach was employed.

1.5.1 Research Design

Strydom and Venter in (De Vos *et al.*, 2002:90) state that the research design selected depends on the purpose of the study, the nature of the research question, and the various skills and resources at the researcher's disposal. The researcher has elected to use a qualitative, explorative, descriptive, and contextual design for the proposed study. This decision was made because the researcher's interest lay in exploring boy's perception of substance abuse amongst adolescents.

Babbie and Mouton (2007: 270), state that a qualitative approach also draws attention to features of a situation that others may have missed, like how boys perceive substance abuse amongst adolescents, by involving boys only as participants. It also involves immersion in situations of everyday lives that are reflective of the lives of individuals, groups, societies and organizations. It also involves looking at ordinary places where it takes unaccustomed forms, so that understanding people's cultures exposes their normality without reducing their uniqueness.

According to Creswell (2003:179), the strategy of inquiry chosen in a qualitative study determines the nature of the methodology to be used for the research study. These strategies focus mainly on data collection, analysis and writing up. The type of the research question is also important Creswell (2003: 183). To enable the researcher to explore the perceptions of boys regarding substance abuse among adolescents a qualitative approach was employed and the population was chosen from the disadvantaged and vulnerable community.

1.5.2 Population

The term population is defined by De Vos *et al.*, (2007:197) as a set of entities including people, in which all the measurements of interest to the researcher are represented. The population for this study is formed by a proportion of all boys at the Child and Youth Care centre in the Langa Township, Cape Town. The centre conducts groups for approximately 180 orphaned and vulnerable children. These children are vulnerable to at-risk behaviour such as substance abuse, crime and absence from school as some of them are living in child headed households where there is no adult supervision and guidance (Siyaphambili Orphanage, Reports, 2008). They only depend on the Child and Youth Care Centre for psychosocial support groups.

1.5.3 Sampling

According to De Vos *et al.*, (2007:194) a sample is defined as a small portion of the measurements drawn from the population the researcher is interested in studying. The sample was selected based on the purpose of the study. The researcher will select a purposive sampling, which is the sampling method used when the researcher have knowledge and the elements of the population from which a sample was chosen (Creswell, 2009:166). The sample of this study was therefore selected from all boys involved in the support groups at the Child and Youth Care

centre, in Langa, Cape Town. It was not possible to predict the exact sample size at the outset of the study. Therefore, data saturation was employed to determine the sample size. Data saturation occurred once the data being collected was repeated, and signified completion of data saturation on a particular culture or phenomenon (Greeff, in De Vos *et al.*, 2002:300).

According to Creswell (2009:166), qualitative samples are usually small in size, but the researcher was controlled by the saturation of the data collected. The researcher decided that data was saturated when the participants started repeating the same information during the interviews, after the interview with the eighth Xhosa speaking participant. The researcher switched to the Sotho speaking participants and after the third interview, the information was the same. The researcher selected boys aged between 15 and 18 years, who speak the Xhosa and Sotho languages and attend the psychosocial and preventative support groups at the Child and Youth Care Centre, to participate in the study. This was based on the participants' willingness to partake in the study. Boys who did not take part in the support groups were excluded from the sample, as the researcher wanted to make sure that the included boys were not taking substances.

Characteristics of boys, who took part in the study, were as follows:

- Boys aged between 15 and 18 years.
- Who lives in the Langa Township, Cape Town
- Who had never had contact with substance usage (alcohol and drugs)
- Who attend the psychosocial and preventative groups at the Child and Youth centre

1.5.4 Data Collection Method and Process

In this study, individual, semi-structured interviews were used to collect the relevant data. Marvasti (2004) emphasizes that individual semi-structured interviews are ideal to reveal the inner feelings and attitudes of the participants. The process of data collection according to De Vos *et al.*, (1998:6), refers to the process whereby the researcher gains access to the targeted setting and to potential participants who will be recruited to take part in the study. This step was taken only after sampling took place.

Meetings and interviews were conducted at the nearby office of the Child and Youth Care Centre, in Langa. Before the interview process, the purpose and the procedures of the study were clearly explained to the participants, in order to fully engage them in the study. This was conducted in order to create a friendly environment, and to assure participants of the confidentiality and anonymity of the information they will be giving during the interviews.

The participants that were recruited for the study are those believed to be vulnerable to adolescent behavioural problems e.g., being involved in substance usage, or know peers who are in the aforementioned circumstances. The participants are from disadvantaged backgrounds, and some of them emerge from child headed households (Siyaphambili orphanage Reports, 2008). All the above characteristics make them vulnerable to be pushed into at- risk behaviours. The researcher used a purposive sampling method where the manager of the Child and Youth Care Centre selected those participants who fitted the selection criteria and were willing to participate in the study. The selected participants in turn recruited other participants whom they knew could provide relevant information and, were willing to share their perceptions with the researcher (Holloway and Wheeler, 2002:122). An audio recording of the interviews was made in addition to taking notes during the interviews. This was only facilitated with the participant's consent. Participants were interviewed in the language they understand, and comfortable to converse in. The questions were simplified to enable the boys to understand the terms, as in the interview guide below:

1.5.5 The interview guide

- What is alcohol and drugs abuse? / Yintoni ukuxhatshazwa kotywala neziyobisi?
- Why do you think adolescents drink and use drugs? / Ucinga ukuba kutheni amakhwenkwe namantombozana esela utywala esebenzisa neziyobisi?
- Tell me what you know about substance abuse amongst adolescents? / Ndixelele ukuba wazi ntoni ngokuxhatshazwa kweziyobisi ngamakhwenkwe namantombozana?
- How do you feel about adolescents who abuse substances? / Uziva njani ngamakhwenkwe namantombozana lawo axhaphaza iziyobisi?
- What happens to adolescents who abuse substances? / Kwenzeka ntoni ngamakhwenkwe namantombozana lawo axhaphaza iziyobisi?

1.6 Data Analysis

Creswell (2003: 190) defines the process of data analysis as involving making sense out of the text and image data. Different authors have several generic processes stated in the activities of qualitative data analysis. But for the purpose of this study, data analysis as outlined by Creswell (2003: 190; 2009:185-186) was used. The researcher adopted the 8 steps of data analysis, as the researcher learned that these steps were relevant for this study.

The analysis is outlined as follows:

- Read through all transcripts to make sense of the information and write down ideas
- List all topics and cluster the similar ideas into columns
- Organise and prepare data by transcribing interviews, typing field notes and arranging data into different themes.
- Read through all the available data to obtain a general sense of the information, and to reflect on its overall meaning.
- Organise information into categories or themes and label the categories with codes.
- Use the coding to generate small numbers of themes or categories that will appear as major findings in the study, and separate them under different headings.
- The researcher will then discuss the themes in detail to convey the descriptive information about the participants. The discussions will include detailed themes and sub themes, specific illustrations, multiple perspectives from individual participants and the quotations. The themes will be illustrated through tables.
- Finally, data will be interpreted and the researcher will give their own understanding of what the data means.

1.7 Data Verification

De Vos *et al.*, (2007:346) stated that it is important to evolve the value of the research project in terms of its applicability, consistency and neutrality. For the purpose of this study, a model developed by De Vos *et al.*, (2007) was used. This model demonstrates that the research process was carried out accurately, and is a fair representation of the participants being studied. In this study, trustworthiness and credibility was demonstrated as follows:

- The researcher ensured that field notes were recorded immediately after the interviews.
- During the interviews data was recorded in a careful and manner.
- The researcher referred to the original literature review used during data collection and analysis.
- Data from other sources was used to corroborate and elaborate the research under study, and its applicability was confirmed by the research supervisor.
- The researcher summarised and reflected on its meaning, to check whether the researcher understands the responses.
- To determine whether the findings of this study can be confirmed by other studies, a research report was compiled, all interviews were recorded, and transcripts and analysed data were recorded in files for future reference.

1.8 Limitations of the Study

The study was conducted with a small sample of adolescents and cannot be generalised. There are other limitations to this study as identified by the researcher:

- The researcher interviewed only eleven participants, therefore having a very limited number of participants. The findings of the study can therefore not be generalised.
- The study included only black African boys from two ethnic groups(i.e., Xhosa and Sotho) only, aged between 15 and 18 years and does not represent the perceptions of boys from other ethnic groups or those of girls

1.9 Ethical Considerations

According to De Vos et al (2007: 56) ethical aspects are imperative when practicing and conducting research in social work. A study that involves human participants needs great care, respect and obligation to acknowledge participants' rights, dignity and respect. Therefore, this study commenced after the approval of the research proposal by the University of the Western Cape's Higher Degrees committee. When the research proposal was accepted, this signified the granting of permission to continue with the study. Written permission to involve orphaned and vulnerable children in the study was sought from the parents and guardians (care –givers) of the potential participants in the areas of Langa, Cape Town and the manager of the Child and youth

Care centre, in Langa. Parents and guardians were asked to sign the consent forms on behalf of their children. The participants were fully informed about the study and they were allowed to choose to withdraw from the study at any time, should they choose to do so. They will not be held against their will. All participants were assured of anonymity and confidentiality of the information they share. (Creswell, 2003:66; Babbie and Mouton, 2007:523).

1.10 Definition of Key Concepts:

Abuse: Gwinnell and Adamec (2006:1) define abuse as the excessive use of a substance, whether it is alcohol, tobacco, prescribed medication or other items. Individuals who exhibit an abusive behaviour may escalate their behaviour into addiction

Adolescents: National Programme of Action for Children in South Africa (2001) defined adolescents as children in the age group between 15 and 19 years, based on the World Health Organization and National Health Information System.

Risk behaviour: Flisher *et al.*, (1993:480) defines risk behaviour as behaviour that can jeopardize the health and psychological development of adolescents. They further identified substance abuse as a significant component of at-risk behaviour, with alcohol taking the lead as the readily available drug that most adolescents abuse.

Boys: According to Frosh *et al.*, (2002: 2) boys are also referred to as young men or male children aged between 0 years and 18 years.

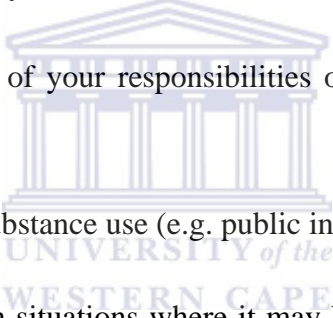
Parental influence: According to Gwinnell and Adamec (2006: xvi) if parents are alcohol and / or drug abusers or addicts, their children are more likely to abuse or become addicts to alcohol or drugs

Peer pressure: Urging from individuals that a person regard as equals to perform acts that the individual might not chose to do on his/her own (Gwinnell and Admec, 2006:195). Gwinnell and Adamec (2006: xvii) further report that individuals are affected by the behaviours of their peers. If most of their friends are drinking or using substances, and smoking, then will often wish to drink or smoke

Perceptions: Kirkpatrick (1998), (Dictionary) defines perception as “feeling,” “understanding,” “knowledge,” “comprehension”.

Substance Abuse: Is defined by Gwinnell and Adamec (2006:225) as the recurrent use of alcohol and legal and illegal drugs that result in an individual failing to perform important work, school and family obligations and thus suffering the consequences. Substance abuse is not severe as an addiction it substances. With addiction, an individual has built tolerance to alcohol or drugs, needing greater quantities to achieve the same effect of satisfying their need (Gwinnell and Adamec, 2006: 225)

Diagnostic and Statistical Manual for Mental Disorders, 4th Edition (DSM4): substance abuse refers to an unhealthy pattern of substance (alcohol or drug) use that result in significant problems in one of the following ways:

- 
- Inability to adequately take care of your responsibilities or fill your role at work, school or home
 - Repeated legal problems due to substance use (e.g. public intoxication or disorderly conduct)
 - The repeated use of substances in situations where it may be dangerous to do so (e.g. driving while under the influence)
 - The continued use of substances even though the substance is causing considerable problems in your life.

Substances: Euphemistic terms for any illegal drug (the free online dictionary, at answers.com 2009); in chemistry a substance refers to any material with a definite chemical composition (the free Dictionary, at answers.com 2009).

1.11 Conclusion

The above information provides an overview of the study, including the context information and the orientation of the study literature review, research problem statement, the research question, goals and objectives, research methodology and ethical considerations. The researcher also

explained the motivation for the study. This was done by broadly highlighting the extent of the problem substance abuse among adolescents in South Africa, through the studies conducted by other researchers. The researcher also reviewed literature to obtain insight about the extent of the identified problem among adolescents. This was conducted with the researcher by focusing on the research objectives. A qualitative methodology was chosen as the approach of the study, with individual semi-structured interviews as the data collection method. Data analysis and data verification was outlined and discussed. The researcher discussed the ethical consideration and finally, defined the key concepts relevant to this study. Chapter Two the researcher discusses the research methodology chosen for this study, and describe how it was used in order for the researcher to reach the goals and objectives set for the study.



