# Impact of socio-cultural practices on substance abuse amongst the rural youth: Towards the development of a school-based intervention programme

By

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# DECLARATION

I, Mabasa Matimba Allan declare that the study of the **Impact of socio-cultural practices towards substance abuse amongst the rural youth: Development of a school-based intervention programme** is my work in origin. All the sources that I have used or quoted herein have been indicated and acknowledged by means of complete references. This work has not been submitted before for any degree at any other institution.

Mabasa Matimba Allan

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Signature                                                                        Date

# DEDICATION

This study is dedicated to my family members who have never failed to give me emotional and moral support throughout the study. I also dedicate the study to my current employer, the University of Venda for the support. I also dedicate this work to my supervisor and the National Institute for the Humanities and Social Sciences for giving me the scholarship.

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- To my participants who took part in this study.

# GLOSSARY TERMS

The glossary of terms defines and contextualises the *Xitsonga* terms used to define the existing socio-cultural practices and events in rural areas of Malamulele*.* These terms are defined as follows:

- *"Hambanani"* - This word refers to doing away with or leaving something. In the context of the study, this literally means doing away with the use and abuse of substances such as drugs and alcohol.

- "*Makhwaya*"- Is a dance performed by young boys. The dancers bow their heads and use their hands and legs to dance.

- *"Nhluvulo"*- This is an unveiling ceremony in remembrance of someone who has died in the family a year ago. In this kind of ceremony, relatives, friends and people of the community celebrate the life of a deceased person by drinking liquor, giving the mourner clothes, furniture and money.

- *"Van'waswimanimani"*- This refers to when women from one extended family meet to conduct a stokvel of money alternatively within the extended family. Most of the extended families practise this every month. Due to plenty of extended families, this happens almost every weekend. During the function, money is paid to the family visited; they eat, drink liquor and dance as a way of celebration.

- *"Vukhomba"*- In *Xitsonga* culture, girls are made to attend initiation schools as a passage to adulthood. The main aim of attending this school is to cultivate courage, endurance, perseverance and obedience among the young girls and to prepare them for marriage.

- *"Xibelani"*- This is used interchangeably as a skirt and as a type of female dance where women wear it and shake their waists. This type of a dance is performed with the aid of musical instruments.*"Xigubu"*- It is a dance performed by young men. The real name for this dance is *"Xincayincayi";* the name "*Xigubu"* comes from the big western drum that is used when dancing it. Hence, sometimes the word "*Xigubu"* is used to refer to a traditional drum used when performing "*Xigubu"* dance. This type of dance is performed during "*Xitsonga"* cultural

functions such as graduation of "*Vukhomba*" and "*Ngoma*" for girls and boys, respectively.

- *"Xiseveseve"*- This word can be literally translated to mean friendship. Friends, especially women, form friendship groups where they buy each other clothes and furniture as a way of promoting their friendship. During the function, where these goods are exchanged, they eat, drink alcohol and dance as a way of celebration.

# LIST OF ACRONYMS

**AIDS**- Acquired Immune Deficiency Syndrome

**APA**- American Psychological Association

**CASA**- Center on Addiction and Substance Abuse

**CCR**- Commission on Children at Risk

**DCS**- Department of Correctional Services

**DOE**- Department of Education

**DOH**- Department of Health

**DSD**- Department of Social Development

**DSM-IV-TR**- Diagnostic and Statistical Manual of Mental Disorders (*Text Revision*)

**EU**- European Union

**FGD**- Focus Group Discussions

**HIV**- Human Immune Virus

**MCLP**- Mesocorticolimbic Dopamine Pathway

**NYPSA**- National Youth Policy in South Africa

**RSA**- Republic of South Africa

**SAPS**- South African Police Service

**SGB**- School Governing Bodies

**SPSS**- Statistical Package for the Social Sciences

**Stats SA**- Statistics South Africa

**STI's**- Sexual Transmitted Infections

**TCA**- Thematic Content Analysis

**TREC**- University of Limpopo Turfloop Research and Ethics Committee

**UL**- University of Limpopo

**UN**- United Nations

**UNCNDPD-** The United Nations Commission on Narcotic Drugs Political Declaration

**UNAIDS**- The Joint United Nations Programme on HIV and AIDS

**UNODC**- United Nations Office on Drugs and Crime

**WHO-** World Health Organization

# TABLE OF CONTENTS

# LIST OF TABLES

# LIST OF FIGURES

# ABSTRACT

The scourge of substance abuse globally amongst the youth today is probably one of the most talked about risky health behaviours in history, and is increasing at an alarming rate. Socio-cultural practices contribute towards the use and abuse of substances by the youth in rural areas. The "*Ke Moja*" programme that dealt with youth substance abuse was rarely received in these areas. The researcher sought to study the impact of socio-cultural practices towards substance abuse amongst the youth to develop a school-based intervention programme. The researcher's research methodology included a mixed methodological approach that is, exploratory-descriptive design. Stratified-systematic and purposive sampling methods were used to draw a sample from learners, educators, social workers and SGB members. The data collection methods employed was semi-structured interview schedule and questionnaires. Data was analysed using thematic analysis. The results reveal that alcohol and drugs serve as agents of socialisation in socio-cultural events. It was found that there are different types of traditional home-brewed beers that the youth abuse almost daily because they are cheap, easily accessible and available. The findings also reveal that socio-cultural events contribute towards substance abuse in rural areas. The study reveals that socio-cultural events take place almost every weekend where the youth use substaces as agents of socialisation. The findings reveal that the need for socio-culturally appropriate substance abuse prevention programmes amongst the youth is important in rural areas. The programme is called *"Hambanani"* which literally means doing away with the use and abuse of substances. The researcher concludes that socio-cultural practices contribute towards the abuse of substances by the youth in rural areas. The researcher recommends that social workers implement a school-based intervention programme on the impact of socio-cultural practices towards substance abuse amongst the rural youth.

**Key words:** Socio-cultural practices**,** Intervention programme, School-based, Substance abuse, and The youth**.**

# CHAPTER ONE

# GENERAL ORIENTATION OF THE STUDY

## 1.1 Introduction and Background

This chapter gives general orientation of the study that explored and described the impact of socio-cultural practices on substance abuse amongst the rural youth towards the development of a school-based intervention programme. The scourge of substance abuse amongst the youth today is probably one of the most talked about risky health behaviours in history and is increasing at an alarming rate globally. Socio-cultural practices have been found to be contributing towards the use, misuse and abuse of substances by the youth. Abisiubong, Idung, Udoh and Ekanem (2012:10), who assert that the majority of the youth in rural areas are becoming increasingly vulnerable to substance abuse due to socio-economic changes and the prevailing socio-cultural practices, confirm this. This abuse happens because substances are readily availability, accessibility and affordability. A similar study in India found that 40% of the youth at the age of 18 years in rural areas are at risk of substance abuse due to socio-cultural practices (Jiloha, 2009:167). Jiloha (2009:167) also asserts that the "Indian society, which enjoys cultural diversity, has a history of use of plant products, namely, cannabis sativa, opium, and home-brewed alcohol beverages within a defined socio-cultural framework over five millennia".

In South Africa, substance abuse has been reported to be on the increase among young people (Chiroro, Mlambo, Magongoa & Combrinck, 2012:11). Reddy, James, Sewpaul, Koopman, Fumani and Sifunda (2010:2) assert that in South Africa, the prevalence rate of alcohol abuse amongst school learners ranges from 22% to 26%. This is also supported by reports that substance abuse in South Africa in a national survey conducted in 2008 amongst the youth increased from 2.2 million users in 2004 to 3.2 million by 2008, with cocaine use increasing by an estimated 20% (Chiroro *et al.*, 2012:11). The most commonly abused substances by the youth in Limpopo Province are cannabis (49%), inhalants (39%), bottled wine (32%), home-brewed beer (30%) and

commercially brewed beer (54.8%) (Department of Social Development & University of Limpopo, 2013:16). In the 2009 Parliamentary Budget Vote Speech, the Deputy Minister of Social Development noted that the debutant substance abuse age has, in recent years, fallen to 9-10 years in spite of the "*Ke Moja*" programme being rolled out in schools to prevent the abuse of substances to school learners.

With regard to substance abuse prevention and treatment, focus has been on urban and metropolitan areas neglecting rural and under-developed areas. During socio-cultural events, various types of traditionally home-brewed beverages are abused mostly in these events by the youth in rural areas. Specifically, in Mopani District of Limpopo Province, the youth are increasingly indulging in the abuse of substances due to socio-cultural practices and connotations (Makhubele, 2012:23-24). The types of substances that are abused in rural areas are home-brewed beers such as *"mporosi, chibuku, ndzi ta ku nyisa, xikwembu ndzi teki"* (Makhubele, 2012:23). The nature of substances used by youth is cannabis, cigarettes, inhalants, and commercial brewed beers (Van Wyk, Kleintjes, Ramlagan & Peltzer, 2007:341). The common substances that have emerged recently include Nyaope, Taiwan and khilibidi (DSD & UL, 2013:14). The study looking at the nature of substances used and abused in the rural settings is paramount. Having a study looking at the types of substnces abused in rural areas assisted the researcher to develop a school-based intervention programme focusing on the impacts of socio-cultural practices towards substance abuse amongst the youth in rural areas. The extent to which the youth abuse substances is motivated by the need to relieve stress, to pass time, to socialise, to enhance their confidence, to serve as a sexual stimulant, and addiction (Pitso, 2007:89). The motives of drinking home-made alcohol beverages results in school dropout and binge drinking amongst the youth in rural areas (Makhubele, 2012:24). Mokgwadi (2011:481) also found that young people enjoy when there is entertainment during the socio-cultural events in which they unwittingly engage in substance abuse. These socio-cultural practices serve as agents of socialisation. Makhubele (2012:24) enshrines that young people who struggle with the negative effects of social exclusion turn to continouos homemade alcohol consumption to mitigate the discomfort and sense of helplessness they feel. Home-

brewed consumption of alcohol in rural areas is an alternative to address problems of social exclusion (Makhubele, 2012:24). Makhubele (2011:1) outlines that there is a dearth of research that has explored home-made alcohol misuse and abuse as well as its impacts in rural areas of South Africa, particularly in Limpopo Province.

The government of the Republic of South Africa has introduced programmes to address various social ills as per identified need. Similarly, programmes of prevention and treatment such as the "*Ke Moja*" that deal with youth substance abuse are mostly offered in urban and peri-urban areas, with rural areas rarely receiving the services (Chiroro *et al*., 2012:21), which makes the "*Ke Moja*" appropriateness questionable to respond suitably to contextual issues that the youth are grappling with regarding substance abuse in rural areas. Khosa, Dube, and Nkomo (2017:70) stipulate that there was a lack of consistency in terms of the implementation of the programme *"Ke Moja"* programme across schools. The challenge of implementing the *"Ke moja"* programme is lack of ownership by community members and young people affected by the abuse of substances (Khosa *et al.,* 2017:80). Abikoye and Olley (2012:1) indicate that efforts by researchers, policy makers and other stakeholders to bring about significant reductions in substance use among the youth appears not to be yielding desired results, as the problem of hazardous drinking among the youth has persisted. One possible problem is that studies and policies on alcohol have not adequately situated the problem within relevant social contexts (Abikoye & Olley, 2012:1). The researcher is of the view that the implementation of programmes, studies conducted, policies made and stakeholder's collaborations on substance abuse amongst the youth have not adequately situated the problem within relevant rural social contexts. Nhlapo, Himonga, Maithufi, Weeks, Mofokeng, and Ndima (2014:30) enunciate that government has no ability to determine completely the ways in which rural people live with their circumstances.

## 1.2 Motivation of the Study

The motivation for undertaking the study was the personal experience about working as a social worker in low-resourced communities in Malamulele*,* where young people are influenced by contextual socio-cultural factors towards substance abuse. While working

as a social worker in Malamulele rural areas, the researcher observed that socio-cultural practices are major contributing factors towards substance abuse amongst the youth. The need for socio-culturally appropriate substance abuse prevention programmes amongst the youth is important in rural areas (Aguilera & Plasencia, 2005:299). Intervention programmes should be contextualised to respond to substance abuse in these areas. Weyers (2011:15) asserts that in order to deal effectively with impediments such as substance abuse, professionals must have a clear picture of the community and broader contexts within which it exists. De Vos (2002:29) is of the view that people's behaviour becomes meaningful and understandable when placed in the context of their lives. Makhubele (2012:24) contended that without understanding people's social context, there is little possibility of exploring the meaning of an experience. Consequently, these socio-cultural issues cannot be left unattended to or neglected. The researcher undertook the study on influences of socio-cultural practices towards substance abuse amongst the youth in order to develop a school-based intervention programme.

DSD and UL (2013:20) alluded to that youth substance misuse and abuse is a major problem worldwide. Increasing youth indulgence in substance use and abuse is a major threat to family stability, social security and national development (DSD & UL, 2013:20). Currently, use and abuse of drugs have transformed from the traditional custom involving adults, to a stage where the youth are also involved as the ages of users and abusers range from 09 to 80 years (DSD & UL, 2013:20). The early inception of substance use and/or abuse nine years indicates the potential danger substances pose to the youth and society at large (DSD & UL, 2013:20). Shisana *et al.*, (2009:20) shows that in South Africa 2.3% of the urban population and 1% of the rural population use cannabis. In Nigeria the current prevalence of alcohol use is 23.7% among the younger age group (Lasebikan & Ola, 2016:1). South Africans addicted to cannabis account for 19.9% of all patients undergoing treatment at drug rehabilitation centres (Khosa *et al.*, 2017:75). Shisana *et al.*, (2009:3) indicates that the Youth Risk and Behaviour Survey (YRBS) revealed the use of cannabis at a rate of 9% by school-age children. Khosa *et al.*, (2017:76) mentions that statistics on substance abuse in South Africa prior to the

implementation of the *"Ke-Moja"* programme clearly shows substance abuse among teenagers has spiralled out of control, with one in two school children having already experimented with drugs and alcohol. In South Africa, substance abuse by primary and secondary school learners is growing concern attributed to a number of factors emanating from the family, school, community, society and individuals (Khosa *et al.*, 2017:71).

Although the *"Ke moja"* programme rolled knowledge to learners about the consequences of substance abuse, there is no module which covers how they can avoid being involved in substance abuse because there are a number of factors which contribute to young people abusing substances (Khosa *et al.*, 2017:72). Therefore, it is of utmost important to have a school-based programme looking at addressing the impacts of socio-cultural factors towards substance abuse amongst the youth. Yet, the Prevention of and Treatment for Substance Abuse Act 70 of 2008 provides for the establishment of programmes in the prevention and treatment of substance abuse. Therefore, to have a programme that responds to the impacts of socio-cultural practices towards substbace abuse amongst the rural youth is of utmost and paramount importance. The United Nations Commission on Narcotic Drugs Political Declaration (2014:5) indicates that substance abuse affects the freedom and the development of young people who are the world's most valuable asset.

## 1.3 Operationalisation of Key Terms

The operationalisation of key terms was crucial in order for the researcher to specify the concepts studied to decide on the measurement operations (Babbie & Mouton, 2001:100). The necessity of the operationalisation of key terms permitted the researcher to clarify the meaning of concepts in order to draw meaningful conclusions about the study (Babbie & Mouton, 2001:99). In this study, the researcher operationalised all the concepts and terms in advance to ease the focus areas of the research. De Vos, Strydom, Fouche and Delport (2005:29) assert that the operationalisation of terms permitted the researcher to express an abstraction formed by generalisation from subjective aspects of manifested observation of behaviour in the

society studied. The operational definitions in this study allowed the researcher to identify indicators, specific events and phenomena that truthfully represented the abstract of the research (De Vos *et al.*, 2005:33). In this study, the operational definitions assisted the researcher to link the concepts with clearly identifiable objects and subjects as well as the theoretical frameworks in the social world (De Vos *et al.*, 2005:33).

**The following key concepts have been operationalised for the purpose of this study:**

## 1.3.1 Socio-cultural practices

In the context of this study, socio-cultural practices refer to *"vukhomba", "xigubu", "xiseveseve", "van'waswimanimani", "makwaya", and "xibelani",* which take place in rural areas. Scott and Palincsar (2006:1) refer to socio-cultural practices as related to socio-cultural theory to explain how people's mental functioning relates to their social, cultural, institutional and historical contexts. The socio-cultural standpoint plays a role in participating in social interactions and culturally organised activities that influence the cognitive development and behaviour of the people (Scott & Palincsar, 2006:01). This was drawn from Lev Vygotsky's work of socio-cultural theory, which describes human learning as a social process and the origin of human intelligence in society and culture. Vygotsky believed everything is learned on two levels, through interaction with others socially and culturally and then integrated into the person's mental structure. For instance, every function in the human being's cultural development appears twice at social and individual levels (Vygotsky, 1978:57).

## 1.3.2 Intervention programme

In this study, an intervention programme refers to a systematic plan of action undertaken by the researcher in partnership with the youth affected by the impact of socio-cultural practices towards substance abuse to enhance their well-being in rural areas. Intervention is a professional behaviour of a social worker to bring about change in the person-environment situation in order to achieve the objectives of the agreement of cooperation (contract) entered into with the client (New Dictionary of Social Work,

1995:35). Intervention is an applied action taken by a social worker or other helping agent, usually in concert with a client or other affected party, to enhance or maintain the functioning and well-being of an individual, family, group, community or population (Cozby, 2009:205). Programme is any set of organized activities supported by a set of resources to achieve a specific and intended resul (Scriven, 1998:57).

### 1.3.3 School-based

School-based is the decentralisation of services from the authority of the central government, community and families to the school settings (Caldwell, 2005:13). The term school-based is understood as a mental health service for excessive use of substances delivered in a school setting for learners. This term was used by the researcher to refer to youth substance abuse prevention and early intervention programme meant for secondary school learners delivered in a school setting.

### 1.3.4 Substance abuse

The term "substance abuse" was used by the researcher in this study to refer to the maladaptive pattern of recurrent abuse of drugs and alcohol by high school the youth in rural areas (White, 2007:02). Substance abuse refers to the improper, excessive, irresponsible, or self-damaging use of addictive substances (Visser & Routledge, 2007:596). The Diagnostic and Statistical Manual of Mental Disorders (DSM-IV-TR) (APA, 2000:199) defines substance abuse as a maladaptive pattern of substance use leading to clinically significant impairment or distress, manifested through one or more of the following symptom within a 12-month period: recurrent substance use in situations that cause physical danger to the user, or in the face of obvious impairment in school or work situations. Again, substance abuse refers to any ingredient that, when taken by a person, modifies perception, mood, cognition, behaviour, or motor functions (APA, 2000:198). Substance abuse is defined as the overindulgence of substances such as drugs and alcohol amongst primary and secondary school learners in such a way that their functioning is affected and consequently results in various social and health problems (Khosa *et al*., 2017:73). The term "substance abuse" was used by the

researcher to refer to the excessive use of drugs and alcohol which can lead to addiction amongst the youth.

## 1.3.5 The youth

There are different ways of defining the youth specifically with the age groups. Youth refers to the state of being young, particularly with that phase oflife between childhood and adulthood (Spence, 2005:4). Nandigiri (2012:114) asserts that the United Nations defines the youth as those between 15 and 24 years of age. National Youth Policy in South Africa (NYPSA) defines the youth as those between the ages of 14 and 35 years. Nugent (2006:2) defines the youth as the people between the ages of 10 and 24. Youth refers to the interim social status between childhood and adulthood which also includes adolescence (Hartinger-Saunders, 2008:92). The youth is a separate group of people requiring special attention to their needs as they move away from the critical developmental period of adolescence (Siegel & Welsh, 2005:23). National Youth Development Agency (NYDA) Act 54 of 2008 defines youth as persons between the ages of 14 and 35 years. The term youth in the study was used by the researcher to refer to school learners between the ages of 14 to 24 years schooling in the rural areas.

## 1.4 Research Problem

Young people from low socio-economic contexts are at risk of having poorer public health as they are more likely to abuse substances in a high-risk manner and to use illicit drugs (Spooner & Hetherington, 2004:vii). Spooner and Hetherington (2004: vii) assert that broader societal and cultural influences contribute to substance abuse amongst young people in rural areas. Individual risk factors such as social alienation, social support, environmental factors, social cohesion, social exclusion, societal systems and institutions influence the use and abuse of substances. In a study amongst African Americans, socio-cultural factors were found to play a role in the high rate of alcohol abuse and dependence (Butcher, Mineka & Hooley, 2007:425). In another study in India, socio-cultural practices were also found to play a role in the choice of substances abused in rural areas (Jiloha, 2009:167). Furthermore, in the Niger Delta region of Nigeria, the situation is compounded by the prevailing custom that encourages

the presence and abuse of substances in traditional functions and ceremonies (Abasiubong, Idung & Ekanem, 2012:10). In the context of this study, socio-cultural practices refer to ceremonies such as *"vukhomba", "xigubu", "xiseveseve", "van'waswimanimani", "makhwaya" and "xibelani",* which contribute towards substance abuse. The definition of socio-cultural practices in the context of the study refers to social interactions and culturally organised activities influencing the behaviour of the young people which include ceremonies such as "*vukhomba", "xigubu", "xiseveseve", "van'waswimanimani", "makhwaya" and "xibelani"* contributing towards substance abuse in rural areas.

Attempting to change cultural trends and address the negative impact of cultural trends towards substance abuse is challenging, as young people are particularly vulnerable to harm from substance abuse due to culture, customs and values (Spooner & Hetherington, 2004:3). Bobo and Husten (2000:225) assert that socio-cultural events in the rural areas influence the initiation and continued abuse of substances amongst the youth. For instance, parental influence, family structure, peer pressure, role modeling, advertising and promotion, poor socio-economic factors, accessibility, lack of knowledge, negative attitudes and beliefs are problems associated with substance abuse among the youth (Jiloha, 2009:1968). Bobo and Husten (2000:226) states that initiation and continued abuse of substances is perpetuated by peer pressure, family influences, demographics, advertising, economics, and availability of substances. Chiroro *et al.*, (2012:11) argues that substance abuse is primarily a home-based problem which involves parents who are substance abusers. Substance abuse among the youth is boosted by social and cultural attitudes of seeing the use of substances as a norm, and easy accessibility of alcohol and drugs.

Generally, drug abuse research has focused on affluent provinces and metropolis cities with minimum attention being paid to rural provinces (DSD & UL, 2013:14). Chiroro *et al.*, (2012:21) argue that the "*Ke Moja*" programme that dealt with youth substance abuse was mostly received in urban and peri-urban areas, with rural areas rarely receiving the programme. The rare provision of *"Ke moja"* Programme makes its

appropriateness questionable to address the impact of socio-cultural issues towards substance abuse amongst the youth in the rural areas. The research studies and programmes should also include the youth in rural areas. The researcher undertook a study that focuses on youth in the rural areas to develop a school-based intervention programme looking at the impacts of socio-cultural practices towards substance abuse. Lack of credible information has skewed the provision of services on substance abuse with regard to prevention and treatment (DSD & UL, 2013:14). Khosa *et al.*, (2017:71) states that there is lack of tangible evidence on whether the programme has been successful in trying to prevent substance abuse among school learners.

There is no clear school-based intervention programme that specifically addresses the impact of socio-cultural factors of substance abuse amongst the rural youth. In support of this, Farley, Smith and Boyle (2003:324) stated that rural areas are often neglected in health care related planning. In a Report by DSD and UL (2013:20), it is found that reliable objective information on substance use and associated effects, particularly from a rural context, is limited. Traffic accidents, school related problems, risky sexual practices, delinquent behaviour, juvenile crime, developmental problems, physical and mental consequences, infections, violence, future use disorders, drug trafficking and legislation are direct and indirect risk of socio-cultural consequences of youth substance abuse (Jiloha, 2009:170).

One possible problem why substance abuse prevention programme amongst the youth appears not to be effective is that studies and policies on this issue have not adequately situated the problem within relevant socio-cultural contexts (Abikoye & Olley, 2012:1). There is a need for socio-culturally appropriate substance abuse prevention programmes amongst the youth in rural areas (Aguilera & Plasencia, 2005:299). The critical appreciation of social and cultural traditional practices in the intervention of substance abuse can be protective to avoid stereotypical or idyllic views of urban or urban lifestyles, which promote self-protective beliefs and behaviours (Castro & Coe, 2007:783). This study enabled the researcher to close the gap on contextual issues using global research methodologies and theoretical frameworks to create school-based

socio-cultural intervention programme for substance abuse. There is still a need to impart life skills knowledge about how to deal with socio-cultural practices through substance abuse programmes (Chiroro *et al.*, 2012:42). Ajao, Anyanwu and Tshitangano (2014:215) assert that little is known about the knowledge, attitudes and behavioural practices regarding the influences of socio-cultural practices towards substance abuse amongst the youth in rural areas.

## 1.5 Theoretical Frameworks

The theories used in the study were the Ecosystems and Cultural Identity Theories. The first theory was used to achieve and guide the research project. The cultural identity theory was used into cultural issues with regard to the study. The eco-systems theory is a theory that looks at people within their contexts, whereas the cultural identity theory looks at accepting how cultural individual and environmental identities persuade young people to abuse substances.  Theoretical frameworks are tools of structuring thinking and action about a problem to provide a rationale, of justifying decisions and explaining the findings (Kitson, Harvey & McCormack, 1998:19). A theory is a set of ideas or statements that explain a particular social phenomenon (Bless, Higson-Smith & Sithole, 2013:12). It provides the researcher with a backcloth and rationale for the research that was being conducted (Bryman, 2012:20).

Theories in the context of this study enabled the researcher to entice interrelated sets of concepts and propositions which are organised into a logical and empirical system to enlighten relationships about socio-cultural practices towards substance abuse amongst the youth in rural areas. Hutchison (2003:12); and Robbins, Chatterjee and Canda (2005:06) define a theory as an interrelated set of concepts and propositions organized into a deductive system to explain relationships about certain aspects of the world. A theory provides a framework within which a social phenomenon studied is understood and the findings are interpreted (Bryman, 2012:20). A theory enabled the researcher to gather facts about what was systematically observed, advance science and new knowledge (Bless *et al.*, 2013:14). In this study, again the theories allowed the researcher to classify, predict and conceptualize facts. The theoretical frameworks

11

allowed the researcher to point emerging concepts of the study, which were fully explored where theoretical insights were being generated (Bryman, 2012:717). The theories used in this study were discussed as follows:

## 1.5.1 The Ecosystems theory

The Ecosystems theory is an integration of certain fields of study such as system and ecology theories (Meyer, Moore & Viljoen, 2008:467). For the purposes of this study, the ecosystems theory served as the overarching theoretical framework which guided this research project because it enabled the researcher to understand socio-cultural factors that contribute to the escalation of substance abuse. The ecosystems theory is a theoretical framework that guides to understand the person in a situation to bring about the desired change through the appropriate intervention strategy (Ambrosino, Ambrosino, Heffernan & Shuttlesworth, 2008:54). The ecological metaphor helped the researcher as a social work professional to enact the social purpose of the study by helping people and promoting responsive environments that support human growth, health and satisfaction in social functioning (Germain & Gitterman, 1996:5; & Zastrow, 2006:42).

The theory in this study served the researcher with an opportunity to determine how people know and understand the world around them (Meyer *et al.*, 2008:467). This theory also encouraged the researcher to grasp the problem of concern within the situation of the person-in-context, and to contribute to the problem intervention process (Compton, Galaway & Cournoyer, 2005:23). The eco-systems theory assisted the researcher to view young people in context with regard to substance abuse in rural areas. Therefore, contextualising the impact of socio-cultural practices of substance abuse amongst the youth was paramount to enhance the school-based intervention programme. Knowledge of subjective dimension best emerged when the researcher understood the full context in which people behave (Monette, Sillivan, DeJong, & Hilton, 2014:221). Segal, Gerdes and Steiner (2013:132) note that the ecological framework for practice provides a strong foundation for social workers to integrate cultural sensitivity and multiculturalism with all aspects of their environments in order to recognise social,

cultural and experiential differences. This theory focused on the social and cultural factors with regard to behaviour change and learning about the historical traditions, beliefs and values in a particular environment, and how that social and cultural factors influence the individual's behaviour (Keys, MacMahon, Sánchez, London & Abdul-Adil, 2004:177). The ecosystems theory looks at the misfit between the client system and the environment through a social work practice aimed at correcting this condition (Pardeck, 1988:134).

Bronfenbrenner (2005:27) elucidate that ecological systems theory explains how human development is influenced by different types of environmental systems. The ecosystems theory classic rendition is based on four interrelated types of environmental systems such as the micro-system, meso-system, exo-systemic, and macro-system (Bronfenbrenner, 2005:27). The levels of intervention of the ecosystems theory ranges from smaller, proximal settings in which individuals directly interact to larger, distal settings that indirectly influence development (Ettekal & Mahoney, 2017:2). The ecosystems theory aided the research to look at the opportunities and risks associated with how youth spend their discretionary time outside the regular school day as one of the primary settings in which youth spend their out-of-school hours includes extracurricular activities and after-school activities (Ettekal & Mahoney, 2017:2). The ecosystems theory serves as a lens to understand how activities foster positive, healthy development of youth from different backgrounds (Ettekal & Mahoney, 2017:2). In the context of this study, the ecosystems theory supported the researcher to understand the nature of substances used by the youth-in-school and determine how the youth-in-school abuse substances in the socio-cultural events.

The ecosystems framework, with its emphasis on a person's fit in her or his environment, provides a strong theoretical foundation for social work practice that is culturally competent (Segal *et al.*, 2013:132). Segal *et al.*, (2013:132) alluded to that this requires social workers to become aware of cultural diversity and to develop skills for working with people from different cultures. This theory enabled the researcher to focus on cultural differences and practice models to emphasise the need to learn about

environmental factors that have negative effects on the lives of people (Segal *et al.*, 2013:132). The ecosystems theory in the social work practice provides the nature of effective practice towards this study by looking in socio-cultural practices of demanding an open stance on the practitioner to be flexible and willing to modify strategies to fit the needs and situation of the clients (Corey, 2014:27).

The theory incorporates the idea and a perspective which holds that people in a particular context should be seen, studied, interpreted and interacted with through their lifestyles and reality from the vantage point of their context (Gray, 2001:3). Thabede (2008:233) asserts that people in rural areas, more especially Africans, should be viewed from the vantage point of their worldview by defining their realities of social and cultural landscapes. This means that with regard to the impact of socio-cultural practices towards substance abuse, young people should be given an opportunity to define their view of substance use and abuse. Thabede (2008:234) argues for the helping professions and the related social sciences in South Africa to create space for the culture-based epistemologies, such as culture-based ideas of social work intervention. Thabede (2008:234) further state that the helping professions in South Africa should acknowledge the significance of culture in providing social services to the African people.

## 1.5.2 Cultural-Identity theory

In relation to the eco-systems theory, the researcher also applied Cultural Identity Theory to complement the eco-systems theory as the major guiding lens. Cultural Identity Theory is primarily concerned with identity change motivations that characterize late childhood and early adolescence, while individuals are dependent on caretakers and attending primary and secondary school (Kandel 1980:1). The theory outlines that individuals are motivated toward drug-related identity change because of socially defined problems with existing ego identities that they encounter provide an opportunity structure for that change (Anderson 1998:243). The theory permitted the researcher to look at participants' sense of belonging to a particular culture or group which is *Xitsonga* culture involving traditions, heritage, language, religion, ancestry, aesthetics, thinking

14

patterns, and social structures of a culture (Lustig, 2013:48). The theory assisted the researcher to cater the participants' beliefs, values, norms, and social practices of their culture and how they identify themselves with that culture. The theory allowed the researcher to look how socio-cultural events take place and promote the abuse of substances in the rural areas amongst the youth.

The theory offers that substance abuse is an outcome of a drug-related identity change process featuring three micro-level (personal marginalization, ego identity discomfort, and lost control in defining an identity), two meso-level (social marginalization and identification with a drug subcultural group), and three macro-level (economic opportunity, educational opportunity, and popular culture) concepts (Anderson, 1998:233). Anderson (1998:233) contends that the theory seeks to inform substance abuse etiology by understanding how individual (micro) and environmental (meso and macro) phenomena influence the construction of drug-related identities and drug abuse. Cultural-identity theory use a multi-dimensional definition of drug abuse that includes a pattern of regular and heavy use over a significant period. This includes a set of drug-related problems (at work or with interpersonal relationships, one's own health, and formal social control agencies), previous and failed attempts to terminate drug consumption, and self-identification as having a drug and/or alcohol problem (Anderson, 1998:242).

## 1.6 Purpose of the Study and the Research Objectives

This section gives a description and application of the aim and objectives of this study. The aim and objectives of the study were as follows:

### 1.6.1 Aim of the study

The aim is the purpose and goal of the study that explicitly gives the focus of the study and what it includes and leaves out (De Vos *et al.*, 2005:116). The aim of research enabled the researcher to have focus of what the study was all about and how it was undertaken (Bryman, 2012:92). The aim allowed the researcher to establish the intent of the entire study that was clear, specific and informative with reasons of why it was

conducted and accomplished (Creswell, 2014:123). Wolcott (2001:92) purported that it is important to review the method to achieve the study aim and objectives. Therefore, the aim of the study was to explore and describe influences of socio-cultural practices towards substance abuse amongst the youth in order to develop a school-based intervention programme for the youth-in-school in rural areas.

## 1.6.2 Research objectives

The researcher ensured that the research objectives were specific, clear and achievable (De Vos *et al.*, 2005:116). The objectives were developed to assist the researcher to draw the feasibility and practicability of the study. The researcher, in developing the objectives of the study, was guided by the research design, problem, topic as well as questions. The research objectives permited the researcher to look for the study's researchable practical significance (Babbie & Mouton, 2001:103).

The following main objectives guided the focus of the study:

- To establish the nature of substances used by the youth-in-school.
- To assess the prevalence of socio-cultural events in promoting the availability and abuse of substances.
- To determine how the youth-in-school abuse of substances occur in these socio-cultural event.
- To assess the frequency of socio-cultural events in promoting substance abuse amongst the youth in rural communities.
- To develop a school based intervention programme on substance abuse for the youth-in-school.

Considering the main objectives above, the following secondary objective was also developed to guide the development of the school-based intervention programme:

- To assess knowledge and attitudes of learners towards substance abuse in relation to:
  - ✓ Parental influence,
  - ✓ Role modeling,
  - ✓ Advertising and promotion,

- ✓ Poor socio-economic factors,
- ✓ Violence and criminal offences,
- ✓ School related problems, and
- ✓ Risky sexual practices.

The problems related with alcohol and drug abuse in rural areas amongst the youth are parental influence, family structure, peer pressure, role modeling, advertising and promotion, poor socio-economic factors, accessibility, lack of knowledge, negative attitudes and beliefs (Jiloha, 2009:168). Alcohol and drug abuse amongst the youth is associated with socio-cultural risk factors such as family and peer influences, advertising, economics as well as substances availability (Bobo & Husten, 2000:226). The school related problems, risky sexual practices, delinquent behaviour, juvenile crime, and violence are serious risk direct and indirect socio-cultural consequences of adolescent substance abuse (Jiloha, 2009:170).