CHAPTER TWO

2.0 RESEARCH DESIGN AND METHODOLOGY

2.1. Introduction

In the previous chapter, the researcher presented an overview of the research problem and the proposed research process. This chapter focuses on the research methodology, which was used in the execution of the study. It includes the research design and methodology, the method of data collection, method of data analysis, and data verification. According to the World Health Organization (2000) substance abuse is seen as a major component of at-risk behavior among adolescents globally. It is also recognised as one of the most significant health and social problems in South Africa (Children in 2001:83). Examples of substances that adolescents abuse are, alcohol, marijuana, cocaine, methamphetamine, and heroin (Buddy, 2004:1).

The research design and methodology for this study was selected in order to ensure that the boys who participate in the study were given the opportunity to share, their perceptions about substance abuse amongst adolescents. Data was collected by means of semi-structured interviews with a view of achieving the goal and objectives of the research, which are:

The **goal** of the research is to explore and describe boys' perceptions of substance abuse amongst adolescents. The objectives to the research on the other hand are:

- To explore perceptions of boys regarding substance abuse amongst adolescents, by means of individual interviews.
- To describe perceptions of boys regarding substance abuse among adolescents, by means of writing a research report.
- To draw conclusions and make recommendations regarding substance abuse

2.2 Research Design and Methodology:

The purpose of choosing a specific research design and research methodology is to provide a model to help organize the activities of the researcher from the very conception of the project to the dissemination of the research findings and recommendations (Graziano and Raulin,

2000:39). Social research needs a design or a structure before data collection or analysis can commence. Research details deals with a logical problem (De Vaus, 2001: 9). In other words, when designing research, we need to ask:

Given the research question, what type of evidence is needed to answer the questions in a convincing way (De Vaus, 2001:9)?

Since the purpose of this study was to explore and describe the perceptions of boys regarding substance abuse amongst adolescents, it was decided to use a qualitative, explorative, descriptive and contextual research design. The research methodology was then designed in order to fit within the framework provided by the chosen research design, as well as achieving the goal and objectives of the study.

2.2.1 Qualitative Research

According to Denzin and Lincoln (1998: 8) qualitative research has a multi-method focus, and involves an interpretive, naturalistic approach to its subject matter. Furthermore, phenomena as are studied within their natural settings, and the researcher attempts to make sense of, or interpret them in terms of the meanings that the participants give them. A qualitative researchers emphasis is thus on the socially constructed nature of reality (Denzin and Lincoln, 1998:8). This type of research elicits the participant's meaning, experience or perceptions, and is concerned with understanding rather than explanation (Ezzy, 2002: xii, Holliday, (2002:7), Silverman, 2002:32). Holloway (2002:5) points out that, qualitative studies are open ended and set up research opportunities designed to lead the researcher into unforeseen areas of discovery within the lives of the people that are being investigated. He goes on then to state that qualitative researchers invite the possibility of a rich array of variables, rather than trying to control them.

In summary then, this study was conducted within the qualitative design because the researcher wanted to gain understanding of the perceptions of boys about substance abuse amongst adolescents and to discover new concepts about the phenomenon under investigation rather than imposing preconceived ideas on the perceptions of the boys participating in this study.

2.2.2 Exploratory Research

The purpose of exploratory research is to investigate phenomena or situations when there is little existing knowledge relating to them (Silverman 2002:9). According to Brink (1996:11) the goal of this type of research is to explore the dimensions of a phenomenon and the manner in which it is manifested, as well as the other factors that are related to it. Exploratory research functions to provide more insight about the nature of the phenomenon that is being studied. This study was explorative since there is a dearth of relevant literature regarding the perceptions of boys themselves about substance abuse, amongst adolescents. By exploring their perceptions, new knowledge will be generated and insight will be obtained in understanding the problems faced by them.

2.2.3 Descriptive Research

There is agreement in the literature that the purpose of descriptive research is to obtain accurate and complete information with regard to a phenomenon by means of observation, description and classification (Brink 1996:11, Creswell 2003:215). Neuman (2000:124) states that a researcher presents a picture of the specific details of a situation and describes them accurately. In the opinion of Rubin and Babbie (2001:125) description in qualitative studies is likely to refer to a more extensive examination of phenomena and their deeper meaning, thus leading the researcher to a “thicker” description. The researcher aimed to describe the perceptions of boys about substance abuse amongst adolescents to obtain insight into how social workers and other helping professions assist them in practice settings which was the Child and youth Care Centre.

2.3 Research Methodology

2.3.1 Description of Participants

In the following part of the chapter, the researcher provides a brief outline of the history of the participants. The participants in this study were drawn from the oldest and first black township in the Western Cape, Cape Town. The population of this township originally came from the Transkei, Venda, Bophuthatswana and Ciskei, (former homelands of the Republic of South Africa). They came to Cape Town as migrant workers and lived in the District Six of Cape

Town in the 1890's. They were removed according to the Group Areas Act to Ndabeni, Cape Town. In the 1901, they were again removed to the Langa area where a township was established (The free online encyclopedia, 2009).

The movement from the rural homelands to the city was extremely difficult. There were laws in South Africa that prevented this movement, and people who moved forcefully lived in poor conditions. The government was unwilling to supply adequate housing to these people. People lived in one room hostels that resulted in a substantial housing shortage. Hence the growth of informal squatter settlements and extensive use of backyard shacks as homes (The free online encyclopedia, 2009). The community of Langa is characterized by poverty, unemployment and a variety of social problems such as substance abuse. The researcher chose to select participants for this study from this area, as adolescents here are vulnerable to at-risk behaviours such as substance abuse (alcohol and drug).

2.3.2 Research Approach

Qualitative approach is defined as methods of research that emphasise depth of understanding and explore a deeper meaning of human experiences and perceptions (Rubin and Babbie, 2001). A qualitative approach also draws attention to features of a situation that others may have missed. It involves immersion in situations of everyday lives that are reflective of the lives of individuals, groups, societies and organizations. It also involves looking at ordinary places where it takes unaccustomed forms, so that understanding people's cultures exposes their normality without reducing their uniqueness. According to Creswell (2003:179) the strategies of inquiry chosen in a qualitative study, determines the nature of the methodology to be used for the research study. These strategies focus mainly on data collection, analysis and writing up. The type of the research question is also important Creswell (2003: 183).

2.3.3 Population and Sampling

Population is defined by De Vos *et al* (2007: 194) as a set of entities, including people in which all the measurements of interest to the researcher are represented. The population for this study is formed by all boys at the Child and Youth Care Centre in the Langa Township, Cape Town.

There are approximately 180 adolescents attending support groups at the orphanage per month with about 110 girls and 70 boys.

2.3.4 Sampling

De Vos *et al* (2007: 194) define a sample as a small portion of the measurements drawn from the population the researcher is interested in studying. There are several sampling methods in qualitative approach, according to De Vos *et al* (2007: 194). These methods are divided into two models, namely; probability and non probability sampling Creswell (2009:166). The researcher briefly discusses each sampling procedure and indicates the reason why the non probability model was used in this study.

2.3.5 Probability and Non Probability

The probability model, according to Creswell (2009: 166), can be used to select large volumes of samples. The researcher did not choose to use this model as the study included a small sample. For the purpose of this study, the researcher chose to use non probability sampling. According to Creswell (2009: 166), there are four types of non probability sampling methods, namely: reliance on available subjects, snowball, quota sampling, and purposive sampling.

In reliance on available subjects' method, the researcher relies on the participants that are available on passing the sampling point at a specific time Creswell (2009:166). Snowball sampling is appropriate when the members of the population are difficult to locate. The located participants are then asked to identify the others that fit the criteria of the study Creswell (2009:167). In quota sampling the researcher here must have the knowledge of the demographic of the population according to gender, ethnic groups, education levels, etc. The researcher must also have knowledge of what proportion in the population falls under urban or rural etc. (Creswell (2009: 167).

2.3.6 Purposive sampling

The researcher chose to apply the purposive sampling for the purpose of this study. According to Creswell (2009: 166 -167), purposive sampling is appropriate when the researcher select the

sample on the bases of the researcher's knowledge of the population, its elements and the nature of the study. Hence the researcher chose to use this method as the researcher has the knowledge of the population and the nature of the research study. The researcher also selected a subset of this population where participants are easily identified. All participants recruited for the study were temporary (placed for a period of six weeks, while their problems were resolved) residents of the Child and Youth Care Centre and they were accessible. The researcher also wanted to gain insight in to the perceptions of boys regarding substance abuse amongst adolescents (Creswell, 2009: 166). This was based on the researcher's knowledge of the population about where they came from and what problems are faced by the community, e.g. poverty and unemployment, its elements, of which ethnic groups mostly live in the area and the nature of the study. According to Shaw and Gould (2001:118), qualitative samples are usually small in size, but the researcher was also controlled by the saturation of the data collected.

Potential participants were identified by a method of purposive sampling, in which participants were selected as potential participants due to the researcher's belief that they have the potential to share relevant information. The participants are boys from a disadvantaged area. They are exposed to people who drink alcohol and use drugs on a daily basis. Not all of the adolescents boys invited agreed to participate. The participants who agreed to participate were regarded as representation adolescent boys in the geographical area where they live. These boys are vulnerable to at-risk behaviour such as substance abuse, as some of them are living in child headed households where there is no adult supervision and guidance (Siyaphambili Orphanage, reports, 2008). They depend on Child and Youth Care Centre for psychosocial support groups. The researcher interviewed eleven participants at the Centre before a theoretical saturation was reached.

2.4 Data Collection Process

The process of data collection, according to De Vos *et al.*, (1998:6), refers to the process whereby the researcher gains access to the targeted setting and to potential participants who will be recruited to take part in the study. This step was taken only after identifying willing participants. Meetings with potential participants and their guardians (the carers and the Manager

at the Child and Youth Care Centre)) and interviews with participants were conducted at the nearby office of the Child and youth Care Centre.

The purpose of the study was clearly explained to the guardians and potential participants in that the researcher is interested in exploring the boys' perceptions with regard to substance abuse (alcohol and drug abuse) amongst adolescents. Furthermore, that the participants were interviewed on a one-to-one basis in order to get their individual perceptions with regard to the above issue. This was facilitated in order to introduce the researcher to both guardians and potential participants, and to create a user-friendly environment. The researcher also wanted to assure participants and their guardians of the confidentiality of the information they would be providing during the interviews. The participants recruited for the study were those believed to be vulnerable and prone to adolescent behavioural problems such as, getting involved in substance usage. The researcher used a purposive sampling method to select the sample for the study.

2.4.1 Preparation of Participants



Two meetings were held before the actual data-collection, one with the parents or guardians, and one with the proposed participants. The researcher obtained the guardian's cooperation by informing them fully about the research process, as well as obtaining their permission through a formal consent letter, before interviewing the participant. The various aspects of the research and participation were carefully explained to both groups. The participant's consent to being interviewed was also obtained through signing consent forms and this served as a further measure to built trust in the researcher. The participants were given the opportunity to ask any questions at any stage of the interview. The researcher also explained the consequences of the study with the participants as well as the dissemination of findings. Furthermore, the researcher informed them that it is their right to choose to participate or with draw from the study at any time.

2.4.2 Interviews

Qualitative interviews were defined as attempts to understand the world from the participants' point of view, to unfold the meaning of people's experiences to uncover their lived world prior to

scientific explanations. De Vos *et al.* (2005: 286), view interviewing as a prominent method of information collection in qualitative research. Interviews are said to be interactional and the interviewer is deeply and unavoidably implicated in creating meaning that's imbedded in participants (De Vos *et al.* 2005:287).

In qualitative research, the aim is to capture and understand the "lived experience" of the participants, and consequently many researchers favour the use of the more open-ended types of interviews (Silverman, 2000:94). These interviews are used in an attempt to understand rather than to explain underlies this type of interviewing, and it provides a greater breadth of data than other methods of data-collection due to its qualitative nature (Denzin and Lincoln, 1998:56). Thus, the researcher chose to conduct semi-structured interviews with the aid of an interview guide in order to gather the necessary data, since this data collection method fit the goal and objectives of the study.

2.4.3 The Interview Guide

The researcher developed an interview guide by using certain pre-determined questions (or keys) to guide the interview. These questions were asked in a non-directive and open-ended way. The questions were then sifted according to their relevance to the purpose of the study, and what question the researcher targeted as the appropriate final question. This was important as according to Wilkinson and Birmingham (2003:47), the researcher needs to prepare a list of questions to be covered so that important issues are not overlooked and the interview follows a logical progression. According to Wilkinson and Birmingham (2003: 44), there are three models of interviews, namely; the unstructured interview, semi structured interview, and the structured interview.

The unstructured interview model is difficult to control. With unstructured interviews, the researcher cannot really say how much time it will take per session, according to Wilkinson and Birmingham (2003:45). As the researcher had limited time to conduct the interviews, therefore did not see this model to be suitable for the study. And with structured interviews, the questions are predetermined and the interview is follows the order of the questions controlled by the researcher. The structured interview can be time-tabled and the time is set for each interview

Wilkinson and Birmingham (2003: 45). The structured interview provides an easier framework for analysis. There is fine line between the structured and semi- structured interviews models and the researcher did not have any problems with the model structured

2.4.4 Semi Structured Interviews

The researcher chose to adopt the semi structured interview model. According to Wilkinson and Birmingham (2003: 45), a semi structured interview is less flexible, as compared to unstructured interview. They mention that in the semi structured interview, the questions are predetermined, although there is some flexibility to allow the participant to give more information should it be necessary Wilkinson and Birmingham (2003: 45). In this study, the questions were predetermined and compiled into an interview guide. The researcher used this guide during the interviews as a tool to collect the relevant data for the study. Probing questions were asked to allow the participants to expand on the information they had provided.

Semi structured individual interviews enabled insight into the way participants interpret their perceptions, and also permitted the researcher to have a glimpse into their social worlds (Hammell, Carpenter, Harris, 2004:16). Hence, in this study, semi structured interviews were used to explore boys' perceptions with regard to substance abuse, among adolescents. These enabled insight into the way participants who were boys, perceive the issue of substance abuse, and also allowed the researcher an opportunity to get a glimpse in to their attitude and understanding towards substance abuse, like alcohol and drugs. De Vos *et al.*, (2002: 292) and Sewell (2001: 1), define qualitative interview as attempts to understand the world from the participant's point of view, to unfold the meaning of people's experiences and uncover their lived world.

Each interview was conducted using an interview guide of issues to be explored, enabling every participant to answer the same questions with some probing questions where they were required. After each interview the researcher recorded field notes in order to capture and preserve the moment of the interview and all observations and impressions in full. (Hammell, Carpenter, Harris, 2004:16). The content of the interview guide focused on the knowledge of boys regarding substance abuse, what cause adolescents to abuse substances and their perceptions of the impact

of substance abuse on the lives of the adolescents. The summary of the interview guide is as follows:

- What is alcohol and drugs abuse? / Yintoni ukuxhatshazwa kotywala neziyobisi?
- Why do you think adolescents drink and use drugs? / Ucinga ukuba kutheni amakhwenkwe namantombozana esela utywala esebenzisa neziyobisi?
- Tell me what you know about substance abuse amongst adolescents? / Ndixelele ukuba wazi ntoni ngokuxhatshazwa kweziyobisi ngamakhwenkwe namantombozana?
- How do you feel about adolescents who abuse substances? / Uziva njani ngamakhwenkwe namantombozana lawo axhaphaza iziyobisi?
- What happens to adolescents who abuse substances? / Kwenzeka ntoni ngamakhwenkwe namantombozana lawo axhaphaza iziyobisi?

According to De Vos *et al.* (2005:289), active interviewing is not just confined to asking questions and recording information or answers. There are several techniques that the researcher needs in order to interview effectively. The researcher highlights those techniques adopted during the interview process, namely:

- Minimal verbal responses: “nodding”; “yes, I see”, to show the participant that the researcher is listening, but also avoiding interrupting the participant.
- Clarification: the researcher needed the participant to explain what they just said. When the participant was asked, “ tell me what you know about substance abuse?” he responded by saying, “ *substance abuse means drinking over, in that it is worse that girls find themselves being raped.... And also they get infected with diseases.*” the researcher further asked, “Do you mean only girls get infected with diseases? And he said, “Boys also get infected with diseases, but not like girls, girls are soft.”
- Reflection: to get the participant to expand on what they just said, “So, you believe that substance use is illegal?” When the researcher required additional information, the researcher reflected on what the participant had said. They then added more information to their responses.

- Listening: looking at the participant to demonstrate interest in what they said. The researcher and the participants sat next to each other. The researcher turned to face the participant, and sat as if a normal conversation was taking place.
- Probing: to persuade the participant to provide additional information about the issue under discussion, follow up questions were asked to give the participants opportunity to elaborate on their responses, “why else do you think adolescent drink alcohol and use drugs?” the participant said, “ *to make themselves and happy and some drink and use drugs to release stress*”
- Encouraging: give the participant compliments so that they can continue, for example, “you are doing great.” At this moment the participants were more relaxed, and the researcher could make comments (De Vos *et al.*, 2005: 289 -290)

2.5 Data Analysis

Creswell (2003: 190) defines the process of data analysis as involving making sense out of the text an image data. Various authors have several generic processes stated in the activities of qualitative data analysis. For the purpose of this study, data analysis as outlined by Creswell (2003: 190) and Creswell (2009: 185-186) were used. The researcher used the 8 steps of data analysis as these were seen by the researcher as more relevant to this study.

- Read through all transcripts to make sense of the information and write down ideas
- List all topics and cluster the similar ideas into columns
- Organise and prepare data by transcribing interviews, and comparing the data in the transcripts to field notes, and arrange data into different themes.
- Read through all the available data to obtain a general sense of the information, and reflect on its overall meaning. This was also done in comparison to the interview guide to assess if the information in the transcripts were relevant to the questions
- Organise information into categories or themes and label the categories with codes. The researcher read through all transcripts again and wrote down some ideas as they come to mind and clustered similar responses (Creswell, 2009:186).
- Use the coding to generate small numbers of themes or categories that will appear as major findings in the study and separate them under different headings. The researcher

decided on different themes and obtained approval from the supervisor, i.e. relevance. Reading the transcripts and focusing on trends of the participant's responses to the questions, with the goal of formulating sub themes.

- The researcher then discussed the themes in detail, to convey the explorative and descriptive information from the participants. The themes and sub themes that relate together were categorised and a demographic table was developed. The discussions included detailed themes and sub themes, specific illustrations, multiple perspectives from individual participants and the quotations. The themes were illustrated through tables.
- Finally, data was interpreted and presented according to themes and sub themes in order to give meaning to the participants' responses. The themes and sub themes were discussed and integrated with the participants' responses, literature and previously conducted research and theory. The researcher also provided their own understanding of what the data means (Creswell, 2009:186).

2.6 Data Verification

De Vos *et al.*, (2007:346) stated that there is a need to evaluate the study, its applicability, consistency and neutrality. For the purpose of this study, a model developed by De Vos *et al.*, (2007:346) was used. This model demonstrates that the research process was carried out truly and fairly. In this study trustworthiness and credibility was demonstrated as follows:

- The researcher compiled field notes immediately after the interviews, as during the interviews only brief notes were taken.
- The researcher referred to the original literature review during data collection, to ensure that relevant information is collected. During the analysis of the collected data, literature was integrated into themes and sub themes.
- Data from other sources, for example, other research studies conducted previously was used to corroborate and elaborate upon the research study and its applicability was confirmed by the supervisor.
- The researcher summarised and reflected on the meaning of the data to check whether the researcher understands the participants' responses.

- In order to determine whether the findings of this study can be confirmed by other studies, a research report was compiled. All interviews were recorded; transcripts and analysed data were recorded in the form of a report for future reference.

2.7 Ethical Consideration

According to De Vos *et al.*, (2007: 56) ethical aspects are imperative when practicing and conducting research in Social Work. The study that involves human participants need great care, respect and obligation to acknowledge participants' rights, dignity and respect Therefore, this study commenced after the approval of the research proposal by the University of the Western Cape's Higher Degrees committee. When the research proposal was accepted, it gave permission to continue with the study. Written permission to involve children in the study was sought from the parents and guardians of the potential participants in the areas of Langa, Cape Town, as well as from the Manager of the Child and Youth Care Centre. Parents and guardians were asked to sign consent forms on behalf of their children. (Hammell, Carpenter, Harris, 2004:16)

2.7.1 Informed consent

The participants were fully informed about the study, and that they will be allowed to choose to withdraw from the study at any time, should they choose to do so. All participants were assured of anonymity and confidentiality of the information they share (Creswell, 2003:64 and Babbie and Mouton, 2007:521). They were given codes, as in false names to be identified with, and their names were not written down. During the interviews they used the false names to introduce themselves.

2.7.2 Voluntary Participation

According to Babbie and Mouton (2008:521), researchers believe that participation should be voluntary. However, this norm can conflict with the researchers' need for generalisability. The researcher learned that it is important that participants not be coerced to participate in a study. Therefore, participants were informed that they can choose to withdraw from the study at any time they wish to do so.

2.7.3 No Harm to the Participants

It is further stated that research should not harm those who participate in it, unless take an informed risk of harm (Babbie and Mouton, 2008:522). The participants were ensured that there would not be any harm to them, by participating in the study.

2.7.4 Anonymity

The researcher ensured the participants that no specific information will be identified with the individual it describes (Babbie and Mouton, 2008:523). No data was associated with any individual who participated in the study in order to maintain their self respect and dignity.

2.7.5 Confidentiality

Even though the researcher knows which data describes which participant, the researcher agreed to keep that information confidential (Babbie and Mouton, 2008:523). Participants were ensured that confidentiality will be maintained at all times. The researcher also informed participants that when data was written up, no names would be attached to the responses, hence they were given false identity. Data would be accessed by the researcher and the supervisor and only codes (Respond 1, 2, 3, etc.) would be used to identify data.

2.8 Self Reflective Issues of the Researcher

The following are the researchers' thoughts and ideas regarding the content of this study. They are presented as a group of inter related reflections. The researcher is a black African Sepedi speaking female. She was aware that due to the demographic profile and geographic area of the Child and Youth Care Centre, there would be only potential black African participants for the study. There was no way that the race imbalance could be rectified, as the centre is in a black township. Only black African children live at the Centre. The researcher used two languages, i.e., Xhosa and English to conduct the interviews. There was no effect of the researcher's race on the outcome of the responses to the researcher's knowledge as the researcher is fluent in both languages used in the study. The Researcher compiled and own interview guide in English and translated it in Xhosa. She asked for a Xhosa speaking person to verify the guide.

The home language of most of the participants was Xhosa and therefore; there was thus no language barrier. Participants were informed that whatever they said during the interviews will be kept confidential. The researcher was well trained for interviewing, data documentation and question techniques and highly motivated with regard to fieldwork. The researcher attempted to remain as neutral as possible throughout the interviews with participants, despite the fact that they were in a Child and Youth Care centre. The researcher had an interview guide written in both in English and Xhosa. The researcher did her own translation and asked verification from the colleagues at work, who were Xhosa speaking, (as the researcher is a North Sotho or Sepedi speaking). The researcher is fluent in English, Xhosa and North Sotho.

2.9 Conclusion

The above information provides an overview of the methodology of the study, including the description of the study participants, definition of qualitative methodology, differences between qualitative and quantitative methodologies, research approach, population and sampling, data collection process, interviews, data analysis, data verification, ethical consideration, and limitations of the study, and self reflective issues of the researcher.

Chapter Three will focus on the presentation of data and the discussion of the findings through identified themes, sub themes and narratives from the participants. This will include integration of the literature reviewed, previously conducted studies, and the theoretical framework under investigation.

CHAPTER THREE

3.0 DATA PRESENTATION AND LITERATURE CONTROL

3.1 Introduction

In the light of the aforementioned a qualitative research was undertaken to gain first-hand knowledge of boys' perceptions regarding substance abuse, amongst adolescents. Data was gathered by means of individual interviews. Interviews were conducted with 11 participants between the ages of 15 and 18 years. The boys were members of the support groups at the Child and Youth Care Centre, and were identified by volunteers in the community as orphaned and vulnerable children. Initially, the researcher planned to conduct eight interviews, but decided to proceed until data saturation took place. This means that data no longer generates new information (Morgan, 1997:43).