## 1.7 Significance of the study

The findings of the study will add knowledge base to social work education with special reference to substance abuse intervention. The study will integrate universal life skills, methodologies and theoretical frameworks with socio-cultural intervention strategies in order to address substance abuse amongst the youth in rural areas. The study will also help the Department of Education to consider the relevance and importance of school social workers to address influences of socio-cultural practices towards substance abuse. The study will enable the Departments of Health and Social Development to consider developing policies and programmes of addressing socio-cultural practices towards substance abuse in rural areas. The study will also benefit Non-Governmental Organizations to refer to it when addressing substance abuse amongst the rural youth. The Non-Governmental Organizations will also form part of the multi-disciplinary team in implementing the programe on the impact of socio-cultural practices towards substance abuse amongst the youth. The social work practitioners will use the study to render a programme that youth in the rural areas are contextually grappling with regard to substance abuse. The study will also enable social work practitiioners to get insight of

how socio-cultural practices and events promotes the use and abuse of substances by youth in the rural areas. The study will also conscientise youth in the rural areas about the impact of socio-cultural practices towards substance abuse. The programme will also serve as a precautionary measure to alert youth on the impact of socio-cultural practices towards substance abuse, for instance, informing youth about the effects of nature of home-brewed concorctions used and abused in rural areas.

## 1.8 Delimitation and Background of Malamulele

This study took place in Malamulele surrounding areas in *Vhembe* District of Limpopo Province, South Africa. Malamulele constitutes *Xitsonga* speaking people with their distinct socio-cultural practices. Socio-cultural practices that characterise the area of Malamulele are "*vukhomba", "xigubu", "xiseveseve", "van'waswimanimani", "makhwaya" and "xibelani",* which contribute towards substance abuse in rural areas. *Vhembe* District Municipality is located in the North of Limpopo Province. It shares borders with three countries, namely Zimbabwe, Botswana and Mozambique. It also shares borders with Capricorn and *Mopani* District Municipalities. *Vhembe* District Municipality has four local municipalities, namely Makhado, Collins Chabane Municipality (Lim 345), *Thulamela* and *Musina*. The study was conducted in Collins Chabane rural schools in various circuits, which were referred as stratas and Department of Social Development in the Municipality. *Vhembe* District has a population of approximately 1.2 million people, according to South African Local Government (2009-2011).

The municipality is a rural municipality plagued by a high rate of unemployment, which stands at 53%, and poverty, which stands at 32% (South Africa, 2010:01). Vhembe District Municipality has a 50% population of the youth under the age of 20 years. 20.4% of the youth are reported as using substances, of which alcohol is the most frequently abused compared to dagga (marijuana), glue, benzyne, tobacco and aerosol sprays. Teenagers abusing substances are said to be growing faster in numbers when compared to the youths older than 20 years (Maluleke, 2010:05). Vhembe District has 383 social workers, and a total number of 329 high schools: 36 independent high schools and 293 public high schools. Together, the schools have 189857 learners and

7117 teachers. The researcher had appointments with Heads of Departments of Social Development and Education, who supplied the figures above.

## 1.9 Organisation of the Thesis

**Chapter one**

Chapter one was on the general orientation of the study. This presented the background, motivation, definition of concepts, research problem, aim and objectives of the study as well as the significance of the study. The chapter also presented the theoretical frameworks used in undertaking the study.

**Chapter two**

This chapter discussed the research methodology, which focuses on the research process and the kind of tools and the procedures used in the study. The chapter included the mixed methodological approach and the exploratory-descriptive design. This included the population and sampling method of the study. The chapter also presented the data collection method, data analysis, significance of the study, quality criteria and ethical considerations.

**Chapter three**

This chapter presented the types and nature of substances abused by young people in rural areas. The chapter described a number of substances abused by the youth in schools due to socio-cultural practices. The chapter also presented the history of substance abuse and the typology of traditional beers used by the youth.

**Chapter four**

This chapter focused on reviewing literature on social and cultural factors promoting substance abuse amongst the youths. The chapter also reviewed literature on socio-cultural events towards substance abuse among the youths in rural areas. The chapter

further introduced the availability of substances in socio-cultural events. It also presents the frequency of socio-cultural events in rural communities.

**Chapter five**

This chapter paid attention to the consequences of substance abuse amongst the youth. The specific effects of substance abuse were also discussed in the chapter, including HIV, teenage pregnancy, school dropout, school violence, crime, domestic violence and addiction.

**Chapter six**

The chapter introduced the importance of a school-based prevention programme on substance abuse. The roles of social workers in the school-based socio-cultural intervention programme were presented. The five competencies of social life skills that apply in the programme such as a positive sense of self, self-control, decision-making skills, a moral system of belief, and prosocial connectedness were presented in the chapter. The chapter also outlined the use of the community education model stages for the programme.

**Chapter seven**

This chapter looked at the presentation, interpretation and analysis of data on the impact of socio-cultural practices towards substance abuse amongst the rural youth towards the development of a school-based intervention programme. The chapter also presented the results and findings drawn from the participants.

**Chapter eight**

The chapter outlined the summary of the major findings. It also provided the major concluding remarks of the study. The chapter further presented the recommendations drawn from the major findings and the conclusions of the study on the impact of socio-cultural practices towards substance abuse amongst the rural youth towards the development of a school-based intervention programme.

# CHAPTER TWO

# EMPIRICAL RESEARCH METHODOLOGY

## 2.1 Introduction

The research methodology focuses on the research process and the kind of tools as well as procedures used in this study (Babbie & Mouton, 2012:74). The methodology presents specific tasks, and research steps employed by the researcher (Babbie & Mouton, 2012:74). Bryman (2012:46) asserts that a research method is a technique of collecting data. The chapter outlines the methods utilised in this research project in order to reach the goal of the study. The chapter includes mixed methodological approach and exploratory-descriptive design as well as the population and sampling method of the study. The chapter also presents the data collection method, data analysis, significance of the study, quality criteria and ethical considerations.

## 2.2 Research Approach

The study used a mixed methodological approach that includes qualitative and quantitative approaches. The researcher described the phenomenon on the impact of socio-cultural practices towards substance abuse amongst the youth through both qualitative and quantitative perspectives in the study (Bless *et al.*, 2013:57). The mixed methodological approach is a study that combines qualitative and quantitative approaches, data collection and analysis methods to expand knowledge (Bryman, 2012:627). Msweli (2011:60) views mixed method approach as a study combining both the deductive and inductive approach to increase validity of the findings. The mixed methodological approach enabled the researcher to triangulate the approaches into a single study (De Vos *et al.*, 2005:360). Creswell (2014:14) stipulates that mixed methods involves combining or integrating the qualitative and quantitative research in one study. The researcher used a mixed methodological approach to explore and describe the impact of socio-cultural practices towards substance abuse amongst the youth in order to develop a school-based intervention programme. The approach also

enabled the researcher to enhance triangulation, complementarity, development, initiation, expansion, greater validity, offset, completeness, process, different research questions, credibility, context, improving the usefulness of findings, confirming and discovering, diversity of views and enhancement of findings in the study (Bryman, 2012:633).

The study was conducted in phases, starting with qualitative phase and followed by quantitative phase (Creswell, 2014:226). The exploratory sequential mixed method design was used to enable the researcher to first explore qualitative data, and then to use the findings to move to the second phase of quantitative data collection (Rubin & Babbie, 2013:44). The exploratory sequential mixed method allowed the researcher to explore and to present in-depth explanations of the findings of the qualitative approach obtained at first on the impact of socio-cultural practices towards substance abuse amongst the youth (Creswell & Plano Clark, 2011:120). This permitted the researcher to present the secondary statistical findings to confirm and to validate the results obtained on the study of the impact of socio-cultural practices towards substance abuse amongst the youth (Creswell & Plano Clark, 2011:120). In this study, the researcher first conducted focus groups discussions and individual interviews. This was followed by the completion of questionnaires (Creswell, 2014:226).

The proponents of qualitative and contextual approaches offer access to a valuable data such as deeper and richer understanding of people's lives and behaviour involving knowledge of their subjective experiences (Monette *et al.*, 2014:220). The important dimension is on social reality and the subjectivism (also called the interpretive, or "verstehen", approach) that provides a more non-positivist perspective on these issues (Monette *et al.*, 2014:221). Therefore, contextualising the intervention on the impact of substance abuse amongst the youth in schools in rural areas is important. There is a need to view and to experience the situation from the perspective of the people themselves as well as seeing how the individuals experience and give meaning to what is happening to them (Monette *et al.*, 2014:221). Important parts of human experience

are the subjective and personal meanings that people attach to themselves, to what they do, and to the world around them (Monette *et al.*, 2014:221).

## 2.3 Research Design

A research design is "a plan of how to go about addressing research questions" (Msweli, 2011:58). Msweli (2011:58) asserts that part of the plan is to specify how data was collected and analysed as well as aims and goals articulated in the problem statement. Babbie and Mouton (2012:74) define a research design as "a blue print of how you intend conducting the research". They assert that a research design focuses on the end-product of what kind of study was being planned by the researcher. The research design also empowered the researcher to draw attention to what kind of results were aimed at by writing a research problem statement and questions. The research design also supported the researcher to focus on the logic of the research process by providing evidence required to address the research questions appropriately (Babbie & Mouton, 2012:75). Bryman (2012:46) postulates that a research design "provides a framework for the collection and analysis of data".

An exploratory-descriptive research design was utilised. The purpose of exploratory research was to gain a broad understanding of a situation or phenomenon as little was known (Bless *et al.*, 2013:35). The exploratory design allowed the researcher to gain insight and comprehension of the subject researched (Babbie & Mouton, 2012:80). It aided the researcher to use in-depth interviews to gain insight and comprehension of the impact of socio-cultural practices towards substance abuse amongst the youth in rural areas (Babbie & Mouton, 2012:80). The exploratory design assisted the researcher to examine new interest where the subjects of study were relatively new (Babbie & Mouton, 2012:79). The exploratory design also enabled the researcher to determine the breadth and scope of the study in order to generate initial questions to guide more searching research (Bless, *et al.*, 2013:57). It addressed the "what", "how", "who" and "why" questions (Neuman, 2000:21). The descriptive research design in this study helped the researcher to describe verbal narratives derived from interviews (Bless *et al.*, 2013:57). The descriptive research design allowed the researcher to describe the

variables of interest (Bothma, Greef, Mulaudzi & Wright, 2010:110). The researcher described the variables of interest by assessing the prevalence and frequency of the occurrence of socio-cultural events on promoting the use and abuse of alcohol and drugs.

## 2.4 Population

Population refers to a target group which is the set of elements that the researcher focuses upon (Bless *et al.*, 2013:164). The population of the study permitted the researcher to draw a group of people studied to make conclusions (Babbie & Mouton, 2012:100). It supported the researcher to consider and to determine the entire set of people who were the focus of the study and who had specific characteristics (Bless *et al.*, 2013:162). The population of this study included learners, Life Orientation Educators, social workers and members of School Governing Bodies (SGB). The researcher targeted two secondary schools in Malamulele Central Circuit (Mahuntsi Secondary School and Ntsako Secondary School). Learners who abuse substances were included to explore their experiences and views about the impact of socio-cultural practices towards substance abuse.

## 2.5 Sampling

Sampling is a small portion of the total set of objects, events or persons that together comprise the subject of the study (Denzin & Lincoln, 1994:393). Bless, Higson and Kagee (2007:67) assert that a sample is chosen according to what the researcher considers to be typical units. A sample allowed the researcher to study representative members of the population that served as an interest of the study (Babbie & Mouton, 2012:100). It enabled the researcher to draw a subset of the whole population which was actually investigated and whose characteristics were generalised to represent the entire population (Bless *et al.*, 2013:162).

Stratified-systematic and purposive sampling methods were used to draw a sample from learners, educators, social workers and SGB members. The stratified sampling

method allowed the researcher to identify and to allocate units of strata by using a stratifying criterion of schools in circuits (Bryman, 2012:192). The sampling frame consisted of school learners, teachers, and SGB members emanating from the four circuits such as Malamulele central, west, east and south which were referred as the stratas. The sampling frame also included social workers. It included 166 learners, 2 teachers, 2 SGB members, and 2 social workers. The researcher identified a school in two circuits where schools were referred to as sub-stratas. The schools in circuits in Collins Chabane Municipality were referred to as stratas. After stratifying, the researcher used systematic sampling to subsequently select learners at intervals whereas the first respondents were selected randomly. The systematic sampling subsequently selects respondents at intervals and makes the first selection randomly (De Vos *et al.*, 2011:230).

The systematic sampling method permitted the researcher to select units directly from the sampling frame without resorting to a table of random numbers (Bryman, 2012:191). The method assisted the researcher to select learners at equal intervals, starting randomly by selecting the first learner and followed by taking the fifth one on the list until the number required was reached (Bless *et al.*, 2013:167). The purposive sampling method helped the researcher to use his judgement regarding the characteristics of the representative sample with subjective considerations of the researcher (Bless *et al.*, 2013:172). The method enabled the researcher to purposefully seek typical and divergent data or findings (De Vos *et al.*, 2005:329). The inclusion criteria included social workers who work in rural areas with a working experience of more than five years. This included Life Orientation Teachers and SGB members in each selected school.

Two Life Orientation Educators, two area social workers, and two SGB members were purposively selected for individual interviews to explore their observations and suggestions on the impact of socio-cultural practices towards substance abuse. Four focus group discussions comprising of two from each secondary school consisting of 10 learners each were conducted. Sixty three learners from each school who were not part

of the focus group discussions completed a self-developed questionnaire. Since the learners who were identified and participated in this study were minors, the researcher demonstrated familiarity of research Acts and Regulations by using consent forms by parents or legal guardians, declaration of consent by parents on behalf of the child, and the child was asked to assent to take part in the study. The total participants from both schools were 172.

## 2.6 Data Collection

Data collection is a gathering of information to address the questions being asked in the study (Creswell & Plano Clark, 2011:171). This involves several interconnected steps such as sampling, gaining permission, collecting data, recording data and administering the data collection (Creswell & Plano Clarke, 2011:171). Data collection in this study involved a chronological process of obtaining approval from ethics committee, gaining entry into the field, and obtaining informed consent or declaration of consent as well as having methods of collecting data (Bothma, *et al.*, 2010:275). For the first qualitative data collection phase, both semi-structured individual interviews and focus group discussions (FGD) were used. Semi-structured individual interviews were held with learners, educators, social workers and SGB members. The interviews aided the researcher to understand socio-cultural practices and "how the everyday, inter-subjective world is constituted" from the participants' perspective (Rubin & Rubin, 2012:31). FGD was also held only with learners to collect information on their perceptions on the impact of socio-cultural practices towards substance abuse amongst the youth in rural areas. Since this study was a mixed method to be conducted in two separate phases, for secondary data collection, a quantitative data questionnaire was developed to be completed by selected participants (learners). Furthermore, the researcher used the literature review as a source of collecting data.

The researcher used a semi-structured interview schedule (individual interviews and focus group discussion), audio recorder and questionnaires as data collection methods. The semi-structured interviews schedule allowed the researcher to discover new aspects of the study by exploring in detail the explanations supplied by respondents

(Bless *et al.*, 2013:197). It also assisted the researcher to clarify concepts and to facilitate the construction of more highly structured interviews (Bless *et al.*, 2013:197). Individual interviews permitted the researcher to have direct personal contact with the participants to answer questions related to the study (Bless *et al.*, 2013:193). The focus group discussion is a quick way of collecting data from many participants, and provides an opportunity for particpants to learn from each other by discussing (Bless *et al.*, 2013:201). Focus groups discussion assisted the researcher to gain deeper insight where the participants could not agree on some issues (Bryman, 2012:500).

A questionnaire is a collection of questions administered to the respondents (Bryman, 2012:715). The New Dictionary of Social Work (1995:51) defines a questionnaire as "a set of questions on a form which is completed by the respondent in respect of a research project". A questionnaire enabled the researcher to give the respondents to answer and fill questions without being interviewed, and is quick to administer (Bryman, 2012:233). The researcher got permission from the participants to use the audio recorder before the commencement of the interviews, which allowed the researcher to have full interview records (De Vos *et al.*, 2005:298).

## 2.7 Data Analysis

Data analysis involves making sense of text and image (Creswell, 2014:220). The data analysis enabled the researcher to prepare data, moving deeper into understanding the data, representing the data, and making an interpretation of the larger meaning of the data (Creswell, 2009:183). The researcher analysed the two qualitative and quantitative databases separately (Creswell, 2014:227). The researcher used the Thematic Content Analysis (TCA), which was a descriptive presentation for qualitative data. Thematic content analysis enabled the researcher to seek for themes (Creswell, 2009:184). There are different methods of thematic analysis. For instance, Creswell's (2009:184) method of data analysis such as to organise and prepare data, develop a general sense of the data, code the data, describe and identify themes, represent findings, and interpret data. Therefore, the researcher thematically transcribed data from a tape recorder onto paper following Braun and Clarke's (2006:86) guidelines, which are Phase 1:

familiarising yourself with your data; Phase 2: generating initial codes; Phase 3: searching for themes; Phase 4: reviewing themes; Phase 5: defining and naming themes and Phase 6: producing the report. The participants were interviewed in *Xitsonga* language which made the researcher to present the themes in the language and translated into English.

For the second set of data analysis, the SPSS programme of quantitative data analysis was used to prepare and manage the data (Creswell & Plano Clark, 2011:205). Since this study was a mixed method, a mixed method framework of analysis was conducted in stages (Creswell & Plano Clark, 2011:213). These stages allowed the researcher to apply a mixed method framework such as data reduction, data display, data transformation, data correlation, data consolidation, and data integration (Onwuegbuzie & Leech, 2006:490). The researcher in this study analysed the data statistically and developed tables and figures (Creswell & Plano Clarke, 2011:214). The researcher compared the data from different sources and integrated all data into a coherent whole (Creswell & Plano Clarke, 2011:214).

## 2.8 Ethical Considerations

The ethics in this study brought the researcher into a realm of the role of values in the research process pertaining to the treatment of participants and activities undertaken (Bryman, 2012:130). Ethical considerations assisted the researcher in understanding the imperative of ethical research (Bothma *et al.*, 2010:2). In this study, ethics were interwoven throughout the research processes (Bothma *et al.*, 2010:4). The ethical considerations which applied in this study throughout the research process were as follows:

### 2.8.1 Permission to conduct study

The study was reviewed by the research ethics committee of the University of Limpopo and the Limpopo Premier's Office. Bothma *et al.*, (2010:12) contend that all research involving human participants in South Africa must be reviewed by the research ethics committee to grant permission. The primary function of the ethics committee was to

protect both the participants and the researcher (Bothma *et al.*, 2010:12). Permission to conduct the study was obtained from the University of Limpopo Turfloop Campus Research and Ethics Committee (TREC). Bothma *et al.*, (2010:12) assert that permission to conduct research must be obtained from relevant institutions to recruit and screen the potential participants. Permission to conduct the study was also obtained from the Department of Education and Department of Social Development before the commencement of the study. The permission was obtained in writing (Bothma *et al.*, 2010:12). The researcher also obtained ethical clearances from the University of Limpopo and the Provincial Limpopo Office of the Premier. The community traditional authorities were also requested to grant permission to conduct the study.

## 2.8.2 Voluntary participation

Neuman (2014:151) defines a principle of voluntary participation or consent as an ethical principle that people should never participate in research unless they explicitly or freely agree to participate. In this study, the participants were told about the nature of the study conducted. Leedy and Ormrod (2014:107) contend that people recruited for participation in a research study should be told about the nature of the study to be conducted and given a choice either to participate or not to participate in the study. The researcher ensured voluntary participation. This also involved informed consent which was the consent of the respondents to participate in the study (Babbie & Mouton, 2012:521). The researcher did not force or lie to participants to participate in the study (Neuman, 2014:151), but ensured that participation was voluntary. This also involved informed consent of the participants to participate in the study (Babbie & Mouton, 2012:521). The researcher first agreed with each respondent to voluntarily participate or not. The researcher also informed the participants about the use of the tape recorder.

## 2.8.3 Anonymity and confidentiality

The protection of respondents' identity was ensured by the researcher through non-disclosure of their names (Neuman, 2014:155). The researcher opted to store information in a lockable locker to keep it secret from the public after use. The researcher opted to burn the questionnaires and to destroy the interview records as it is

a moral and ethical duty of researchers to destroy records to protect confidentiality (Neuman, 2014:155). The protection of the participants' identities was ensured by the researcher, who did not identify the responses with given respondents. This means that the respondents were never identified (Babbie & Mouton, 2012:523). The information given by the respondents was kept confidential by the researcher. The researcher respected the privacy of the participants for their free participation. To maintain confidentiality, the researcher made sure that there was limited access to data that was locked in a lockable locker, or data was stored in a safe and secure place. No other person was allowed to access the data other than the supervisor. The researcher interviewed the participants in safe and favourable environments to maintain confidentiality.

## 2.8.4 No harm to participants

The respondents' rights to withdraw from the programme were respected as they were assured of this ethic (De Vos *et al.*, 2005:58). The social worker attempted to protect the participants from harm by setting ground rules for the clients not to disrespect one another. The researcher protected the respondents from any form of physical discomfort that may have emerged from the research project (De Vos *et al.*, 2005:58). The study did not harm the participants physically or induce them to perform reprehensible acts, or to lose their self-esteem (Bryman, 2012:135). Babbie (2010:65) asserts that human research should never injure the people being studied regardless of whether or not they volunteer for the study. The researcher did not expose the participants to risk of losing their lives, and were not subjected to unusual stress, embarrassment, or loss of self-esteem (Leedy & Ormrod, 2014:107). He did not reveal the information of the participants to avoid embarrassment and to harm them psychologically, emotionally and physically (Rubin & Babbie, 2013:290). A problem might have arisen when other participants laugh at others and a fought. This made the researcher to be sensitive to the participants. The researcher should have made referrals to other social workers and psychologists in cases where the participants were harmed emotionally and psychologically but neither one of these happened.

## 2.8.5 Informed consent

The researcher respected and provided an opportunity to the participants to choose whether they want to participate or not (De Vos *et al.*, 2011:117). All the participants signed informed consent to participate after given explanation of the purpose of the study (Bless, Higson-Smith & Kagee, 2006:142). With regard to the learners as participants of the study, the researcher presented the declaration of consent form to be signed by the parent(s) on their behalf. Learners under the age of 18 years signed the child assent before participating in the study. The researcher gave the participants at least five days to consider the informed consent.

## 2.9 Quality Criteria

The researcher ensured quality data in the study. This has to do with trustworthiness through credibility, transferability, dependability and conformability (Botma *et al.*, 2010:232). Credibility empowered the researcher to look at subjectivity, congruence, in-depth description, setting, and theories appropriate for the study (De Vos *et al.*, 2011:420). The researcher ensured quality data through credibility by engaging the participants using semi-structured interview schedules and questionnaires. Credibility and internal validity assisted the researcher to use the exploratory-descriptive design, and to engage the participants through the semi-structured interview schedules and questionnaires to ensure quality data (Ravitch & Carl, 2016:188). Literature review on the impact of socio-cultural practices towards substance abuse was conducted to ensure quality data.

Transferability (preference to external validity or generalisability) allowed the researcher to provide sufficient data and context to enable other researchers and professionals to apply the findings to different situations and contexts (Cameron, 2011:20). The knowledge was shared with the participants during data collection. The study will also disseminate knowledge to the youth when the school-based intervention programme starts being rolled out in rural areas. This will also assist social workers with knowledge that is contextual in order for them to respond to issues. This will also add knowledge and value to social work education. The Departments of Social Development, Health

and Education will use the study as a benchmark on the impact of socio-cultural practices towards substance abuse. The study was conducted using two data gathering methods, which strengthens the study's usefulness for other settings (De Vos, *et al.*, 2011:420). The researcher ensured quality of data by considering theoretical frameworks to serve as guiding lenses of the study (Ravitch & Carl, 2016:189). The theoretical frameworks enabled the researcher to align the study with contextual factors in order to transfer socio-cultural aspects of substance abuse of the study design and findings to various contexts.

Dependability as preference to reliability supported the researcher to ensure quality data by using research methods which were logical, well documented and reviewed (De Vos *et al.*, 2011:420). This was achieved by reviewing literature from other scholars who wrote about issues relating to the subject under scrutiny. Dependability allowed the researcher to use a feasible research methodology in order to achieve the objectives of the study. This enabled the researcher to be consistent through data reduction, raw data and process notes (Golafshani, 2003:601). In this case, the researcher followed the research processes which were documented and reviewed by other scholars. Conformability or neutrality preference to objectivity permitted the researcher to ensure that the results of the study were from the participants through raw data, memos, themes, notes, data reduction and analysis (Cameron, 2011:20). The researcher achieved conformability by developing a semi-structured interview schedule and questionnaire, which covered the contents about the subject. The researcher drew results from the participants and by reviewing literature of other scholars.

Trustworthiness of the quantitative approach in the study was achieved through reliability and validity. Reliability refers to dependability or consistency, while validity suggests truthfulness. These two aspects help to establish the truthfulness and credibility of findings (Neuman, 2014:225). The researcher used representative reliability, which is a measure that yields consistent results for various social groups (Neuman, 2011:208). Neuman (2011:209) contends that reliability is improved by clearly conceptualising all constructs using a precise level of measurement, multiple indicators

and pilot tests. Reliability suggests that the same data would have been collected each time in repeated observations of the same phenomena (Blanche, Durrheim & Painter, 2006:152). The researcher developed several techniques for cross checking reliability. An informal method of establishing reliability was to question the respondents about issues that are relevant to them, and to be clear in what is asked. In addition, to enhance the reliability of a measurement instrument, it should be administered in a consistent fashion, that is, there should be standardisation in the use of the instrument from one situation to the next (Blanche *et al.*, 2006:153). For the purposes of this study, the researcher used similar questionnaires which were completed by learners.

According to Babbie (2004:143), "validity refers to the extent to which an empirical measure reflects the concepts it is intended to measure". This means that the measure process measures the variable it claims to measure (De Vos *et al.*, 2005:160). Validity takes different forms, each of which is important in different situations, such as face, content, criterion and constructs validity. For the purpose of this study, content validity was used to look at the content that answered the identified research gaps. Content validity refers to the degree to which a measure covers the range of meaning included within a concept, that is, the extent to which an instrument is a representative sample of the content area (domain) being measured (Royse, 2004:129). Concerning content validity, an extensive literature review of the area under investigation was conducted. The researcher ensured that the content covered by the interview schedule and questionnaire for all respondents was relevant to the topic under discussion. The researcher acknowledged the sources from different authors to avoid plagiarism in order to ensure trustworthiness of the study.

# CHAPTER THREE

# THE TYPES AND NATURE OF SUBSTANCES ABUSED BY YOUNG PEOPLE

## 3.1 Introduction

This chapter presents the types and nature of substances abused by young people in rural areas. The chapter describes a number of substances abused by the youth in schools due to socio-cultural practices. The chapter presents the history of substance abuse, and the typology of traditional beers used by the youth. There are dangerous types of substances. The types of substances and their nature pose health risks to the well-being of young people who are indulging in such substances. Substance abuse is rife due to being attached to socio-cultural customs as well as practices that allow these types of substances to be used without restrictions. It is a norm to prepare substances specifically meant for socio-cultural practices. The other reason that promotes the abuse of these types of substances is that they are affordable, accessible as well as easily available in homes. The main issue that poses danger to the well-being of young people is the nature of ingredients and lack of tests in terms of fitness for consumption without negative impact. The nature of substances used by the youth-in-school is presented in this chapter.

## 3.2 History of Substance Abuse

History of substance abuse amongst black people dates back to the 1600's in America (Williams, 1970:23). In the United States, Africans used alcohol in religious ceremonies and rituals (Stuckey, 1987:35). World trends in alcohol consumption rose steeply during the several decades preceding the 1980s, while between 1960 and 1972 alcohol production rose by more than 60% (Myadze & Rwomire, 2014:2). Historically, Africans have always been accustomed to the consumption of fermented beverages which, as a group, have less alcoholic content that distilled beverages. The World Health Organization (WHO) estimated that during the late twentieth century there were 140

million people in the world who were alcohol dependent (Mayor, 2001:72). Alcohol consumption had become a generally accepted social habit in many countries of the world and especially in the poor states where, in some countries, the revenue earned from the trade in alcohol constituted a large percentage of the national income (Myadze & Rwomire, 2014:2). The increase appeared even more dramatic in Africa, with its proliferation of modern breweries. In Africa and Asia the marked increase had been attributed to relaxed religious sanctions against consumption and the increase in supply as modern industries produced alongside local distilleries and breweries (WHO, 1980:23).

It was believed that Blacks were irresponsible under the influence of alcohol, more difficult to control and inflicted violence to turn against slavery they were attached to seek freedom (Manganyi, 2015:35). Africans were allowed to drink alcohol during the holidays by then, especially Christmas. The plight of using and abusing alcohol is very high in both urban and rural areas. In rural areas, this is perpetuated by the impact of socio-cultural practices towards the abuse of alcohol and drugs. African cultures generally restricted the use of substances to older age groups who consumed them during special occasions (Njoroge, 2015:66). Myadze & Rwomire (2014:1) outlines that modern breweries began to expand in Africa during the late twentieth century, whereby alcoholism became an increasing cause for concern. Youth in the rural areas praise themselves of drinking a lot without being intoxicated. Dumbili (2013:22) postulates that the ability to drink large a quantity without showing a sign of intoxication and the ability to drink faster than the opponent is one of the issues leading to the abuse of alcohol amongst the youth. The youth use substances for various reasons such as social, economic and cultural issues.

Substance abuse in South Africa, including alcohol, tobacco, cannabis and cocaine are generally a common problem amongst the youth-in-school (Hamdulay & Mash, 2011:83). Lebese, Ramakuela and Maputle (2014:330) assert that learners, for instance, at *Muyexe* rural area in Limpopo Province linger around taverns during the day in school uniform abusing alcohol, glue and marijuana, which results in anti-social

behaviour such as stealing other people's properties, fighting, attacking and hurting each other with bottles and other dangerous weapons, resulting in unruly behaviour and poor performance, and teachers have raised complaints about this (Lebese *et al.*, 2014:330). Substances abused by the youth-in-school in rural areas include alcohol, tobacco, dagga, petrol, benzines, glue and jeyes fluid mixed with spirit or petrol (Lebese *et al.*, 2014:333). Lebese *et al.*, (2014:333) assert that nyaope and cocaine were never used in *Muyexe* as they are found mostly in big cities. Substance abuse in South Africa is a challenge with negative effects on learners such social, physical, educational, economic and HIV transmission that interfere with their development (Lebese *et al.*, 2014:336).

## 3.3 Biological Implications of Types of Substances Abused

Regardless of the service to the biopsychosocial model of human behaviour, substance abuse counsellors mostly overlook the bio piece of the equation. Knowledge of the biology of addiction is crucial for an understanding that certain chemicals and behaviours have on people, the cravings that grip them, and the health problems associated with substance abuse with inclusive awareness of genetic features (Van Wormer *et al.*, 2008:119). It is contemplated by Van Wormer *et al.*, (2008:121) that taking a draw of a cigarette, inhaling or exhaling of cocaine leads to trillions of potent molecules surging through the bloodstream into the brain. Injecting a drug such as heroin or meth directly into the veins makes a person to get a rush within 30 seconds. Irrespective of a chosen method of ingestion, swallowing, inhaling or injecting, the psychoactive drugs are absorbed into the bloodstream and carried to the central nervous system (Van Wormer *et al.*, 2008:121). Unlike many other drugs such as penicillin, these kinds of drugs pass the blood brain-brain barrier and cause the release of neurotransmitters (feel good chemicals) in the brain (Abadinsky, 2003:17). Jung (2001:38) argues that drugs are detoxified by metabolic processes or eliminated from the body as waste material.

The toxicity and the poisonous nature of substance abuse cause physiological changes in the brain due to vitamin deficiency (Butcher, Mineka & Hooley, 2007:412). Substance

dependence includes more severe forms of substance use disorders, and usually involves a marked physiological need for increasing amounts of a substance to achieve the desired effects. While on the other hand, substance dependence means that an individual will show a tolerance for a drug and experience withdrawal symptoms when the drug is unavailable. Hence, tolerance is the need for increased amounts of a substance to achieve the desired effects, which results from biomedical changes in the body that affects the rate of metabolism and elimination of substance from the body (Butcher *et al.*, 2007:412).

Butcher *et al.*, (2007:412) contends that withdrawal symptoms are physical symptoms such as sweating, tremors, and tension that accompany abstinence from the drug. Substance abuse is maladaptive (Nesse, 1994:339). Physical tolerance occurs when brain cells begin functioning normally in the presence of certain drugs. Under conditions of repeated or chronic use, the brain begins functioning as if the presence of drugs is normal, thereby reducing the drug's effect on the user (Johnson, 2004:35). However, certain drugs can produce relatively quick and high tolerance levels (opiates), while other tolerance develops only mild tolerance (marijuana) over a longer period (Johnson, 2004:35).

Benshoff and Janikowski (2000:12) assert that a drug is any substance, natural or artificial, other than food whose chemical nature alters structure or function in the living organism. It is also expounded that psychoactive drugs are mood altering and used for purposes of recreation or self-medication. As such drugs can be categorised and divided into depressants (downers), opiates, stimulants (uppers) and hallucinogens. These substances affect the central nervous system, and therefore alter the user's mood and sensory perceptions in some cases. For this reason, the major drugs of misuse, whether uppers or downers, imitate the structure of neurotransmitters, the chemicals in the brain that give people pleasure (Van Wormer *et al.*, 2008:122). The categories of drugs and their implications into the biological functioning of the human being will be discussed below.

### 3.3.1 Depressants

This category of drugs includes alcohol, barbiturates and tranquilisers; hence, narcotics might be natural, semi-synthetic such as heroin, or synthetic such as morphine and demerol (Abadisnky, 2003:2). These drugs depress the central nervous system, reduce anxiety at low dosages, and can induce anesthesia and death at high dosages (Van Wormer *et al.*, 2008:122). Some of these drugs such as alcohol and nicotine can be purchased legally by adults. Other drugs such as barbiturates or pain killers can be used legally under medical supervision (Butcher *et al.*, 2007:412). Johnson (2004:37) argues that depressants slow the central nervous system to induce relaxation, drowsiness, or sleep, but when they are abused, they can be extremely dangerous.

### 3.3.2 Cannabis

This drug is commonly known as marijuana or dagga, hashish, pot, weed, grass, dope or bud, and it is also classified as a hallucinogen (Nelson, 2012:36). This herbal form of a plant can be grown in most countries around the world. It is a dried plant material which is green and brown in colour and is usually smoked. Using cannabis can result in a carefree mood, euphoria, muscular relaxation, and bodily warmth and intensified visual and auditory perceptions, while many users suggest that it gives them creative insights and is a mind-opening experience (Nelson, 2012:38). At a low level of use, people can have lung damage, increased appetite, short-term memory loss, impaired judgment, bloodshot eyes, dry mouth and lethargy, while for regular heavy users, adverse effects may include anxiety, paranioa, psychosis and depression (Nelson, 2012:38).

### 3.3.3 Opiates or narcotics (morphine and heroin)

The effects of opiates can be euphoria, blissful apathy and dreamy, drowsy warmth (Nelson, 2012:40). Opiates are naturally occurring chemicals that hail from the opium poppy, which is similar to synthetic drugs. These narcotics are prescribed by physicians to supplement endorphins in the brain and hinder the release of pain neurotransmitters (Benshorff & Janikowski, 2000:12). Opiates users inject, smoke or snort substance for

maximum effect, whereas some mix heroin and cocaine by shooting it, which is an extremely dangerous practice called "speedballing" (Van Wormer *et al*., 2008:132).

Opiates produce powerful rush accompanied by feelings of contentment lasting for 60 seconds (Van Wormer *et al.,* 2008:132). This rush results from these drugs, which bind into the endorphin receptor sites located in the pleasure centres of the brain (Jonson, 2004:87). Withdrawal in regular users may occur after a few hours; drug craving, muscle pain, restlessness, cold flashes, runny nose, tearing eyes, delirium, hallucinogens, manic activity, perspiration, restlessness, increased perspiration rate, intensified desire for the drug, sweating, abnormal cramps, pans in the back as well as extremities, severe headache, marked tremors, varying degrees of insomnia, diarrhea and vomiting and cardiovascular collapse may occur, which can also results in death (NIDA, 2006:02).