According to Erikson's psychosocial theory of human development, a central task for adolescents is the formation of a unique and secure sense of personal and social identity (Nicholas, 2004:39). Marcia, Paplia and Olds (1995), in Nicholas, (2004:39), stated that the process of identity development begins in the early childhood. Puberty poses the emerging adolescent with a range of physical, interpersonal and social dilemmas. The effective resolution of which precedes the formation of satisfactory adult roles, and long term personal and social objectives (Nicholas, 2004:39). During the identity formation period adolescents begin to refine their personal and social identities. They begin to think of themselves as generally socially and psychologically stable (Nicholas, 2004:39).

When adolescents search for their identity and try to find out who they are, it is a vital process that builds on what they achieved in the earlier development stages. These stages would have laid ground work for coping with crisis of adult life (Erikson, 1973 in Kibel and Wagstaff, 2001: 156). Environmental stressors such as crime, unemployment and poverty, parental stressors such as substance abuse by parents, alienation, illness and problems amongst peers such as peer pressure and truancy, impacts negatively on adolescents.

A boy from a disadvantaged background may find it difficult to develop positively due to barriers to full opportunities for personal growth (Way *et al.* 2004: 222). They are confronted by physical and social changes, and decisions they make often do not reflect societal, parental or the community expectations. Thus understanding of how boys respond, experience, perceive, resist and influence these cultures and contexts is critical in understanding their development. To understand how boys perceive and give meaning to the world around them, one must start from the boys' own perspectives. This can be achieved by including the voices of boys from disadvantaged backgrounds (Way *et al.*, 2004:222).

During the course of this chapter the results of the semi-structured interviews will be discussed. The themes and sub-themes that were identified as emerging from the experiences shared by the boys are set out and discussed in depth. Relevant quotations from the transcripts of the interviews are included in order to provide empirical support for the discussion and conclusions. In addition, relevant literature was also reviewed and has been incorporated in this section of the study; in the form of literature control (Creswell 2003:33).

The literature was used inductively. This is consistent with the methodology of the qualitative research paradigm. According to Creswell (2003:33) literature is used inductively when it does not guide and direct the research, but is used as an aid to compare and contrast the themes that emerge from the study. The findings from this study were compared and contrasted with existing theories and previous research, and reported in the relevant literature. The literature control enabled the researcher to evaluate the data and compare the meaningful themes that were identified with what is captured in the literature. The five themes, as well as the related sub themes, are set out in Table 2. Each of these themes and sub themes will be separately discussed. It is important to know that the sub-themes do overlap at times.

3.2 Demographic Data

The demographic data of the participants is set out in Table 1. Below:

There were a total of eleven boys who participated in this study, and their demographic data is set out in the table below.

TABLE 1. Demographic data of Participants

AGE	GENDER	ETHNIC GROUP	LANGUAGE	GRADE
18	Male	Xhosa	Xhosa	10
15	Male	Xhosa	Xhosa	9
15	Male	Xhosa	Xhosa	9
15	Male	Xhosa	Xhosa	8
18	Male	Xhosa	Xhosa	10
17	Male	Xhosa	Xhosa	11
18	Male	Xhosa	Xhosa	11
18	Male	South Sotho	Sotho	12
17	Male	South Sotho	Sotho	11
17	Male	South Sotho	Sotho	11
18	Male	South Sotho	Sotho	12



3.2.1. Age

Three of the participants were 15 years old, three 17 and five 18 years. All eleven participants interviewed are between the ages of 15 and 18 years. According to their age group, the participants are in their adolescence. According to Way *et al.*, (2004: 222) the adolescence stage is a difficult period in a human lifespan, and it may be more difficult for adolescent boys from poor backgrounds and high risk environments. They are confronted by physical and social changes, and decisions they make often do not reflect societal, parental or the community expectations.

3.2.2 Gender

The 11 boys who participated in the research are exposed to substance abuse in various forms in their community. They could therefore relate to substance abuse in order to verbalise their perceptions in this regard. The few researchers, who studied boys from diverse backgrounds such as Way *et al.*, (2004:222); Brook *et al.*, (2006:26 -34) and Flisher *et al.*, (2003:58 -65) suggest

that boys' experiences vary from within and across cultural contexts. Like girls, boys are also influenced by environments in which they develop. Thus, understanding how boys respond, experience, perceive, resist and influence these cultures and contexts is critical to understand their development. To understand how boys perceive and give meaning to the world around them, one must start from boys' own perspectives. Especially by including the voices of boys from disadvantaged backgrounds (Way *et al.*, 2004:222).

The likelihood of substance abuse among male adolescents may be influenced by many factors. According to Brook, Morejele, Brook (2006:26-34), environmental factor such as unemployment, violence and crime, worsening HIV/ AIDS pandemic, parental drug use, association with deviant peers serve as behavioural models and may predict the adolescent boys' behaviour. Sussman and Ames (2001:61), have a different view of environmental. Sussman and Ames (2001: 61), discuss the demographic on the basis of geographical location, dwelling context, neighbourhood disorganisation, economic deprivation conditions which may limit access to recreational opportunities and the availability of drugs.

In a disorganised neighbourhood, for example, one is relatively likely to be exposed to unsanctioned instances of social disobedience, such as drug dealing, public drunkenness, and gang related activities. There are also buildings structures that provide many enclosed public areas as well as abandoned buildings, lend themselves to a greater incidence of crime perpetration and drug use. These are prevalent in dense, urban and disorganized neighbourhoods (Sussman and Ames, 2001:61). This kind of environment is not conducive to adolescents especially, when they are from disadvantaged background where there is a lot of social disobedience. These can perpetuate crime and substance abuse among adolescents. In response one of the participants said:

“The child will be hooked to use substances and when he does not have money he will start to abuse other stuff and start to commit crime, drop out of school and start robbing people of their possessions”

3.2.3 Ethnic group

Although the participants in the study live in Langa, they are from two different ethnic groups. Eight of the participants were Xhosa and four were Sotho.

3.2.4 Language

Xhosa are eight of the participant's home language, whereas four are Sotho speaking. Interestingly, the Sotho speaking participants could also speak fluent Xhosa, whereas the Xhosa speaking participants could not speak Sotho. All of the participants were conversant in English.

3.2.5 Grade

One of the participants was in Grade seven, one in Grade eight, one in Grade nine and two in Grade 10. A group of four was in Grade 11, and two in Grade 12. Eight participants attend school at different local high schools and four attends school at the former model C high schools. Participants, who attended former model C schools in a neighbouring community, are mostly the Sotho-speaking participants (whose parents do not want them to study in Xhosa).

3.3 Discussion of the Themes and Sub Themes

Adolescent drug abuse differs from adult drug abuse in several ways: for example, regular use may not be considered abuse in adults, whereas it might be considered abuse in adolescents because of the potential of such use to interfere with developmental growth and adjustment tasks (Sussman and Ames, 2001:57). Furthermore, high risk situations may differ between those of adolescents and adults. Adolescents in particular, may be relatively likely to use drugs in situations in which they are responsible for taking care of others e.g., serving as driver, in which they are at highest risk among age groups for fatal accidents. Adolescents have a higher likelihood of suffering social consequences specific to adolescence, for example, problems at school, getting in to trouble with the law and truncated development such as early involvement in family creation (Sussman and Ames, 2001:59). This was evident when one participant gave his perception of the impact of substance abuse on adolescents by saying:

“They end up in the streets being nothing but criminals who are always in trouble with the law.”

Five main themes, each consisting of a number of sub themes, emerged from the data analysis process. Each of the themes and sub-themes that emerged from this body of data is presented in Table 2. The five themes will be fully discussed and interpreted as it is presented. The discussions will be supported and further illustrated with verbatim quotations from the transcripts of the interviews, the researcher’s field notes and the relevant literature.



Table 2. Themes and Sub Themes that emerged from the data

Themes	Sub- Themes
Theme 1: Boys’ knowledge about substance abuse	
Theme 2: Boys’ perceptions on why adolescents abuse substances	Sub–theme 2.1: Adolescents abuse substances because of peer pressure Sub–theme 2.2: Adolescents abuse substances because of family problems Sub–theme 2.3: Adolescents abuse substances because of role models
Theme 3: Boys’ feelings about substances abuse among adolescents	
Theme 4: Boys’ perceptions of the impact of substance abuse on adolescents	Sub–theme 4.1 The physical impact of substance abuse on adolescents Sub–theme 4.2: The social impact of substance abuse on adolescents
Theme 5: Boys’ recommendations to prevent substance abuse amongst adolescents	Sub–theme 5.1: Boys recommendation to close Shebeens down Sub–theme 5.2: Boys recommendation that alcohol should be sold to adults only Sub–theme 5.3: Boys recommendation to develop prevention and awareness programs

3.3. 1: Theme 1: Boys’ knowledge about substance abuse

The following statements from the participants demonstrate the participants’ knowledge about substance abuse:

“Eh ... the use of alcohol and drugs unlawfully”

“Using illegal drugs for recreational use and to get a high, like ecstasy, dagga, and crack and going overboard”

“You speak about people drinking too much and using illegal drugs overboard.”

“Overdoing mandrax, dagga, crack and ... and ...ja! Yes alcohol and cigarettes are drugs but are legal but people use too much of those, I can say yes they are drugs.”

From the abovementioned statements it is clear that the participants view substance abuse as either legal or illegal. These statements are confirmed by Gwinnell and Adamec (2006:225) in that substance abuse is the recurrent use of alcohol and legal or illegal drugs that result in an individual failing to perform important work, school, and family obligations and thus suffering consequences. The same authors (Gwinnell and Adamec 2006:225) are also of the opinion that substance abuse is not as severe as an addiction to substances. With substance dependence, an individual has built tolerance to substances or drugs, needing greater quantities to achieve same effects of satisfying their needs. When asked about the impact of substance abuse on adolescent, one participant responded by saying:

“Boys will end up being influenced by drugs and will not get that, that is when he start to do wrong things or steal because he would want to fulfill his need”

Buddy (2004:1), furthermore agrees with the participants by giving examples of substances that adolescents abuse as, marijuana, cocaine, methamphetamine, heroin, etc., which are said to be illegal because they are addictive or can cause severe negative health problems.

One of the participants expressed himself about the effect that substance abuse have on people:

“To abuse alcohol and drugs is to drink too much alcohol and use drugs until a person cannot control himself, end up doing the wrong things. Beating other people for no reason.”

Under the following sub theme, the researcher will discuss boys’ perceptions on why adolescents abuse substances:

TABLE 3.

Theme 2: Boys' perceptions on why adolescents' abuse substances	Sub Theme 2.1 Adolescents abuse substances because of peer pressure
	Sub Theme 2.2 Adolescents abuse substances because of family problems
	Sub Theme 2.3 Adolescents abuse substances because of role models

3.3.2 Theme 2: Boys' perceptions on why adolescents abuse substances

According to Sussman and Ames (2001: 57), drug use generally is more prevalent among males than females. They report that in a study that was conducted in 1994 by (Barbor and Johnstone) on the problematic opiate, it was indicated that males outnumbered females by a ratio varying around 2:1 and 4:1. This also was confirmed in the studies conducted by Saluja *et al.*, (2005: 455), Brook *et al.*, (2006:26-34), Flisher *et al.*, (2003: 61-63), where it was indicated that there is a higher prevalence of substance abuse among male adolescents than females. In a study that was conducted in Kwazulu-Natal, South Africa, on 16 years and older adolescents, it was indicated that 32 per cent of male adolescents, compared to 11 per cent of female adolescents, use and abuse substances.

The gender differences in drug use might be explained by a consideration of sex role expectations and differential stigma associated with drug use. Males are often taught to deal with problems by engaging in goal attainment, rather than by talking about difficulties in an expressive manner. Taking drugs may be one way for them to take action to cope with stress (Sussman and Ames, 2001: 57). Females, on the other hand, might be more likely to seek social support. The magnitude of gender differences currently observed may change among the young generation of the more recent decades, given changing in sex role expectations. This might be caused by females pursuing a more instrumental goals and decrease in tendency towards expressiveness (seeking social support), drug use and abuse may increase in prevalence as a maladaptive coping option (Sussman and Ames, 2001: 57). The adolescence stage of development is also seen as one of the important critical factor that might influence substance abuse among adolescents.

Boys' perceptions on why adolescents abuse substances as a theme is divided into three sub themes: adolescents abuse substances because of peer pressure, adolescents abuse substances because of family problems, and adolescents abuse substances because of their role models. They are discussed as follows:

3.3.2.1 Sub Theme 2.1: Adolescents abuse substances because of peer pressure

Gwinnell and Adamec (2006: 195), define peer pressure as urging from individuals that a person regards as equals to perform acts that the individual might not choose to do on her /his own. Individuals are affected by the behaviours of their peers. If most of their friends are drinking, smoking or use substances, they will often wish to drink or smoke.

As one of the participants responded by saying:

“I think is peer pressure, when seeing their peers using substances, they also do to keep their friends”

According to Brook *et al.*, (2006:26-34), peer substance use is one of the major and well-established predictors of adolescent substance use. The influence of the peer group is exerted via modelling and social reinforcement of nonconforming behaviour. Previous research suggests that peer substance use influences adolescent behaviour and that adolescents' own predispositions to using drugs may lead them to select deviant peers (Brook *et al.*, 2006:26-34).

Theoretically, Erikson (1968) describes the adolescent stage as a stage in which an adolescent seeks to develop a coherent sense of self (Kibel & Wagstaff, 2001:156). This theorist observed that not every adolescent achieves a strong sense of identity, during or after adolescence. According to Erikson (1968), to form an identity, adolescents must ascertain and organise their abilities, needs, interests, and desires so that they can be expressed in a social context (Kibel and Wagstaff, 2001:156).

Elkind (1998) in Kibel and Wagstaff, 2001:161) explains that an adolescent must be able to differentiate and integrate in the outside world in a way that an adolescent becomes aware of the many ways in which one differs from others, and integrate these distinctive parts of oneself into

a unified, unique whole. This process requires much time and reflection, but when a person has achieved a sense of identity through this path, it is almost impossible to break down (Kibel & Wagstaff, 2001:161).

Elkind (1998) further explains that when an adolescent replaces one's ideas and feelings of self by adopting other people's behaviours, one would have a low self esteem and be confused. This kind of adolescent is said to be highly susceptible to outside influence and vulnerable to stress, because of the lack of the inner compass and direction to guide them (Kibel and Wagstaff, 2001:162). Elkind attributes this as a problem, as a large number of adolescent are confronted with sense of self built by replacing one's set ideas and feelings about self with the ones adopted from other people. These individuals are described by Fields (2001: 16) as having a poor self concept.

According to Fields (2001: 16), poor self concept is mostly generalised as at-risk factor for problems with alcohol and drugs. This involves choices made by the individual and is active rather than passive. A sense of self concept comes from within to the outside world, rather than the outside world defining who the individual is (Fields, 2001:16). This important point has implications for individuals who develop co-dependent relationships with addicts and alcoholics. A person with a self concept is unique, individual with emerging talents and skills

- An individual who can accomplish things, for example, achieve goals, solve problems and have maturity to develop and grow.
- An individual who can trust and be trusted and who can set appropriate boundaries for relationships (Fields, 2001:16).

This was evident when one of the participants responded by saying:

“I think peer pressure cause them to drink, in that if they do not do what their friends do they will not have friends”

“I think peer pressure, when seeing their peers using substance”

The researcher believes that adolescents think that they need to do what their friends do, in order for them to keep their friendships. Boys look up to their peers for social acceptance and popularity relative to their peer group. Their development of self understanding is influenced by large cultural expectations of what it means to be a male and also their perceptions of themselves in relation to their peers (Way, Chu, Kimmel, 2004: 219). One participant responded in line with the above statement by saying:

“It is peer pressure because they need to belong and if they do not do what others do, they are not accepted in the group, yes its peer pressure.”

According to Marcia, Papalia and Olds (1995) in Nicholas (2004: 39), the process of identity development begins in the early childhood. Puberty poses the emerging adolescent with a range of physical, interpersonal and social dilemmas. The effective resolution of which precedes the formation of satisfactory adult roles and long term personal and social objectives (Nicholas, 2004:39). During the identity formation period, adolescents begin to refine their personal and social identities. They begin to think of themselves as generally socially and psychologically stable (Nicholas, 2004: 39). One of the participants expressed himself as follows:

“some use to enjoy themselves and some have reasons to use , like peer pressure when friends use and one feel forced to use also to keep the friendship,”

According to Gwinnell and Adamec (2006:236), some adolescents use substances to enjoy themselves and get euphoric (high).

“I use because I want be a strong man and fit in to my group, they won’t like me if

I do not use, that is what they say.”

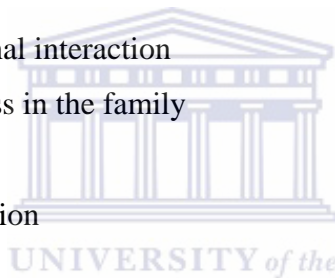
3.3.2.2 Sub Theme 2.2: Adolescents abuse substances because of family problems

According to Fields (2001:15) alcohol and drug addiction are often a family disease. The likelihood of developing the disease of alcoholism and drug addiction is greater for those individuals who have an alcoholic or drug addicted family member. It increases more if most

family members abuse alcohol and drugs. The children from alcoholic or drug addicted, dysfunctional and shame-based family systems are at greater risk for developing problems with alcohol and drugs. The modeling of family members who use alcohol and drug also greatly influence the development of alcohol and drug dependence (Fields, 2001:15). The alcoholic and drug addicted family has a poor communication system among adults and children; there are trusts and no rules. This kind of a family system breeds childhood traumas of fear, rejection, abandonment and sometimes violation. Trauma, violence and violation are all factors that contribute to the substance abuse among adolescents Fields (2001:40).

Some examples of factors contributing to alcohol and drug use in the family include the following (Fields 2001:40):

- Marital discord
- Imbalances and dysfunctional interaction
- Significant trauma and stress in the family
- Inappropriate boundaries
- Shame abandonment, rejection



There is increasing evidence that environmental and economic stressors have adverse consequences for families and children (Brook *et al.*, 2006:26 -34). Environmental stressors also include such influences as discrimination, victimization, and markers of poverty, such as lack of household amenities, and hunger. The following participants explained their perceptions in the following way:

“For some boys and girls, they have problems at home that cause them to use drugs”

“They do not want to be controlled by their parents.”

“They say they use drugs and alcohol to release stress and make themselves happy when they want to enjoy themselves.”

When the researcher asked for clarity in this regard, the responded said that, adolescents have their own problems of boyfriend s and girlfriends relationships. When their friendships do not

workout they resort to anything that can relieve their stress, like alcohol or drugs because they do not want to think about the situation they find themselves in.

Parental substance abuse, which includes parental smoking, alcohol, and marijuana use, the domain of child rearing, which includes parental monitoring and the mutual attachment relationship between parent and child influence the behaviour of the adolescents. Adolescents with weak bonds to their parents are more likely to be pulled into peer groups involved in delinquency and drug use (Fields, 2001:39).

3.3.2.3 Sub Theme 2.3: Adolescents abuse substances because their role models

Modeling by older siblings, parents and peers is highly correlated with drug abuse amongst adolescents. Drugs is furthermore reinforced by the media, which successfully creates a market with images of drug use as a helpful solution to all physical complaints and solutions for various problems. Alcohol is portrayed as necessary to lead a “good life” (McWhirter, McWhirter, McWhirter and McWhirter 2004:119). One of the participants expressed himself in the following way:

“Living with parents who smoke and drink a lot.”

Gwinnell and Adamec (2006: 236), explain that some adolescents may be modeling their own parents who use substances behavior, as some of the participants responded below:

“They do what their role models do. Parents, famous people. Because they believe it’s cool to use.

“They also see parents do it and think it is the right thing to do. They say it is a style.”

Fields (2001:39) further discusses at-risk factors that contribute to the development of alcohol and drug dependency. The longer the family denies that they are faced with alcohol and drug problems, the more vulnerable the family members become. Parental alcoholism and drug addiction make children in that family four to eight times more likely to develop problems with alcohol and drug (Fields, 2001:39). This is in most cases due to the lack of parental supervision.

3.3.3 Theme 3: Boys' feelings about substance abuse amongst adolescents

When participants were asked how they feel about adolescents who abuse substances, it was interesting to hear how boys view the impact of substance abuse on the lives of the adolescents. They responded by saying:

"I feel bad because most girls fall pregnant.... boys get arrested and waste their time in jail. They also drop out of school and some become street kids"

"I feel bad because it is not good what they do. They will end up spoiling their future and drop out of school"

"I feel very bad because mostly is boys who abuse substances, and those who use end their future, as they were not informed, they end up in the streets and unwanted, untrusted by their families and the community"

"I feel bad because I think of his future how it will look like when he start using substance at an early age"

The participants were aware of their feelings and were able to reflect how they feel about adolescents who use and abuse substances and provided example of the impact substances can have on their lives. Most responses raised their concerns regarding the future of adolescents who abuse substances.

Sussman and Ames (2001: 16) further stated that drug abuse becomes a societal problem when drug abusers do not recognise themselves as having problems, the severity of the problem and do not recognise the value of a sober life.

One of the participants expressed himself as follows:

"I feel bad because it seems we see them as having problems, but not them"

According to Sussman and Ames (2001:16), three variables are found, that are strong correlates of addiction concerns:

- The greater the level of someone’s current drug use and expectation that they will continue to use drugs, the greater the level of addiction. It was reflected in the findings when one respondent mentioned that once an adolescent is hooked to substances, it is hard to go back and they end up getting involved in doing the wrong things like committing crimes.
- The lack of general assertiveness may influence drug abuse or use through inhibiting creation of new pro-social, anti- drug bonds oriented leading to greater addiction concerns. This variable was reflected when the participants indicated that peer pressure cause substance abuse among adolescents.
- Individuals who place lower importance to health as a value are relatively likely to be concerned about becoming an addict or alcoholic. One participant responded by saying that it seems as if we are the ones who see that the adolescents who abuse substances have problems, but not them. This, in the researcher’s opinion, it means that at the time when an adolescent is involved in substance abuse, they do not really care about what might happen to their health.

TABLE 4.

Theme 4: Boys’ perceptions of the impact of substance abuse on adolescents	Sub Theme 4.1 The physical impact of substance abuse on adolescents
	Sub Theme 4.2 The social impact of substance abuse on adolescents

3.3.4 Theme 4: Boys’ perceptions of the impact of substance abuse on adolescents

Continued substance use, despite having persistent or recurrent social or interpersonal problems, may cause arguments with family members, no interest in physical hygiene, school drop out, physical fights and other risk behaviors, such as sexual risk behaviors of having sexual intercourse with multiple partners with protection, contracting the HIV virus etc (Brook *et al.* 2006:26-34). This might also result in legal problems (e.g., arrests for substance-related disorderly conduct such as stealing).

Sussman and Ames (2001:28), stipulates drug related problems. These include dangerous or illegal activities used as a means to obtain drug, robbery and violent crimes, methods of using drug such as needle sharing among drug users and action inhibited while under the influence, for example, drunken driving resulting in fatal accidents. Participants have the knowledge about the impact substance abuse can have on adolescents lives, according to the researcher. When they were asked how they perceive substance abuse amongst adolescents.

Participants' responses were again divided in to sub- themes as follows:

3.3.4.1 Sub Theme 4.1: The physical impact of substance abuse on adolescents

Some of the participants verbalised their perceptions of the physical impact of substance abuse as follows:

“There are people who I know; they look ugly and old because of alcohol and drugs. They end up damaging their lungs and die”

“Alcohol and drugs damage their minds and they cannot think properly and get other diseases like lung diseases”

“It is not healthy, it creates a habit that leads to bad consequences of contracting STIs, AIDS, making girls preg.”

“ The difference is that 80% of boys use substances, but those who do not use are safer and those who use are in the risk of falling in to trouble with the law, getting sick, having unwanted babies, sometimes even raping girls.”

Fields (2001: 66) reports that the users of drugs face many hazards related to the circumstances of illegal drug use such as impurities, infection and the consequences of the addict lifestyle. By sharing contaminated needles, they risk to contract infections such as hepatitis, tetanus, HIV and AIDS and all other blood- bone infections.

One participant emphasised the following:

“They understand the risk of using drugs in that they will forget to use condoms, have unprotected sex, the consequences of having unprotected sex may be impregnating or contracting infectious diseases, like HIV and AIDS”

Sussman and Ames (2001: 29) reports that chemically dependent females are often victims of traumatic events such as sexual abuse, rape and domestic violence. Drugs mostly implicated in domestic violence are alcohol as a stimulant that increase paranoia and lead to violence. They contribute to violence behaviours and likelihood that a person may become a victim of such behaviours. Some drug users engage in economically oriented violent crime and robbery in order to support their costly drug use, which often get them in trouble with the law.