Morphine and heroin are commonly taken into the body through smoking, snorting, eating, skin popping or mainlining. Young substance abusers usually move from snorting to mainlining which is injecting the liquefied drug beneath the skin (Butcher *et al.,* 2007:434). Vomiting and nausea are the immediate effects of heroin and morphine use. Hence, the withdrawal state of using these drugs incorporates diminishing of the need for foods, water and sex, while pleasure feelings of relaxation, euphoria and reverie tend to dominate (Butcher *et al*., 2007:435). Users become physiologically dependent on the opium in the sense that they feel physically ill when they do not take it and gradually build up a tolerance for the drug, so increasingly larger amounts are needed to achieve the desired effects (Butcher *et al*., 2007:435).

### 3.3.4 Inhalants

The inhalants are a group of volatile chemicals that easily evaporate which can be inhaled such as aerosols, paint, glue, gasoline and light fluid (Van Wormer *et al*., 2007:136). The users of inhalants sniff or huff these substances and sometimes put their heads in a paper bag to inhale the vapours, which at high levels permanent damage can be done to the central and peripheral nervous systems. Hence, an

overdose can lead to coma (Van Wormer *et al.*, 2008:136). NIDA (2006:02) asserts that sniffing highly concentrated amounts of the chemicals can directly induce heart failure or death within minutes of repeated inhalants. Van Wormer *et al.*, (2008:136) argue that early intervention is vital to hinder brain damage.

### 3.3.5 Stimulants

The stimulants include cocaine, amphetamines and methamphetamines, which stimulate the central nervous system, increasing alertness, and relieving fatigue (Nelson, 2012:29). Physiological reactions to stimulants incorporate increased pulse and blood pressure rates, dilated pupils, insomnia and loss of appetite (Van Wormer *et al.*, 2008:137). Stimulants speed users up, keep them awake, make them feel more energised and alert, give them a sense of well-being, and cause anxiety, restlessness and insomnia (Nelson, 2012:29).

### 3.3.6 Alcohol

Alcohol is described as a chemical and a drug; the kind of alcohol that people take is ethyl alcohol or ethanol (Van Wormer *et al.*, 2008:122). Ethyl alcohol is a colourless, flammable, volatile liquid with a burning taste (Royce & Scratchley, 1996:67). For instance, Pride (2017:03) asserts that alcohol is a safer alternative for teens than hard drugs, which is also a myth. The only difference between the types of drugs is the amount of water and other alcoholic-ingredients such as hops and grains added to make the beverage contain more liquid (Johnson, 2004:37). Alcohol if it is taken too excessive, different levels of intoxications are likely to be observed with different individuals and at different times (Van Wormer *et al.*, 2008:122).

Van Wormer *et al.*, (2008:13) notes that there are categories of drunks such as jacose drunk, who is a barrel of laughs; amorose drunk, who cannot keep his hands to himself; bellicose drunk is the new man with the new teeth; lachrytose who cries and full of self-pity when drunk; somnos drunk who are sleepy; clamorose drunk who are loud; and scientose, who know it all. Domestic violence, child abuse, rape and other crimes, serious illness, and accidents requiring hospitalisation are all linked to alcohol misuse

as well as the large majority of drunk drivers in fatal car crashes, for example, are casual or binge drinkers rather than chronic alcoholics (Sharman, 2005:52). The highest level of alcohol use is among 21 year olds (Kinney, 2006:106). Alcohol use is the leading risk factor in three leading causes of deaths among the youth unintentional injuries, including motor vehicle crashes and drowning, suicides and homicides (Centers for Diseases Control, 2005:03).

### 3.3.6.1 Alcohol's effects on the brain

Nelson (2012:37) asserts that alcohol tends to relax people, reduce their inhabitations and stimulates sociability, while also cause impaired motor co-ordination and slowed reaction times. Long-term regular heavy use can lead to severe health problems, including cirrhosis of the liver, high blood pressure, damage of the brain and severe vitamin deficiencies, and accidental death, violent crime and absenteeism (Nelson, 2012:37). Alcohol has complex and seemingly contradictory effects on the brain (Butcher *et al.*, 2007:414). Individual differences in the brain chemistry may explain the observation that excessive alcohol intake consistently may promote aggression in some persons but not in others (Higley, 2001:16).

It is stipulated that at lower levels, alcohol stimulates certain brain cells and activates the brain's pleasure areas, which release opium-like endogenous opioids that are stored in the body (Butcher *et al.*, 2007:414). At higher levels, alcohol depresses brain functioning, inhibiting one of the brain excitatory, neurotransmitters, glutamate, which in turn slows down activity in parts of the brain (Butcher *et al.*, 2007:414). According to Butcher *et al.*, (2007:414) the "inhabitation of glutamate in the brain impairs the organism's ability to learn and affects the higher brain centres, impairments judgment and other rational processes and lowering self-control". Nesse (1994:344) notes that alcohol caused major motor vehicle accidents and is the major cause of death in the early reproductive years.

In most cases, when the alcohol content of the blood stream reaches 0.08 percent, the individual is considered intoxicated, at least with respect to driving a vehicle. Hence,

when the blood alcohol level reaches roughly 0.5 percent (the level differs somewhat among individuals), the entire neutral balance is upset and the individual passes out and unconsciousness apparently acts as a safety device, because concentrations above 0.55 percent are usually lethal (Butcher *et al.*, 2007:414). Overdosing on alcohol can lead to vomiting, blackouts (amnesia), acute poisoning, unconsciousness, coma and death (Nelson, 2012:37). The precise expression of alcohol intoxication will vary widely because it is largely determined by the individual's personality and by social and cultural expectations about the effects of drink (Gossop, 2000:72).

### 3.3.6.2 The physical effects of chronic alcohol use

The effects of alcohol vary for different drinkers, depending on their physical condition, the amount of food in their stomach, and the duration of the drinking. Alcohol users may gradually build up a tolerance for the drug so that ever-increasing amounts may be needed to produce the desired effects (Butcher *et al.*, 2007:415). Women metabolise alcohol less effectively than men and thus become intoxicated on lesser amounts of alcohol (Butcher *et al.*, 2007:416). The clinical picture of individuals who drink alcohol too excessively is highly unfavourable (Butcher *et al.*, 2007:416). Butcher *et al.*, (2007:416) assert that alcohol that is taken in must be assimilated by the body, except 5 to 10 percent that is eliminated through breath, urine and perspiration.

The work of assimilation is done by the liver, but when large amounts of alcohol are ingested, the liver may be seriously overworked and eventually suffer from irreversible damage (Butcher *et al.*, 2007:416). Butcher *et al.*, (2007:416) contend that 15 to 30 percent of heavy drinkers develop cirrhosis of the liver, a disorder that involves extensive stiffening of the blood vessels. Thus, consumption of alcohol reduces a drinker's appetite for other food as alcohol has no nutritional value; the excessive drinker can suffer from malnutrition (Butcher *et al.*, 2007:418). Additionally, heavy drinking impairs the body's ability to utilise nutrients; so the nutritional deficiency cannot be made up by popping vitamins (Butcher *et al.*, 2007:418). Many alcohol abusers also experience increased gastrointestinal symptoms such as stomach pains (Butcher *et al.*, 2007:418).

## 3.4 Descriptive Typologies of Traditional Home-made Beers Beverages and its Ingredients in Preparation Abused by the Youth in Rural Areas

Young people are using and abusing alcohol almost everyday in rural areas. Young people staying in rural communities end up being socio-economically excluded from the opportunities, and therefore resort to the use and abuse of home-brewed beers almost everyday. In low-resourced areas, manufacturers of home-made alcohol utilise unorthodox and poisonous ingredients to make their brews more intoxicating as well in under-developed or rural areas. Traditional forms of home-made alcohol are produced through a simple procedure of fermentation of seeds, grains, fruits and/ or vegetables (Makhubele, 2012:19). The majority of contemporary brewers of home-brewed alcohol still use traditional local ethnic names for their beverages, while utilising unorthodox and poisonous ingredients to make their brews more intoxicating (Manganyi, 2015:41). Expedient commercial intentions order that a lot of what is comprised in the home-brewed alcoholic beverages is of poor quality, often contaminated and toxic (Pitso, 2007:06). The following are types of home-made alcohol cited from Makhubele (2012:23).

### 3.4.1 "Mporosi" ("Mqomboti")

In ancient times, basically, people would use sorghum malt, ice cream, milk, sugar, yeast, and "*chibuku*" *l*ocally known as "*ximbukumbafi*" or "shake-shake" and water to brew "*mporosi*" (Makhubele, 2012:23). It was unanimously agreed that conventionally sugar and yeast were never used, whereas today some brewers add sugar and yeast (Makhubele, 2012:23). It is indicated that seven days to prepare this home-made alcohol as it is cooked and end-products recooked until the brewer is satisfied that it is ready for consumption (Makhubele, 2012:23). Historically, it was during social and religious occasions where liquor was accepted to be used by the elders not the youth. However, of late, people add more hazardous substances to "*Mporosi*" such as methylated spirits and cabbat (a substance used to fast-track the ripening of bananas). "*Mporosi*" used to be made up of sorghum malt, sugar and water than is currently mixed

with ice cream and this changed due to commercial reasons (Makhubele, 2012:23). Myadze and Rwomire (2014:2) indicate that consumption of alcoholic beverages was restricted to elders of the community and drinking was social rather than an individual activity. Women were generally excluded from drinking parties but not entirely (Myadze & Rwomire, 2014:2). The beverages are obtained from ripe bananas, millet or honey and sorghum. In Botswana, brewing and beer consumption have generally been an integral part of village life while sorghum, a staple food throughout southern Africa, was a primary ingredient in the production of traditional alcoholic beverages (Molamu & Manyeneng, 1989:3).

### 3.4.2 "Ndzi ta ku nyisa"

Makhubele (2012:23) asserts that "Ndzi ta Ku Nyisa" literally means "I will beat you up" and some brewers call it "Skopdonorr". This is brewed by mixing sorghum malt, maize meal, yeast, methylated spirits, brake fluids and battery acid (Makhubele, 2014:23). Makhubele (2012:23) stipulated that this is a dangerous home-brewed alcohol as it is not supposed to be drunk by weak and sick people.

### 3.4.3 "Xikwembu ndzi teki"

Makhubele (2012:23) emphasises that *"Xikwembu ndzi teki"* literally means "God takes me". This is a mixture of sorghum malt, water and sugar, water from boiled roots of Jinja shrub, yeast, ice cream, king-korn, brake fluids and battery acid. Hence, after drinking this mixture, he or she is certain that this is fatal as the alcohol name "God takes me", and it is by the grace of God that after drinking "*Xikwembu ndzi teki*", the person will survive (Makhubele, 2012:23). It is indicated that the reason is that the person start vomiting, trembling and unable to control himself, and the person wet himself or herself (Makhubele, 2014:23).

### 3.4.4 "Marula"

*"Marula"* in *Xitsonga* is called *"Vukanyi"* which is also used by young people in rural areas during summer as it is seasonal. Malamulele and its surrounding areas have a lot of "*Marula"* trees, which make it simple for families to fetch the *"Marula"* fruits during its

season to prepare it for people in their respective communities. Some people during *"Marula"* seasons sell this type of substance in the streets. The *"Marula"* as a substance is prepared for some few days before being ready for consumption. Traditionally, the pattern of cultural ceremonies and drinking occasions around are seasonal with regard to *"Marula"* in rural areas (Manganyi, 2015:42).

Many family and community celebrations such as weddings and puberty rites would have been deliberately scheduled to take place in the post-harvest period when the availability of *"Marula"* as an ingredient for alcohol production was assured (Manganyi, 2015:42). Alcohol could appear as well in occasions such as funerals (Manganyi, 2015:42). African people perform rituals using alcohol as it is believed to have close association with ancestors (WHO, 2007:02). Despite the fact that the availability and brews of the *"Marula"* fruit is seasonal, still due to plenty of traditional home-brews, all varieties of home-brewed alcohol are now available at all times (Manganyi, 2015:42). WHO (2007:02) indicated that traditionally, alcohol drinking to the point of intoxication was considered primarily the privilege of male elders, who held the highest status in Africa's rural communities. Young people spend their times entertaining themselves with the traditional home-brewed liquor (Manganyi, 2015:42). Other traditional and unorthodox home-brewed beers were discussed in the findings of the study.

## 3.5 Biological Factors in the Abuse of and Dependence of Alcohol and Other Substances

Researchers have stressed the role of genetic and biomedical and psychosocial factors, and have viewed problem drinking as a maladaptive pattern of adjustment to stress of life. Still others have emphasised socio-cultural factors such as the availability of alcohol and social approval of excessive drinking. The combination of some of these factors seems to influence the risk for developing alcohol abuse or alcohol dependence, as with most other forms of maladaptive behaviour. There might be several types of alcohol dependence, each with different patterns of biological, psychosocial and socio-cultural causal factors (Butcher *et al.*, 2007:419).

Substances such as alcohol, cocaine and opium have powerful effects to the biology of human beings as these activate areas of the brain that produce intrinsic pleasure and sometimes immediate, powerful rewards. Other factors involve the person's biological makeup or constitution, including a person's genetic inheritance and the environmental influences (learning factors) that enter into the need to seek mind altering substances to an increasing degree as use continues (Butcher *et al.*, 2007:419). Butcher *et al.,* (2007:419) assert that the development of alcohol addiction is a complex process involving many elements such as constitutional vulnerability, environmental encouragement, and unique biomedical properties of certain psychoactive substances.

## 3.6 Neurobiology of Substance Abuse

Drugs vary in their biomedical properties and how rapidly they enter the brain. Central to the neurochemical process essential for addiction is the role played by drugs in activating the pleasure pathway which involves mesocorticolimbic dopamine pathway (MCLP), the centre of psychoactive drug activation in the brain (Butcher *et al.*, 2007:419). The MCLP arises from axons or neuronal cells in the middle portion of the brain called the ventral tegmental area, which also connects to other brain centres such as the nucleus accumbens and then to the frontal cortex (Butcher *et al.*, 2007:419). Butcher *et al.*, (2007:419) assert that this neuronal system is involved in such functions as control of emotions, memory as well as gratification, while alcohol produces euphoria by stimulating this area in the brain.

The research findings have shown that direct electrical stimulation of the MCLP produces great pleasure and has strong reinforcing properties (Butcher *et al.*, 2007:419). Other psychoactive drugs also work to change the brain's normal functioning and to activate the pleasure pathway (Butcher *et al.*, 2007:419). The exposure of the brain to an addictive drug alters its neurochemical structure and results in a number of behavioural effects and continued use of the drug, neuroadaptation or tolerance, and dependence to substance develop (Butcher *et al.*, 2007:419). Blackouts are perhaps the most interesting phenomenon associated with alcohol use and the one about which the least is known neurologically (Van Wormer *et al.*, 2008:130).

Blackout is the term used by both alcoholics and health researchers to describe the total inability to recall events that occurred while the person was drunk, even though the person appeared normal at the time as the inability to store knowledge in long-term memory is attributed to a high blood alcohol level. Usually when over 0.30 blood alcohol concentration as well as alcohol is consumed, larger sections of the brain are turned off, preventing cells from firing and new memories from being laid down (Sweeney, 1990:155). Females appear to be susceptible to this condition after a spell of heavy drinking. The youth are the most likely age group to experience a blackout, and blackout is even stronger when alcohol is combined with valium, sleeping pills, or muscle relaxants (Van Wormer *et al.*, 2008:130).

## 3.7 Genetic Vulnerability, Influences and Learning on Substance Use and Abuse

The possibility of a genetic predisposition to developing alcohol abuse problems has been widely researched, and the findings have shown that many experts agree that genetics probably plays an important role in developing sensitivity to the addictive power of drugs such as alcohol. Genetic factors are associated with substance abuse disorders in a family lineage (Plomin & DeFries, 2003:18). Butcher *et al.*, (2007:420) assert that children of alcoholics have inheritance of alcoholism and alcoholism clearly tends to run in families. The sons of alcoholics have a high risk for developing problems with alcohol because of an inherent motivation to drink or sensitivity to the drug (Butcher *et al.*, 2007:420). Butcher *et al.*, (2007:420) note that children of alcoholic parents who had been adopted by nonalcoholic foster parents were nearly twice as likely to have alcohol problems by their late twenties as a control group of adopted children whose real parents were not alcoholics. Genetic factors certainly do influence individual susceptibility to substance abuse (Nesse, 1994:344).

Bouchard and Loehlin (2001) describe an alcohol-risk personality as an individual, usually an alcoholic's child, who has an inherited predisposition towards alcohol abuse and who is impulsive, prefers taking high risks and is emotionally unstable. Prealcoholic

men who are genetically predisposed to developing drug or alcohol problems but who have not acquired the problem show different physiological patterns than nonalcoholic men in several respects (Butcher *et al.,* 2007:420). They tend to experience a greater lessening of feelings of stress with alcohol ingestion than do nonalcoholic men, and these men show a larger conditioned physiological response to alcohol cues than individuals who were considered at a low risk for alcoholism (Butcher *et al.*, 2007:420). Butcher *et al.*, (2007:420) contend that pre-alcoholic men might be more prone to develop tolerance for alcohol than low risk men. Butcher *et al.*, (2007:421) assert that having a genetic predisposition or biological vulnerability to alcohol abuse is not a sufficient cause of the disorder due to the development of alcohol-related problems which involve living in an environment that promotes initial as well as continuing use of substance. People become conditioned to stimuli and tend to respond in particular ways as a result of learning, as this appears to play an important role in the development of substance abuse and antisocial personality disorders (Butcher *et al.*, 2007:421).

## 3.8 Psychosocial Repercussions of Substance Abuse

Behavioural problems associated with alcohol and other drugs emerge, in most people, during late adolescence and early adulthood (Van Wormer *et al.*, 2008:229). Rose (1998:132) assert that identifying and understanding the course of those problems, accordingly, requires a developmental perspective, and many risk factors, can be spotted in early childhood by young people's parents, teachers and counsellors. Erik Erikson (1963:05) and Van Wormer *et al.*, (2008:229) proposed a theory of psychosocial development consisting of eight stages on growth and development focused on how an individual personality interacts with the biological and social systems to affect behaviour.

From birth to old age, birth life consists of a chronological series of age-related developmental stages and tasks that need to be completed. In this instance, for the practitioner, knowledge of psychological milestones normally negotiated such as during adolescence and the youth adulthood, is important for the overall assessment of behaviour and functioning (Zastrow & Kirst-Ashman, 2006:46). Certain features of the

adolescent brain may predispose a youngster to behave in ways that place him or her at particular risk for trying alcohol and other drugs (Van Wormer *et al.*, 2008:230). The very plasticity of the adolescent brain that facilitates learning also renders them particularly vulnerable to the temptation of substance use and related brain damage (Monti, Miranda, Nixon, Sher, Swartzwelder & Tapert, 2005:207).

A number of adult mental disorders such as schizophrenia and bipolar disorders have their onset in adolescence, and are probably related to brain changes, while prevention of heavy alcohol and other substance use during this vulnerable period is paramount (Van Wormer *et al.,* 2008:231). Van Wormer *et al.*, (2008:231) assert that the part of the brain linked to judgment, novelty-seeking, and self-awareness does not reach full maturity until after age 20. This is probably why many teens lack the skills to resist peer pressure, and why many engage in "daredevil" activities, and when hormones change, peer pressure, and the need for autonomy are added to the equation, the end result can be volatile. Alcohol is associated with a wide range of social problems such as unemployment and poverty. It alcohol plays a role in the social disintegration of family and community life, especially in black communities (Parry & Bennets, 1998:06).

In Erik Erickson's identity versus role diffusion of adolescence experimentation and the struggle for meaningful identity occurs, where adolescents experiment with drugs and drunkenness, and hang around with antisocial peers (Van Wormer *et al.*, 2008:231). During the turbulence of adolescence, when the growing child pursues his or her identity independently of parents, peer group influence is at its strongest. The odds of the youth aged 12 to 17 using marijuana were found to be 39 times higher for those whose close friends used marijuana than for those who did not (Van Wormer *et al.*, 2008:231). A National Survey by substance Abuse and Mental Health Services Administration (2006:13) contends that peer drug use and peer attitude are the strongest predictors of marijuana use amongst the youth.

The psychotropic drugs interfere with the evolved mechanisms that regulate behaviour and block out-modeled responses as drugs are also used to adjust arousal (Nesse,

1994:345). Drugs can lead to psychological tolerance with psychological effects and more difficult to overcome (Johnson, 2004:36). In some instances, drug use is meant to ameliorate feelings of poor self-esteem (Van Wormer *et al.*, 2008:238). The probable explanations of the use of alcohol are emotional pain relief, dulling bad feelings about the self, stress and anxiety (Van Wormer *et al.*, 2008:239). Van Wormer *et al.,* (2008:239) allude to the fact that researchers have postulated that the presumed increase in anxiety and stress during adolescence contributes to the frequent initiation into drug use observed at this time. Spear (2000:120) also argues that adolescents' perception of events as stressful is a more important predictor of alcoholism than an absolute number of such events. Regarding trauma, there is a strong link between child abuse and later development of alcoholism and other drug problems (Downs, Capshew & Reindels, 2004:336). Girls who are sexually abused are three times more likely to develop drinking problems later than girls not abused (Elias, 1998:01). Abuse is the single strongest predictor of alcohol dependence in girls, even stronger than a family history of alcoholism (Van Wormer *et al.,* 2008:238). Smoking in women is strongly related to a history of child sexual abuse (Join Together, 2006:1).

Sexually abused boys were more likely to be diagnosed with conduct disorder, dysthymia (mild depression), while girls were likely to be diagnosed with post-traumatic stress disorder and major depression (Van Wormer *et al.*, 2008:238). Aggression at age 8 predicted alcoholism of 18 to 20 years later in males, while for females, children who cried easily when teased or who were anxious and shy were most apt to develop problems later. Hence, for both sexes, poor school success was a predictor of later drinking problems (Van Wormer *et al.*, 2008:237). Adolescents with alcohol problems report higher rates of physical abuse, violent victimisation, witnessing violence, and other traumas compared with controls ("The youth Drinking," 1997:04).

Van Wyk *et al.*, (2007:342) assert that people who live in difficult circumstances such as poverty, dysfunctional families or with psychological or psychiatric problem disorders may find relief from these circumstances by taking drugs. Chaotic home environments, ineffective parenting, lack of positive family attachments, and nurturing, overly shy or

aggressive classroom behaviour, failure in school performance, poor social coping skills, affiliations with deviant peers and approval of drug using behaviours in family, work, school, peer and community, are risk factors for substance abuse (Van Wyk *et al.*, 2007:342). Hereditary factors which are environmentally determined influence development of alcoholism which are family drinking patterns, the availability of alcohol, and peer group habits (Van Wormer *et al.*, 2008:237).

Parents are primary role models for their children's drinking, and drug using behaviour are positively associated with adolescent patterns of substance use (Van Wormer *et al.*, 2008:237). Many young people use substances because they want to be accepted by their friends who use drugs or to deal with daily stress, whereas those who live in poverty-stricken families anesthetise themselves with drugs as a way of escaping from their environment (Goldberg, 2002: xiii). Goldberg (2002: xiii) also asserts that some individuals who seem to have everything immerse themselves in drugs, possibly out of boredom. Behaviour tolerance individuals are highly intoxicated people who have learned to act normally to controlled social environments; they arrange their life so that their social movements are limited to routine, well-rehearsed actions and environments (Johnson, 2004:36).

# CHAPTER FOUR

# SOCIO-CULTURAL FACTORS AND EVENTS PROMOTING SUBSTANCE ABUSE AMONG THE YOUTHS

## 4.1 Introduction

This chapter reviews literature on social and cultural factors promoting substance abuse amongst the youths. The chapter discusses factors contributing to substance abuse amongst the youth such as parental influence, role modeling, peer pressure, advertising, marketing and promotion. The factors also include poverty, violence and criminal offences towards family members. Other factors that were discussed in this chapter incorporate school related problems and risky sexual practices. The chapter also outlines the impact of culture on substance abuse amongst the youth. The chapter reviews literature on socio-cultural events towards substance abuse. This includes a discussion on how socio-cultural events relate to substance abuse in rural areas. The chapter also introduces the availability of substances in socio-cultural events, and presents the frequency of socio-cultural events in rural communities. The discussion also focuses on preparation of substances for socio-cultural events.

## 4.2 Social and Cultural Factors Fueling Substance Abuse

Socio-cultural factors such as the social sanctions against alcohol consumption in Africa appear to be weakening, especially for females and adolescents (Myadze & Rwomire, 2014:2). Myadze and Rwomire (2014:2) postulate that religious taboos about drinking are no longer taken seriously. Currently, drinking patterns shifted away from traditional norms as alcohol dependence and problem of drinking became an increasing concern in the society (Myadze & Rwomire, 2014:1). Regions with the highest level of economic development tend to have the highest per capita consumption of alcohol (Myadze & Rwomire, 2014:2). Myadze and Rwomire (2014:2) articulate that wide variations exist in

the cultural patterns of alcohol use, its integration into everyday life, and the meanings associated with it as culture shapes all aspects of alcohol use, including its physical and social consequences. Heath (1982:2) notes that socio-cultural factors are as critical to the understanding of the influence of alcohol on behaviour as are physiological or psychological considerations. Culture exerts a powerful influence over the use of alcohol throughout the world (Myadze & Rwomire, 2014:2).

Socio-cultural practices contribute toward substance abuse amongst the youth in rural areas. Mokgwadi (2011:481) found that young people enjoy when there is entertainment during socio-cultural events as they view entertainment as the way to go and they unwittingly engage in substance abuse. These socio-cultural practices serve as agents of socialisation in rural setting in such events. Spooner and Hetherington (2004: vii) further assert that the broader societal and cultural events influence young people's individual risk factors such as social alienation and social support, and environmental risk factors such as social cohesion and social exclusion as well as societal systems and institutions for substance abuse. Socio-cultural practices play a role in the escalation of alcohol and drug use or abuse in rural settings (Jiloha, 2009:167). Young people lead life in different ecological contexts, and socio-cultural practices impact on the manifestations of their behaviour towards alcohol and drug use and abuse (Mokgwadi, 2011:482).

In a study amongst African Americans, socio-cultural factors were to found to play a role in the high rate of alcohol abuse and dependence (Butcher *et al.*, 2007:425). In another study in India, socio-cultural practices were also found to play a role in the choice of substances abused in rural areas (Jiloha, 2009:167). Substance abuse is challenging as young people are particularly vulnerable to harm from the abuse due to culture, customs and values (Spooner & Hetherington, 2004:3). Bobo and Husten (2000:225) assert thin socio-cultural practices influence the initiation and continued abuse of substances amongst the youth. The youth grow up in various environmental contexts with socio-cultural practices that influence their behaviour towards substance abuse (Aguilera & Plasencia, 2005:303).

There is still a need to impart life skills knowledge about how to deal with socio-cultural practices through substance abuse programmes (Chiroro *et al*., 2012:42). Ajao *et al*., (2014:215) assert that little is known about knowledge, attitudes and behavioural practices regarding the influences of socio-cultural practices towards substance abuse amongst the youth in rural areas. There are problems associated with substance abuse amongst adolescents such as parental influence, family structure, peer pressure, role modeling, advertising and promotion, poor socio-economic factors, accessibility, availability, lack of knowledge, negative attitudes and beliefs (Jiloha, 2009:168). The serious risk direct and indirect socio-cultural consequences of adolescent substance abuse are traffic accidents, school related problems, risky sexual practices, delinquent behaviour, juvenile crime, developmental problems, physical and mental consequences, infections, violence, future use disorders, drug trafficking and legislation (Jiloha, 2009:170). Substance abuse amongst adolescents is associated with socio-cultural risk factors such as family and peer influences, demographics, advertising, economics as well as substances availability (Bobo & Husten, 2000:226). Other factors contributing towards substance abuse includes the following:

## 4.2.1 Parental influence

Adolescents are more likely to abuse substances at an earlier age if their parents do (Bobo & Husten, 2000:226). Chiroro *et al*., (2012:11) point out that substance abuse is a mainly home-based problem, including parents who are substance abusers, which is further boosted by social and cultural attitudes of seeing the use of substances as a norm, ease of obtaining and accessibility of alcohol and drugs. Cultural practices are products of learned as well as shared standards of behaviour that are transmitted from elders to the youth (Castro & Coe, 2007:783). Social factors should also be considered, such as families seeing drinking as a way of increasing bonding among family members and friends as these families also view sobriety as a risk of being ostracised, which may influence their use of alcohol (Van Wormer *et al*., 2008:432).

Emerging obstacles faced when trying to educate the youth about the dangers of substance abuse are mainly home-based problems, including parents who are

substance abusers, cultural and religious attitudes, including seeing the use of substances as a norm (Chiroro *et al.*, 2012:25). Parent-child relationship factors, including limited or poor quality familial attachments, low levels of parental supervision and strictness, inadequate parental monitoring, lack of parental affection, concern and involvement are related to substance abuse amongst adolescents (Bobo & Husten, 2000:226). Van Wyk *et al.*, (2007:342) assert that young people in rural areas who live in difficult circumstances such as poverty and dysfunctional families find relief from these circumstances by abusing substances.

Chaotic home environments, ineffective parenting, lack of positive family attachments, and nurturing are issues affecting the youth to abuse substances (Van Wyk *et al.*, 2007:342). There are three parental variables that have high predictive power for the initiation of adolescent substance abuse, such as parent drug using behaviours, parental attitudes concerning drugs, and the quality of parent-child interactions (Van Hasselt, Hersen, Null, Ammerman, Bukstein, Mcgillivray & Hunter, 1993:215). The quality of parent-child interactions factor has been characterised by lack of family closeness, low levels of maternal involvement in activities with children, and insufficient, inconsistent, or severely harsh parental discipline (Van Hasselt *et al.*, 1993:215). The impact of poor parenting, inadequate family problem solving and high levels of family conflict lead to subsequent adolescent substance use and abuse (Van Hasselt *et al.*, 1993:215).

## 4.2.2 Role modeling

Adolescents' imitation of film, television and pop stars as well as fashion models styles of substance abuse has direct impact of substance abuse amongst the youth (Jiloha, 2009:169). Most learners in schools are likely to look for role models by paying less attention on whether modeling is either positive or negative. The youth in schools end up even modeling the abuse of substances if the environment promotes the abuse of substances due to availability and accessibility. Young people who have deviant role models are likely to lead the behaviour to abuse substances as a way of modeling their role models (Van Hasselt *et al.*, 1993:215).

## 4.2.3 Peer pressure

Spein *et al.*, (2004:118) asserts that peer influence is the predictor of youth substance abuse. One of the contributing factors towards substance abuse is peer pressure as well as experimentation amongst school learners as they influence each other and want to taste substances in order to feel high after the use (Lebese *et al.*, 2014:334). Erik Erickson's (1963) stages of the theory of psychosocial development, namely identity versus role diffusion (12-17 years) is pertinent to this age group as it predicts experimentation of substances. Van Wormer *et al.*, (2008:231) assert that the risk during this stage of development is that adolescents experiment with drugs and alcohol and socialise with antisocial peers. Adolescence is a time of experimentation when young people become increasingly independent and mobile, and are subject to a "widening range of social influences" (Harker, Myers & Parry, 2008:16).

Peer drug use and peer attitude are two of the strongest predictors of marijuana use, and the odds of the youth aged 12 to 17 years using marijuana were found to be 39 times higher for those whose close friends used marijuana (Van Wormer *et al.*, 2008:231). Adolescents' substance abuse happens mostly in the company of friends (Bobo & Husten, 2000:226). Young people in company of peers abuse substances to be accepted, to be popular, to fit in, to impress friends, and to be cool in front of friends (United Nations Office on Drugs & Crime, 2004:07). Substance abuse in the company of friends is for enjoyment, excitement and fun in order to feel good, high, happy, laugh, relieve boredom, to have good time, to feel on top of the world and to get energy (United Nations Office on Drugs & Crime, 2004:07).

## 4.2.4 Advertising, marketing and promotion

The researcher is of the view that substance abuse amongst the youth is perpetuated by promotion, advertising and markting of alcohol. Some significant contributors of substance abuse are advertising, promotion and marketing which are getting more sophisticated and are highly unregulated (Dumbili, 2013:26). Advertising and promotion of substances is one of the major factors contributing towards the abuse of substances amongst the youth (Bobo & Husten, 2000:226). Advertising is found to be the effective

weapon contributing towards the youth's decision to initiate abusing substances (Jiloha, 2009:169). Advertising and promotion is a potential risk factor for substance abuse amongst the youth (Bobo & Husten, 2000:227). Bobo and Husten (2000:227) opine that awareness of beer and tobacco commercials contribute to adolescents to abuse substances at their early ages.

Commercial advertising and promotion bans might reduce the prevalence of substance abuse amongst the youth (Jiloha, 2009:169). Manufacturers of alcohol and tobacco market their products in different ways to encourage the consumption and smoking of these products (Bruijn, 2011:1). These products are also marketed on television. The marketing of the products promotes the use of these substances. This affects young people because they view it as a good thing to do and to use it continuously, but they end up being addicted. The marketing of these alcohol and tobacco expose young people both in urban and rural areas to consume and smoke (Bruijn, 2011:1). Media is the basic form of passing messages to people and being listened to or watched, but on the other hand, market substances which promotes consumption and smoking of alcohol and tobacco (Bruijn, 2011:3).

## 4.2.5 Poverty

A study conducted by Makhubele (2012:17) in the Mopani District of Limpopo Province found that social exclusions, for instance, poverty, high unemployment and lack of social contacts are generally contributing factors to the increased prominence of home-made alcohol in South African society. Young people from low socio-economic contexts are at risk of having poorer public health as they are more likely to abuse substances in a high-risk manner and to use illicit drugs (Spooner & Hetherington, 2004: vii). Makhubele (2012:17) argues that socio-economic inequalities as well as persistent weakening of family bonds have shaped an environment in which temporary escape from the harsh reality of everyday life is often sought through the production of home-made alcohol.

Substance abuse is complicated by complex socio-economic challenges such as unemployment and poverty which devastated many families and communities (Lebese *et al.*, 2014:330). Spein *et al.*, (2004:119) contend that poor parental income and their socio-economic status contribute towards substance abuse amongst the youth. High rates of substance abuse are observed in low socio-economic settings due to easy availability and low prices of home-made prepared illegally concoctions (Jiloha, 2009:169). Socio-economic factors like the failing education system as well as high unemployment rates make the youth more vulnerable and likely to engage in substance abuse (Jagganath, 2015:222). Anderson (1998:241) is of the view that economic opportunity has a direct and negative effect on social marginalisation, and an indirect and negative effect on identification with a substance abuse. For instance, due to the limits on economic opportunity, the greater the risk of substance abuse. Therefore, poverty is a socio-economic factor that contributes towards the abuse of substances amongst the rural youth. Social workers in this case should also detect how poverty plays a role towards the abuse of substances amongst the youth in rural areas. Social workers should make recommendations on skills development to develop young people to deal with poverty. The social workers in this case should serve as brokers to link young people with relevant stakeholders in order to impart them with skills for poverty eradication.