One of the participants also mentioned these behaviours by saying the following:

“those who drink and use substances always find themselves in troubles of raping, having unprotected sex, because they become uncontrollable and end up falling in trouble with the law and contracting diseases, like sexually transmitted disease, because what they do under the influence is out of their control”

Participants' statements are also confirmed by Gwinnell and Adamec (2006:231) when they reported risk behaviors among adolescents who use and abuse substances, saying that they are associated with fatal road accidents. They further stated that teenagers are likely to engage in sex and less likely to use condoms when they are under the influence of substances, than when they are not. They are also faced with unwanted pregnancies. Adolescents are engaging in unsafe sex also risk contracting sexually transmitted diseases, including human immunodeficiency virus among other diseases, herpes, gonorrhoea, etc. Gwinnell and Adamec (2006:231) further mentioned that sexual assault occurs more commonly when substances are involved, whether the substances are used by the victim, offender or both of them.

3.3.4.2 Sub Theme 4.2: The social impact of substance abuse on adolescents

According to Sussman and Ames (2001:11), there are four symptoms manifested by maladaptive patterns of drug use. These lead to clinically significant impairment or distress. These symptoms are discussed as follows:

- Recurrent drug use may result in failure to fulfill major obligations at work, school or home. Repeated absences, tardiness, poor performance, suspensions or neglect of major duties.
- It is physically hazardous when driving a car, swimming or even walking in dangerous places while under the influence.
- May lead to arrests for disorderly conduct, like violence, crime etcetera.
- Getting into fights with others or acting inappropriately in front of others is indicative of abuse (Sussman and Ames, 2001: 11 and Fields, 2001:119).

According to Fisher and Harrison (2000:19, 25), the lifestyle of the drug addicts often include criminal activity to secure enough money to support their habit.

When asked about the impact of substance abuse among adolescents, the participants responded by saying the following:

“Causes them to commit crime, lose control”

“They end up in the streets being nothing but criminals who are always in trouble with the law. Their future is invisible and they will have an excuse saying they never had good role models at home”

“I know that person who abuses drugs drop out of school and also damage their lungs and eh.....also get infected with diseases, get preg.”

When children cannot cope with their academic work, particularly in higher grades, they are likely to develop anti social behaviour that correlates with the abuse of alcohol and drugs. They fail to develop the skill necessary to learn and succeed in school and many have learning difficulties that parents deny until it is late (Fields, 2001: 39). The schools also fail to deal with the problems adequately. At this stage, that is when adolescents resort to the friends for support, and because they are in difficult times, they will follow whatever their friends do. In most instances they tend to be friends with adolescents who display uncontrollable behaviours.

The participant here when asked about the impact of substance abuse on adolescents, he responded by saying:

“Those who do not use have a bright future but those who do first lose respect and have a bleak future, because drugs and alcohol mess up their future.”

Given the understanding of boys’ with regard to the impact of substance abuse on adolescents, they were also asked how they think substance abuse can be prevented. In their responses, the boys made recommendations on how they think adolescents can be prevented from using substances. The theme: boys’ recommendations regarding how to prevent substance abuse among adolescents was derived from their responses. The theme was also divided into three sub themes, namely: shebeens to close down, alcohol to be sold to adults only and development of awareness and prevention programmes. They are discussed as follows:

TABLE 5

<p>Theme 5: Boys recommendations to prevent substance abuse amongst adolescents</p>	<p>Sub Theme 5.1 Boys’ recommendations to close Shebeens down</p>
	<p>Sub Theme 5.2 Boys’ recommendations that alcohol should be sold to adults only</p>
	<p>Sub Theme 5.3 Boys’ recommendations to develop prevention and awareness of awareness programs</p>

3.3.5 Theme 5: Boys recommendations to prevent substance abuse amongst adolescents

According to Sussman and Ames (2001:91), prevention programmes happen on three different levels, that is primary prevention, which is before the problem starts, secondary prevention, when the problem has already started, but before the disease starts and tertiary prevention which the program just before death is likely. Sussman and Ames (2001: 91-92), also report that the available prevention programmes tend to focus on the young people, whereas the same programs can be applied to adults as well. According to Sussman and Ames (2001:93), school based drug abuse prevention programs can be successful. However, it is a challenge to maintain consistent and rigorous programmes at schools for years.

The participants were also asked how adolescents can be prevented from continuing to abuse substances. The participants' responses were divided into sub-themes as follows:

3.3.5.1 Sub Theme 5.1: Boys' recommendations to close shebeens down

In their study, Morojele and Brooks (2005) indicated that these substances are accessible to adolescents through a variety of sources such as street markets in the communities, shebeens and house parties. Furthermore, the rate of substance abuse is higher in male adolescents than female adolescents (Parry *et al.*, 2004:369-374). In their responses participants agreed that shebeens are contributing to substance abuse amongst adolescents and expressed themselves as follows:

“People must stop selling alcohol to children. All shebeens should be closed and only legalised places should be open and people must buy alcohol with their IDs to verify their age”

“All shebeens must be closed and alcohol must not be sold to children. There must be places where children can go after school so that they can move away from the streets”

3.3.5.2 Sub Theme 5.2: Boys' recommendations that alcohol should be sold to adults only

Sussman and Ames (2001:93) also mentioned that legislative means can be used to curb drug use among adolescents, for example, the enforcement of access laws might decrease purchase of tobacco and alcohol products by young people, at least if applied across the multiple context like homes, schools and stores Wakefield *et al.* 2000, in Sussman and Ames (2001:93). The adolescents argued that substances should not be sold to people younger than eighteen years old and made the following statements in this regard:

“Substances especially alcohol must not be sold to children younger than 18 years old. Eh ...eh...it should be sold to those people who are old enough and should produce an ID, when purchasing alcohol. Alcohol must not be sold to children less than 18 years of age..... And jah!”

“By stopping to sell alcohol and drugs to children, people must produce IDs when buying alcohol”

3.3.5.3 Sub Theme 5.3: Boys' recommendations to develop prevention and awareness of awareness programs

According to Fields (2001:252), alcohol and drug intervention is any action taken by someone to interrupt the progression of the problem with alcohol and drugs. And Fisher and Harrison (2000: 110) define intervention as the process to stop someone who is experiencing the harmful effects of alcohol and other drugs. Intervention programme can happen at various stages, according to Fields (2001: 252). At each of these stages, there are opportunities for intervention. If the programme is integrated at early stages of the problem and interrupt the progression to later stages of alcohol and drug abuse, the negative consequences may be avoided. The intervention stages are discussed by Fields (2001: 252) as follows: namely;

Non-use interventions

- The children must be taught the refusal skills and dealing with peer pressure
- Education and implementation of effective parenting, communication skills and other alcohol and drug prevention interventions skills
- Affirmation and support in activities that promote a good sense of self and alternative activities to alcohol and drugs, such as sport activities.
- Parental, peer and other to maintain non-use

Two of the participants made the following recommendation to limit the problem of substance abuse amongst adolescents:

“We can build sport facilities and play grounds and encourage children to take part in sport to stop them from going around in the streets”

“To prevent them not to get enough time to discuss these things, involve them in groups and guided by an older person, things like sport need to be introduced in the community to keep these boys busy.”

It is interesting to note that the literature involves parents in prevention and awareness programme. Thus, give parents their role as parents and also questioning their parenting lifestyle. In a way this will also open communication lines between the parent and the child; and also enhance effective relationships.

Initial contact interventions

There are two significant concerns in this stage: overreaction by parents and under reaction by parents. Parents have a major role to play. They must become more aware of the child's behaviour and signs of alcohol and drug use. They must communicate with their child, and let the child elate the experience of the contact without being judgmental, blaming and being negative. Parents must express concerns about the safety to the child and discuss at risk factors of alcohol and drug dependence and addiction. This might be the opportunity to explore other aspects of the child's life and explore other family problems with the child.

Experimentation interventions

In this stage teacher play a great role. The focus should be on communication and exploration of values, attitudes and feelings about alcohol and drugs.

- Teaching and modeling skills in decision making, conflict resolution, goal setting etc.
- Teaching children skills in coping with, dealing with authority figures and controlling destructive impulses
- Providing information about chemical dependency, addiction and at- risk factors regarding alcohol and drug use
- Educating about alcohol and drug prevention

One of the participants gave a lot of thought to the matter of the prevention of substance abuse amongst adolescents, and made the following recommendations:

“There must be programs in place in primary schools and high schools, so that they can be informed. I joined in groups to discuss issues that are problematic to us boys and girls, so that I think these programme I think should be expanded into schools especially primary schools to teach children while they are still young and to let them talk and learn to open up”

“These programmes should be introduced in schools. In advantaged schools the children are taught about these issues. It can only be started when the child will understand, like at the end of primary school and the beginning of high school”

Interventions at the integrated stage

In this stage intervention by community change agent professionals, e.g. Soccer players, Teachers, Nurses etc, can play vital role. The communities look upon them as role models. They should participate in the community activities and raise awareness with the regard to the social problems faced by the community, e.g. substance abuse, HIV and AIDS, as they are better listen by adolescent

- Identification and communication of concerns and negative consequences as a result of integrated alcohol and drug abuse.

- If problems are identified, work on these issues in counseling; give educational classes on chemical dependency, family systems and advice about regular counseling attendance.

In this regard one of the participants responded by saying:

“Programs need to be launched so that children in the communities can be made aware of the consequences of abusing substances that can put them at risk”

According to Sussman and Ames (2001:93), the advice not to use drugs from the community agents like doctors, dentists, local health personnel, etc., and provision of self- oriented material can be useful. Like wise mass media, for example TV, radio, film print and magazines, can reach young people, and can be used to counteract other media glorification of drug use, as well as provide anti- drug use messages. The use of interactive CDs and chat rooms on the worldwide were currently is helping to remedy this difficulty (Sussman and Ames (2001: 93).

One of the participants expressed himself as follows:

“90% of the time they are in risk. I think what is being done now is working, like TV programs, magazines programs. I think these programs work as teenagers start to get worried when they see them, whereas before they would do it without the pulse.”

The last stage of alcohol and drug prevention intervention as discussed by Fields (2001: 254) is as follows:

Intervention at the Excessive use and addiction stage

This stage according to, Fields (2001:254), informs us about the formal intervention, for example institutionalisation of the person with the problem of abuse and dependency on alcohol and drugs who can no longer control this behaviour. One participant gave a good example of excessive use of drugs and alcohol by saying:

“It is like a person uses drugs and alcohol in excessive continually in a short period of time.”

3.4 Conclusion

In this chapter, the researcher presented the results generated from the interviews with boys, regarding substance abuse among adolescents. The demographic data of the participants was also briefly discussed to give the reader the overview of the participants in the study. Thereafter the themes derived from the participants' responses were divided into sub themes, and were presented in tables. These themes and sub themes were discussed and integrated into theory and literature and the narratives derived from the interviews.

CHAPTER FOUR

4.0 SUMMARY, CONCLUSIONS, LIMITATIONS AND RECOMMENDATIONS

4.1 Introduction

The final chapter provides a brief summary of the three chapters outlined and the main findings. The researcher will also demonstrate how the qualitative approach was implemented. The researcher further discusses the conclusions drawn upon for the study. The limitations will also be highlighted. The final section will discuss the recommendations as derived from the data obtained from the participants.

The goal of the study was to explore and describe boys' perceptions of substance abuse, amongst adolescents. The objectives of the study are:

- To explore perceptions of boys regarding substance abuse amongst adolescents by means of semi-structured individual interviews.
- To describe perceptions of boys regarding substance abuse amongst adolescents by means of writing a research report.
- To draw conclusions and make recommendations regarding substance abuse to existing substance abuse.

4.2 Summary of Chapters

An over view of the research proposal appears in Chapter One in which a brief summary of the research question and the problem statement were provided. The research methodology was discussed and a plan was set out to implement this study. This plan included the qualitative research approach and the use of semi-structured individual interviews as a method of data collection. Substance abuse amongst adolescents as a global and national concern was discussed with specific reference to the higher frequency of boys. It also referred to the challenges for social service delivery at NGO's level as well as within governmental sector.

In the Second Chapter of this study, the research methodology that was applied was discussed in depth. The choice of research design was discussed and the rationale was provided. The various

steps that the researcher carried out during the research process were set out. The preparation of the participants, the data collection, data analysis and data verification processes were described in significant detail.

The researcher provided a detailed presentation and discussion of the findings, in Chapter Three. The various themes and sub themes that were identified during the data analysis process were discussed. Relevant quotes from the interviews with the participants were used to provide evidence for these findings. These findings were also compared and contrasted with those of previous research as reported in the relevant literature.

4.3 Conclusions

4.3.1 Research methodology and Design:

The research methodology and design that formed the basis of this study were appropriate and enabled the researcher to explore and gain insight regarding the perceptions of boys regarding substance abuse, amongst adolescents. By employing the qualitative research paradigm and semi-structured interviews as a method of data-collection, the researcher was able to gather the necessary data. This is further in light of the fact that little is known from how boys perceive substance abuse themselves in South Africa. These insights will be valuable for social service providers, other members of the helping professions, as well as parents and guardians.

4.3.2 Theme 1: Boys' knowledge about substance abuse

The study revealed that boys are aware of substance abuse and what it means. Although they indicated different levels of understanding, some participants were able to provide some examples of substances they know. What was also noticeable was that the boys identified the substances that are used in their neighbourhoods, for instance, alcohol, marijuana, methamphetamine, cocaine and heroin. The conclusion is therefore, that boys account of their knowledge of substances is influenced by the environment they live in, as they are often exposed to illegal street markets and shebeens where alcohol and drugs are easily accessible to everyone. It was also evident that the participants perceive substance abuse with using too much of it, as well as the fact that it is illegal to use drugs. The findings from this study are consistent with the

findings of previous research that have been documented in the relevant literature (Buddy, 2004:1, Gwinnell and Adamec 2006:1).

4.3.3. Theme 2: Boys' perceptions on why adolescents' abuse substances

The participant's reports of why adolescents abuse substances were divided in three sub-themes. They perceived that adolescents abuse substances are due to peer pressure, family problems, and the fact that their parents abuse substances.

Participants were in agreement that peer pressure contributes to adolescents' substance abuse. They verbalised that boys in particular drink alcohol and use drugs because their friends expect them to join them. It also appeared that adolescents drink with their friends to maintain their friendship, fear of rejection and require a sense of belonging to the group.

The participants also agreed that family problems are often one of the reasons why adolescents abuse substances. They verbalised that poor relationships between adolescents and their parents, and communication problems, and even constant financial concerns are also contributing factors. Some of the participants responded that adolescents who live with parents who drink alcohol and/or use drugs, identify with their behaviour. They also verbalised that their role models in the media also influence adolescents to abuse substances and that the latter regard this kind of behaviour as "cool". Boys also indicated that some adolescents drink alcohol and use drugs to make themselves (feel happy) or to release stress.

The abovementioned data is in agreement with findings of previous research which has been documented in the relevant literature.

4.3.4 Theme 3: Boys' feelings about substance abuse amongst adolescents

The participants were sympathetic towards adolescents who drink alcohol and use drugs, and were concerned about their future, health and trouble with the law. One participant mentioned that it is not only adults who are concerned adolescents who abuse substances, but that it is a concern for adolescents as well. It is concluded that boys are concerned about substance abuse amongst adolescents.

4.3.5 Theme 4: Boys' perceptions of the impact of substance abuse on adolescents

The participants agreed that substance abuse is not in the best interest of adolescents. Once they are addicted to alcohol and/or drugs, their need to generate money will increase. They might even commit crime or steal to maintain their habits. The latter might even lead to other problems like dropping out of school, confrontation with the law, and even jail sentences.

4.3.6 Theme 5: Boys recommendations to prevent substance abuse amongst adolescents

Participants had their own opinions on how substance abuse can be prevented amongst adolescents. The participants' responses taught the researcher that they need to be included in decision making around issues that involve them. Some participants responded by saying, all illegal shebeens must only be closed and alcohol must be sold to adults. People who purchase alcohol must produce their identity documents to verify their age.

They further responded by saying, sport facilities and sports ground should be built to encourage children to take part in sport, and stop them from going around the streets. Some participants had ideas of what should be in place to prevent adolescents from abusing substances. They said that there must be programmes established in primary schools and high schools to inform children of the consequences of substance abuse.

4.4 Limitations of the study

Over the course of the study the researcher faced a number of difficulties that placed limitations on the research and the findings:

- The researcher interviewed only eleven participants, therefore having a very limited number of participants. The findings of the study can therefore not be generalised.
- The study included only black African boys and it is therefore not representative of all the different ethnic race groups in South Africa.
- The participants who were recruited live temporarily (are placed for six weeks at the centre while their problems are still being resolved) in a Child and Youth Centre and were therefore a homogenous group.

4.5 Recommendations

The following recommendations are by no means comprehensive but should be seen as an attempt to be taken into consideration awareness and prevention programmes by service providers.

- Further research amongst adolescents of more age groups, different ethnic groups and from various social backgrounds to broaden the understanding of adolescents who abuse substances. Research should be conducted in conjunction between Universities, NGO's, governmental organisations and churches, in order to assist social workers and other helping professions in developing prevention programmes.
- In this study, the researcher aimed to inform the managers and coordinators of the substance abuse programmes both in the government (Social Development, Education and Recreation, Sport and Culture) and non governmental sectors regarding the perceptions of boys with regard to substance abuse. This was aimed at supporting them in developing the appropriate strategies when planning awareness and prevention in substance abuse program.
- It worth noting that the literature involves parents in the awareness and prevention programs. These give parents their responsibility as parents and question their parenting skills. In a way this opens communication lines between a parent and a child and ultimately enhances relationships. It is therefore recommended that parents should be involved in all steps of programmess on awareness and prevention, so that they can be aware of the symptoms of substance use among their children. They will hopefully identify and notice behavioural changes and differentiate between mood swings of adolescence stage, and that of substance abuse.
- Life skills programmes in schools must be structured with models that incorporate drug prevention and awareness programmes, and risk factors that surround substance abuse, and the consequences thereof. This kind of a programme will give the intervention a context, rather than being presented as one of those awareness programmes. The programmes that include life skills and information of risk factors will better equip

children with the necessary tools to resist substance abuse (Sussman and Ames, 2001:94-95).

- The researcher recommends that this be a joint venture among the Education Department, Social Development, and the funded Non- governmental organisations dealing with substance abuse. The life skills teachers and the officials in the abovementioned sectors must be trained to intervene, and meet the adolescents' needs with regard to substance abuse problems
- Programmes should include:
 - teaching children methods to cope with pressures they are faced with
 - Children to equipped with the skills of self concept, self esteem self identification that will help them to resist peer pressure and be aware of who they are, at the same time raising awareness about all social problems including substance abuse, HIV and AIDS, etc. This task must be divided among all the helping professions
 - Recreational facilities to be developed and equipped with resources that will be able to attract children from the streets, e.g. gym, soccer fields, swimming pools, etc.

BIBLIOGRAPHY:

- Babbie, E. and Mouton, J. (2001) The practice of social research, Cape Town, Oxford University Press
- Babbie, E. and Mouton, J. (2007) The practice of Social Research, South African (ed), South Africa, Oxford University Press
- Babbie, E. and Mouton, J. (2008) The practice of Social Research, South African (ed), South Africa, Oxford University Press
- Bezuidenhout, C. and Joubert S. (2003) Child and Youth misbehaviour in South Africa. Pretoria. Van Schaik
- Brink, H. (1996) Fundamentals of research methodology for the health care professionals. Kenwyn: Juta
- Brook, J. S., Morojele, N. K., Brook, D. W. (2006) Predictors of Drug use among South African Adolescents, Journal of Adolescents Health, 38(1): 26 -34
- Buddy, T. (2004) Guide to Alcoholism and Substance abuse: Available at <http://alcoholism.about.com/cs/drugs.com>. (Accessed: 14.04.2008)
- Burnhams, N.H., Fakier, N., Myers, B., Cerff, P.(2008) Computerised Substance abuse Surveillance System The Alcohol and Drug Abuse Research Unit, Medical Research council, Cape Town
- The National Programme of Action for children in South Africa (2001) Children in 2001, A report on the state of the Nation's children. The Presidency. South Africa
- Creswell, J.W. (2003) Research Design: Qualitative and Quantitative and Mixed Methods Approaches, London, SAGE.
- Creswell, J.W. (2009) Research Design: Qualitative and Quantitative and Mixed Methods Approaches, London, SAGE.
- Denzin, N.K. and Lincoln, Y.S.(Ed) 1998. The landscape of qualitative research: theories and issues. Thousand oaks: Sage Publications, Inc
- Denzin, N.K. and Lincoln, Y.S.(Ed) 2000. The landscape of qualitative research: theories and issues. Thousand oaks: Sage Publications, Inc
- De Vaus. D. 2001. Research design in Social Research. London: Sage Publications
- Department of Health (2003) Draft Policy Guidelines for Adolescent and Youth Health. Pretoria.

Department of Social Development, Athlone District, Cape Town, Langa Service Point, Intake: 2008

De Vos A.S., Strydom, H., Fouche', C.B., Delpont, C.S.L. (2002) Research at Grassroots: For the Social Science and Human service professional, 2nd (ed) Pretoria, Van Schaik Publication

De Vos A.S., Strydom, H., Fouche', C.B., Delpont, C.S.L. (2005) Research at Grassroots: For the Social Science and Human service professional, 2nd (ed) Pretoria, Van Schaik Publication

De Vos, A. S., Strydom, H., Fouche, C.B., Delpont, C.S.L. (2007) Research at grass roots: For the Social Science and Human Service Professions 3rd edition Pretoria, Van Schaik.

Diagnostic and Statistical Manual of Mental Disorders fourth edition (1994), Amer Psychiatric Pub Inc.

Ezzy, D. (2002) Qualitative analysis: practice and innovation. London: Routledge

Holliday, A. (2002) Doing and writing qualitative research. London. Sage Publications, Ltd
Holloway and Wheeler

Fields, R. (2001) Drugs in Perspective: A Personalised look at substance use and abuse, New York, McGraw –Hill publishers

Fisher, G. L. and Harrison T. C. (2000) Substance abuse: Information for School Counselors, Social workers, Therapists and Counselors, London, Allyn and Bacon Publishers

Flick, U, (2002) An introduction to qualitative research, London, SAGE Publications

Flisher, AJ; Ziervogel, C.F., Chalton, D.O.; Robertson, B.A.(1993) Risk taking behaviour of Cape Peninsula students. South African Medical Journal Vol. 83, No. 7, 469 –497

Flisher, A. J., Parry, C. D. H., Evans, J., Muller, M., Lombard, C. (2003) Substance abuse by adolescents in Cape Town: Prevalence and correatates, Journal of Adolescents, 32, 58-65, Alcohol and Drug Abuse Unit, MRC, Pretoria

Frosh, S., Phoenix, A., Pattman, R. (2002) Young Masculinity: Understanding boys in Contemporary Society, New York, Palgrave.