## 4.2.6 School related problems

Substance abuse amongst adolescents is relative to poor academic performance, declining grades, absenteeism from school as well as dropping out of school (Jiloha, 2009:170). Risk factors for substance abuse are overly shy or aggressive classroom behaviour, failure in school performance, poor social coping skills, affiliations with deviant peers and approval of drug using behaviours in family, school, peer and community (Van Wyk *et al.*, 2007:342). The youth whose parents had not received a high school qualification are at a greater risk of substance abuse (Haskins, 2012:02). Low parental education and moderate household income has also been associated with greater rates of substance abuse in adolescents (Haskins, 2012:02). Townsend, Flisher and King (2007:297) argue that the reasons for the youth to drop out of school are due

to substance abuse. The youth who are at risk of substance abuse are also in danger of failing at school as well as in their social life (McCrystal, 2009:242). The risk factor of learners' substance abuse at school is academic failure and low commitment to school work (Brazg *et al.*, 2011:505).

### 4.2.7 Risky sexual practices

The extent to which the youth abuse substances is motivated by the need to relieve stress, the need to pass time, to socialise, to enhance confidence, and to stimulate themselves sexually, resulting in school drop-outs, binge drinking and addiction (Makhubele, 2012:24). Substance abuse in rural areas is also associated with school dropout, unplanned sexual activities and increased sexually transmitted diseases (Tshitangano & Tosin, 2016:1). Adolescents abusing substances are likely to have multiple partners and to engage in sexual activities at an early age, which put them at greater risk of unplanned pregnancies, HIV/AIDS and sexually transmitted diseases (Jiloha, 2009:170). Substance abuse has been linked to high levels of sexual risk behaviours such as multiple partners, and engaging in unprotected sex by both men and women (Pluddemann, Flisher, Mathews, Carney & Lombard, 2008:687). Substance abuse amongst learners makes them vulnerable to HIV infection, sexual transmitted infections and poor school performance (Ajao *et al.*, 2014:214). The National Strategic Plan for HIV, TB and STIs (2017-2022) outlines that substance abuse is one of the social drivers of HIV & AIDS.

## 4.3 The Impact of Culture on Substance Abuse

Socio-cultural beliefs can shape the approach to and behaviour regarding substance use and abuse, while culture plays a central role in forming expectations of individuals about potential problems they may face due to substance abuse (Abbott & Chase, 2008:02). Cultural customs and values allow the free availability and accessibility of substances in rural areas which is accepted as a norm, for instance when there a traditional ceremony (Jiloha, 2009:167). Culture encourages the presence and abuse of substances in cultural gatherings to serve as an agent of socialising (Manganyi, 2015:44). There are various cultures in South Africa, for instance, for Zulu, Pedi, Venda,

Xhosa, Ndebele speaking people with their distinct cultural attachments and identities. The study of the impact of socio-cultural practices towards substance abuse amongst the youth focuses on rural communities of Malamulele. In *Xitsonga* speaking rural areas of Malamulele, there are plenty of cultural functions such as "*vukhomba*", "*xigubu*", "*xiseveseve*", "*van'waswimanimani*", "*makwaya*", and "*xibelani*", which encourage the presence and abuse of substances to serve as agent of socialisation.

Eckersley (2005:157) asserts that cultures provide the underlying assumptions of an entire way of life, which allows us to make sense of the world and our lives. Eckersley (2005:157) also argues that aspects of modern western culture are persuasive and underestimate social factors behind drug use and abuse. Eckersley (2005:159) argues that there is a need for a socio-cultural intervention perspective on population health problems, for instance, substance abuse. The role of culture in the mainstream of population health provides meaning and qualities that contribute to it such as autonomy, competence, purpose, direction, balance, identity and belonging, which are fundamental to young people as these attributes are destinations of the developmental journeys they are undertaking (Eckersley, 2005:159).

The influence of culture on health and well-being and cultural characteristics can have a positive impact on social support and personal control. Culture provides a broader sense of a system of meanings and symbols that shape how people in various contexts see the world and their place in it, which will also give meaning to personal and collective experience (Eckersley, 2005:158). Eckersley (2005:159) asserts that the need for intervention programmes to reduce drug use has a deep cultural change to promote better population health and well-being. Cultural variables involve relationships with broad family networks, interpersonal and intrapersonal relationships assessment that affects the nature and quality of relationships relative to the use and abuse of substances in rural areas. Oetting (1999:947) is of the view that parents, schools and peers are the most influential sources of culture that shape perceptions and behaviours of young people regarding the use and abuse of substances.

Gilley and Co-Cke (2005:293) state that cultural factors are contributing towards substance abuse in rural areas. Cultural expectations constitute specific gender-based norms that influence substance abuse behaviour by specifying rewards or adverse impact as consequences of specific behaviours (Castro & Coe, 2007:783). In this case, substance abuse is gender-linked with cultural expectations. Communities abhor substance use by women while at the same time approve substance use by men (Castro & Coe, 2007:783). To this end, cultural practices are products of learned as well as shared standards of behaviour that are transmitted from elders to children (Castro & Coe, 2007:783).

## 4.4 Socio-cultural Events and Substance Abuse

Cultures provide the underlying assumptions of an entire way of life, allowing people to make sense of the world and their lives (Eckersley, 2005:157). In the context of this study, culture was seen as an underlying assumption of a way of life, allowing young people in rural areas to define the sense of their own world and lives regarding the use and abuse of substances. Socio-cultural practices contribute towards the use and abuse of substances by the youth. During pre-colonial times in Africa, beer and wine played crucial roles in religious, cultural and secular ceremonies and events (Manganyi, 2015:41). The researcher believes that the context of rural areas is attached with customs and values relative to and applied in socio-cultural events such as brewing alcohol for free in such events. This is how life is viewed where customs allow the use of substances in socio-cultural events without age restriction. Young people enjoy substances during socio-cultural events by unwittingly engaging in substance abuse. These socio-cultural practices serve as agents of socialisation in these socio-cultural events. The use and abuse of substances is for ceremonial purposes in rural areas (Abbott & Chase, 2008:02).

Socio-cultural ceremonies such as *"vukhomba", "xigubu", "xiseveseve", "van'waswimanimani", "makwaya" and "xibelani"* contribute towards substance abuse where home-brewed substances are mostly and frequently obtained for free. This abuse happens because substances are readily availability and accessibility; it is customs and

culture. During socio-cultural events, various types of traditionally home-brewed beverages/drinks are abused by the youth. These types of substances pose a danger to the health of these young people as they are even not measured or tested in terms of their fitness for human consumption. These substances are easily accessible because there are no regulatory mechanisms of home-brewed points and how this should be taken by whom.

Mokgwadi (2011:481) argues that the youth in rural areas socialise in socio-cultural events by engaging in the continuous use of substances. These events are commonplace and often revolve around alcohol use before and during meals, and again alcohol is often seen as a social lubricant (Butcher *et al.*, 2007:425). Socio-cultural events play a role in the choice, use and abuse of substances as young people experiment with substances in these events (Jiloha, 2009:167). In Africa, the situation is perpetuated by the prevalent custom that encourages the presence and abuse of substances in socio-cultural events (Abasiubong *et al.*, 2012:10). Though there are socio-cultural events in families contributing towards substance abuse amongst the youth, there is also no mechanism of monitoring these events. Young people observe, learn and experiment with substances in these events. The researcher is of the opinion that if there was a monitoring and regulatory mechanism, this could decrease.

In the context of this study, socio-cultural events include *"vukhomba", "xigubu", "xiseveseve", "van'waswimanimani", "makwaya" and "xibelani",* which are held every weekend in rural areas. This contributes towards substance abuse as this is where they are mostly and frequently practised. The nature of substances used by the youth in schools as well as the prevalence of these substances in socio-cultural events contributes towards substance abuse. The frequency of socio-cultural events and substances abused by learners in these settings has a negative impact on young people's lives.

## 4.5 The Availability of Substances in Socio-cultural Events

The prevalence of drinking alcohol in rural areas amongst the youth is increasing (Visser & Routledge, 2007:597). Hamdulay and Mash (2011:83) assert that alcohol is the primary substance abused by young people, with lifetime use prevalence rates between 25% and 40%. The most commonly abused substances by the youth in Limpopo Province are cannabis (49%), inhalants (39%), bottled wine (32%), home-brewed beer (30%) and commercially brewed beer (54.8%) (Department of Social Development & University of Limpopo, 2013:16). In a national survey conducted in 2008, half (50%) of grade 8 to 11 learners had consumed alcohol, just under one third (30%) had smoked cigarettes, and 13% had used cannabis in their lifetime (Van Wyk *et al.*, 2007:341). The use and abuse of substances in rural areas is rife due to being easily accessible, having several home-brewed points as well as affordability and less cost. The nature and types of substances mostly used everyday are traditional home-brewed and unorthodox concoctions because they are cheap. Due to socio-economic exclusions experienced by a huge number of households, people opt to establish home-brewed points to sustain their families.

Most of the learners in high schools started using substances between the ages of 15 to 20 years in rural areas. This was mostly compounded by socio-cultural practices and ceremonies as the majority of learners attested that substances are easily obtainable in villages in these events (Tshitangano & Tosin, 2016:01). The prevalence of substance abuse areas is rife and tends to be overlooked as there are no control mechanisms that look at how substances are abused in such contexts. This proliferating and pervasiveness is also caused by the availability of many socio-cultural events with attached customs and values that allow free availability and accessibility of these substances. The occurrence of socio-cultural events, ceremonies and functions is rife, and contributes negatively towards the abuse of substances by young people since there is no age restriction in these events.

## 4.6 Frequency of Socio-cultural Events in Rural Communities

Spein, Sexton and Kvernmo (2004:118) contend that indigenous or socio-cultural practices and events contribute 23% of substance abuse behaviour. Adebiyi, Faseru, Sangowana and Owoaja (2010:01) emphasise that in the local areas of Nigeria, 20.5% of school learners abused substances in these events. In the Niger Delta region of Nigeria, the situation of substance abuse is compounded by prevailing customs that encourage the presence and abuse of substances in traditional functions and ceremonies (Abasiubong *et al*., 2012:10). Young people in rural areas are now allowed to use substances with no restrictions, which leads to the increase in the use of liquor, unlike in the past where it was not allowed. Socio-cultural events play a huge role in the increase in substance abuse as liquor is for free, and serves as agent of socialisation with no regulatory frameworks to look at the use of substances in such events. Traditional authorities tend to overlook the regulation of the use and abuse of home-brewed due to plenty of socio-cultural events, which hugely promote the abuse and use of substances in rural communities. In many families and communities' celebrations, traditional events, weddings and puberty rites, the youth in schools use and experiment with alcohol and drugs (Manganyi, 2015:42). Socio-cultural events i are mushrooming almost every week, accompanied by the use and abuse of alcohol and drugs n Malamulele.

In the context of this study, socio-cultural events refer to ceremonies such as *"vukhomba", "xigubu", "xiseveseve", "van'waswimanimani", "makwaya" and "xibelani"*, which contribute towards substance abuse where they are mostly and frequently practised. These events are held every weekend in rural areas where liquor is free flowing and traditional customs and values are followed as agents of socialisation. The availability of traditional liquor in these socio-cultural events is viewed as a spirit of "*Ubuntu*" amongst those living as it is for free. A socio-cultural event, ceremony or function without liquor is viewed as not uplifting, or as undermining traditional customs and values as well as the spirit of "*Ubuntu*". Young people indulge in substances due to socio-cultural events as some of the contributing factors. Young people enjoy participating in these socio-cultural events as they know liquor is free. These socio-

64

cultural events serve as entertainment during the weekends as they are attached to the use of substances. Young people opt to attend these socio-cultural events as agents of socialisation due to shortage of extra-mural activities in rural areas.

These socio-cultural events are held quarterly, monthly and weekly in rural communities where substances are easily available and accessible. Bobo and Husten (2000:225) emphasise that socio-cultural influences and events influence the initiation as well as the continued abuse of substances. During such socio-cultural events, people take meals before the use of substances as foods are prepared for a huge number of people. The social events are commonplace and often revolve around alcohol use before and during meals, and again alcohol is often seen as a social lubricant (Butcher *et al.*, 2007:425). Gilley and Co-Cke (2005:293) state that cultural factors and events are contributing towards substance abuse. During these events, people take their meals for free before using substances which are also free.

Historically, the use and abuse of substances was approved for men as women were not allowed because they were linked to the performance of household responsibilities. Nowadays, young females indulge in substances such as ciders as well as tobacco in such socio-cultural events. Cultural expectations constitute specific gender-based norms that influence substance abuse behaviour by specifying rewards or the adverse impact of abuse as consequences of specific behaviours (Castro & Coe, 2007:783). The use of substances was previously gender-based, as it did not allow women to use liquor as an agent of socialisation in socio-cultural events in rural areas. Nowadays, the number of women using liquor in such events is very rife. The impact of socio-cultural practices amongst the youth is the tendency by smokers to drink alcohol and drinkers of alcohol to smoke (Bobo & Husten, 2000:225).

## 4.7 Preparation of Substances for Socio-cultural Events

Traditionally, the pattern of ceremonies, functions and events are viewed as drinking occasions (Manganyi, 2015:42). Manganyi (2015:42) asserts that many family and community celebrations such as weddings and puberty rites would be deliberately

scheduled to take place in the post-harvest period when the availability of ingredients for alcohol production was assured. The use of home-brewed substances in rural areas was successfully meant for family celebrations to give thanks to the ancestors the performance of rituals (Manganyi, 2015:43). Traditional beers meant for such socio-cultural events are prepared at least three days before the ceremony or function. People who are responsible for preparing these traditional beers are older experienced women.

Again, when there are funerals, people drink traditional beers (Manganyi, 2015:43). Young people also use substances during the preparation of the grave in the graveyards. When young people are under the influence of substances made available by the mourning family in the graveyards, they start being violent and become disrespectful to the elderly as well as causing havoc. This sound bad to the mourning family, community and traditional authority as it is viewed as disrespectful. Manganyi (2015:43) contends that the drinking of low-ethanol alcohol, which is woven into special community-wide ceremonies and occasions marking life-cycle passages, constitutes an intensely social event. In some rural areas, people use beers in parties to socialise as men would gather together to discuss the news and events of the village while drinking as a way of fostering a sense of community solidarity among the men of the village (Manganyi, 2015:42). These days, young school learners also use liquor as an agent of socialisation, which poses risk to their sustainable livelihoods.

# CHAPTER FIVE

# CONSEQUENCES OF ABUSING DRUGS AND ALCHOHOL AMONGST THE YOUTH

## 5.1 Introduction

This chapter presents the effects of substance abuse amongst the youth. There are different effects presented about the abuse of substances by young people. The chapter also introduces the general consequences of substance abuse. Specific effects of substance abuse amongst the youth are also discussed in this chapter. The consequences of harmful substance abuse cannot be denied in the present world because it has social, health, economic, and psychological consequences (Dumbili, 2013:27). Dumbili (2013:27) indicates that in schools the clashes have been on the increase and youths cruelly maim their rivals with dangerous weapons. These effects involve a discussion on crime and domestic violence, and include HIV, teenage pregnancy, school dropout, school violence and addiction.

## 5.2 General Consequences of Substance Abuse

Young people commit crime, drop-out of school, becomes vulnerable to the socio-economic agenda, they are poverty stricken and addicted to substances in rural areas. Young people are also at risk in terms of their health status due to the types and nature of substances abused. The problem of abuse such as the use of illegal substances such as marijuana, cocaine and alcohol has increased recently in schools in Eisleben village, Botlokoa Ga-Ramokgopa in Limpopo Province (Mothibi, 2014:181). The patterns of substance use amongst South African adolescents is cause for concern as early initiation of alcohol use is associated with a range of negative consequences, including school drop-out, unprotected sexual behaviour that places adolescents at risk of infectious diseases and unwanted pregnancies, and later, the development of alcohol use and other mental disorders (Onya, Tessera, Myers & Flisher, 2012:352). It was found that 50% of young people have problems stemming from their family's alcoholism

(Drake & Mueser, 1996:87). The problem of substance abuse in schools has increased worldwide, which requires the need to incorporate substance abuse prevention into the school subjects in all grades (Mothibi, 2014:190).

When teenagers are induced or under the influence of substances, they sustain physical injuries through burns or falls (Lebese *et al.*, 2014:339). Substance abuse is an important social and health problem in almost all of countries in the world, including South Africa (Visser & Routledge, 2007:596). Many adolescents engage in substance use activities, which they do perceive as risky, but as somehow acceptable within their peer groups. As a result, risky behaviours of substance abuse during adolescent years is of major concern because they are associated with increased risk of injury, interpersonal violence, crime, high-risk sexual behaviour, suicide, academic difficulties, and school drop-out (Visser & Routledge, 2007:596). Substance abuse can impact on the rest of young people's lives who have engaged themselves in this kind of risky behaviour.

Alcohol seems to be one of the major substances that people abuse easily as a source of occasional pleasure and a usual habit (Lawal & Ogunsakin, 2012:37). Lawal and Ogunsakin (2012:38) contend that exceeding two drinks per day is linked to increase in blood pressure, and heavy drinking raises the risk of stroke. It can also cause swelling of the heart as well as irregular heartbeat. Substance abuse and criminality are critical problems in South Africa as a result of childhood difficulties, ineffective parenting, delinquent peers, and a lack of commitment to school amongst the youth (Kelly & Ward, 2012:45). The consequences and implications of substance abuse amongst the youth have a major contribution towards their lives being at risk of not participating in economic opportunities. Young people end up giving up their lives and opting to abuse substances.

## 5.3 The Specific Effects of Substance Abuse amongst the Youth

### 5.3.1 The effects of substance abuse are discussed as follows: Crime and domestic violence

In the United States, approximately 500 000 people were imprisoned for drug-related offences, while 80% of the people were behind bars in Columbia due to alcohol and drugs (CASA, 1998:17). In Canada, a study conducted in 26 communities showed that more than half of the people arrested for criminal offences were under the influence of alcohol and drugs (Garlick, 2000:02). Substance abuse in South Africa has reached epidemic proportions, and is problematic to the country (Mothibi, 2014:181). The most abused substance is alcohol, which is a major cause of crime, violence and moral decay in South Africa as between 65% and 70% of violent crimes in Cape Town can be attributed to the intake of alcohol (Mothibi, 2014:181). The use of marijuana precedes the use of alcohol, which in turn led to illicit drug-taking, and concurrently, to involvement in criminal activities. A unique problem exists when trying to consider marijuana's effect on crime as there is a correlation between marijuana use and criminal behaviour, which in turn contributes to traffic violations, accidents and fatalities (Mothibi, 2014:186).

Most of the domestic violence towards women by adolescents is directly associated with substance abuse (Jiloha, 2009:171). Socio-economic challenges and substance abuse lead to criminal activities amongst the youth (Lebese *et al.*, 2014:330). Tshitangano & Tosin (2016:02) contend that figures published by the South African Police Services (SAPS) show that substance abuse is accounting for 60% of all crime in the country. Amongst adolescents, substance abuse has a direct impact in the increase of violence and crimes rates (Jiloha, 2009:170). The risk factor for the youth's substance abuse is early aggressive behaviour, alienation, rebelliousness, antisocial behaviour associated with peers who abuse substances as well as being involved in violent and criminal offences (Brazg *et al.*, 2011:505).

Violence by the youth causes high levels of sexual violence against women, use of weapons as well as substance abuse, particularly for the youth living in deprived communities like rural areas (Waller, Gardner & Cluver, 2014:630). Risk factors for antisocial behaviour are a concern due to young people aged 12 to 22 years old, who are increasingly the most likely perpetrators of violence and aggressive crime in South Africa, which is around 35% of the country's prison population under the age of 25 years (Department of Correctional Services, 2010:01). Adolescents who abuse substances are likely to be delinquent, violent and engage themselves in criminal activities (Maggs & Hurrelmann, 1998:367).

## 5.3.2 HIV

The United Nations Acquired Immune Deficiency Syndrome (2009:01) contends that in 2007, the youth aged 15 to 24 years accounted for an estimation of 45% of the new HIV infections worldwide. An estimated 22.4 million people are living with HIV in Sub-Saharan Africa (UNAIDS, 2009:21). In 2008, it was estimated that 5.2 million people were living with HIV in South Africa (Shisana *et al.*, 2009: xv). Rice and Farquhar (2000:186) assert that about 50% of new infections affect young people between the age of 10 and 24. The prevalence of the HIV pandemic is high and alarming in South Africa as well as in Sub-Saharan Africa.

Teenagers who are using substance are mostly infected by HIV while they are under the influence of substances (Lebese *et al.*, 2014:340). There is a very strong link between substance abuse and HIV infection, which affects young school learners even in rural areas (Lebese *et al.*, 2014:340). Most young school learners who are using substances are irresponsible as they sleep around through unprotected sex. This poses a high risk of HIV transmission as they are usually out of their minds because of substance influence (Lebese *et al.*, 2014:340). Lebese *et al.*, (2014:340) assert that school learners who abuse substances are more likely to engage in delinquent behaviours such as sleeping with different partners. Lebese *et al.*, (2014:340) assert that young school learners who use substances are five times more likely to have sex

than teens who do not use substances, and more likely to have unprotected sex with a stranger.

### 5.3.3 Teenage pregnancy

Sexually transmitted infections (STIs) and HIV/AIDS are a major problem in South Africa, coupled with a high incidence of teenage pregnancy, alcohol and drug abuse. It is of grave concern, especially its impact among the young (15–24 years) and in economically poor, rural populations (Bana, Bhat, Godlwana, Libazi, Maholwana, Marafungana, Mona, Mbonisweni, Mbulawa, Mofuka, Mohlajoa, Nondula, Qubekile, Ramnaran, 2010:154). Sexual promiscuity and teenage pregnancy amongst young school learners are a cause for concern due to substance abuse (Bana *et al.*, 2010:154). Alcohol consumption has increased in South Africa because of decreased control over the production, sale and ready availability of alcohol and other local cultural factors affecting both males and females. It is probable that this may lead to an increase in episodes of unprotected sex, which in turn may contribute to an increase in STIs and unwanted pregnancies. Thus, teenage pregnancy makes the young mother susceptible to social ostracism, interrupted education, lack of social security, poverty and repeat pregnancies (Bana *et al.*, 2010:154).

### 5.3.4 School drop-out

Dropping out of school contributes to poor health and risky behaviour such as HIV and substance abuse amongst young people (Melton-Spelman, 2014:219). There is a close association between this problem and the high truancy rate, poor homework responses and lack of concentration by students during classes (Mothibi, 2014:181). There is a close relationship between substance abuse, crime and school drop-out amongst school learners in rural communities (Mothibi, 2014:181). The school environment plays a major role in the process of developing adolescent drug use due to the negative attitudes fostered by authoritarian school systems to make students more susceptible to drug use (Mothibi, 2014:188). Melton-Spelman (2014:219) asserts that high rates of death are linked to low educational attainment even more than are deaths from smoking.

Teenagers who are abusing substances such as dagga and alcohol are at high risk of failing, and show poor educational progress (Lebese *et al.*, 2014:339). Lebese *et al.*, (2014:339) contend that some school learners who are using substances are always in groups of three or four, and spend most their time smoking and drinking alcohol and they do not have time to focus on their studies. Young school learners who abuse substances particularly alcohol, are more likely to experience academic problems such as poor class attendance and inability to focus, and thus earn lower grades (Lebese *et al.*, 2014:339). School learners who use dagga are now not attending school and the only thing that they do is to go to illegal spaza shops that sell dagga and alcohol and do not even want to talk about school (Lebese *et al.*, 2014:339). The more a student uses tobacco, alcohol, cannabis, cocaine and other substances, the more likely he or she will perform poorly in school, drop out, or not continue to higher education (Lebese *et al.*, 2014:339).

## 5.3.5 School violence

More than twenty years since the dawn of democracy in the Republic of South Africa (RSA), the country continues to face seemingly insurmountable challenges relating to violent crime (Statistics South Africa, 2016:01). Although violence is a global concern that knows no boundaries, it is important to acknowledge that the dynamics surrounding violent crime in South Africa are complex and distinctive (Statistics South Africa, 2016:01). Aggressiveness towards teachers and elders, which sometimes leads to conflict and scuffles between teachers and learners also appear to be associated with substance abuse (Mothibi, 2014:181). There are four major causes of violent crimes at the individual level such as individual motives or attitudes, aggression and hostility, impulsivity, and the loss of problem-solving abilities (Mothibi, 2014:186). Alcohol used alone or in combination dramatically increases the risk of violent behaviour, and contributes expressively to the prevalence of adolescent suicide, fighting and robbery (Mothibi, 2014:186). There is a consistent and positive relationship between the use of alcohol and violent crime involving aggressive behaviour amongst school learners in rural areas (Mothibi, 2014:186). Learners abusing drugs and alcohol also become aggressive towards teachers and other learners (Lebese *et al.*, 2014:339).

## 5.3.6 Addiction

Continuous use of substances leads to dependence amongst young people (Lebese *et al.*, 2014:339). Continuous use of alcohol and drugs lead to physical and psychological harm amongst the youth due to addiction (Lebese *et al.*, 2014:339). Addiction as defined by the APA (2000:197) refers to the diagnosis of substance dependence disorder, which requires the presence of a maladaptive pattern of substance use, resulting in distress or clinically significant impairment, and involves at least three of the following symptoms which occur within the same 12-month period:

- Tolerance
- Withdrawal problems
- Use of substance longer than intended
- Unsuccessful attempts to control or reduce consumption
- Spending excessive amounts of time procuring, using substance or recovering from its effects
- Reduced involvement in important social, occupational or recreational activities, and
- Continued use despite the presence of recurrent physical or psychological problems.

Barker (2003:07) defines addiction as a physiological and psychological dependence on behaviour or substances amongst the youth. In this context, young people in rural areas are addicted to traditional and unorthodox concocted brewed beers that are prepared illegally in rural families for sustainability. Young people in rural communities depend on the use of home-brewed substances. When they wake up everyday, they look for home-brewed points to take alcohol as their daily routine.

# CHAPTER SIX

# SCHOOL-BASED PROGRAMME ON SOCIO-CULTURAL PRACTICES TOWARDS SUBSTANCE ABUSE AMONGST SCHOOL LEARNERS

## 6.1 Introduction

The chapter introduces the importance of school-based prevention programme on substance abuse. The role of social workers in the school-based socio-cultural intervention programme was presented in this chapter. This chapter describes the literature of the prevailing school-based substance abuse programmes in some countries. The prescribed school-based programme on socio-cultural practices towards substance abuse amongst school learners in rural areas is presented. There is a graphic representation of the development of a school-based intervention model presented in this chapter. The five competencies with social life skills to apply for the programme such as a positive sense of self, self-control, decision-making skills, a moral system of belief, and prosocial connectedness were presented in this chapter. The chapter also outlines the use of the community education model stages for the programme.

## 6.2 The Importance of School-based Prevention Programme on Substance Abuse

Schools are regarded as main areas for prevention activities on substance abuse, meaning the prevention of the impact of socio-cultural practices towards substance abuse amongst the youth is essential in schools in rural areas (Kvaternik & Rihter, 2012:120). Elkins, Miller, Briggs, and Skinner (2015:496) argue that schools should address the social issues such as substance abuse confronting the youth in their settings. The formation of appropriate strategies in schools is important in order to transfer knowledge relating to the impact of socio-cultural practices towards substance

abuse in schools (Kvaternik & Rihter, 2012:120). Schools are a learning environment with a pleasant atmosphere for young people to make responsible choices about the use of substances (Hocˇevar, 2007:152). The prevention of problems of substance abuse is considered as exceptional domain of school life in order to enhance the well-being of young people (Kvaternik & Rihter, 2012:120). It was found that the programme on the impact of socio-cultural practices towards substance abuse is appropriate to schools as it is culturally sensitive and enables social workers to be culturally competent.

This school-based programme is culturally important and sensitive unlike the "*Ke Moja"* programme that was mostly appropriate and received in urban and peri-urban areas. The *"Ke Moja"* programme focused on affluent provinces and metropolis cities with minimum attention being paid to rural provinces (Chiroro *et al.*, 2012:21). This made the "*Ke Moja"* programme questionable in terms of addressing the impact of socio-cultural issues towards substance abuse amongst the youth. To implement the appropriate and culturally sensitive school-based intervention programme on the impact of socio-cultural practices towards substance abuse, the use of community education model for the programme concerned is very important. This process is flexible because it allows cultural sensitivity and cultural competence regarding the implementation of the school-intervention programme on the impact of socio-cultural practices towards substance abuse amongst the youth in rural areas. The *"Ke Moja"* programme was developed to be responsive to the problem of substance abuse amongst the youth since its inception in 2003. Substance abuse had been reported to be on the increase among young people during and after the launching of this programme (Chiroro *et al.*, 2012:25). Chiroro *et al.*, (2012:21) argues that the effectiveness of the *"Ke Moja"* programme was mostly realised and received in urban and peri-urban areas, with rural areas rarely receiving it.

The youth grow up in various environmental contexts with socio-cultural practices that influence their behaviour towards substance abuse (Aguilera & Plasencia, 2005:303). Social workers working in rural areas need to understand the negative effects of

working in small rural areas. Cultural competence is an ethical and legal aspect in social work practice used by social workers as it is a set of behaviours, attitudes and policies. Ethical and legal aspects enable social work agencies and professionals to effectively serve individuals by incorporating the values and belief systems of those being served (Congress & Gonzalez, 2013:222). The development of the school-based intervention programme needs to be planned and evaluated in a way which is cooperative and co-participative, and whose implementation involves relevant stakeholders (Conyne, 2013:5). It should consist of planning, implementation and evaluation of intervention effects which should be school-based, collaborative and culturally relevant (Conyne, 2013:5). It should be dynamic, sequential and coordinated in a set of steps. It should harness and guide social workers towards directed and testable goal accomplishment on the impact of socio-cultural practices fueling substance abuse (Conyne, 2013:19).

Substance abuse prevention strategies should not be separated from facets of school life and activities (Kvaternik & Rihter, 2012:120). In the field of prevention in a school environment of the European socio-cultural context, a model of public health policy is mainly based on the principle of normalisation of substance abuse problem and harm reduction (Kvaternik & Rihter, 2012:120). Instead of looking at normalisation of substance abuse problem and harm reduction with regard to socio-cultural contexts, this study looks at developing an intervention programme that responds appropriately to the impact of socio-cultural practices towards substance abuse at schools in rural areas. The need for socio-culturally appropriate substance abuse prevention programmes amongst the youth in schools is important (Aguilera & Plasencia, 2005:299). This programme is appropriate in schools as it is culturally sensitive and enables social workers to be culturally competent. The community education model is also presented as a way of disseminating life skills to respond appropriately to socio-cultural practices towards substance abuse amongst the youth. Social workers need to understand the negative effects of socio-cultural practices towards the use and abuse of substances amongst the youth in rural areas (Farley *et al.*, 2003:325).

The programme on the impact of socio-cultural practices towards substance abuse is appropriate in schools in rural areas as it is culturally sensitive and enables social workers to be culturally competent. It answers the question of appropriateness, cultural sensitivity and cultural competence, unlike the "*Ke Moja*" programme that was mostly appropriate and received in urban and peri-urban areas, and which focused on affluent provinces and metropolis cities with minimum attention paid to rural provinces. Eckersley (2005:157) asserts that cultures provide underlying assumptions of an entire way of life, which allow us to make sense of the world and our lives, and that aspects of modern western culture are persuasive and underestimate social factors behind drug use and abuse. Eckersley (2005:159) argues that there is a need for a socio-cultural intervention perspective on population health problems, for instance, substance abuse. The role of culture in the mainstream of population health provides meaning and qualities that contribute to it such as autonomy, competence, purpose, direction, balance, identity and belonging, which are fundamental to young people as these attributes are the destinations of the developmental journeys they are undertaking (Eckersley, 2005:159).

The influence of culture on health and well-being and cultural characteristics can have positive impact on psychosocial factors such as social support and personal control, including socio-economic inequalities. In this instance, culture provides the broader sense of a system of meanings and symbols that shape how people in various contexts see the world and their place in it, which also give meaning to personal and collective experience (Eckersley, 2005:158). Eckersley (2005:159) asserts that the need for intervention programmes to reduce drug use with deep cultural change promotes better population health and well-being. Socio-cultural strategy outlined in the programme on the impact of socio-cultural practices towards substance abuse is culturally sensitive to present health issues in the broader context of social and cultural values and characteristics of the youth in rural areas (Hecht & Krieger, 2006:305). Substance abuse prevention strategies should not be separated from facets of school life and activities of how socio-cultural practices affect young people's lives in schools, as they do not live in a vacuum (Kvaternik & Rihter, 2012:120). These practices play a major

role in the increase of substance abuse. Therefore, a programme that is appropriate, cultural sensitive and cultural competent is the school-based intervention programme on the impact of socio-cultural practices towards substance abuse, unlike the *"Ke Moja"* programme. Weyers (2011:15) asserts that in order to deal effectively with impediments such as substance abuse, professionals must have a clear picture of the community and broader contexts within which it exists.

## 6.3 The Roles of Social Workers on the School-based Socio-cultural Intervention Programme

In the context of the study, the role of social workers in the school-based intervention programme is very important for practice implications. Social workers serve as part of a multidisciplinary team and a bridge between schools and the communities, which is vital in a programme designed to address the impact of socio-cultural practices towards substance abuse amongst the youth in rural schools (Manale, 2006:52). This team comprises of educators, psychologists and social workers. Its job is to guide the youth in schools and to provide information, and where necessary, counselling and therapy are important in order to promote learners' welfare or well-being (Manale, 2006:55). The role of social workers in this programme is to embrace services such as counselling, dissemination of information and prompt intervention (Manale, 2006:55). School social work in rural schools is pivotal to deal with today's pressing issues such as the impact of socio-cultural practices towards substance abuse amongst the youth as this has consequences in schools and has adverse effect on their performance (Manale, 2006:52). Manale (2006:52) asserts that the goal of social work in schools is to enhance transactions between learners, the school, home and the community environment in order to improve the youth coping capacities as well as their school conditions.

The role of social workers is paramount in low-resourced areas where manifesting problems of the youth in schools cannot be easily referred to substance abuse treatment centres as these are neither accessible nor affordable (Manale, 2006:54). Manale (2006:55) argues that the majority of the youth are still at school, which makes it

necessary to consider using school social workers in under-resourced rural settings where there are multiple problems and no accessible and affordable treatment centres. The prevention of the impact of socio-cultural practices towards substance abuse amongst the youth in rural areas can be done by introducing social workers in school to do prevention work. The role of social workers in schools thus attempts to address and treat problems that interfere with learning in order to maximise the learning potential of all the youth (Manale, 2006:55). Social workers should play an effective role in the implementation of the programme by ensuring that it is contextual and sensitive to local beliefs, attitude, culture, values as well as traditional norms and practices (Manale, 2006:56). Manale (2006:56) argues that it is imperative for social workers to facilitate programmes that support the youth in schools as community developers who understand people and do not impose foreign values on them.

Social workers in rural high school settings can make an impact in the prevention of the impact of socio-cultural practices towards substance abuse due to their knowledge and understanding of the school environment, developing the youth and working with other professionals (Barley, 1999:2). Social workers are well equipped with knowledge to design and implement prevention programmes that teach the youth pro-social behaviours, and in this context, implementing the impact of socio-cultural practices towards substance abuse (Manale, 2006:58). The role of social workers through the dissemination of education to the youth can enable them to protect themselves through the use of skills that they have acquired during the implementation of the programme (Manale, 2006:58). Social workers can also teach adolescents problem-solving, time management and stress management skills, assertiveness, communication and self-consciousness aimed at assisting them to understand themselves and others (Manale, 2006:58). The skills imparted by social workers to assist the youth to take control of their lives, to indulge in self-analysis and self-understanding facilitate understanding of one's own feelings, decision making as well as the ability to express themselves through programmes that make them feel valued, accepted and appreciated (Malaka, 2003:08). Oakley (2002:70) asserts that social workers can render the primary prevention programme on the impact of socio-cultural practices towards substance

abuse amongst the rural youth in a cost-effective way through this contextual life skills programme in rural schools. In the context of this school-based intervention programme, social workers play a number of roles which includes:

## 6.3.1 Change agents

Social workers, as change agents, can play identify the youth problems to improve their quality of life with regard to the impact of socio-cultural practices towards substance abuse (Sheafor, Horejsi & Horejsi, 1994:25). Social workers facilitate the much-needed change in rural schools by mobilising learners' interest to advocate for change (Manale, 2006:61). They are in a position to recognise conditions that contribute to youth substance abuse and to ensure that resources are available to meet their needs (Sheafor *et al.*, 2004:25). They can play a role of instilling assertiveness to the youth in rural areas to take responsibility and make decisions towards addressing the impact of socio-cultural practices fueling substance abuse.

## 6.3.2 Educators

Social workers are in position to disseminate effective educational programmes that have clear messages about risky behaviours manifesting amongst the youth, for instance the abuse of substance (Manale, 2006:62). In the context of the school-based intervention programme, social workers are in a position to raise awareness and to disseminate information about the impact of socio-cultural practices towards substance abuse. Manale (2006:62) contends that information given by social workers is informal way by providing awareness campaigns. Social workers are in a position to provide information to help the youth to practise communication skills through interactive discussions during programme implementation. Rivers and Aggleton (2001:01) assert that one such problem experienced by communities in under-resourced areas is less access to information and resources by the youth. Social workers, through this programme, are in a position to provide them with access to information and resources to address the impact of socio-cultural practices towards substance abuse. They are positioned to have informal group discussions in small groups and face-to-face

consultations as well as to provide counselling services to the youth who manifest problems of substance abuse (Manale, 2006:63). They are able to link the youth with further needed information and resources beyond their control.

### 6.3.3 Therapist or counsellor

Social workers have the ability to offer life skills programmes that can necessarily unlock many problem areas, for instance the impact of socio-cultural practices towards substance abuse amongst the rural youth (Manale, 2006:65). They are in a position to provide therapeutic and counselling services to the youth who are adversely affected due the impact of socio-cultural practices towards substance abuse. They are capable of helping the youth to become more assertive by providing them with skills which promote self-confidence and self-esteem (Manale, 2006:65). Manale (2006:66) argues that social workers are trained on how to encourage and affirm the youth to be consistent, committed, honest, self-aware and congruent. Social workers are expected to work with the identified individuals and their families in providing counselling or referring them to rehabilitation centres (Khosa *et al*., 2017:72). Social workers can facilitate and enhance the system of functioning to respond to interactions of clients and their environment regarding the impact of socio-cultural practices toward substance abuse amongst the youth in rural areas.

### 6.3.4 Co-ordinator

Manale (2006:67) holds that when social workers are part of a team of stakeholders, they can be in a position to help with the implementation of programmes and policies due to their professional expertise, knowledge and skills. Therefore, in the context of the school-based intervention programme on the impact of socio-cultural practices towards substance abuse, social workers are in a position to spearhead and co-ordinate its implementation. Freeman, Halin and Marion (1997:03) assert that social workers' role includes coordinating services provided in schools and communities. They are in a position to help the youth and teachers in schools to observe principles of confidentiality, individuality and uniqueness of the youth with regard to the impact of socio-cultural practices towards substance abuse. In coordinating services, social

workers are in position to link the school with the community and parents of the youth with regard to the impact of socio-cultural practices towards substance abuse when implementing the programme (Manale, 2006:68). They are capable of ensuring that the rights of the youth in rural schools are respected when implementing the programme. The role social worker helps in identifying learners abusing substances or who have relatives abusing substances in the rural contexts working collaboratively with other stakeholders (Khosa *et al.*, 2017:72).

## 6.4 Description of Current School-based Substance Abuse Programmes

Findings of studies on school-based interventions outlined by Roona, Streke, Ochshorn, Marshall and Palmer (2001:20) have found that interactive programmes are more effective. Botvin, Griffin, Diaz and Ifill-Williams (2001:361b) assert that efforts to reduce alcohol abuse and alcohol-related problems have taken various forms, including interventions targeting the schools. The awareness of environmental and peer influence of substance abuse, the development of peer refusal skills, and the enhancement of personal and social skills are important issues to be considered in the school-based substance abuse prevention programme, which is relative to the impact of socio-cultural practices towards substance abuse (Haskins, 2012:03).

The school-based preventive intervention teaches resistance skills, norms against substance abuse, and material designed to facilitate the development of important personal and social skills in order to provide adolescents with the knowledge and skills needed to effectively provide social influence and to reduce potential motivations to use substances by increasing general, personal and social competence. The programme also teaches students a variety of cognitive behavioural skills for building self-esteem, resisting advertising pressure, and managing anxiety, communicating effectively, developing personal relationships, and asserting one's rights. Learners are taught with proven skills-training techniques such as group discussion, demonstration, modelling, behavioural rehearsal, feedback and reinforcement, and behavioural "homework"

assignments for out-of-class practice. The programme also teaches problem-specific skills related to substance abuse (Botvin *et al*., 2001:361b).

Harker *et al*., (2008:17) claim that prevention experts suggest continued multilevel interventions for substance abuse needed for the youth and adolescents at a high risk for substance abuse, including family interventions, parent education, school-based drug education, and individual behaviour management, and targeted interventions. The programme also had a direct positive effect on several cognitive, attitudinal, and personality variables believed to play a role in adolescent substance use. Hence, mediational analyses showed that prevention effects on some drug use outcomes were mediated in part by risk-taking, behavioural intentions, and peer normative expectations regarding drug use (Botvin *et al*., 2001:1a). The findings a study conducted by Otieno and Ofulla (2009:853) suggest that family members were found to be an important link in the initial development of a drug taking habit. These findings indicate the need for early intervention that targets pre-secondary and secondary school students. Otieno and Ofulla (2009:853) believe that more effort should be made to develop substance abuse prevention strategies that target secondary school students as a high-risk group.

# 6.5 Five Core Competencies or Social Life Skills Applicable on the Programme on Socio-cultural Practices towards Substance Abuse amongst School Learners

Social workers in schools serve the role of education partners equipped to facilitate life skills programmes, be it in the school-based intervention programme on the impact of socio-cultural practices towards substance abuse amongst the youth in rural areas (Manale, 2006:52). It is necessary for social workers to spearhead the facilitation of life skills education programmes for the youth in schools meant for addressing the impact of socio-cultural practices towards substance abuse amongst the youth. Manale (2006:52) contends that it is necessary for social workers to develop and facilitate these life skills programmes to promote the youth's physical and mental well-beings.

Substance abuse amongst the youth is a result of poor social coping strategies, poor personal and social skills, undeveloped decision-making skills, low self-esteem, inadequate peer pressure, and resistance skills (United Nations Office on Drugs & Crime, 2004:10). Competence reflects affective adaptation in a given environment, whereas from a developmental standpoint, it refers to a mastery of key developmental tasks that signal effective adaptation within a particular life stage, as determined by a specific historical and cultural context (Guerra & Bradshaw, 2008:05). The five competencies to be discussed which serve to provide a guideline framework are: a positive sense of self, self-control, decision-making skills, a moral system of belief, and prosocial connectedness. Having a positive sense of confidence that has direct and long-term positive effects of reducing substance abuse such as positive orientation, feelings of high self-worth, good decision making skills help protect the youth from substance abuse (Radolph, Russell, Tillman, Fincham, 2010:549). In the social skills and coping skills of substance abuse, prevention programmes in schools environment and cultural practices should be considered (Schroeder & Johnson, 2009:236).

## 6.5.1 A positive sense of self

There are three components of self that emerge early in development, and that exert considerable influence during adolescence and the transition to adulthood such as self-awareness, agency and self-esteem (Guerra & Bradshaw, 2008:06). Self-awareness becomes evident by second year of life, although some of the earliest forms of self-awareness have been noted soon after birth providing hopefulness, direction and a sense of purpose (Guerra & Bradshaw, 2008:06). A positive sense of self during adolescence hinges on success in constructing and maintaining positive and realistic possible selves to motivate current and future behaviour, just as negative possible selves can portend maladjustment (Guerra & Bradshaw, 2008:07). Ashford and LeCroy (2013:434) contend that the main strategies of enhancing the youth self-concepts are to encourage achievement and to promote competencies in specific areas, for instance substance use and abuse denial competencies, provision of peer and parental support, and developing coping skills.

Agency as a sense of volition over self-generated acts provides the motor for action (Guerra & Bradshaw, 2008:07). An important component of self-development is the increasing realisation over time that the self is an active, independent agent, just as others are active, independent agents in their own lives; this forms the basis for a sense of self-efficacy, defined as people's beliefs about their capabilities to produce designated levels of performance that exercise influence over relevant events in their lives (Guerra & Bradshaw, 2008:07). A positive and strong sense of self-efficacy enhances adjustment and well-being as individuals set challenging goals, sustains efforts, and recovers in the face of failure (Guerra & Bradshaw, 2008:07). Absent self-efficacy for positive events such as beliefs in one's ability to get good grades in school leads individuals to build self-confidence by developing beliefs in their capabilities for negative events such as the ability to bully others and act aggressively (Guerra & Bradshaw, 2008:07). Self-esteem refers to global judgments of self-worth that emerge around middle childhood as well as domain-specific evaluations of different aspects of the self that become increasingly differentiated from childhood through adolescence and adulthood (Guerra & Bradshaw, 2008:07). For instance, some the youth may consider academic performance important to their self-worth, whereas other teenagers may disengage self-esteem from their performance at school, focusing more on athletic abilities and popularity with peers or more problematic talents such as power and superiority over others.

## 6.5.2 Self-control

Self-control refers to the ability to regulate and manage affect and behaviour in a controlled versus automatic fashion in accordance with situational or normative demands (Guerra & Bradshaw, 2008:08). Early in development, children still control their behaviour primarily in response to environmental contingencies such as punishment and reinforcement (Guerra & Bradshaw, 2008:08). Over time, children internalise standards, which require less external monitoring and more internal management (Guerra & Bradshaw, 2008:08). Self-control continues to develop through adolescent years where the brain activity showing that the frontal lobe activation, an important determinant of behavioural inhibition, increases between adolescence and

adulthood (Giedd, Blumenthal, Jeffries, Castellanos, Liu & Zijdenbos, 1999:861). Self-control is critical for individual adaptation as well as the structure and function of various socio-cultural groups because of shared compliance to a set of standards (Guerra & Bradshaw, 2008:09).

## 6.5.3 Decision-making

The transition from childhood to adolescence is characterised by increasing autonomy and opportunities for choices independent of adults (Guerra & Bradshaw, 2008:09). Many of daily and long-term decisions the youth make during adolescence affect their current and future well-being, including their social relationships, academic performance, and future opportunities. The capacity to make effective decisions also increases during the time with the development of more sophisticated abstract reasoning skills and a growing capacity for probabilistic reasoning (Guerra & Bradshaw, 2008:09). By adolescence, individuals are capable of imagining future outcomes in the present, coordinating independent pieces of information, and understanding the likelihood of various occurring consequences. When compared to adults, children and adolescents are less skilled in several components of decision making as they are less able to plan for or anticipate the future, generate consequences spontaneously, learn from negative consequences, or view negative consequences as harmful (Reyna & Farley, 2006:06).

Better decision makers avoid dangerous risks (Reyna & Farley, 2006:06). A variation of decision making theory emphasises multiple components of mature decision making as related to responsible self-reliance and autonomy, perspective and self-control (Guerra & Bradshaw, 2008:10). Empirical evidence suggests that when faced with problematic social situations, well-adjusted children attend a lot of social cues, and interpret these cues in an unbiased fashion, select appropriate goals, and access and generate positive responses, consider consequences, and enact pro-social behaviours (Guerra & Bradshaw, 2008:10).

## 6.5.4 A moral system of belief

An essential component involves internalised beliefs about how people in a society should behave in relation to others. Socialisation experiences during childhood and adolescence affect how these capabilities are codified into a particular moral belief system reflecting family, community, and cultural values as there is also variability in the salience of these moral belief systems for an adolescent's developing identity (Guerra & Bradshaw, 2008:11). Individuals also differ on the centrality of moral beliefs to their developing sense of self and their moral identity, which may be the cement that binds moral thinking to moral action. The means that young people endorse a moral course of action and believe that it is essential to their identity; they ought to act accordingly (Crocker & Wolfe, 2001:596). Guerra and Bradshaw (2008:11) contend that emphasis on the development of a moral system of beliefs; accompanied by a strong sense of moral identity has been a cornerstone of many positive the youth development models. The developmental assets by the Search Institute encompass qualities with clear moral components such as responsibility, restraint, caring, social justice, integrity and honesty (Benson, 1997:37). Accordingly, character education programmes such as character counts emphasise personal qualities such as trustworthiness, respect, responsibility, fairness, caring and citizenship (Guerra & Bradshaw, 2008:11). For instance, to the extent that specific risk behaviours involve substance abuse, moral identity is an important competency for positive the youth development.

## 6.5.5 Prosocial connectedness

Terms such as investment, engagement, attachment, bonding, sense of belonging, and mattering have all been used to describe the youth affiliations across a range of socialisation domains, including families, schools, and communities (Guerra & Bradshaw, 2008:11). The focus is on a psychological state of belonging, where individual the youth perceive that they and others are cared for, acknowledged, trusted, and empowered within a given context (Eccles & Gootman, 2002:47). This state of belonging works both ways: connectedness involves both feeling cared for and caring about the social environment, as these perceptions should unmistakably be consistent with the core competencies framework (Guerra & Bradshaw, 2008:12).

Because friendships and social interactions are critical for young people's healthy developments, social skills can be an important asset for adolescents and the youth to possess (Ashford & LeCroy, 2013:454). Ashford and LeCroy (2013:454) assert that some adolescents are unpopular, rejected by peers, and have poor social skills. As a result, increasing emphasis is placed on a social skills or social competence model for understanding, preventing and remediating problems experienced by adolescents. Social skills training assumes that problem behaviour in young people can be understood in terms of not having acquired skills needed to cope with various situational demands. There is a need to focus on discovering effective responses for resolving the demands of problem situations while minimising the likelihood of future problems (Ashford & LeCroy, 2013:454).

Social skills training focuses on teaching prosocial skills and competencies that are needed for day-to-day living, rather than on understanding and eliminating pathological responses. The emphasis is also on new learned behaviour that leads to positive consequences rather than on past behaviours that may have elicited negative consequences (Ashford & LeCroy, 2013:454). Promoting social competence in young people can be an effective strategy for helping them confront stressful and problematic situations, as adolescents need to acquire numerous social skills. During this stage of life, they develop patterns of interpersonal relationships, confront new social experiences, and need to learn new behavioural responses (Ashford & LeCroy, 2013:455). The youth connectedness across these multiple domains is a primary determinant of adjustment and predicts risk taking in certain areas such as substance abuse (Commission on Children at Risk, 2003:8).

There are other life skills to teach the youth in relation to the prevention of substance abuse such as setting goals by being specific, realistic, have time frame, developing a plan and stretching self in life (Van Heerden, 2005:3). Van Heerden (2005:3) asserts that these skills include managing time, developing self-esteem and assertiveness, managing interpersonal relationships, participating in alternative activities such as

sports, choosing good friends, being responsible, communication, knowing self, values, limits, and to have coping and refusal skills.

## 6.6 Implications for Social Work Practice

The study of the impact of socio-cultural practices towards substance abuse amongst the youth has implications to social work practice. Social workers in the Department of Social Development spearhead services towards the abuse of substances to the client system. For instance, the *"Ke Moja"* programme was rolled out to school learners to prevent the abuse of substances. Substance abuse programme such as the *"Ke Moja"* that dealt with youth substance abuse was mostly received in urban and peri-urban areas (Chiroro *et al.*, 2012:21). Yet, this was rarely received in rural areas, which makes the "*Ke Moja"* appropriate and questionable to respond suitably to contextual issues that the youth are grappling with with regard to substance abuse. The need for social workers to implement a programme that is socio-culturally appropriate on substance abuse amongst the youth is important (Aguilera & Plasencia, 2005:299).

Substance abuse school-based intervention programme is contextualised to respond to substances abused. Weyers (2011:15) asserts that in order to deal effectively with impediments such as substance abuse, professionals must have a clear picture of the community and broader contexts within which it exists. Consequently, these socio-cultural issues cannot be left unattended to. Social workers need to intervene to address issues that young people are grappling with regarding substance abuse in rural areas. The researcher undertook the study on the impact of socio-cultural practices towards substance abuse amongst the youth to develop a school-based intervention programme considered for social work practice. The study implicates the policies and service standards regarding the rendering of services to young people due to the nature of contexts of these practices. The study's implication for practice incorporates cultural sensitivity and competence to making the programme on the impact of socio-cultural practices towards substance abuse more suitable to address contextual issues.

## 6.6.1 Cultural competence and sensitivity

Cultural competence in the context of this study requires social workers to be sensitive and responsive to the ways in which cultural factors, practices and differences influence how the youth behave, interpret and view substance abuse (Rubin & Babbie, 2013:306). Social workers need to understand the negative effects of working in rural areas, for instance, the negative implications of substance abuse brought about by socio-cultural practices amongst the youth (Farley *et al*., 2003:325). Cultural competence is ethical; and legal social work practice used by social workers is a set of behaviours, attitudes, and policies that enable social work agencies and professionals to effectively serve individuals by incorporating the values and belief systems of those being served (Congress & Gonzalez, 2013:222). Social workers who are culturally competent and sensitivity offer substance abuse education within the behavioural practices of a wider understanding of rural life (Claire & Hout, 2011:124).

In the context of this study, culturally competent and sensitive social workers should break the silent impact of socio-cultural practices towards substance abuse amongst the youth, should talk about it, alert the public, refer to appropriate stakeholders, and train relevant professionals (Stennis, Fischle, Bent-Goodley, Purnell & Williams, 2015:96). Culturally competent social workers are cultural sensitive in their intervention in rural areas, be it on the impact of socio-cultural practices towards substance abuse amongst the youth (Stennis *et al*., 2015:98). They lobby, mobilise and advocate for the integration of indigenous knowledge such as the impact of socio-cultural practices towards substance abuse amongst the youth into the curriculum that add value as well as improve policy-formulation and quality of life (Makhubele & Qalinge, 2008:155).

Makhubele and Qalinge (2008:156) contend that the integration of socio-cultural practices and indigenous knowledge regarding substance abuse brings change on life skills education. This is relevant to learners and educators in schools from rural indigenous areas to build on their strengths about their diverse cultures. Again, integrating socio-cultural knowledge in life skills education of substance abuse teaches *"Ubuntu"* based on human interdependence related to norms, respect, reciprocity,

selflessness, symbiosis, a sense of community, belongingness, shared heritage and the common welfare of the youth in rural areas (Makhubele & Qalinge, 2008:157). Culturally competent social workers have knowledge and respect for various cultural perspectives as well as use social work skills, behaviours, attitudes and policies effectively in various contexts (Howard, 2003:103).

Culture is a critical factor that differentiates the lives of humans from those of other social animals. Thus, it is critical for social work professionals to understand culture and how cultural processes influence human behaviour and the construction of social environments (Ashford & LeCroy, 2013:10). Cultural competence extends well beyond the surface covering of behavioural health like substance abuse prevention. In integrating cultural variables in the prevention and intervention of substance abuse, a cultural-identity further assists in understanding cultural competence (Castro & Alarcon, 2002:783). The assessment and examination of cultural dimensions includes cultural identity, belief systems and worldviews, history of culture, communicating meaning and the use of self-expressiveness, and beliefs about the abuse and use of substance abuse (Collins, Jordan & Coleman, 2013:47-56).

# CHAPTER SEVEN

# DATA PRESENTATION, ANALYSIS AND INTERPRETATION

## 7.1 Introduction

This chapter presents data presentation, analysis and interpretation of the study on the impact of socio-cultural practices towards substance abuse amongst the rural youth towards the development of a school-based intervention programme. The chapter presents biographical data and the educational levels of the participants. Literature to support the participants' arguments was presented to complement what they have mentioned. The themes, figures and tables of unpacking impact of socio-cultural practices towards substance abuse amongst the rural youth towards the development of a school-based intervention programme were presented in this chapter. The researcher applied qualitative data analysis, and data was transcribed verbatim using the thematic analysis of Braun and Clarke (2006:86) guidelines, which are familiarising the researcher with data; generating initial codes; searching for themes; reviewing themes; defining and naming themes and producing the report.  The quantitative approach was aslo considered data to prepare and manage the data (Creswell & Plano Clark, 2011:205). The chapter unpacks the application of stages by Onwuegbuzie and Leech (2006:490) such as data reduction, data display, data transformation, data correlation, data consolidation, and data integration to manage data.

## 7.2 Biographical Data

The biographical data analysed statistically included the age ranges, gender and educational levels of the learner participants who completed the questionnaires of the study.

## 7.2.1 Age range and gender of the learner participants

| Age | Number of males | Number of females |
|---|---|---|
| 14-15 years | 19 | 30 |
| 16-17 years | 48 | 29 |

**Table 1: Illustration of the age range and gender of the learner participants**

The table above depicts the age ranges and gender of the participants. The number of 126 learners completed questionnaires (see Table 1). The female participants who completed the questionnaires ranged between the ages of 14-15 years, and amounted to 23.80% (N=30). A proportion of 15% (N=19) of male participants ranged between the ages of 14-15 years. The other group of female participants ranged between the ages of 16-17 years, amounting to 23.20% (N=29). A number of 38% (N=48) of the participants who completed the questionnaires ranged between the ages of 16-17 years.

## 7.2.2 Educational level of the learner Participants

| Grades | Number of participants per grade |
|---|---|
| 09 | 36 |
| 10 | 48 |
| 11 | 42 |

**Table 2: Educational level of learner participants**

The percentage of learners who completed questionnaires in grade 09 were at 28.57% (N=36). The proportional number of 38.43% (N=48) of the participants were grade 10 learners (see Table 2). A subsequent percentage of 33% (N=42) of the participants were in grade 11.

## 7.3 Impact of Socio-cultural Practices on Substances Abuse: towards a School-based Intervention Programme

There were themes transcribed from the interviews with the participants. The themes enabled the researcher to present the results by involving discussion for the categories, and the presentation of figures that depict the physical setting and diagrams indicating the framework of the study (Plano Clark, 2011:208). The themes of this study also enabled the researcher to present tables, graphs, and figures and to narrate the data (Plano Clark, 2011:208). The themes discussed include the nature of substances used by the youth-in-school, the influence or impact of socio-cultural activities towards substance abuse, the occurrences of socio-cultural events in rural areas, and the development of a socio-culturally school-based intervention programme on substance abuse for the youth-in-school. The Contributory factors towards substance abuse were also presented in this chapter. There are four themes represented in tables and bar charts indicating the findings of the study. The participants were interviewed in their own language which is "*Xitsonga*". The themes, sub-themes, tables and a bar chart are as follows:

### 7.3.1 Theme 1: Nature of substances used by the youth-in-school

The themes discussed below, were transcribed verbatim, include views outlined by the participants about the nature of substances used in rural areas of Malamulele:

> *"Loko vantshwa va toloverile ku nwa byalwa bya xilungu, loko mali yi va yintsongo va tsutsumela eka lebyi bya xintu hikuva byona byi chipile, kambe khombo ra kona hileswaku a byi pimiwangi; leswi swi va ka na khombo eka rihanyu ra vantshwa hikuva va tshama va dakwile".* Young people drink western brewed beers, but when they don't have enough money, they go for traditional beer because it is cheap, the danger is traditional beer is not measured which is risky to the health of the youth.

Socio-economical exclusions such as unemployment as well as low-paying jobs may also influence one to consider home-made alcohol production as an option for income generation (Makhubele, 2012:18). Babor, Caetano, Casswell, Edwards, Giesbrecht, Graham, Grube, Gruenwald, Hill, Holder, Homel, Österberg, Rehm, Room and Rossow (2003:06) assert that the harmful use of alcohol causes considerable public health problems and is ranked as the fifth leading risk factor in premature death and disability in the world. Alcohol is linked with an extensive range of social problems such as unemployment and poverty (Makhubele, 2012:18).

> *"Ku na tinxakaxaka ta swidzidziharisi na swipyopyi leswi swi tirhisiwaka hi vusopfa hi vantshwa ematikoxikaya swo fana na mbangi, vucema, mporosi, xiwa hi mombo, thothotho, xikwembu ndzi teki, xipana gariki or nkuzi malanga".* There are types of drugs and alcohol mostly abused by the youth in rural areas such as dagga, *"vucema, mporosi, xiwa hi mombo, thothotho, xikwembu ndzi teki, xipana gariki or nkuzi Malanga".*

There are many substances such as home-brewed alcohol and drugs in the form of palm wine, local gins; kolanuts and tobacco in the form of snuff and pipe. These are local substances of traditional importance with factors observed to be contributing to their use including their ready availability, custom and culture (Abasiubong *et al*., 2012:09).

### 7.3.1.1 "Mbangi"
A number of participants said:

> *"Mbangi yi tirhisiwa ngopfu hi vantshwa eswikolweni". The youth mostly use dagga in schools.*

> *"Vantshwa va dzaha mbangi loko ku ri na mintlangu ya xintu na loko ku nga ri na mintlangu a matikoxikaya. I ntirho wa vona wa masiku*

*hinkwawo".* The youth in rural areas abuse dagga during socio-cultural events and even when there are no such events, which is their everyday activity.

The word *"Mbangi"* is a *Xitsonga* name which literally means dagga, cannabis or marijuana. The abuse of dagga or cannabis in South Africa is generally a common problem amongst the youth-in-school (Hamdulay & Mash, 2011:83). Lebese *et al.,* (2014:330) assert that learners at Muyexe rural area in Limpopo Province linger around during the day in school uniform smoking marijuana or dagga, which leads to unruly behaviour and poor performance, and teachers have raised complaints about this (Lebese *et al.,* 2014:330). Substances abused by the youth-in-school in rural areas include dagga (Lebese *et al.,* 2014:333). The abuse of dagga takes place everyday whether or not there are socio-cultural events.

## 7.3.1.2 "Xikwembu ndzi teki"

There were a number of arguments from the participants about *"Xikwembu ndzi teki",* as follows:

> *"Ku na byalwa lebyi nga feshenini masiku lawa va nge i Xikwembu ndzi teki, na lomu ka tifacebook mi kuma va vekerile munhu a tlele patwini va ku u nwile byona u tsandzeka ku pfuka laha a nga etlela kona".* Currently there is a fashionable and an unorthodox concoction called *"Xikwembe ndzi teki",* pictures of people lying on the road are being published on facebook. They are said to be failing to wake up due to taking this type of a beer.

> *"Loko van'wana va nwa xikwembu ndzi teki mi kuma munhu a tshamile epatwini i nga ku u chayela movha kumbe mi kuma munhu a helela na hi moya".* One person was found siting on the road as if he was driving a car failing to breathe properly due to taking this type of a beer"

*"Munhu a nga nwi xikwembu ndzi teki a nga dyangi nchumu, loko u fika laha byi xavisiwaka kona va vutisa ku u dyile ke, na loko u nga dyangi va rhanga va ku nyika swa ku dya".* A person should eat first before taking *"Xikwembu ndzi teki"* if you have not those who are selling would give you food to eat first because it is most dangerous if you drink without taking a meal.

*"Byala lebyi bya xikwembu ndzi teki, loko munhu a byi nwa nkarhi wo leha masiku yo landzelelana bya ondzisa, na munhu u sungula ku basuluka a hetelela hi ku fa, bya dlaya".* This beer is dangerous if you take it for a long time because a person loses weight and end up dying.

*"Loko munhu a nwa xikwembu ndzi teki va rhanga va vutisa munhu ku u tshama kwihi no va komba lomu a taka hi kona loko a ya kaya, ivi va n'wi byela ku tshama u langutisa ndlela yo ya ekaya leswaku loko a tlakuka u famba a ya kaya, a nga lahleki".* When you drink this you get lost not knowing where you come from when you are drunk.

*"Xikwembu ndzi teki i byalwa lebyi nga lunghangiki ku tlula byalwa hinkwabyo, byi onhela vanhu vutomi bya vona".* This type of a beer is not good for people because it destroys their lives.

*"Xikwembu ndzi teki"* literally meaning 'God takes me', and is a mixture of sorghum malt, water, sugar, yeast, water from boiled roots of jinja shrub, battery acid, ice cream, king-korn and brake fluids (Makhubele, 2012:23). Makhubele (2012:23) asserts that after having drunk this mixture, one is certain that he or she will die hence the alcohol is named 'God takes me' or survive. The reason is that the person will start vomiting, trembling and unable to walk and will wet himself/herself (Makhubele, 2012:23).

### 7.3.1.3 "Xiwa hi mombo"

There were statements from the participants about "*Xiwa hi mombo*". "*Xiwa hi mombo*" is a type of unorthodox home-made beer used and abused by young people in rural areas. The nature of "*Xiwa hi mombo*" was expressed by the participants as follows:

> "*Xiwa hi mombo, loko u xi nwile u wa hi mombo loko u dakwini, byala lebyi bya xiwa hi mombo byi endliwa hi chukele, vudyangwana na xiviriso, byi tala ku endliwa namuntlha ivi byi va byi lulamile ku nwiwa hi siku leri landzelaka*". The reason why it is called with this name is because when you are drunk you fall with your forehead. "*Xiwa hi mombo*" is made out of sugar, sorghum and yeast. It gets processed for one day and the following day it becomes ready for drinking.

> "*Xiwa hi mombo na byona byi endla leswaku loko munhu a byi nwile ngopfu a wa a titivala kumbe ku hela matimba a tlela na le patwini.*" The one called "*Xiwa hi mombo*" when a person takes it excessively, a person faints, loses balance or power and sleeps wherever.

This type of alcohol is hazardous to young people's health as it influences them to commit actions which they cannot tell or remember when they are sober. After taking this type of home-brewed beer, young people get affected on their physiological and anatomical features as they get injured. Again, it possesses danger to young people's health as they faint in some situations. The nature of this beer seems to be one of the concoctions that change young people to look very old physically in the long run.

### 7.3.1.4 "Xikavanga"

Two participants outlined "*Xikavanga*" as one of the types of home-brewed beers used and abused by the youth in rural areas. This is what they say about this home-brewed beer:

*"Xikavanga i byalwa byo endliwa hi xinkwa, xihenge, xiviriso na mati*
*yo vila".*
*Xikavanga"* is made out of bread, pineapple, yeast and boiled water.

This type of home-brewed beer serves as an agent of socialisation amongst the youth, and has impact towards young people's well-being. As a result of being excluded from economic opportunities, most young people in Malamulele tend to use this type of beer because it is cheap, easily accessible and affordable. Due to the fact that most young people in rural areas of Malamulele are from poverty-stricken families, they opt to use and abuse *"Xikavanga"* because it is cheap.

## 7.3.1.5 "Xikavatlani"

Other participants pointed out *"Xikavatlani"* as one of substances brewed in Malamulele with the following arguments:

*"Xikavatlani" i byala byo endliwa hi makhalavatla, laha ku swekiwaka*
*makhalavatla ivi ya tshikiwa masiku mambirhi leswaku ya bola".*
*"Xikavatlani"* is a beer made out of water melon and boiled water for
three days after being processed and is ready for consumption on the
fourth day.

*"Byala bya xikavatlani byi tshama byi dakwa n'wana wa xikolo a*
*khandziya henhla ka xithopo xa tihunyi a endla wonge wo chayela*
*movha i nga ku i movha a vitana vanhu ku va khandziya ku fambiwa*
*hikuva i movha wa yena".* One of the rural the youth took
*"Xikavatlani"*, and went on top of packed woods and acted as if he is
driving a taxi, calling people to join.

Young school learners in rural areas of Malamulele love *"Xikavatlani"* because it is sweet as it is made of water melon which is sweet. This kind of home-made beer is seasonal as the water melon has its own seasons. When young school learners drink

this kind of home-made beer, they act very strange. It is brewed for three days before it is ready for consumption without being refrigerated. It becomes so strong, so that young people get very drunk and begin to behave strangely.

## 7.3.1.6 "Xipana gariki"

The other participants outlined *"Xipana gariki"* as one of the types of home-brewed beers abused by young people in rural areas:

> "*Xipana gariki xi dakwa munhu a lahleka na le kaya. Xona xi endliwa hi xinkwa xa buraweni, xiviriso, na xihenge". "Xi endliwa namuntlha ivi hi siku leri landzelaka xi va xi lulamile ku va xi nga nwiwa". "Xipana gariki*" when a person takes it, he no longer knows his home or gets lost, it is made of brown bread, yeast, and pineapple,  and is taken a day after processing.

> "*Vantshwa va huma exikolweni hi nkarhi wo wisa va ya nwa xipana gariki. Loko va vuya a va hanyi kahle na vadyondzisi va yena na vana van'wana va xikolo, va nga ha susa na nyimpi".* The worst part of taking this, young people during a school break fetch these types of beers and when they go back to school they fight with teachers and other learners.

Learners linger around the rural areas to drink this type of home-made beer during school breaks. When they come back to school having taken one bottle of a size of 500 mili litres, they violate school rules, fight with teachers and other learners. Young people taking this type of home-made beer are so violent, commit house breaking and steal at home. Lebese *et al.*, (2014:330) assert that learners at *Muyexe* rural area in Limpopo Province linger around during the day in school uniform smoking marijuana or dagga. This leads to unruly behaviour and poor performance by learners, and teachers have raised complaints about this.

## 7.3.1.7 "Vucema"

One of the participant indicated that young people in rural areas sometimes use *"vucema"* which is like "*mporosi". The term comes* from Mozambique.

> *"Vucema byi fana na swimbukumbafi". "Vucema"* is said to be like *"Chibuku".*

> *"Loko munhu a nwa bodlhela rin'we ra vucema u va a dakwile ngopfu hikuva byi na matimba". When a person takes one bottle of "vucema" he or she becomes so drunk because it is so strong.*

## 7.3.1.8 "Vulongo bya tidonki"

One of the participants indicated that young people use *"vulongo bya tidonki"* or donkey dung:

> *Loko munhu a byi dzahile ngopfu u va na migingiriko ngopfu". One of the participants said that when young people in rural areas are broke or without money, they opt to smoke donkey dung which they fold like dagga to smoke, and after smoking it a person becomes hyperactive.*

Makhubele (2012:23) contends that in ancient times basically, people would use sorghum malt, ice cream, milk, sugar, and yeast, *"chibuku",* locally known as *"ximbukumbafi"* or "shake-shake" and water to brew *"mporosi".* It takes seven days to prepare this home-made alcohol as it is cooked and recooked until the brewer is satisfied that it is ready for consumption, which was historically used during social and religious occasions by elders (Makhubele, 2012:23). Nowadays, young people in rural areas drink chibuku or mporosi as it does not take long for it to be ready for consumption due to yeast being included to quicken the process. Anderson (1998:241) purpots that identification with a sub-culture has a direct and negative effect on later ego identity discomfort. For instance, Young people in rural areas use traditional beer as a way identifying and attaching themselves with their culture. This identification and attachment to traditional beer and culture happens without looking at the positive and

negative impact of abusing this substance. The programme in itself assists young people to look at the impact of socio-cultural practices towards the abuse of substances.