Geldard , K. and Geldard, D. (1999) Counselling adolescents, London, SAGE

Gwinnell, E. and Adamec, C. (2006) The Encyclopaedia of Addictions and Addictive Behaviours, New York, Facts on File. Inc

Hammel, K.W. (2002) Informing client centred practice through qualitative inquiry: Evaluating the quality of qualitative research. British Journal of Occupation Therapy, 65(4): 175 184 [in Hammel, Carpenter, Harris, 2004]

- Hammell, K.W., Carpenter, C.; Harris, S.R. (2004) Qualitative Research in Evidence- based Rehabilitation, London, Churchill Livingstone/ Elsevier LTD.
- Holloway. I. and Wheeler, S. (2002) Qualitative Research in Nursing, Oxford, Blackwell Publishers
- Kane, E and O'Reilly- de Brun (2001) Doing your own research, London, Boyars
- Kibel, M.A. and Wagstaff, L.A. (2001) Child Health for all: A manual for Southern Africa 3rd (ed), Cape town, Oxford University Press
- King, g., Flisher, A. J., Noubary, F., Reece, R., Lombard, C.(2004) Substance abuse and behavioural correlates of sexual assault among South African adolescents, Child Abuse and Neglect, Volume 28, 683 -696
- Kirkpatrick, B. (1998) The Oxford College Thesaurus: In clear A- Z form, Oxford, University of oxford
- Ljubotina, D., Galic, J., Jukic, V. (2004) Prevalence and risk factors of substance use among urban adolescent: A questionnaire study, Department of Psychology, Zagreb University Faculty of Philosophy: and Vrapce Hospital, Zagreb University school of Medicine, Zagreb, Croatia
- Mayring, P. (2000) Qualitative content analysis. Forum. Qualitative Social Research, [available on line]: <http://www.qualitative-research.net/fqs-texte/2-00mayring-e.htm>: (accessed 16/04/2008)
- Merriam, S.B. and Associates (2002) Qualitative Research in Practice: Examples for Discussion and Analysis, San Francisco, Jossey- Bass, A Wiley Co
- Marvasti, A. B. (2004) Qualitative research in Sociology, London, SAGE
- Morejele, N.K., Brook, J.S.: Addictive Behaviours (2006) 31, 1163 –1176, Alcohol and Drug Abuse Research Unit, Medical Research Council, Pretoria, South Africa
- Morojele, N. K., Brook, J. S. (2005) Substance Abuse and Multiple Victimization among adolescents in South Africa: Alcohol and Drug Abuse Unit, Medical Research Council, Pretoria, South Africa
- Morgan, DL 1997. Focus groups in qualitative research. Second Edition. California: Thousand Oaks Publishers
- National Programme of Action For Children in South Africa (2001) Children in 2001: A Report on the State of the Nation's Children. The Presidency. South Africa

- Neuman, W.L. 2000. Social Research methods. Qualitative and quantitative approaches. 4th edition. Boston. Allyn & Bacon
- Nicholas, L.(2004) Introduction to Psychology, Landsdowne, UCT Press
- Parry, C.H.D., (2004) A review of Policy, relevant strategies and interventions to address the burden of alcohol on individuals and society in South Africa: South African Psychiatry Review 8.P20 -24
- Parry, C.H. D., Myers, B., Morojele, N. K., Flisher, A. J., Bhana, A., Donson, H. and Pluddermann, A. (2004) Trends in alcohol and other drug use: findings from three sentinel sites in South Africa (1997- 2001) Journal of Adolescence, 27, 429- 40
- Pham –Kanter, G. (2001) Substance Abuse and Dependence. The Gale Encyclopedia of Medicine, 2nd (ed) Jacqueline L. Lange Ed 5 Vols. Farmington Hills, MI, Gale Group
- Pluddermann, A., Flisher, A. J., Matthews, C., Carney, T., Lombard, C. (2007) Risk behaviour in secondary schools in Cape Town. Drug and Alcohol Review 2008.
- Ritchie, J and Lewis J, (2003) Qualitative Research Practice: A guide for Social Science Students and Researchers, London, SAGE
- Rubin, A. and Babbie, E (2001) Research Methods for Social Work, 4th(ed) Belmont, CA: Wadsworth
- Saluja, B. S., Grover, S., Tvpati, A. S., Mattoo, K.S., Bash, D. (2005) Drug dependence in adolescents 1978 -2003, A clinically -based observation from north India, Drug De- Addiction and treatment centre, Department of Psychiatry, Institute of Medicine Education and Research, Chandighv, India
- Sewell, M. (2001) The use of qualitative interview in Evaluation, Available at <http://arizona.edu/fcr/fs/cyfar/intervu> , Accessed on the 23/05/2008.
- Shaw, I. and Gould, N. (2002) Qualitative research in Social Work: Introduction to Qualitative Methods, London, SAGE Publication
- Staton, M., Leukefeld, C., Logan, T.K., Zimmerman, R., Lynam, D., Milich, R.,Martin, C., MacClanahan, K., Clauton, R. (1999) Risky sex Behavior And Substance Use Among Young Adults, Health& social work, May (1999) Vol. 24 (2) 147 –148 available at UWC EBSCOHOST DATABASES
- Silverman, D. (2002) Interpreting qualitative data: methods for analyzing talk, text and interaction. Second Editin. London: Sage Publications, Ltd

- Sussman S., and Ames, S.L. (2001) The Social Psychology of Drug abuse: Applying Social Psychology, USA, Open University Press
- Taylor, M., Jinabhai, C. C., Kleinschmidt, I., Dlamini, S. B. (2003) An epidemiological perspective of substance use among high school pupils in rural Kwazulu- Natal, Department of community Health, N. R. Mandela school of Medicine, University of Natal, Durban, Volume 93, No. 2 South African Medical Journal
- Terblanche, (1999) Risk- taking Behavior of High School learners in Port Elizabeth, Port Elizabeth, University of Port Elizabeth, Unpublished
- Townsend, L., Flisher, A.J., King, G. (2007) A systematic review of the relationship between High school dropouts and substance abuse, Clinical Child and Family Psychology, Vol. 10 No. 4 12/07/2007
- Way, N., Chu, J.J., Kimmel, K. (2004) Adolescent Boys: Diverse Cultural boyhood, New York, New York University Press.
- Wikipedia: the free encyclopedia, the History of the Langa Township, Cape Town, available at: <http://en.wikipedia.org/wiki/langa,-cape-town> [accessed: 19/10/2009]
- Wilkinson, D. and Birmingham, P. (2003) Using Instruments: A guide for Researchers, London, Routledge –Falmer Publishers
- World Health Organization (2002), World Health Report 2002, Geneva
www.thefredictionary.com/substances [accessed 08/11/2009]
www.answers.com/topic/substance [accessed 08/11/2009]
- Xhameni, N. N. (2008) Siyaphambili Orphanage Reports, Langa, Cape Town
- Ziervogel, C. F., Morjele, N., Van der Riet, J., Parry, C., Robertson, B. (1998) A Qualitative Investigation of Adolescent Drinking among male High School Students from three Communities in the Cape Peninsula, South Africa, International Quarterly of Community Health

ANNEXURE A

Interview Guide

Perception of boys regarding substance abuse amongst adolescents

Questionnaire

Identifying information

Name:.....

Date of birth:.....

Home language:.....

Religion:.....

Are you studying:.....

What grade are you in:.....

How do you do at school:.....



Substance abuse

The following questions are about substances and substance abuse. Everything you say will remain in complete confidence.

The potential interview guide is as follows:

- What is alcohol and drugs abuse? / Yintoni ukuxhatshazwa kotywala neziyobisi?
- Why do you think adolescents drink and use drugs? / Ucinga ukuba kutheni amakhwenkwe namantombozana esela utywala esebenzisa neziyobisi?
- Tell me what you know about substance abuse amongst adolescents? / Ndixelele ukuba wazi ntoni ngokuxhatshazwa kweziyobisi ngamakhwenkwe namantombozana?
- How do you feel about adolescents who abuse substances? / Uziva njani ngamakhwenkwe namantombozana lawo axhaphaza iziyobisi?
- What happens to adolescents who abuse substances? / Kwenzeka ntoni ngamakhwenkwe namantombozana lawo axhaphaza iziyobisi?

- How can we help adolescents who abuse substances? / Singawanceda njani amakhwenkwe namantombozana axhaphaza iziyobisi?

Thank you very much for your cooperation. I really enjoyed talking to you and you were very helpful. Everything we spoke about will remain confidential as promised.

The Researcher



ANNEXURE B

Letter of invitation to the Child and Youth Care Centre

For Attention:

I am a social worker interested in studying the perceptions of adolescents with regard to substance abuse among their counterparts. I am doing this study under the guidance of the University of the Western Cape (UWC). (Masters student, registered at UWC).

My topic of interest is: **The perceptions of boys regarding substance abuse among adolescents.**

You are hereby invited as a gate keeper who has the authority to the possible access to participants. This study will inform the Department of Social Development on how to enhance service delivery. Your centre was chosen to assist me in this study as you host support groups for about 180 orphans and vulnerable children in the Langa area. I also believe that they possess the necessary knowledge to voice out their perceptions with regard to substance abuse among adolescents.

Criteria for inclusion in the study:

- Boys between the ages of 15 and 18 in their adolescence stage
- Xhosa speaking, who attend support groups in Langa, Cape Town

All the information needed to explain how the study works will be shared with you in our meeting parents and guardians of participants. All the information gathered during the interviews with participants will be kept anonymous and confidential.

Participation is voluntary. Participants and their parents or guardians will be requested to complete the consent forms.

Should you need more clarity on the above information, you are welcome to contact me.

Thank you,

ANNEXURE C

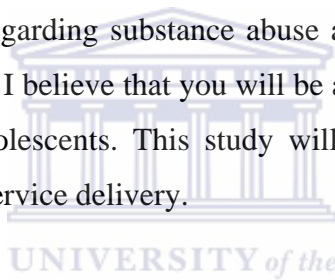
Letter of invitation to participants

For Attention:

I am a Social Worker interested in studying the perceptions of adolescents with regard to substance abuse among their counterparts. I am doing this study under the guidance of the University of the Western Cape (UWC). (Masters student, registered at UWC)

My topic of interest is: **The perceptions of boys regarding substance abuse among adolescents.**

You are hereby invited as the participant to assist me in this study. The purpose of this study is to explore the perceptions of boys regarding substance abuse among adolescents. You have been chosen to assist me in this study as I believe that you will be able to provide me with information about substance abuse among adolescents. This study will inform the Department of Social Development on how to enhance service delivery.



All the information needed to explain how the study works will be shared with you in our meeting with other volunteer participants. All the information gathered during the interviews with participants will be kept anonymous and confidential.

Participation is voluntary. You and your parent(s) or guardian(s) will be requested to complete the consent forms. As you will be participating out of your own free will, you may decide to withdraw from the study at any time without anything held against you.

Should you need more clarity on the above information, you are welcome to contact me.

Thank you,

ANNEXURE D

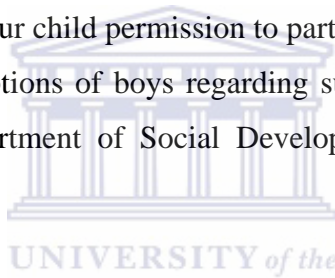
Letter of invitation to parent or guardians of participants

For Attention:

I am a social worker interested in studying the perceptions of adolescents with regard to substance abuse among their counterparts. I am doing this study under the guidance of the University of the Western Cape (UWC). (Masters student, registered at UWC).

My topic of interest is: **The perceptions of boys regarding substance abuse among adolescents.**

You are hereby invited as the parent or guardian to assist me in this study. You are humbly requested to assist me by giving your child permission to participate in this study. The purpose of this study is to explore the perceptions of boys regarding substance abuse among adolescents. This study will inform the Department of Social Development on how to enhance service delivery.



All the information needed to explain how the study works will be shared with you in our meeting with other guardians and parents. All the information gathered during the interviews with participants will be kept anonymous and confidential.

Participation is voluntary. You and your child will be requested to complete the consent forms. As your child will be participating out of his own free will, he may decide to withdraw from the study at any time without anything held against him.

Should you need more clarity on the above information, you are welcome to contact me.

Thank you,

ANNEXURE E

Perceptions of boys regarding substance abuse amongst adolescents

The study has been explained to me - the parent/guardian in English/Xhosa. I was given the opportunity to ask questions and all these questions were answered to my satisfaction.

I hereby give my consent for my child -----to participate in the study.

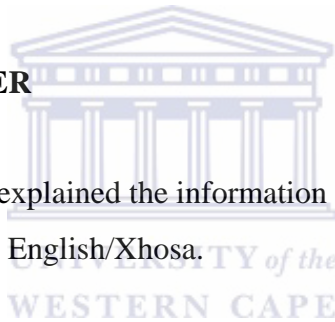
Signed at _____(Place) on _____ (date)

Signature of parent/guardian

___/___/___
Date

STATEMENT BY RESEARCHER

I the researcher declare that I have explained the information on the study to the parent/guardian.
The conversation was conducted in English/Xhosa.



Signature of researcher

Date: _____

Proof of consent for participation in the study

{To be signed by the participants below the age of 18yrs. This form will be accompanied by a signed parental/guardian consent form}

Title of the Study: **The perceptions of boys regarding substance abuse amongst adolescents**

I.....hereby acknowledge that the researcher has discussed with me all the aspects of the study, its purpose and how it will be carried out. I understand the purpose of the study and confirm that I have been allowed adequate opportunity to ask questions where I did not understand. The decision to participate in the study is solely my own.

This research project involves making audiotapes of you. The audiotapes will help the researcher to capture all the information, as it will be difficult for the researcher to capture all the information during the interview process. Only the researcher, the supervisor and the research coordinator will have access to the audiotapes.

-----I agree to audio taped during my participation in this study.

-----I do not agree to be audio taped during my participation in this study.

By signing my name I agree to participate in the study. I know and understand that my participation is entirely voluntary and that I may choose to withdraw at anytime without prejudice or penalties.

I have had the study explained to me and I am willing to participate on my own free will.

Signature of the participant.....

Date:.....

Signature of Witness.....

Date:.....

Signature of Researcher.....

Date:.....