There are many implications of taking home-brewed substances amongst the youth. Young people end up being into binge drinking and end up giving up socio-economic activities. The youth end up dropping out of school, become violent and commit crime. The youth opt to use traditional beers and new concoctions because they are cheap, accessible and affordable. This is supported by the figures depicted below about having plenty of traditional beer brew points. The cheapness, affordability, availability and accessibility fuel the use and abuse of traditional beer in the rural areas. The types of substances commonly used are dagga, tobacco, glue, beers, snuff, cocaine and nyaope. The findings reveal that there are traditional beers and new concoctions used by the youth in rural areas. These include *"mporosi, chibuku, vucema, chayoni, xikwembu ndzi teki, vukanyi, mubvanya, xikavanga, xiwa hi mombo, mikhubi, xikavatlani* and *nkuzi malanga".* The results also reveal that the types of substances mostly abused in socio-cultural events include commercial beers, dagga or marijuana, tobacco, *"mporosi, chibuku, ndzi ta ku nyisa* and *xikwembu ndzi teki".* The findings also reveal that when young people have no money, they tend to smoke donkey dung, which enables them to be hyperactive. To complement and support themes on the nature of substances abuse, below are the results, which have been interpreted and analysed statistically:

## 7.3.1.9 Substances abused in various socio-cultural events in rural areas

| Scale score | Number of participants (N) | Percentage (%) |
|---|---|---|
| Strongly agreed | 49 | 39 |
| Agreed | 71 | 56 |
| Neutral | 04 | 3 |
| Disagreed | 00 | 0 |
| Strongly disagreed | 02 | 2 |

**Table 3: The types of substances abused in various socio-cultural events, including commercial beers, dagga or marijuana, tobacco, "mporosi, chibuku, ndzi ta ku nyisa, xikwembu ndzi teki" in rural areas**

The participants at 56% (N=71) agreed about the abuse of these substances. A proportion of 39% (N=49) of the participants strongly agreed about the abuse of these substances. The number of participants who were neutral on the abuse of these substances amounted to 3% (N=4). A small number of 2% (N=2) of the participants strongly disagreed on the abuse of these substances mostly in socio-cultural events in rural areas. As attested by the participants, the findings reveal that the abuse of substances such as commercial beers, dagga or *marijuana, tobacco, "mporosi, chibuku, ndzi ta ku nyisa* and *xikwembu ndzi teki"* by the youth in socio-cultural events in Malamulele is high at a rate of 95% (N=120). African cultures generally restrict the use of substances to older age groups who consume them during special occasions (Njoroge, 2015:66). But nowadays the youth use substances for various reasons such as social, economic and cultural issues. Taking one glass of these new unorthodox concoctions makes a person drunk. These concoctions are made of dangerous ingredients which are not healthy for young people as they affect their physical appearance.

For instance, some of these home-brewed unorthodox concoctions include those brewed from mixtures of battery acid, mandrax as well as methylated spirits. Makhubele (2012:18) asserts that tremendous stress, rejection, fear and frequent bouts of depression that often result from social exclusion are high risk factors for illegal production and selling of home-made alcohol as well as for the development of a substance abuse problem. Many people who struggle with the negative effects of social and economic exclusion in rural areas turn to home-made alcohol production and commercialization to mitigate the discomfort and sense of helplessness that they feel (Makhubele, 2012: 18). Social exclusion can cause producers of home-made alcohol to use unorthodox methods, which put health hazards to their consumers, which include a

huge influx of young people who serve as consumers everyday as they are socially and economically excluded from the opportunities.

The other substance which is used when there are traditional parties is known as *"punch" or "pine"*, which is a mixture of a number of various western beers, juice and fruits. When there are traditional parties, the family concerned prepares punch or pine a day before the party, with ice in a drum used after a meal, knowing that a person gets drunk prior to being given the beer. The two words used interchangeably are shortened as punch is special punch juice, hence pine is from pineapple. The purpose of preparing punch is to save money on buying a lot of beers because people drink freely during parties. The traditional beers and new concoctions are not tested (experimented) and approved by a responsible body to check if they are good for health of the people. During socio-cultural events, young people take meals with punch before taking liquor, knowing exactly that it is not juice per se, but a mixture of several beers that serve to preface the taking of real stuff.

There is a clear indication that young people are indulging themselves in the use and abuse of substances. The use and abuse of alcohol in rural areas is rife, this is clearly illustrated in the table above. The use of western beers happens mostly when young people get paid after some piece jobs. The most used and abused types of substances by young people are traditional beer and unorthodox concoctions as they are cheap, easily accessible, affordable and sometimes free. In families where traditional beers are being sold, there are no age restrictions since there is no license for selling the beer, unlike in registered liquor stores where there are age restrictions. Therefore, these home brews need to be regulated and the substances sold need to be tested or measured to check if they are good for human consumption.

## 7.3.2 Theme 2: Contributory factors towards substance abuse

### 7.3.2.1 Affordability of traditional beers
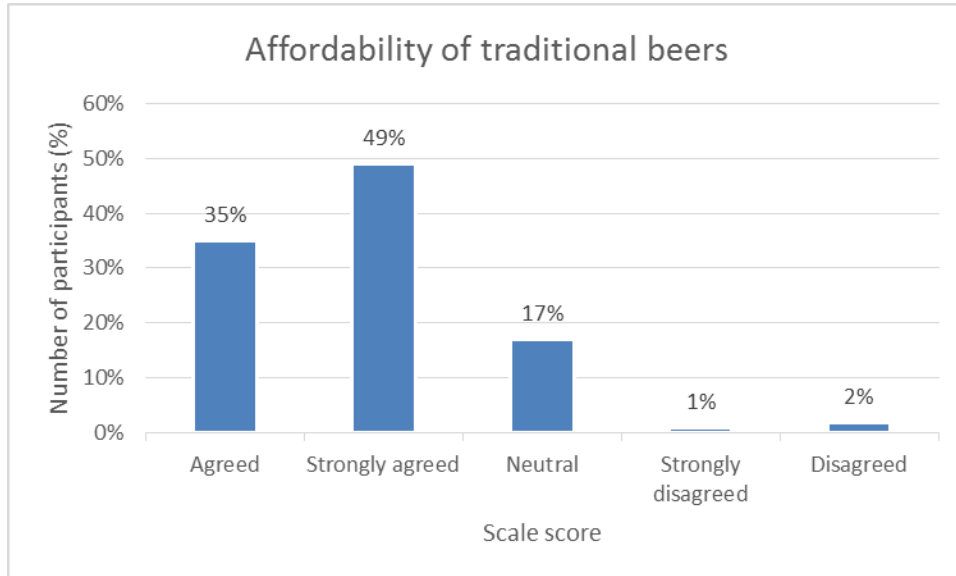


**Figure 1: Affordability of traditional beers**

The figure represents traditional beers in rural areas which are used continuously by the youth because they are cheap and affordable. The highest percentage of 49% (N=62) of the participants in this frequency strongly agreed that traditional beers are used continuously by the youth because they are cheap and affordable (see Fig 1). This is followed by a subsequent percentage of 35% (N=44) of the participants, who agreed that traditional beers are used continuously by the youth because they are cheap and affordable. The percentage of participants who were neutral about traditional beers being used continuously by the youth because they are cheap and affordable was 13% (N=17). A small percent of 2% (N=2) of the participants disagreed that traditional beers are used continuously by the youth because they are cheap and affordable. Lastly, the smallest percent of 1% (N=1) of the participants strongly disagreed that traditional beers are used continuously by the youth because they are cheap and affordable. The findings reveal that traditional beers in Malamulele are used continuously by the youth because they are cheap and affordable at a rate of 84% (N=106) as attested by the participants who agreed and strongly agreed (see Fig 2).

## 7.3.2.2 Availability and accessibility of unorthodox home-brewed beer
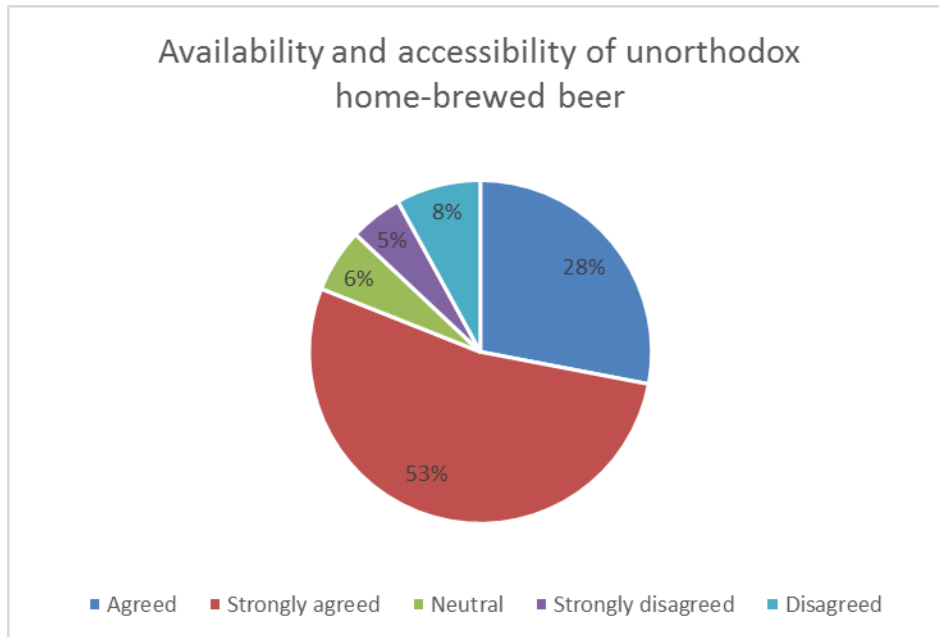


**Figure 2: Availability and accessibility of unorthodox home-brewed beer**

The figure above represents the availability and accessibility of unorthodox home-brewed beer, which contributes towards substance abuse in rural areas. The highest percentage of 53% (N=67) of the participants in this frequency strongly agreed that the availability and accessibility of this home-brewed beer contributes towards substance abuse (see Fig 2). This is followed by the subsequent percentage of 28% (N=35) of the participants agreed that the availability and accessibility of unorthodox home-brewed beer contributes towards substance abuse. The percentage of participants who were neutral on the availability and accessibility of this home-brewed beer which contributes towards substance abuse was 6% (N=8). A percentage of 8% (N=10) of the participants disagreed that the availability and accessibility of this home-brewed beer contributes towards substance abuse. A percentage of 5% (N=6) of the participants strongly disagreed that the availability and accessibility of the home-brewed beer contributes towards substance abuse. The findings reveal that the availability and accessibility of the home-brewed beer which contributes towards substance abuse in rural areas is

approximately at 81% (N=102) as confirmed by the participants who agreed and strongly agreed (see Fig 2).
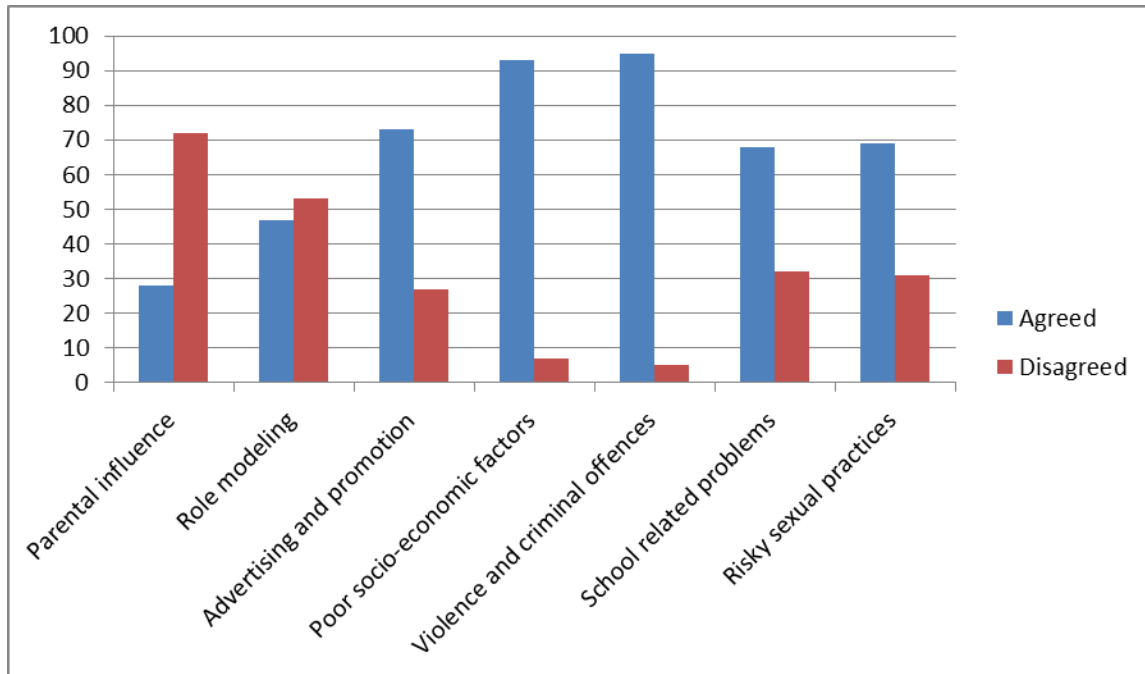


**Figure 3: Contributory factors towards substance abuse (Y-axis= percentage & X-axis= contributory factors)**

This figure above depicts contributory factors towards substance abuse amongst the youth in rural areas. The blue column depicts the percentages of participants who agreed that these factors contribute to substance abuse amongst the youth. The red column shows the percentage of participants who disagreed that these factors contributes to substance abuse amongst the youth. In this study, 72% of the participants disagreed that parental influence contributes to substance abuse, hence 28% agreed to parental influence as contributory factors towards substance abuse amongst the rural youth (see Fig 3). Again, 47% of the participants agreed that role modeling contributes to substance abuse amongst the youth, whereas 53% of the participants disagreed that this factor contributes to substance abuse. A subsequent percentage of 73% of the participants agreed that advertising and promotion contributes to substance abuse amongst the youth, while 27% of the participants disagreed that these factors contribute towards substance abuse amongst the rural youth.

Additionally, a significant number of 93% of the participants agreed that poor socio-economic factors contribute to substance abuse amongst the youth, but 7% of the participants disagreed. A huge number of participants at 95% agreed that violence and criminal offences contribute to the abuse of substances, while 5% disagreed. A percentage of 68% of the participants agreed with school related problems as contributory to substance abuse amongst the youth, but 32% of the particpants disagreed. A proportion of 69% of the participants agreed that risky sexual practices contribute to substance abuse amongst the youth in rural areas. In this study, advertising and promotion, poor socio-economic factors, violence and criminal offences, school related problems, and risky sexual practices are the most contributory factors toward substance abuse amongst the youth. Socio-cultural practices and events play huge contributory factor to the abuse of substances amongst the youth.

Jiloha (2009:169) contends that substance abuse is associated with parental influence, family structure, peer pressure, role model, advertising and promotion, socio-economic factors, availability as well as knowledge, attitude and beliefs amongst the youth. Substance abuse behaviour is seen as an outcome of genetic vulnerability, biochemical characteristics, environmental stressors, past learning experiences, social pressures, individual personality and cultural contexts (Gill, 2000:05). It is seen as a custom to prepare free traditional beers for socio-cultural practices. When there are traditional parties, western and traditional beers are accessible for free for everybody, including the youth as prepared by the family. Hence, the impact of socio-cultural practices towards substance abuse can be felt and the strength of the association between substance use behaviours varies with the levels of abuse (Bobo & Husten, 2000:225).

## 7.3.3 Theme 3: The impact of socio-cultural activities towards substance abuse

Socio-cultural practices that encourage the youth to abuse substances in rural areas were not extensively studied (Bobo & Husten, 2000:231). Therefore, this study looked at the impact of socio-cultural practices towards substances amongst the youth. Socio-

cultural factors play a role in the escalation of substance abuse amongst the youth. They influence the initiation and continued use of substances amongst the adolescents in schools (Bobo & Husten, 2000:225). Young people abuse substances during adolescence through socio-cultural contexts that they find themselves in (Njoroge, 2015:67). Anderson (1998:240): presents that personal marginalisation and positive effect on ego identity discomfort before drug use or during early childhood and adolescent is one of the major factor on early initiation of the use of substances. The youth in rural areas starts engaging with substance use at an early age due to identity discomfort. The use of substances is to remove the discomfort to gain self-esteem. The programme assists the youth to unleash their potential and capacity by looking at the impact of socio-cultural practices towards the abuse of substances. The youth binge drinking depends on traditional beers and new unorthodox concoctions because they are cheap, accessible and affordable. Socio-cultural practices are freely accessible.

Some participants argued:

> *"Vantshwa lava va tirhisaka mabyala na mafole hi vusopfa hi masiku hinkwawo va ondza, vakhalabya, va tshika swa vumundzuku bya vona va landzelelana na byala na fole".* Young people who abuse substances in rural areas lose weight and look old and drop out of school and have no future.

> *"Swidzidziharisi na switswotswi leswi swi onha vutomi bya vantshwa".* Substances destroy the lives of young people in rural areas and places them at risk.

> *"Swi onha mizimbha kumbe mimirhi ya vona".* Substances affect young people's physical appearances.
> *"Vanw'ana loko va dakwile va wa va vaviseka va sala na swivati va tlhela va tsandzeka ku ti lawula".* When young people are drunk and lose control, they fall and get injured.

*"Loko vantshwa va nwa mabyala lawa ma nga kona sweswi, ematikoxikaya nkarhi wo leha va kukumuka makhwiri swi hetelela hi ku va dlaya".* When young people take some of the home-made beers for a long time, they get addicted and end up dying due to the nature of ingredients used to process the beers.

Some participants indicated that:

*"Swi na switandzhaku swo biha eka vantshwa hikuva a va ha lawuleki a swikolweni loko va tinghenelerisa eka swilo leswi, va rhandza tihuwa na ku lwa na maticara na vana van'wana".* Socio-cultural practices have effects as young people in rural areas who abuse substances are uncontrollable and become violent to their teachers and their fellow learners in schools.

Other participants said:

*"Eka vantshwa va xisati loko va dakwile swi va veka ekhombyeni hikuva va nga endla na timhaka ta masangu va nga titwi, leswi swi nga endlaku ku va va kuma xitsongwatsongwana xa HIV na ku tika".* To young women when they are drunk they are at risk of doing sex without their consent which also puts them at risk of contracting HIV.

*"Loko vantshwa va dakwile emitlangwini va hetelela va endla timhaka ta masangu va nga tisirhelelangi. Leswi swi nga endla ku va kuma xitsongwatsongwana xa HIV na ku tika."* When young people are drunk they end up having unprotected sex which put them at risk of being infected with HIV.

Young people are at risk of contracting HIV and STI's during sex due to socio-cultural practices and events after using substances. The abuse of substances was motivated by the need to relieve stress, the need to pass time, to socialise, to enhance confidence, and to stimulate them sexually, resulting in school dropout, binge drinking

and addiction (Makhubele, 2012:24). Substance abuse is also associated with school dropout, unplanned sexual activities and increased sexually transmitted diseases (Tshitangano & Tosin, 2016:01). It makes them vulnerable to HIV infection, sexual transmitted infections and lead to poor school performance (Ajao *et al.*, 2014:214).

Young people use and abuse alcohol and drugs, which place them at risky situations of getting injured when they are drunk, practising risky behaviours of committing crime. They are at risk of contracting STD's and HIV as well as not taking their educational opportunities seriously.  The use and abuse of substances in South Africa is generally problematic amongst the youth-in-school (Hamdulay & Mash, 2011:83). The most abused substance is alcohol, which is a major cause of crime, violence and moral decay in South Africa. Between 65% and 70% of violent crimes in Cape Town could be attributed to the intake of alcohol (Mothibi, 2014:181). There is a very strong link between substance abuse and HIV infection, which affects young school learners even in rural areas (Lebese *et al.*, 2014:340).

Socio-cultural practices encourage young people to use substances as it is allowed customarily, but destroys their future.  They have effects because young people who abuse substances in these events are uncontrollable and violent to their teachers and fellow learners in schools. These practices and events allow young people to use substances without restriction, and they end up becoming abusers of substances, which leads to addiction. Young people are at risk regarding their health due to practices in favour of culture, because some of the home-made beers, if taken for a long time, lead to the youth get addicted, and end up dying due to the nature of ingredients used to process the beers.

| Score scale | Number of participants | Variance from mean $(x - \bar{x})$ | Square of varience from mean $(x - \bar{x})^2$ |
|---|---|---|---|
| Strongly agreed | 38 | 12.8 | 163.84 |
| Agreed | 53 | 27.8 | 772.84 |
| Neutral | 17 | -8.2 | 67.24 |
| Disagreed | 8 | -17.2 | 295.84 |
| Strongly disagreed | 10 | -15.2 | 231.04 |

**Table 4: impact of socio-cultural practices towards substance abuse amongst the youth in rural areas**

$$\sum (x - \bar{x})^2 = 1530.8$$

$$s = \sqrt{\frac{\sum (x - \bar{x})^2}{n - 1}} = 12.25$$

Quantitative approach was used to determine the impact of socio-cultural practices towards substance abuse. The sampling size was 126 participants. Different scale score was used ranging from strongly agree (N=38), agree (N=53), neutral (N=17), disagree (N=8) and strongly agree (N=10) in table 4. From the obtained results mean was calculated at the value of 25.2. The variance from mean was calculated at the value of 1530.8. Variance from mean and square of variance from mean used to calculate the standard deviation was 12.25. The researcher is of the view that socio-cultural practices have impacts on substance abuse amongst the youth in rural areas.

8.3.3.1 Major influences of socio-cultural practices on substance abuse
There were sub-themes transcribed verbatim drawn from the participants on how socio-cultural practices cause substance abuse amongst the youth in rural areas. One of the sub-themes on how socio-cultural practices influence substance abuse was drawn as follows:

One of the participants said:
> *"Xintu lexi xi hlohlotela ka ku tirhisiwa ka mabyala na mafole swi onhela vantshwa vumundzuku a matiko xikaya hikuva va tshika swa*

118

*vumundzuku bya vona va landzelelana na mabyala na mafole".* Socio-cultural practices influence the use of substances by young people in rural areas, which destroys their future as they opt to abuse substances.

Another participant revealed that:

*"Xintu xi pfumelela ku va na byala bya mahala emintlangwini swi nga ri na swipimelo eka vantshwa laha va dyondzaka kona ku nwa na ku dzaha swi va ntolovelo ku ya mahlweni".* Socio-cultural practices allow young people in rural areas to use substances without restrictions, and they end up being abusers of substances.

Socio-cultural practices contribute to the use of substances by young people in rural areas, which destroys their future as they opt to abuse substances. The youth grow up in various environmental contexts with socio-cultural practices that influence their behaviour towards substance abuse (Mokgwadi, 2011:482). Socio-cultural practices have effects as young people who abuse substances are uncontrollable and violent to their teacher and their fellow learners in schools. Lebese *et al.*, (2014:330) assert that learners in Limpopo Province linger around during the day in school uniform smoking *"marijuana or dagga",* which leads to unruly behaviour and poor performance, and teachers have raised complaints about this (Lebese *et al.*, 2014:330).

Due to socio-cultural practices, young people use and abuse alcohol and drugs, which place them at risky situations such as getting injured when they are drunk, practising risky behaviours of committing crime. They are at risk of contracting STD's and HIV as well as not taking their educational opportunities seriously. The use and abuse of substances in South Africa is generally problematic amongst the youth-in-school (Hamdulay & Mash, 2011:83). The most abused substance is alcohol, which is a major cause of crime, violence and moral decay in South Africa. Between 65% and 70% of violent crimes in Cape Town can be attributed to the intake of alcohol (Mothibi,

2014:181). There is a very strong link between substance abuse and HIV infection which affects young school learners even in rural areas (Lebese *et al.*, 2014:340).

Socio-cultural practices encourage young people to use substances as it is allowed customarily, which destroys their future. These practices have effects as young people who abuse substances in such events are uncontrollable and violent to their teachers and their fellow learners in schools. The practices and events allow young people to use substances without restriction, and they end up becoming abusers of substances, which leads to addiction. Young people are at risk regarding their health due to practices in favour of culture as some of home-made beers, if taken for a long time, lead to the youth getting addicted and dying due to the nature of ingredients used to process the beers.

A number of participants in one of the focus groups and individual interviews revealed that:

> *"Mikhuvo, mitirho na mitlangu ya xintu yi na xiave ka ku tirhisiwa swipyopyi na swidzidziharisi eka vantshwa ematikoxikaya."* Socio-cultural practices indeed fuel substance abuse amongst the youth in rural areas.

> *"Mikhuvo kumbe mitlangu swi na xiave xikulu eka ku tirhisiwa ka swipyopyi na swidzidziharisi hi vusopfa hikuva vantshwa hi laha va dyondzaka kona ku swi tirhisa".* In socio-cultural practices, the youth observe, learn and experiment with substances.

> *"Loko ku ri na ntlangu wo fana na vukhomba vantshwa va kuma kona byalwa ku tiendlela leswi vantshwa van'wana va endlaka swona."* When there is a traditional party like women initiation school, the youth gets free alcohol and indulge in alcohol due to peer pressure.

Socio-cultural practices play a huge role in the abuse of substances amongst the youth. Lebese *et al*., (2014:334) assert that one of the contributing factors towards substance abuse is peer pressure as well as experimentation amongst school learners as they influence each other and want to taste substances to feel high. Erik Erickson's (1963) stages of the theory of psychosocial development, namely identity versus role diffusion (12-17 years) is pertinent to this age group as it predicts experimentation of substances.

A number of participants said:

> *"Emikhubyeni kumbe emitlangwini ya xintu byalwa byi kumeka mahala, leswi swi dyondzisaka vantshwa ku tirhisa swipyopyi hi vusopfa".* In socio-cultural practices liquor is free which teaches the youth to abuse substances.

> *"Ka micino ya xintu yo fana na xigubu, vachayi na vacini loko va rhambiwile eka mitlangu kumbe mikhuvo va dzaha mbangi kumbe ku nwa byalwa leswaku va nga nyumi; va ri va susa tingana".* In traditional dances, players of meropa and traditional dancers when invited in traditional parties the youth take dagga or liquor to reduce shyness.

To support this, Westermeyer (1999:254) contends that alcohol and drug abuse reduces self-doubt, alleviating anxiety and enhancing social interactions. The researcher therefore believes that the youth engage themselves in substances in socio-cultural events to lessen anxiety, to have high self-esteem and to interact with others with confidence. Customarily, socio-cultural practices and events allow for the preparation of free liquor without looking at the age of people involved in such practices and events.

Below are some of the responses on this issue:

> *"Loko ku ri na mitlangu vantshwa va lava ku voniwa leswaku na vona va nwa, i bombo eka vona".* During socio-cultural practices the youth abuse substances as a swag.

> *"Loko ku ri na miphahlo vantshwa emutini va fanele ku tirhisa byalwa bya xintu ku chela hi milomo ehansi va phahla hi byona swikwembu ivi lebyi byi nga ta sala enon'wini va byi mita."* During traditional rituals young people are the ones performing rituals using traditional beer to spit on the ground and to drink the remaining beer.

> *"Vantshwa va navela kumbe ku dyondza eka lavakulu ku tirhisa swidzidziharisi na swipyopyi lomu mitlangwini na le mikhubyeni".* The youth learn from the elders to abuse substances during traditional parties.

> *"Vantshwa va kucetelana na vanghana lomu mitlangwini ku tirhisa swipyopyi na swidzidziharisi".* The youth influence each other to abuse substances during traditional parties.

During socio-cultural practices and events, the youth abuse substances as swag in rural areas. When there are traditional rituals, young people are the ones performing these rituals using traditional beer to spit on the ground and to drink the remaining traditional beer. The youth learn from the elders to abuse substances during traditional parties as the parents entertain and socialise in these events in front of the youth. The youth also influence each other to abuse substances during traditional parties.

Spein *et al.*, (2004:118) assert that peer influence is the predictor of youth substance abuse. One of the contributing factors towards substance abuse is peer pressure as well as experimentation amongst school learners as they influence each other and want to taste substances in order to feel high. (Lebese *et al.*, 2014:334). Chiroro, *et al.*,

(2012:11) point out that substance abuse is a mainly home-based problem, including parents who are abusers, which is further boosted by social and cultural attitudes of viewing the use of substances as a norm. Alcohol and drugs are easy to obtain and are accessible. Cultural practices are products of learned as well as shared standards of behaviour that are transmitted from elders to children (Castro & Coe, 2007:783).

Some of the participants interviewed in groups and individually shared the same sentiments and said:

> *"Emitlangwini loko vantshwa va xinuna va lava tintombhi to karhi va karhi va chava ku gangisa va rhanga va dzaha kumbe ku nwa ku susa tingana ku kota ku gangisa tintombhi"*. In socio-cultural events when young men want to propose girls, they take substances in order to remove their shyness.

> *"Eka vantshwa va xisati loko va tshamile na vanghana va kucetelana ku nwa byalwa ku susa tingana loko va gangisiwa na ku loko va endla timhaka ta masangu va nga nyumi."* Again in socio-cultural events young women drink alcohol due to peer pressure as well as to reduce shyness when they are proposed and to engage in sex without being shy.

Young men boost their self-confidence by using substances when there are socio-cultural events to propose girls. Young women take substances to reduce self-doubt when proposed by young men as well as to easily have sex without being shy. Alcohol and drugs are used to reduce self-doubt, alleviate anxiety and to enhance social interactions amongst the youth in socio-cultural events and practices in rural areas (Westermeyer, 1999:254).

Some of the participants said:

> *"Loko ku ri na mikosi vantshwa va ya emasirheni ku cela na ku nwa byalwa lebyi byi vitaniwaka byalwa bya tipiki kumbe timhisi, bya*

*mahala."* When there is a funeral in rural areas young people indulge in alcohol as it is a custom to prepare traditional beer by the concerned family for the grave diggers.

When there is a funeral, young people use alcohol in the graveyards with the elderly. It is customarily to prepare liquor for the grave diggers. The youth also use dagga when playing soccer, believing that it assists them to perform well on the field. Young people use and abuse substances almost everyday which was observed from the behaviour of elders as a way of socialising. The abuse of substances is motivated by the need to relieve stress, to pass time, to socialise, and to enhance confidence, resulting in binge drinking and addiction (Pitso, 2007:1). Young people enjoy when there is entertainment during these socio-cultural events, where they unwittingly engage in substance abuse (Mokgwadi, 2011:481). Substances in socio-cultural practices serve as agents of socialisation. Families view drinking as a way of increasing bonding among family members and friends as these families also view sobriety as a risk of being ostracised, which may influence their use of alcohol (Van Wormer *et al.*, 2008:432).

Other participants made the following statements:

> *"Mitolovelo i ku va vantshwa va nwa ngopfu hi masiku yo tala hi ku pfukela ku ya xava byalwa bya xintu kumbe lebyi byi endliwaka masiku ya lawa emakaya hikuva byi chipile, va nwa va dzumba dyambu hinkwaro."* When they wake everyday young people abuse traditional beers and unorthodox concocted beer because they are cheap to spend the rest of the day relaxing.

> *"Hambi va ri hava mali yo xava va swi tiva ku vanghana va xava va nwa na vona, kumbe va va nyika hi xikweleti hikuva loko va ri na mali va dzumba kona."* Even if they do not have money, young people know that their friends buy for them to drink together or get traditional beer on credit.

*"Lava va endlaku mabyalwa va endlela ku tihanyisa".* Those who sell traditional beers are doing this to sustain their families because they are unemployed or due to economic challenges in rural areas.

Young people bingely use traditional beers and unorthodox concoctions everyday because they are cheap to socialise for the rest of the day. Young people sometimes buy traditional beer on credit. People who are jobless in rural families sell traditional beers and unorthodox beers to sustain their households due to economic challenges. Jobless households sell home-made alcoholic beverages for commercial reasons as a way of dealing with socio-economic exclusion (Makhubele, 2012:17). Makhubele (2012:18) also asserts that unemployment and low paying jobs may also influence one to consider home-made alcohol production as an income generation option.

A number of participants interviewed in groups and individually said the following as transcribed verbatim:

*"Van'wana loko va dzumbile va nwa byalwa ku tima torha hi ku ya hi ndhavuko".* When relaxing some people drink traditional beer to sustain their traditions. As a researcher, sustaining traditional values related to traditional beers promotes risky behaviours towards the youth.

*"Mitolovelo ya xintu yi na xiave hikuva vinyi va ntlangu va xava byalwa bya xilungu na ku endla bya xintu ivi vanhu va byi kuma mahala".* Socio-cultural events plays a major role for the youth in terms of the abuse of substances because when there are traditional parties, western and traditional beers are free in rural areas.

*"Vatswari ematikoxikaya va hoxa xandla hikuva va dzaha fole na ku nwa mabyalwa na vantshwa".* Parents play a role in influencing the youth to abuse substances in rural areas.

"*Loko ku ri na mitlangu ya xintu byalwa bya xintu va byi chela endzeni ka madiromu leswaku loyi a lavaku ku nwa a tikela, hikokwalaho swi na xiave xikulu.*" When there is a socio-cultural event in the family, traditional beer is prepared in drums where everybody has access, which fuels towards the abuse of substances amongst the youth.

Young people drink traditional beer to sustain their tradition, which as a researcher I view as something that poses risky behaviours to young people. Socio-cultural practices play a major role for the youth to abuse substances in rural areas. Parents play a major role in influencing young people to use and abuse substances. During socio-cultural events, beers are for free. Chiroro *et al.*, (2012:11) point out that substance abuse is mainly a home-based problem, including parents who are substance abusers, which is boosted by social and cultural attitudes of seeing the use of substances as a norm. Alcohol and drugs are easily obtainable and accessible. Substance abuse amongst learners put them at risk of contracting HIV infection, sexual transmitted infections and to perform poorly in school (Ajao *et al.*, 2014:214).

Socio-cultural practices have direct negative impact towards substance abuse amongst the youth because traditional practices allow free liquor without age restriction. Young people observe and learn to indulge in substances by experimenting with friends as a way of socialising. Therefore, the youth end up abusing substances because they are cheap and accessible, which interferes with their education and their future. The abuse of substances amongst the youth has negative impact, physically and socially. The youth end up committing crime under the influence of substances, which impacts negatively on their future as they may be arrested and have criminal records.

One of the participants said:
"*Xintu lexi xi hlohlotelaka ku tirhisiwa ka mabyalwa na mafole swi onhela vantshwa va le matikoxikaya vumundzuku bya vona hikuva va tshika swa vumundzuku bya vona va landzelelana na mabyalwa na*

*mafole".* Socio-cultural practices influence the use of substances by young people and destroys their future as they opt to abuse substances in rural areas.

Socio-cultural practices contribute to the use of substances by young people which destroys their future as they opt to abuse substances. The youth grow up in various environmental contexts with socio-cultural practices that influence their behaviour towards substance abuse (Mokgwadi, 2011:482). These practices have effects, as young people who abuse substances are uncontrollable and violent to their teachers and their fellow learners in schools. Lebese *et al*., (2014:330) assert that learners in Limpopo Province linger around during the day in school uniform looking for marijuana or dagga, which leads to unruly behaviour and poor performance, and teachers have raised complaints about this (Lebese *et al*., 2014:330). Socio-cultural practices allow young people to use substances without restrictions, and they end up being abusers of substances.



The level at which socio-cultural practices source substance abuse

- High
- Moderately high
- Neutral
- Moderately low
- Low

56%
15%
4%
16%
9%
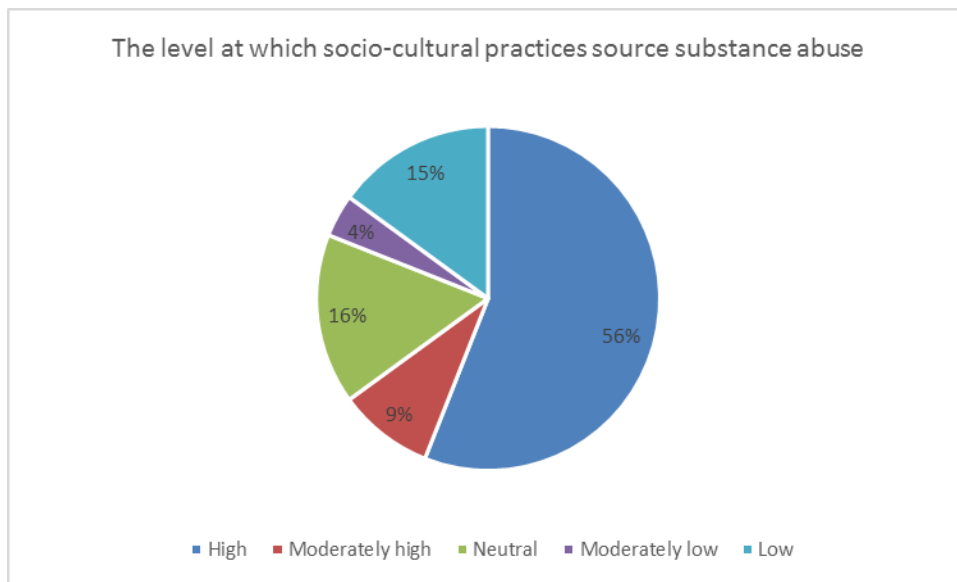
**Figure 4: Level at which socio-cultural practices source substance abuse amongst the youth in rural areas**

The figure above depicts the level at which socio-cultural practices cause substance abuse amongst the youth in the rural areas. A substantial percent of 56% (N=71) of the participants indicated that the level at which socio-cultural practices cause substance abuse amongst the youth is high (see Fig 4), while 9% (N=11) of the participants showed that the level is moderately high, and 16% (N=20) of the participants revealed that it is neutral. A smallest portion of 4% (N=5) of the participants claimed that the level at which socio-cultural practices fuel substance abuse amongst the youth is moderately low, and 15% (N=19) said it is low. The findings reveal that the level at which socio-cultural practices cause substance abuse amongst the youth in rural areas is high at approximately 65% (N=82).

## 8.3.4 Theme 4: The occurrences of socio-cultural events in rural areas

The occurrences of socio-cultural events are rife, which also causes the abuse of substances as the youth in these events get liquor for free. Socio-cultural practices have a direct impact on the abuse of these substances as the youth observe and learn to abuse them because they are freely available in public. Young people indulge in substances due to peer pressure, family and cultural influences, and this leads to continuous use of substances. These events are held alternatively every week and are known as *"xiseveseve", "vukhomba", "van'waswimanimani", "nhluvulo", "xigubu", "xibelani" and "makhwaya".*

A number of participants interviewed in groups and individually revealed that:

*"Mitirho na mitlangu ya xintu swi va kona vhiki na vhiki hi mhaka ya ku ku na mitlangu yo fana na van'waswimanimani, vukhomba, mihluvulo, na micino ya swigubu, xibelani na makhwaya".* In one of the focus groups with school learners, they said socio-cultural events are held alternatively every week such as *"van'waswimanimani, vukhomba, minhluvulo, na mincino ya swigubu, xibelani and makhwaya".*

*"Van'waswimanimani hi loko vavasati va muti wo karhi va hlangana va karhi va ti tsakisa kun'we va ri karhi va nwa swipyopyi, va ri karhi va tlanga xitokofela xa mali."* *"Van'waswimanimani"* refers to a situation where young women from one extended family meet for stokvel purposes and drink liquor.

*"Mitlangu na micino leyi hileswi swi va ka na xiave eka ku tirhisiwa ka swidzidziharisi na swipyopyi hi vusopfa hikuva hi laha vantshwa va dyondzaka kona mitirho leyo biha".* These socio-cultural events fuel substance abuse amongst the youth, and it is where they learn to use substances.

Socio-cultural events in Malamulele are held alternatively every week with free traditional and commercial beers as an agent of socialisation. Young people in such events learn, observe and experiment with substances. In these events, there is no age restriction, and the learners have access to substances without any form of regulation. These events include *"van'waswimanimani", "vukhomba", "minhluvulo", "mincino ya swigubu", "xibelani"* and *"makhwaya".* The events promote the use and abuse of substances amongst the youth. Young women from extended families meet here to conduct stokvel and to drink liquor.

Other participants in interviews conducted individually and in groups revealed that:
*"Vantshwa va titsakisa hi mitlangu va karhi va tirhisa swidzidziharisi na swipyopyi, hikuva ka ha ri hava bolo na ti*netball *swi tekeriwe xiave hi mitlangu ya xintu."* The youth in rural areas entertain themselves with substances because there are no longer sports to entertain them; therefore, they opt to attend socio-cultural events.

Due to lack of extra-mural activities or sport activities among young people, they opt to entertain themselves with substances by attending socio-cultural events as a way of

socialising. These practices and events serve as agents of socialisation where young people obtain liquor for free and smoke tobacco.

All participants in one of the focus groups said:

> *"Mitlangu na mikhuvo ya xintu yi tele ngopfu hikuva yo cincacincana emahelelweni ya vhiki na vhiki vantshwa va ri karhi va tihungasa hi swipyopyi na swidzidziharisi."* Socio-cultural events are too many as they are held alternatively every weekend where young people indulge in substances as entertainment.

One of the educators said:

> *"Mitlangu na mikhuvo ya xintu yi tele ngopfu hi mikarhi ya mahelo ya lembe hi December hikuva munhu u tlula miti yinharhu wa vumune ku na ntlangu ku karhi ku nwiwa na ku dzaha". Swilo leswi swi humelela masiku hinkwawo hi mikarhi leyi ya makhisimusi."* There are many socio-cultural events during the festive seasons as each fourth family in rural communities there are parties where the youth are abusing substances everyday during this time of the year.

The number of socio-cultural events is rife as they are held every weekend where young people indulge in substances. Young people entertain themselves in socio-cultural events with the use of substances as an agent of socialisation. There are many socio-cultural events during the festive seasons as each fourth family in rural communities, you will find the youth abusing substances.

To capture the essence of socio-cultural events in rural areas, one participant argued as follows:

> *"Laha xikarhi ka lembe swa humelela kan'we kumbe kambirhi a n'hwetini hikuva vanhu va hlengeletela mitlangu na mikhuvo ya makhisimusi."* During the course of the year, socio-cultural events are

held once a month as people are investing money for these events for the festive seasons.

One of the educators said:

*"Mitlangu na mikhuvo ya xintu ematikoxikaya yi tele ngopfu hikuva mi kuma muntshwa a ri na vamaseve va ta ku nyikeleni ka n'wana wa yena loyi a ha ku beburiwaka kumbe ku ri xiseveseve". "Swilo swa muxaka lowu swi humelela vhiki na vhiki kumbe swi tlula rin'we, lerin'wana swa boha swi va kona ku karhi ku nwiwa mabyalwa na dzaha mafole."* Socio-cultural events are held every weekend or after one weekend where young women invite friends to attend a party with gifts for the new born child or to run stokvel, where young people drink liquor and smoke drugs.

During the year, socio-cultural events are held once a month as people have invested money for the festive season. Though one of participants argued that these events are held during the festive season, the researcher concludes that the events take place on weekends where a huge number of young people indulge in substances. They are held every weekend or after one weekend where young women invite friends with gifts for the new born children or to run stokvel, where young people drink liquor and smoke drugs. Young women invite friends to attend such events with gifts for new born children or to conduct stokvel, where young people drink liquor and smoke.

In the other focus groups, the participants revealed that:

*"Vanhu va endla mintlangu ku lava ku nyikeriwa mpahla, mi kuma muti wun'we wu endla mitlangu kanharhu hi lembe va lava ku nyikeriwa mpahla ku karhi ku nwiwa na ku dzahiwa emitlangwini yaleyo."* People have parties to exchange clothes as gifts, where one family conducts three different traditional parties a year for clothes, hence young people abuse substances in these events.

"*Swilo leswi swi humelela tinh'weti hinkwato emaheleni ya vhiki rin'wana na rin'wana ku ri na swipyopyi na swidzidziharisi*." Socio-cultural events are held every weekend in rural areas accompanied by the abuse of substances.

Families conduct several socio-cultural parties and events for clothes as gifts in rural areas. Hence, young people abuse substances where they indulge in substances. Socio-cultural events are held every weekend accompanied by the abuse of substances where young people experiment with alcohol and drugs. Adolescence is a time of experimentation when young people become increasingly independent and mobile, and are subject to a "widening range of social and cultural influences" (Harker, Myers & Parry, 2008:16).

The participants in another focus group shared the same sentiments by saying that:

*"Mitlangu na mikhuvo swi tele ngopfu hikuva swo cincacincana swi humelela nh'weti yin'wana na yin'wana na vhiki rin'wana na rin'wana, na byalwa byi va byi tele bya mahala."* Socio-cultural events are so many as they are held alternatively every month and weekend where beers are free. This contributes to the abuse of substances by young people as they get liquor for free.

One of the School Governing Body members said:

*"Mitlangu yi tele ngopfu yo cincana hi ku hambana ka yona hi xintu, yi humelela emaheleni ya nh'weti, ngopfu loko swikolo swi pfarile laha vantshwa va nyanyukaka hi nkarhi walowo hikuva ku va ku nga ri ku dyondziweni." "Va hungasa lomu mitlangwini va nwa byalwa bya mahala."* Socio-cultural events are held alternatively at the end of every month, especially during the school holidays where young people become so excited knowing exactly that they are not at school but drinking alcohol for free.

Another SGB Members said:

"*Mitlangu yi humelela ngopfu loko swikolo swi pfarile vhiki na vhiki*".
Socio-cultural events are held mostly during the school holidays
every weekend.

The researcher believes that different socio-cultural events are held almost every weekend in rural areas. Young people are exposed to the abuse of substances, and they end up abusing them. Socio-cultural events contribute mostly to the abuse of substances amongst the youth as these substances are for free.

## 7.3.4.1 Likelihood and relative promotion of substance abuse by traditional events
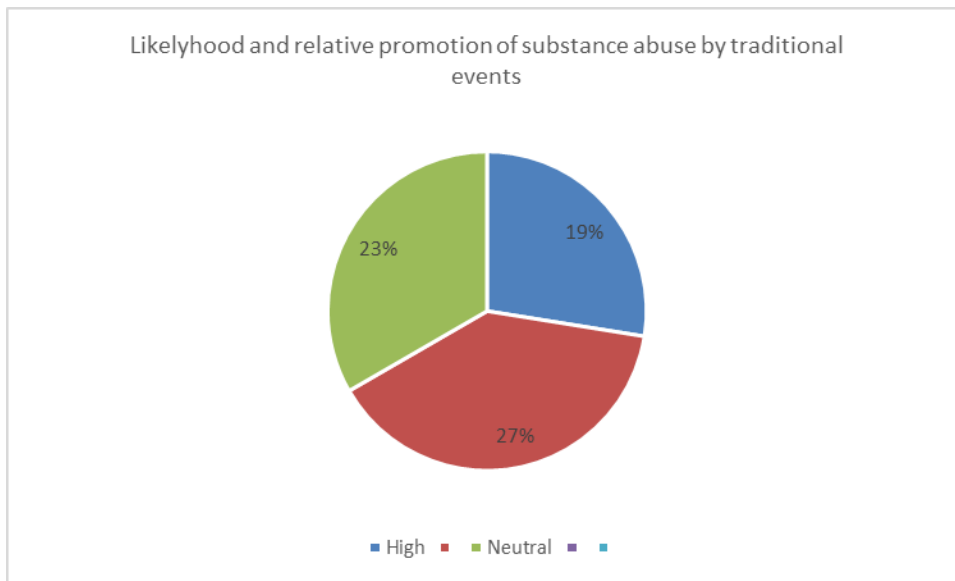


**Figure 5: Likelihood and relative promotion of substance abuse by traditional events**

The figure above depicts the promotion of substance abuse by traditional or socio-cultural events. The findings reveal that substance abuse is likely and relatively to be promoted in traditional and socio-cultural events such as *"xiseveseve", "vukhomba", "van'waswimanimani", "nhluvulo", "xigubu", "xibelani"* and *"makhwaya"* at a rate of 46% in the rural areas of Malamulele (see Fig 5). A subsequent number of 27% (N=34) of the

133

participants agreed that substance abuse is likely and relatively to be promoted by traditional and socio-cultural events is moderately high. A number of 19% (N=24) of the participants indicated this to be high. A proportion of a number of 23% (N=29) of the participants were neutral that substance abuse is being promoted by traditional and socio-cultural events. The other number of 17% (N=21) that substance abuse is not likely to be promoted by traditional and socio-cultural events by saying this is moderately low. A small number of 14% (N=18) indicated that substance abuse is not likely to be promoted by traditional and socio-cultural events as the likelihood and relativity are low. Therefore, the researcher concludes that there is an association between traditional or socio-cultural events and the abuse of substances in rural areas.

## 7.3.5 Theme 5: The development of a socio-culturally school-based intervention programme on substance abuse for the youth-in-school

The *"Ke Moja"* and Puppets programmes are the programmes of substance abuse in South Africa that fails to respond to the impact of socio-cultural practices towards substance abuse in rural areas (Chiroro *et al.*, 2012:21). In South Africa the Department of Social Development spearhead the programmes of substance abuse prevention such as the "*Ke Moja"* and Puppets which are rarely received (Chiroro *et al.*, 2012:21). Schools are viewed as essential setting for substance abuse prevention activities which should not be separated from other aspects of school life and activities in the Republic of Slovenia and in the EU context (Kvaternik & Rihte, 2012:121). Chiroro *et al.*, (2012:11) contends that despite the roll out of *"Ke Moja"* and Puppets in South Africa the debutant substance abuse amongst school learners is increasing and alarming. In South Africa, school-based prevention is the most popular form of universal prevention among young people, as schools facilitate easy access to a large part of the target population (Harker *et al.*, 2008:12). The programmes of prevention across all the Provinces of South Africa such as the "*Ke Moja"* and Puppets that deal with youth substance abuse were mostly offered in urban and peri-urban areas, with rural areas rarely receiving the services (Chiroro *et al.*, 2012:21).

The prevention of substance abuse through the implementation of school-based programme focusing on socio-cultural practices is inseparable as school learners are not living in a vacuum but influenced by contextual issues. There should be clear and consistent development of school rules that standardise the use of substance abuse as well as the transfer of knowledge of substance abuse in schools, which is relative to socio-cultural issues (Kvaternik & Rihte, 2012:121). The school-based intervention focusing on substance abuse among learners continues support for the development of substance abuse prevention policies and regular school-based surveys. The United Nations Office on Drugs and Crime (2004:06) asserts that it is not the responsibility of the school alone to repair all social ills such as smoking and drinking, and that it is not the responsibility of schools to influence and change such behaviours. It is the responsibility of society as a whole, which includes primary caregivers of young people as well as other relevant role-players. Decisions on how best to address substance abuse problems should take into consideration the nature of the community for which prevention efforts are intended, meaning it is vital to initially conduct a situation assessment to determine the type of substances that are abused and the clients' perspectives (Morojele *et al.*, 2011:203).

The current school-based preventive intervention teaches resistance skills, norms against substance abuse without considering the how socio-cultural practices fuels to substance abuse (Botvin *et al.*, 2001:360b). The current programmes also currently teaches learners a variety of cognitive behavioural skills for building self-esteem, resisting advertising pressure, and managing anxiety, communicating effectively, developing personal relationships, and asserting one's rights (Botvin *et al.*, 2001:361b). Learners are taught with proven skills-training techniques such as group discussion, demonstration, modelling, behavioural rehearsal, feedback and reinforcement, and behavioural "homework" assignments for out-of-class practice, and the programme also teaches problem-specific skills related to substance abuse (Botvin *et al.*, 2001:361b).

The study revealed that the process of community education model should be followed as stages to implement the school-based intervention programme through doing the

situation analysis; identify and analyse impediments; formulate a plan of action; and implement the plan of action and evaluate (Weyers, 2011:96). This process is flexible to allow cultural sensitivity and cultural competence regarding the implementation of the school-intervention programme on the impact of socio-cultural practices towards substance abuse amongst the youth. The other mode of applying the school-based programme following the work of Ross and Deverell (2010:373) through making contact, orientation to the community and compiling a community profile; identifying needs and prioritising; identifying resources; establishing a structure of intervention, such as a committee; developing a plan of action; implementing the action plan; evaluating; and withdrawing community workers.

The themes below include views outlined by the participants about the development of a socio-culturally school-based intervention programme on substance abuse for the youth-in-school:

One of the participants said:

> *"Swi na nkoka ku ri ku va na ndlela leyi yi faneleke ku tirhisiwa hi ku dyondzisa vanhu kumbe ku yisa hungu eka vantshwa hi switandzhaku swa mitirho, mitlangu na micino ya xintu eka xiave lexi swi nga na xona eka ku tirhisa swidzidziharisi na swipyopyi hi vusopfa."* It is very much important to have a programme that teaches about the impact of socio-cultural practices towards substance abuse and how socio-cultural practices affect young people in rural areas.

> *"Swi na nkoka tanihiloko swi tekela enhlokweni timhaka ta ndhavuko ku wu na xiave muni ku hlohlotela ku tirhisiwa ka mabyalwa na mafole hi vusopfa na ku tlhela swi tirhisa ndlela ya ndhavuko ku sivela swilo leswi."* It is very much important as it is culturally appropriate and flexible to accommodate the cultural sensitivity and

cultural competence as a way preventing the use and abuse of substances.

*"Ku yisa emahlweni ku fanele ku va na ndlela yo herisa kumbe ku sivela vanhu lava va xavisaka swidzidziharisi na swipyopyi lomu matikoxikaya handle ka mpfumelelo."* There should be a way to end and prevent those who sell drugs and liquor without licenses in rural areas.

A programme on awareness of the impact of socio-cultural practices towards substance use and abuse amongst young people is very important. It is crucial to have a programme which is culturally appropriate and flexible to accommodate cultural sensitivity and cultural competence as a way of preventing the use and abuse of substances. There should be a way of ending and preventing those who sell drugs and liquor without licenses. The socio-cultural strategy outlined in the programme on the impact of socio-cultural practices towards substance abuse is culturally sensitive to present health issues in the broader context of social and cultural values and characteristics intended for the youth in rural areas (Hecht & Krieger, 2006:305).

Some of the participants asserted:
> *"Xin'wana ku fanele ku va na ndlela yo vanhu va endleriwa tindlela tin'wana va titsakisaka hi tona swo fana na bolo ya milenge, bolo ya mavoko (netball), hikuva vantshwa va swi kota ku hayara swibazana va xavile byalwa va famba va karhi va nwa no dzaha."* The other thing is there should be a way to entertain young people like having sports activities as the youth nowadays hire taxis for trips and buy liquor to entertain themselves.

> *"Swi na nkoka ku programme leyi yi endliwa hikuva yi ta tisa ku cinca tanihiloko yi ta languta ka leswi swi humelelaka ematikoxikaya."* It is

very much important to initiate a programme to bring change as it looks at what it is happening in rural areas.

*"Swi na nkoka hikuva vanhu va ta dyondza na ku tiva ku mitlangu ya xintu yi na xiave muni eka ku nwa mabyalwa na ku dzaha mafole."* It is important to initiate a programme of this nature in rural areas as young people are going to learn and know the impact of socio-cultural practices towards substance abuse amongst the youth.

*"Swi na nkoka hikuva swi ta endla leswaku vantshwa va dyondza hi switandzhaku na vubihi bya swilo leswi va kota ku hambana na swona."* It is important so that young people will learn about the impact of socio-cultural practices to stop abusing substances.

Sport activities are also important to entertain young people with extra-mural activities by having leagues of different sports. To initiate a programme such as a school-based intervention programme on the impact of socio-cultural practices is important to bring change about the bouts created by socio-cultural factors towards substance abuse. It is important to initiate a programme of this nature as young people are going to learn and know the impact of socio-cultural practices towards substance abuse amongst the youth. The prevention strategies should include socio-cultural practices towards abusing substances through culturally sensitive and competent practitioners.

Other participants indicated that:
> *"Swi na nkoka hikuva dyondzo leyi yi ta languta eka leswi swi humelelaka eka ndhawu yaleyo ngopfu eka vantshwa."* This programme is important as it looks at contextual issues facing young people in relation to the abuse of substances.

*"Swi na nkoka ku hlayisa rihanyu ra vantshwa hikuva va ta lemukisiwa."* It is important as it promotes the health of the young people and raise awareness on the impact of socio-cultural practices.

*"Swi na nkoka hikuva swi ta pfuna na lava va nga tinghelerisa ka ku nwa mabyalwa na ku dzaha mafole ku va va tiva switandzhaku swa kona".* The programme is important to assist those who have indulged in substances to know its impact.

Anderson (1998:241) presents that an educational opportunity has a direct impact on changing social marginalisation. This is applicable to the study as the programme focuses on rendering awareness on the impact of socio-cultural practices towards substance abuse amongst the youth in rural areas. Social workers' role is to facilitate and coordinate the realisation of the programme and play a role of an educator in this case. The programme looks at the negative and positive impact of socio-cultural practices towards substance abuse amongst the youth in rural areas. Therefore, this assists social workers to look at how socio-cultural events contribute towards the abuse of substances to raise awareness to the communities. The programme is to assist youth to have knowledge on how substance abuse due to socio-cultural practices and events impact on their sustainable livelihoods. This programme looks at contextual issues that young people are faced such as the impact of socio-cultural practices towards alcohol and drug use and abuse. The promotion of health of young people and raising awareness should include the impact of socio-cultural practices towards substance abuse to respond appropriately in terms of cultural sensitivity and competence. The programme is important because it will assist those who have initiated the use of substances in terms of their impact and influence of alcohol and drug use and abuse. The need for socio-culturally appropriate substance abuse prevention programmes amongst the youth is important in rural areas (Aguilera & Plasencia, 2005:299). Substance abuse intervention abuse should also be contextualised to respond appropriately to substances abused the areas. Weyers (2011:15) asserts that in order to deal effectively with impediments such as substance abuse, professionals must have a

clear picture of the community and broader contexts within which it exists. The theme on the development of a socio-culturally school-based intervention programme on substance abuse for the youth-in-school includes sub-themes on a clear presentation of the programme recommended. The sub-themes are discussed as follows:

### 7.3.5.1 Name of the school-based intervention programme
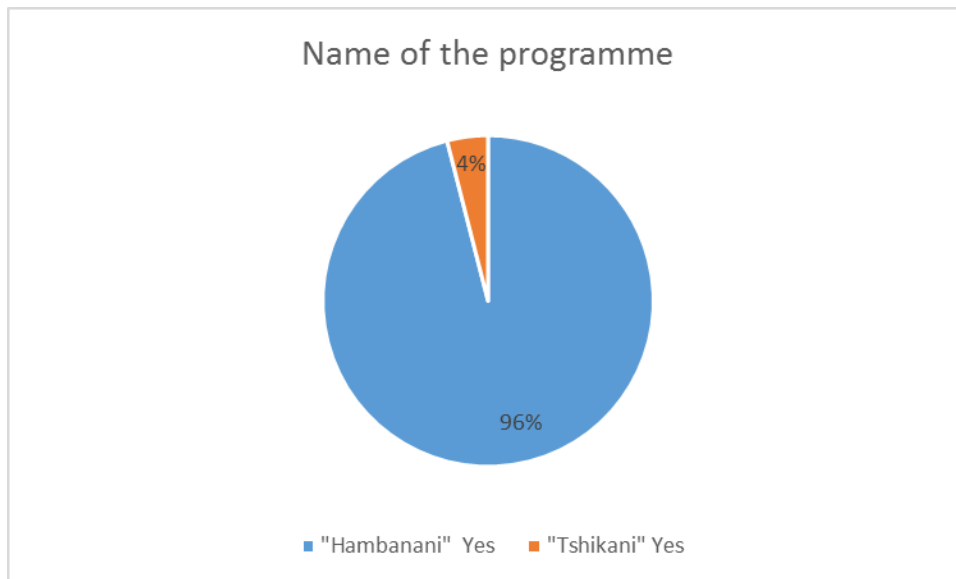


**Figure 6: Name of the programme**

The study revealed the name of the school-based intervention programme on the impact of socio-cultural practices towards substance abuse amongst the rural youth as *"Hambanani"* as 96% (N=121) of the participants supported the name for the programme (See Fig 6). This name refers to doing away with in *Xitsonga* language. In the context of the study the name "*Hambanani*" means young people should do away with the abuse of substance. Therefore, the "*Hambanani"* programme is the name of the school-based intervention programme on the impact of socio-cultural practices towards substance abuse amongst the rural youth. A small percentage of 4% (N=5) of the participants supported the name "*Tshikani"* as the name of the school-based intervention programme on the impact of socio-cultural practices towards substance abuse.

## 7.3.5.2 People implementing the programme

The study revealed that social workers employed by the Department of Social Development spearhead the implementation of the programme as they are rendering services directly to rural villages. In implementing this programme, social workers should play the roles of enablers, researchers, coordinators, planners, organisers, brokers and educators. The study revealed that the target groups of the programme are high school learners. Social workers should work with school teachers, SGB members, nurses, police officers, traffic officers and psychiatrists or psychologists to disseminate information on substance abuse in their field of expertise.

## 7.3.5.3 Resources needed

The study revealed that there is a need for finances or budget to implement the school-based intervention programme on the impact of socio-cultural practices towards substance abuse amongst the rural youth. The budget is meant for transportation, stationery and posters. There is also a need for human resources such as social workers to work as a team to get all stakeholders together to implement the programme.

## 7.3.5.4 Stages/steps and length of the programme

The study revealed that the stages or steps meant for the implementation of the school-based intervention programme on the impact of socio-cultural practices towards substance abuse amongst the rural youth are to analyse the situation; to identify and analyse the impediments; to formulate a plan of action; to implement the plan and to evaluate it. The study has found that the length of implementing the programme is six days for one hour and 30 minutes, and that social workers in coordinating and implementing the programme, should stretch the five days in five weeks by dividing the stages of the programme into five weeks.

## 7.3.5.5 Development of a socio-culturally school-based intervention programme

| Scale score | Number of participants (N) | Percentage (%) |
|---|---|---|
| Agreed | 49 | 39 |
| Strongly agreed | 42 | 33 |
| Neutral | 28 | 22 |
| Strongly disagreed | 03 | 2 |
| Disagreed | 05 | 4 |

**Table 5: Development of a socio-culturally school-based intervention programme**

A proportion of 39% (N=49) of the participants agreed, and 33% (N=42) strongly agreed with the need to implement the programme (see table 5). 22% (N=28) of the participants were neutral on the development of the intervention programme by following the following steps: analysing the situation, planning the target group on the implementation strategy, implementing the programme, and evaluation. A smallest proportion of the participants of 4% (N=5) disagreed and 2% (N=3) strongly disagreed on the development of the programmes. The researcher is of the view that the implementation of the programme should be through analysis of the situation, planning the target group on the implementation strategy, implementing the programme, and evaluation.

## 7.3.5.6 Programme possible strengths and limitations

One of the strengths of the programme relates to positively looking at contextual issues of the rural areas that enable social workers to look at local realities of the youth in rural settings with regard to substance abuse. The programme also enables social workers to be culturally sensitive. It allows social workers to be culturally competent in the field of substance abuse. It integrates social and cultural practices that fuel substance abuse as it was overlooked by previous programmes such as "*Ke Moja*" as well as puppets. The limitations of the programme are that it does not generally address the global types of substances. It also seems not to care about people in urban areas as it is rural-based. It can be applied across South Africa and other African countries where socio-cultural practices and events fuel the abuse of substances in rural areas. The table discussed below complements the results from thematic analysis provided above with statistical

analysis as the study was a mixed method where the quantitative approach is embedded within the qualitative approach.

# CHAPTER EIGHT

# SUMMARY OF MAJOR FINDINGS, CONCLUSIONS, IMPLICATIONS FOR SOCIAL WORK PRACTICE AND RECOMMENDATIONS

## 8.1 Introduction

In this chapter, the problem statement, aim and objectives as well as the research questions of the study were restated. Summary of the major findings were presented. Conclusions were drawn from both literature and the empirical findings of the study. The chapter concludes with a discussion on the implications of the findings for social work interventions or practice. The researcher has made recommendations drawn from the major findings and conclusions that were recommended to policy-makers in terms of the operationalisation of the school-based programme on socio-cultural practices towards substance abuse amongst the youth in rural schools.

## 8.2 Re-statement of the Problem

In a study amongst African Americans, socio-cultural factors were found to play a role in the high rate of alcohol abuse and dependence (Butcher, Mineka & Hooley, 2007:425). In another study in India, socio-cultural practices were also found to play a role in the choice of substances abused in rural areas (Jiloha, 2009:167). Furthermore, in the Niger Delta region of Nigeria, the situation is compounded by the prevailing custom that encourages the presence and abuse of substances in traditional functions and ceremonies (Abasiubong *et al*., 2012:10). In the context of this study, socio-cultural practices refer to ceremonies such as *"vukhomba", "xigubu", "xiseveseve", "van'waswimanimani", "makhwaya"* and *"xibelani".* These practices contribute towards substance abuse as this is where they are mostly and frequently practised.

Bobo and Husten (2000:225) assert that thin socio-cultural practices influence the initiation and continued abuse of substances amongst the youth in rural areas. There are problems associated with substance abuse amongst the youth and these are: parental influence, family structure, peer pressure, role modeling, advertising and promotion, poor socio-economic factors, accessibility, availability, lack of knowledge, negative attitudes and beliefs (Jiloha, 2009:168). Chiroro *et al.*, (2012:11) point out that substance abuse is mainly a home-based problem including parents who are substance abusers. Generally, substance abuse research and *"Ke Moja"* programme have focused on affluent provinces and metropolis cities with minimum attention being paid to rural provinces (Chiroro *et al.*, 2012:21). There is no clear school-based intervention programme that specifically addresses the impact of socio-cultural factors towards substance abuse amongst the rural youth as the programmes are meant for general or global substances used or abused.

## 8.3 Re-statement of the Aim and Objectives of the Study

### 8.3.1 Aim of the study
The aim of the study was to explore and describe the influence of socio-cultural practices towards substance abuse amongst the youth in order to develop a school-based intervention programme for the youth-in-school in rural areas.

### 8.3.2 Research Objectives
The following main objectives guided the study:
- To establish the nature of substances used by the youth-in-school. This objective was achieved in theme 1 of chapter 9. This objective was attended to, which summarily revealed that the types of substances commonly used are dagga, tobacco, glue, beers, snuff, cocaine and nyaope. Again, there are traditional beers and concoctions used by the youth in rural areas. These include the following:
    - ✓ "Mporosi"

- ✓ "Chibuku"
- ✓ "Vucema"
- ✓ "Mbangi"
- ✓ "Chayoni"
- ✓ "Xikwembu ndzi teki"
- ✓ "Vukanyi"
- ✓ "Mubvanya"
- ✓ "Xikavanga"
- ✓ "Xiwa hi mombo"
- ✓ "Mikhubi"
- ✓ "Xipana gariki"
- ✓ "Punch"
- ✓ "Xikavatlani"
- ✓ "Nkuzi malanga"

The participants, at 96%, indicated that the abuse of these substances by the youth takes place mostly in rural areas. The youth linger around in their respective rural communities looking for these substances in home-brew points. In rural communities, these substances are also used in socio-cultural events. This also has to do with substances being morally accepted in such events to sustain, enhance and promote cultural practices.

- ▪ To assess the prevalence of substances available in socio-cultural events. This objective was achieved in theme 2.

When there are traditional parties or socio-cultural events, the family concerned prepares alcohol in drums used after meals. The findings reveal that the abuse of substances such as commercial beers, dagga or *marijuana, tobacco, "mporosi", "chibuku", "ndzi ta ku nyisa",* and *"xikwembu ndzi teki"* by the youth in socio-cultural events in the rural areas of Malamulele is high at a rate of 95% (N=120) as attested by the participants. A similar study in India found that 40% of the youth at the age of 18 years in rural areas were at risk of substance abuse due to socio-cultural events and

practices (Jiloha, 2009:167). Reddy *et al.*, (2010:2) assert that in South Africa, the prevalence rate of alcohol use amongst school learners ranges from 22% to 26%. The most commonly abused substances by the youth in Limpopo Province are cannabis (49%), inhalants (39%), bottled wine (32%), home-brewed beer (30%) and commercially brewed beer (54.8%) (DSD & UL, 2013:16).

▪ To determine whether the youth-in-school abuse substances at such socio-cultural events. This objective was attained as follows:

During the school holidays young school learners become excited knowing exactly that they will be drinking alcohol for free in socio-cultural events. The worst part is that during school break, they look for these types of beers, including commercial beers, *"dagga" or* marijuana*, "mporosi", "chibuku", "ndzi ta ku nyisa"* and *"xikwembu ndzi teki"* and when they go back to school, they fight with teachers and other learners. In socio-cultural events when young school boys want to propose girls, they take substances in order not to be shy. Again, young school girls drink alcohol due to peer pressure as well as to reduce self-doubt when they are proposed and to easily have sex without being shy. When they are drunk, they are at risk of doing sex without their consent, which also puts them at risk of contracting HIV.

▪ To assess the frequency of socio-cultural events in rural communities

The objective was realised as follows:

The occurrence of socio-cultural events is rife, which fuels the abuse of substances as the youth in these events get liquor for free. Young people indulge in substances due to peer pressure, family and cultural influences. This leads to continuous use of substances amongst the youth. Socio-cultural events are held alternatively every weekend, and are known as *"xiseveseve", "vukhomba", "van'waswimanimani", "nhluvulo", "xigubu", "xibelani" and "makhwaya".* They are held at the end of every month, especially during the school holidays where young people become excited knowing exactly that they are not at school but drinking alcohol for free. The findings reveal that substance abuse is likely to be promoted by these traditional and socio-cultural events at a rate of 46% in rural areas of Malamulele.

Considering the above objectives, the following secondary objective was developed to guide the development of the school-based intervention programme:

- To assess knowledge and attitudes of learners towards substance abuse in relation to:
  - ✓ Parental influence
  - ✓ Role modeling
  - ✓ Advertising and promotion
  - ✓ Poor socio-economic factors
  - ✓ Violence and criminal offences
  - ✓ School related problems
  - ✓ Risky sexual practices

The findings reveal that parental influence as a contributory factor towards substance abuse amongst rural the youth is at the rate of 28% (N=35). The results show that role modeling in influencing the abuse of substances amongst the youth is approximately at the rate of 47% (N=59), and advertising and promotion on media at 73% (N=92). The results also reveal that significantly poor socio-economic factors such as poverty are at approximately 93% (N=117) in terms of contributing towards substance abuse amongst the youth, whereas violence and criminal offences contribute at the rate of 95% (N=120) towards the abuse of substances. The study shows that school related problems have contributory factors of approximately 68% (N=86), and risky sexual practices at 69% (N=87).

It was found that advertising and promotion, poor socio-economic factors, violence and criminal offences, school related problems, and risky sexual practices are the most contributory factors towards substance abuse amongst the youth in rural areas. Ajao *et al.*, (2014:215) asserts that little is known about the knowledge, attitudes and behavioural practices regarding the influence of socio-cultural practices towards substance abuse amongst the youth. There are problems associated with substance abuse amongst the youth, and these are: parental influence, family structure, peer pressure, role modeling, advertising and promotion, poor socio-economic factors,

accessibility, availability, lack of knowledge, negative attitudes and beliefs (Bobo & Husten, 2000:226). The serious risk direct and indirect socio-cultural consequences of adolescent substance abuse include traffic accidents, school related problems, risky sexual practices, delinquent behaviour, juvenile crime, developmental problems, physical and mental consequences, infections, violence, future use disorders, drug trafficking and legislation (Jiloha, 2009:170). Substance abuse amongst the youth is associated with socio-cultural risk factors such as family and peer influence, demographics, advertising, economics as well as substances availability (Bobo & Husten, 2000:226). The second objective was:

- To develop a school based intervention programme on substance abuse for the youth-in-school

This objective was achieved in theme 4 of the study. It is important to have a programme that teaches about the impact of socio-cultural practices towards substance abuse and how these practices affect young people in rural areas. The results reveal that 72% (N=91) of the participants support the implementation of the programme through analysis of the situation, planning the target group on the implementation strategy, implementing the programme and evaluation. The process of community education model involves situation analysis; identifying and analysing the impediments; formulating a plan of action; and implementing and evaluating it (Weyers, 2011:96). The other mode of applying the school-based programme should be through following the work of Ross and Deverell (2010:373): making contact, orientation to the community and compiling a community profile; identifying needs and prioritising; identifying resources; establishing a structure of intervention such as a committee; developing a plan of action; implementing the action plan; evaluating; and withdrawing community workers.

## 8.4 Findings of the Study

A summary of major findings of the study was presented as follows:

### 8.4.1 Types and nature of substances used by the youth in rural high schools of Malamulele

The types of substances commonly used in rural areas are:

- Dagga or *"Mbangi"*
- Tobacco
- Glue
- Commercial or western beers
- Snuff
- Cocaine
- *"Nyaope"*
- *"Mporosi"*
- *"Chibuku"*
- *"Vucema"*
- *"Mbangi"*
- *"Chayoni"*
- *"Xikwembu ndzi teki"*
- *"Vukanyi"*
- *"Mubvanya"*
- *"Xikavanga"*
- *"Xiwa hi mombo"*
- *"Mikhubi"*
- *"Xipana gariki"*
- *"Punch"*
- *"Xikavatlani"*
- *"Nkuzi malanga"*

The substances mentioned above are used and abused in socio-cultural events in rural areas. The more intriguing in Malamulele are concoctions of home-made alcohols in addition to industry manufactured alcohol. The types of substances abused in these areas are cannabis, cigarettes, inhalants, commercial brewed beers and home-brewed beers such as *"mporosi"*, *"chibuku"*, *"ndzi ta ku nyisa"* and *"xikwembu ndzi teki"* (Van Wyk *et al.*, 2007:341). The abuse of *"dagga"* or *"cannabis"* in South Africa is generally a common problem amongst the youth-in-school (Hamdulay & Mash, 2011:83). Learners in school uniform look for *"marijuana"* or *"dagga,"* which leads to unruly behaviour and poor performance, and teachers have raised complaints about this (Lebese *et al.*, 2014:330). The substances abused by the youth-in-school include dagga (Lebese *et al.*, 2014:333).

*"Xikwembu ndzi teki"* literally meaning 'God takes me', and is a mixture of sorghum malt, water, sugar, yeast, water from boiled roots of jinja shrub, battery acid, ice cream, king-korn and brake fluids (Makhubele, 2012:23). *"Xiwa hi mombo"* is made of sugar, sorghum and yeast. It gets processed for one day and the following day it is ready for consumption. *"Xikavanga"* is made of bread, pineapple, yeast and boiled water. *"Xikavatlani"* is a beer made of water melon and boiled water and is ready after three days. *"Xipana gariki"* is made of brown bread, yeast and pineapple, and is taken after a day when processed. Learners linger around rural areas to look for this type of home-made beer during school breaks.

Learners come back to school having taken alcohol and drugs and violate school rules, and fight with teachers and other learners. Young people taking this type of home-made beer are violent, commit house breaking and steal at home.*" "Vucema"* is like *"Chibuku".* Makhubele (2012:23) contends that in ancient times, basically, people would use sorghum malt, ice cream, milk, sugar and yeast. Chibuku is locally known as *"ximbukumbafi"* or "shake-shake" and *"Mporosi".* It takes seven days to prepare this home-made alcohol as it is cooked and recooked until the brewer is satisfied that it is ready for consumption, and was historically used during social and religious occasions by the elders (Makhubele, 2012:23). Nowadays, young people in rural areas drink

*"chibuku"* or *"mporosi",* which no longer takes long for it to be ready for consumption due to yeast being included to quicken the process.

Another substance used when there are traditional parties is known as *"punch" or "pine"* and is a mixture of a number of various western beers, juice and fruits. When there are traditional parties, the family concerned prepares punch or pine a day before the party with ice in a drum used after a meal, knowing that a person gets drunk prior to being given beers. The two words used interchangeably are shortened as punch; it is special punch juice, hence pine is from pineapple. The purpose of preparing punch is to save money on buying a lot of beers because people drink freely during the party. The traditional beers and new concoctions are not tested (experimented) and approved by any regulatory body to check if they are good for health of the people, which puts young people's lives at risk. Young people take meals with punch before taking liquor, knowing exactly it is not juice per se but a mixture of several beers that serve as to preface the taking of liquor.

## 8.4.2 Home-brew points

There are plenty of traditional beer brew points in rural areas. Due to poverty and adverse living conditions, most people sell traditional and commercial beers without licences to sustain their families. In such points, there are no age restrictions. Young people move from one brew point to the other until sunset. Traditional beers and unorthodox concoctions are cheap and affordable. Easy availability and accessibility of these drugs fuels and promotes the use and abuse of substances abuse. The youth opt to use traditional beers and new concoctions because they are cheap, accessible and affordable. The findings reveal that the biggest percentage of 49% (N=62) of the participants in this frequency strongly agreed that traditional beers are used freely by the youth because they are cheap and affordable. The results show that the biggest percentage of 53% (N=67) of the participants in this frequency strongly agreed that the availability and accessibility of unorthodox home-brewed beer contributes towards substance abuse in rural areas. The high rates of alcohol use and abuse is observed in low socio-economic settings because of their easy availability and low prices (Jiloha,

2009:169). Chiroro, *et al.*, (2012:11) point out that substance abuse is mainly a home-based problem including parents who are substance abusers, which is further boosted by social and cultural attitudes of looking at the use of substances as a norm.

## 8.4.3 The prevalence and occurrences of socio-cultural events in rural areas

The occurrences of socio-cultural events are rife, which also fuels the continuous use and abuse of alcohol and drugs by the youth. Young people get liquor for free in socio-cultural events, which promote the use and abuse of substances amongst the youth, as they observe and learn to abuse these substances because it happens in public. They indulge in these substances due to peer pressure, family and cultural influence. They are held alternatively every weekend and are known as *"xiseveseve", "vukhomba", "van'waswimanimani", "nhluvulo", "xigubu", "xibelani" and "makhwaya".* The participants contended that the continuous use and abuse of alcohol and drugs is promoted by traditional and socio-cultural events.

Therefore, the researcher argues that there is a connection between traditional or socio-cultural events and the use and abuse of alcohol and drugs in rural areas. There are too many socio-cultural events where young people indulge in substances as entertainment. In each fourth family, there are parties where the youth are abusing substances during these times of the year. During the course of the year, events are held once a month as people have money during the festive season. Free traditional and commercial beers have become an agent of socialisation. Young people learn, observe and experiment with substances. There is no age restriction, since every school learners also access substances. There is no regulatory framework. Socio-cultural events taking place alternatively are *"van'waswimanimani, vukhomba, minhluvulo, mincino ya swigubu, xibelani* and *makhwaya"*. These events promote the use and abuse of substances amongst the youth. Young women born in one extended family meet in these events to conduct *stokvel* and to drinking liquor.

## 8.4.4 The impact of socio-cultural practices towards substance abuse amongst the youth in rural areas

Socio-cultural practices have direct negative impact towards substance abuse amongst the youth because traditional practices allow free liquor without age restrictions. Young people observe and learn to indulge in substances by experimenting with friends as a way of socialising. The findings reveal that approximately 52% (N=91) of socio-cultural practices have a direct impact towards the abuse of substances amongst the youth in the rural areas of Malamulele. There is a relative connection between socio-cultural practices and substance use and abuse in rural areas. Socio-cultural practices have negative impact on young people. They abuse substances and become uncontrollable, violent and commit crime. They end up being violent to their teachers and their fellow learners in schools. Socio-cultural practices encourage young people to use substances without restrictions, and they end up being abusers of substances. They take home-made beers with tobacco and dagga for a long time and get addicted and end up dying due to the nature of ingredients used to process the beers. Socio-cultural practices encourage young people to use substances as they are allowed customarily, but destroy their future. Young people are at risk regarding their health due to practices in favour of culture.

Socio-cultural practices that encourage the youth to use and abuse substances have not received extensive study (Bobo & Husten, 2000:231). This study looked at socio-cultural practices towards substances amongst the youth in rural areas. These factors play a role in the escalation of alcohol use and abuse amongst the youth. They influence the initiation and continued use of substances amongst the youth in schools (Bobo & Husten, 2000:225). Young people abuse substances (Njoroge, 2015:67). The binge drinks and depends on traditional beers and new unorthodox concoctions due to morally promoting socio-cultural practices. Socio-cultural practices influence the use of substances by the youth as they access them freely in events. The researcher is of the view that the level at which socio-cultural practices fuel alcohol use and abuse amongst the youth is high. Substance use and abuse behaviour is seen as an outcome of social pressure, individual personality and cultural contexts (Gill, 2000:05). It is seen as a

152

custom in rural areas to prepare free traditional beers as a socio-cultural practice in traditional events. When there are traditional parties, western and traditional beers are accessible for free to everybody, including school learners as prepared by the family. Hence, socio-cultural practices have an impact towards substance abuse, and the strength of the connection between substance use behaviours varies with the levels of abuse (Bobo & Husten, 2000:225).

For instance, as part of the study on the impact of socio-cultural practices towards substance abuse, the participants supported the fact that parental influence, role modeling, advertising and promotion, poor socio-economic factors, school related problems, risky sexual practices, violence and criminal offences contribute to the abuse of substances amongst the youth. Socio-cultural practices and events play as a huge contributory roe in the abuse of substances amongst the youth. Jiloha (2009:169) asserts that socio-cultural practices associated with substance abuse in the youth are parental influence, family structure, peer pressure, role model, advertising and promotion, socio-economic factors, availability as well as knowledge, attitude and beliefs. These practices play a huge role in the abuse of substances amongst the youth in rural areas. Lebese *et al.*, (2014:334) assert that one of the contributing factors towards substance abuse is peer pressure as well as experimentation amongst school learners as they influence each other and want to taste substances in order to feel high. Erik Erickson's (1963) stages of the theory of psychosocial development, namely identity versus role diffusion (12-17 years) is pertinent to this age group as it predicts experimentation of substances.

## 8.4.5 Views about the development of a socio-culturally school-based intervention programme on substance abuse for the youth-in-school

The findings reveal that in South Africa, the *"Ke Moja"* and Puppets programmes are the programmes of substance abuse failing to address the impact of socio-cultural practices towards substance abuse in rural areas. The results shows that the programme should be name *"Hambanani"* as a subsequent number of 96% (N=121) of the participants supported the name. The study also reveals that social workers in the Department of

Social Development should spearhead and coordinate the programme on the impact of socio-cultural practices on substance abuse. The resources needed for this programme is a budget that includes transportation, stationery, and posters. The study reveals that the length of implementing the programme is six days for one hour and 30 minutes each day through analysing the situation; to identifying and analysing impediments; formulating a plan of action; implementing the plan of action and evaluating. The community education model is followed through doing the situation analysis; identify and analyse impediments; formulate a plan of action; and implement the plan of action and evaluate (Weyers, 2011:96). The programme on socio-cultural practices towards abusing substances is culturally sensitive and competent kind of intervention.

## 8.5 Conclusions

The study concludes that socio-cultural practices have direct impact towards substance abuse amongst the youth in rural areas. Socio-cultural events, functions or ceremonies promote the use of substances amongst the youth as there are free substances attached to such events. The youth in schools indulge in substances as they observe and experiment with socio-cultural events from the adults. The youth easily access home-brewed liquor due to being cheap, affordable, and accessible and having so many traditional home brew points. The types of substances commonly used are dagga, tobacco, commercial beers, snuff, cocaine, and nyaope. Again, there are traditional beers and new concoctions used by the youth such as *"mporosi, chibuku, vucema, chayoni, xikwembu ndzi teki, vukanyi, mubvanya, xikavanga, xiwa hi mombo, mikhubi, xikavatlani, punch and nkuzi Malanga".* Socio-cultural factors play a role in the escalation of substance abuse amongst the youth. Advertising and promotion, poor socio-economic factors, violence and criminal offences, school related problems, and risky sexual practices are the most contributory factors toward substance abuse amongst the youth in rural areas.

The occurrences of socio-cultural events in rural areas are rife which also fuels towards the abuse of substances as the youth in these events get liquor for free. A Socio-cultural practice has a direct impact towards the abuse of substances as the youth observe and

learn to abuse substance because it happens in public. Young people indulge in substances due to peer pressure, family and cultural influence in socio-cultural events that also lead to continuous use of substances amongst the youth. Socio-cultural events are held alternatively every weekend in rural areas, and are called *"xiseveseve", "vukhomba", "van'waswimanimani", "nhluvulo", "xigubu", "xibelani" and "makhwaya".* Socio-cultural practices have direct negative impact towards substance abuse amongst the youth because traditional practices allow free liquor without age restrictions. Young people observe and learn to indulge in the use of substances by experimenting with friends as a way to socialise. The youth end up committing crime under the influence of substances which impact negatively on their future when arrested due to criminal records.

The process of community education model should be followed to implement the school-based programme through doing the situation analysis; identify and analyse impediments; formulate a plan of action; and implement the plan of action and evaluate (Weyers, 2011:96). The other mode of applying the school-based programme should be through following the work of Ross and Deverell (2010:373) through Making contact, orientation to the community and compiling a community profile; identifying needs and prioritising; identifying resources; establishing a structure of intervention, such as a committee; developing a plan of action; implementing and evaluating the action plan; and withdrawing community workers.

## 8.6 Limitations of the Study

The study was confined to selected schools in Malamulele. Therefore, the findings cannot be generalised to a larger population or other areas. The researcher was aware and mindful of limited literature in South Africa that specifically addresses issues relating to socio-cultural factors and events towards substance abuse. As a result, cross-referencing was not simple. There was a lack of trust by the participants towards the researcher, where he had to establish rapport with them before data could be gathered. Once trust and rapport were achieved, the data collection process went ahead as planned with minimal disruption and interference.

## 8.7 Recommendations

The study recommends the following:

- The researcher recommends that the school-based intervention programme on the impact of socio-cultural practices towards substance abuse amongst the youth in rural areas be implemented to address contextual issues that the youth are grappling with.
- Social workers should be cultural sensitive and cultural competent in implementing the programme.
- The Department of Social Development should use the programme to render substance abuse awareness services in rural areas.
- The Department of Social Development should spearhead the development of policy that looks at the impact and influence of socio-cultural practices towards substance abuse.
- Socio-cultural events should be monitored by the South African Police Services.
- Traditional leaders should be involved to address the impact of socio-cultural practices towards substance abuse amongst the youth in rural areas.
- Permission to conduct a socio-cultural event should be licenced and be applied for.
- The Department of Education should develop a curriculum for high school learners that include the impact of socio-cultural practices towards substance abuse amongst the youth in rural areas.
- In implementing this programme the process of community education model should be followed to implement the school-based programme by doing a situation analysis; identifying and analysing the impediments; formulating a plan of action; and implementing and evaluating the plan of action. It also includes the process of making contact, orientation to the community and compiling a community profile; identifying needs and prioritising; identifying resources; establishing a structure of intervention such as a committee; developing a plan of action; implementing and evaluating the action plan; and withdrawing community workers.

- Communities should serve as important stakeholders to address the impact of socio-cultural practices towards substance abuse amongst the youth in rural areas.
- Families brewing traditional beers should obtain a licence and brews should be tested and regulated in terms of their fitness for consumption.
- Social workers should be culturally competent to render services to the client system of the impact of socio-cultural practices towards substance abuse.

# CHAPTER NINE

# DEVELOPMENT OF SCHOOL-BASED INTERVENTION PROGRAMME

## 9.1 Introduction

There is no existing programme developed on the impact of socio-cultural practices towards substance abuse amongst the youth in schools in rural areas. Programme development is defined as a dynamic procedure containing a sequenced and coordinated set of steps that harness and direct resources as well as forces towards a desired and testable goal accomplishment (Conyne, 2010:6). Programme development constructs an intervention to address the public health problems (Fraser & Glalinsky, 2010:460). The programme developed by this study for the impacts of socio-cultural practices towards substance abuse has set of steps such as to do situation analysis, identify and analyse impediments, formulate a plan of action, and implement and evaluate. Conyne (2013:29) notes that programme development has a hierarchy or cycle of planning, implementing and assessing the effects. Rothman and Thomas' (1994:36) expound that programme development model includes problem analysis and project planning, information gathering and synthesis, design, early development and pilot testing, evaluation and advanced development as well as dissemination. There is a plethora of steps or modalities of programme development but the researcher considered using Weyers' steps of community education model to unfold this programme on the impacts of socio-cultural practices towards substance abuse amongst the youth in the rural areas. Weyers (2011:96) presents the process of community education model as to do situation analysis, identify and analyse impediments, formulate a plan of action, and implement and evaluate it.

The development of the programme in social work is meant for the purpose of conceiving, creating and testing innovative human services modality to preventing and ameliorating problems or to maintain the quality of life (De Vos *et al.,* 2005:394). The

study sought to develop modality in a form of a programme to prevent and ameliorate the impacts of socio-cultural practices towards substance abuse amongst the youth in the rural areas. Schilling (1997:174) notes that social work programmes developed incorporate strategies to strengthen social relationships between a person and the social environment. Conyne (2013:21) stipulated that programme development is aligned with the context looking at the situation and surrounding influencing people which includes variables such as culture, social interactions, values, history, and geographical area. The programme developed by this study present ways in which social workers respond to the problems interfacing the youth and their social environment by looking at the socio-cultural practices contributing on substance abuse. The programme allows social workers to make use of the eco-systems and cultural identity theory to address the impacts of socio-cultural practices towards substance abuse amongst the youth in rural areas.

## 9.2 Rothman and Thomas' Design and Development Model

Fraser and Galinsky (2010:462) emphasizes this model of programme development is based on the use of program theory to design treatment manuals and successive refinement of intervention content in a sequence. Fraser (2004:210) argues that intervention research is requisite for a profession as proffessions are committed to change. The design and development of the programme is an action undertaken by social workers to assist clients affected by social problems to enhance and sustain the social functioning and well-being of the people, be it individuals, families, groups, communities or organizations (Schilling, 1997:174). The Intervention Research Design and Development for Human Services by Rothman and Thomas' (1994:36) described a six-phase engineering perspective or model for the development of social and health services interventions. The model has six phases such as:

    (a) Problem analysis and project planning,
    (b) Information gathering and synthesis,
    (c) Design of intervention,
    (d) Early development and pilot testing,

(e) Evaluation and advanced development, and

(f) Dissemination.

Fraser (2004:211) presented a perspective on programme development complimenting Rothman and Thomas with the following phases:

(a) Explanatory research,

(b) Conceptualization,

(c) Program design,

(d) Efficacy testing,

(e) Effectiveness testing, and

(f) Dissemination.


## 9.3 Conyne Steps for Applying Programme Development in Prevention

Conyne (2013:28) argues that programme development process needs to incorporate three central conditions. The programme is planned, developed and evaluated (Conyne, 2013:5). In other words, it consists of planning, implementation and evaluation of intervention effects, which should be community-based, collaborative as well as culturally relevant (Conyne, 2013:5). At first, the programme needs appropriate blending of evidence-based findings with local conditions. Secondly, the programme should be guided by sequenced set of steps that leads from understanding what is missing and needed through development and implementation of the prevention product. Lastly, the programme needs to evaluate the process as it is being conducted and its preventive effects. This study outlines a programme on the impacts of socio-cultural practices towards substance abuse amongst the youth in rural areas which is conditionally and contextually local. The study also unpacks the chosen steps of community education model to apply the programme in real situations aimed at addressing the impacts of socio-cultural practices towards substance abuse. The chosen model of community education model of the study also provides the practitioners implementing the programme with latitude to evaluate the process of addressing the impacts of socio-cultural practices towards substance abuse.

Developing a programme in preventing social and public health problems has to be adequate, appropriate, effective, efficient, outcomes-based, contextual, and sustainable (Conyne, 2013:21). This study on developing a school-based intervention programme for the impacts of socio-cultural practices towards substance abuse in rural areas is adequate, appropriate, effective, efficient, outcomes-based, contextual, and sustainable. Conyne (2013:29) notes that programme development is applied through cyclical steps of planning, implementing and assessing the effects whereby each have sub-steps. Conyne (2013:29) outlines that the first step on planning the programme laid the following grounds as sub-steps:

- Laying the groundwork for community, collaboration, and cultural relevance;
- Analysing local context and conducting professional literature review;
- Creating problem statement;
- Developing preventive goals, objectives, strategies and evaluation;
- To obtain the inputs and resources for the programme.


Conyne (2013:29) contends that the second step of implementing the programme with process evaluation essentially have the following sub-steps:

- Implementing the programme plan with participants or clients through strategies comprising sequenced and coordinated activities, tasks, responsibilities, resources, and timelines;
- Examining the process evaluation data to generate feedback.


Conyne (2013:29) again is of the view that the third step on effects to evaluate outputs has the following sub-steps:

- Examining outcome evaluation data to determine outcomes;
- Identifying impacts, and incidence reduction;
- Determine the results.

The above presented programme development models shares commonalities with the community education model by Weyers (2011:96) discussed as follows:

## 9.4 The Use of Community Education Model as Stages or Steps for the Programme

This is a community work model in social work used by social workers to provide education to service users. Community education underpins initiating the informative awareness prevention programme to disseminate knowledge, change attitude and behaviour on the impact of socio-cultural practices towards substance abuse amongst the youth (Weyers, 2011:96). The model's goal is to eliminate ignorance, change attitudes and behaviour, and impart knowledge and skills required to control people's lives and to contribute effectively to the environment in which they live (Weyers, 2011:96). Ross and Deverell (2010:373) contend that the model's aims are to develop people's knowledge and insight, to make community members aware of ways of solving problems, motivate participation and cooperation, skills development, and to instil people with needed attitudes. The process of community education model is to do situation analysis; identify and analyse impediments; formulate a plan of action; and implement and evaluate it (Weyers, 2011:96). The stages of the community education model were discussed below as follows:

### 9.4.1 Do situation analysis

Weyers (2011:97) contends that in this phase, the main component is to undertake a broad-based situation analysis of both the circumstances of the target community and the environment in which it functions. The analysis phase is to conduct a needs assessment (De Vos *et al.*, 2011:432). There are objectives in this phase such as providing a planning strategy in order to understand factors that drive the need for an intervention, desires and resources to achieve, simplifying a diagram of programmes, initiative or interventions to respond to a given situation (Rankin, Weyers & Williams, 2008:339).

The use of the following steps are executed during this phase: identifying and involving the participants, gaining entry and cooperation from settings, identifying concerns of the

population, analysing the identified problems, and setting goals and objectives (De Vos *et al.*, 2011:435).

## 9.4.2 Identify and analyse impediments

Purposefully identifying, researching and gaining understanding of the specific nature and context of the existing impediments of the community are important elements (Weyers, 2011:98). Assess the nature of the impediment and determine by defining and analysing if it falls within environmental and social domains (Weyers, 2011:98). Identify the probable cause and impact on people and analyse if it affects the community as a whole or not (Weyers, 2011:98).

## 9.4.3 Formulate a plan of action

This phase enables practitioners to establish an intervention structure such as a committee from the community to plan (Ross & Deverell, 2010:379). Education in communities is offered through formal, non-formal or training format (Weyers, 2011:100). The educational opportunities and techniques might be peer education programmes, group work, life skills projects, workshops, community outreaches and meetings (Weyers, 2011:100). Social workers can be the action system to enable the programme by doing a feasibility study, assembling a planning team to formulate the plan of action, designing the programme, recruiting members of the communities, starting the programme, continually evaluating the programme, and expanding the endeavours (Weyers, 2011:101).

## 9.4.4 Implement the plan of action

If the programme is successful, it would increase community members' knowledge and skills, develop their insight as well as change their attitudes and behaviour, due to being empowered to function effectively to contribute to the community (Weyers, 2011:102).

### 9.4.5 Evaluate the programme

This phase involves evaluation of the objectives, design and plan of action, implementation undertaken, literature gathered, and stakeholders participated in the programme. The evaluation that takes place at this phase identifies weaknesses and mistakes made for further improvements, and establishes the success of the learning process of the programme (Ross & Deverell, 2010:380). It evaluates the effectiveness of the objectives of the programme (Swanepoel, 1997:178). Acquiring feedback by completing questionnaires or conducting interviews with the participants after each implementation for further improvement is a requisite (Rankin *et al.*, 2008:344).

## 9.4 School-Based Intervention Programme

In this case, the major role of social workers is to serve as educators to educate young people on the impact socio-cultural practices amongst themselves. Having considering different models or perspectives of programme development, the researcher developed a nine-phased school-Based Intervention Programme presented as follows:

## 9.5.1 Development of a School-Based Intervention Model

1. Study the indicators/pointers to the problem

2. Problem-School-community linkages and Identification

3. Engagement of school leadership and other key stakeholders on identified problem

4. Understanding the magnitude and impact of the problem

5. Setting goals & prioritizing solutions

6. Developing an implementation/action Plan

7. Implementing the plan

8. Reflection and analysis of implemented plan by representatives of stakeholders

9. Overall evaluation and re-planning the activities

Figure 7: Development of a School-Based Intervention Model

## 9.5.2 Phase 1: study the indicators/pointers to the problem

The social workers in this phase identify and explore past and present problems/needs of the community. The social workers gather information on local existing alcohol & drugs, socio-cultural events and practices. The social workers search and probe how socio-cultural events and practices promote substance use and abuse. This also includes assessing the local existing substances abused in the locality by interviewing learners. The stage incorporates having a dialogue or interviews with learners to assess the nature of socio-cultural events and practices existing in their respective rural

communities. This involves assessing how the socio-cultural events and practices influence the abuse of substances in the rural areas. The assessment in this stage should also include looking at the skills and strengths the community has. For instance, identifying and analysing impediments include the impact of socio-cultural practices towards substance abuse to the human security and public health. Social workers should ask the following questions: what is the nature and extent of educational and training services that community members have received in the past about the impact of socio-cultural practices towards substance abuse? To what extent did these services address the impact of socio-cultural practices towards substance abuse in rural areas? What is currently being done about the impact of these socio-cultural practices towards substance abuse? Taking the previous initiatives into consideration: is there a market for a new or improved community education service?

## 9.5.3 Phase 2: Problem-School-Community linkages and Identification

In this stage, the social workers get entry to the community by linking with the traditional authority. After gaining entry, the social workers identify and involve the school in the community. Social workers arrange a meeting comprising of the traditional authority, school management and social workers to discuss gathered information on local existing alcohol & drugs, as well as socio-cultural events and practices.

## 9.5.4 Phase 3: Engagement of school leadership and other key stakeholders on identified problem

Social workers engage the school to identify substance abuse concerns within the school through dialogue or assessment with the learners, SGB, teachers and school principals. The social workers in this stage also make an analysis of the nature and the impacts of substances abuse by school learners. The social workers engage with principal and SGB to set the goal and objectives to address the concerns of substance abuse. This phase includes inviting relevant stakeholders such as police officers, traffic officers, nurses, social workers from the Child and youth Care Centres, Department of

Social Development and Department of Correctional Services on concerns in the school.

## 9.5.5 Phase 4: Understanding the magnitude and impact of the problem

The social workers in this stage should analyze the identified concerns from all the stakeholders. Analyses of the identified concerns enable the social workers and all the stakeholders to look at the extent of the nature of substances used and abused by young people in the rural areas. This stage includes analysis of the impacts of socio-cultural practices towards substance abuse amongst the youth in rural areas. Social workers and other stakeholders analyse how socio-cultural practices towards substance abuse impact negatively on the human security and public health.

## 9.5.6 Phase 5: Setting goals and prioritizing solutions

In this stage, goal & objectives of the school-based intervention programme should be outlined. All the stakeholders in this stage brainstorm on the alternative possible solutions of the school-based intervention programme. The stakeholders should select the best options by prioritizing the possible solutions.

## 9.5.7 Phase 6: Developing an implementation/action plan

The social workers should allow learners to identify and elect the committee of learners to plan with. The plan should also be integrated with the goal and objectives raised by the educators and SGB in phase one. This stage comprises of inviting relevant stakeholders such as police officers, traffic officers, traditional authority, nurses and social workers to give inputs in the plan of action for the programme to be holistic and integral. The seminar as a discourse should be held design and outline a plan of action based on concerns and information identified for the school concerned. This stage covers identifying ethics or rules of etiquete of the programme.

## 9.5.8 Phase 7: Implementation the plan

This stage encompasses developing a preliminary intervention incorporating issues of the discourse covered from the plan of action. The stage includes implementing the plan of action on the impacts of socio-cultural practices towards substance use and abuse amongst the youth. This stage embraces reflection of the implemented plan of action by the representative of learners as well as stakeholders. In this stage, social workers should work with other stakeholders such as nurses, police officers, prosecutors, traffic officers and psychiatrists or psychologists to disseminate information on substance abuse in their field of expertise. The school-based programme on the impact of socio-cultural practices towards substance abuse amongst the youth was recommended to be as follows in terms of implementation:

- types of substances abused in rural areas
- socio-cultural practices towards substance abuse
- types of socio-cultural events occurring in rural areas
- social life skills
- Parental influence
- Role modeling
- Advertising and promotion
- Poor socio-economic factors
- Violence and criminal offences
- School related problems
- Risky sexual practices

## 9.5.9 Phase 8: Reflection and analysis of implemented plan by representative of stakeholders

This stage embraces reflection of the implemented plan of action by the representative of learners as well as stakeholders. This stage includes establishing recommendations for improving the programme activities. This phase incorporates developing a preliminary reflection and analysis of intervention for further improving the strategy of the programme. This stage incorporates feelings and thoughts of the all the

stakeholders on the implemented activities. The stage permit the all the participants to criticize the programme implemented activities throughout.

## 9.5.10 Phase 9: Overall evaluation and re-planning the activities

The stage includes implementing the plan of action on the impacts of socio-cultural practices towards substance use and abuse amongst the youth. This stage contains to assess the effectiveness, and efficiency of the programme by the social workers (Kirst-Ashman, 2017:345). The social workers should evaluate how ethics of the programme were realized. The social workers should allow the all the stakeholders participated to establish recommendations to improve the programme (Kirst-Ashman, 2017:345). In this stage, evaluation includes evaluating the goal and objectives of the programme. Evaluation contains evaluating the design, plan of action, and implementing of the programme. The social workers should also evaluate information gathered and the participation of the stakeholders.

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# Appendices

## Appendix A: Consent Form

**The Impact of socio-cultural practices on substance abuse amongst the rural youth: Towards the Development of a school-based intervention programme**

Dear participant

My name is Mabasa Matimba Allan. I am a PhD student in Social Work at the University of Limpopo. The research study on the **impact of socio-cultural practices towards substance abuse**: development of a school-based intervention programme amongst the youth in rural areas is part of my PhD degree programme. As part of this study, I am expected to collect data from selected participants, including you. During the data collection, the researcher would make use of an interview schedule or questionnaires.

You are kindly invited to be a participant in this study. The session would take approximately one and half hours. You are kindly requested to read and sign the informed consent provided to you. The participation in this study was voluntary and anonymous.

Thanking you in anticipation.

Mr. Mabasa Matimba Allan
PhD Social Work Candidate
University of Limpopo, Turfloop Campus
Contact number: 076 7885 677

Signature:_____

Date:_____

# Appendix B: Declaration of consent

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

Mr. Mabasa Matimba Allan, a Social Worker from the University of Limpopo (Turfloop Campus) is conducting research. The research is a full requirement for Mr. Mabasa Matimba Allan's PhD degree in Social Work. Information will be collected by means of interview schedules or questionnaires.

My rights as the participant:

- I cannot be forced to participate in this study;
- I have the right to withdraw from the study at any given time;
- I have the right to decline to answer any question (s) I am not comfortable with;
- I will remain anonymous and my name and identity would be kept from public knowledge;
- Any information I reveal during the process of this study should remain confidential, should only be used for the purposes of this research and for publication in Mr. Mabasa Matimba Allan's thesis, and relevant or appropriate publications;
- I grant permission for any information I reveal during the interview process, with the understanding that data collected will remain in possession of the interviewer, Mr. Mabasa Matimba Allan and his supervisor; and
- The identification particulars such as surnames and names will be kept securely safe in Mr. Mabasa Matimba Allan's office and thereafter the list will be destroyed.

Signature Participant: _____Date: _____

# Appendix C: Declaration of Consent Form by Parent(s) on behalf of the Child

I,………………………………………….. the parent of the participant, out of my own free will, hereby agree that my/the child (ren) voluntarily participate in the study about the impact/influences of socio-cultural practices towards substances abuse: development of a school-based intervention programme amongst the youth in rural areas with the following understanding:

**Nature of the research**

The Social Work Researcher, Mr. Mabasa Matimba Allan from the University of Limpopo, Turfloop Campus is conducting a research. The research forms part of the requirements for Mr. Mabasa Matimba Allan's PhD degree programme. The information will be collected by means of questionnaires in groups.

**Rights of my child as a participant**

The child (ren) will not be forced to participate in this study. The child (ren) will have the right to withdraw from the study at any given time, have the right to decline to answer any question(s) if not comfortable with it. The child (ren) will remain anonymous as name (s) and identity will be kept from public knowledge, and any information revealed during the process of this study will remain confidential, as it will be used for the purposes of this research and for the publication in Mr. Mabasa Matimba Allan's thesis or appropriate publications. I grant permission for any information the child (ren) will reveal during the interview process, with the understanding that the data collected will remain in possession of the interviewer, Mr. Matimba Allan Mabasa and his Supervisor. The identification particulars such as surnames and names will be kept secure in lockable safe in Mr. Mabasa Matimba Allan's office and thereafter the list will be destroyed.

Signature:…………………………..          Date:………………………………

# Appendix D: The consent form by parent(s) or legal guardian

Dear participant

My name is Mabasa Matimba Allan. I am a PhD Student in Social Work at the University of Limpopo. The research study on the **impact of socio-cultural practices towards substance abuse**: development of a school-based intervention programme amongst the youth in rural areas is part of my PhD degree programme. As part of this study, your child is identified to participate either through interviews or completing a questionnaire. You are kindly requested to give permission or consent for your child to voluntarily participate. The session will take approximately one and half hours. You are kindly requested to read and sign the informed consent provided to you. The participation in this study was voluntary and anonymous.

You have the right to refuse for your child to participate in the study or to withdraw at any time without reprisal. Your child will give consent to participate in this study without coercion, undue influence, and inappropriate incentives. In case you are not able to read as a parent, a verbal consent should be obtained in the presence of a literate witness who should verify in writing, and duly sign that the informed consent was obtained (finger print).

Thanking you in anticipation.

Mr. Mabasa Matimba Allan
PhD Social Work Candidate
University of Limpopo, Turfloop Campus
Contact number: 076 7885 677

Signature:_____

Date:_____

# Appendix E: Child Assent

Dear child/minor

My name is Mabasa Matimba Allan. I am a PhD Student in Social Work at the University of Limpopo**. The research study on the impact of socio-cultural practices towards substance abuse: development of a school-based intervention programme amongst the youth in rural areas** is part of my PhD degree programme. As part of this study, I am expected to collect data from selected participants, including you. During the data collection, the researcher will make use of interview schedule or questionnaires. Your best interest as a child is paramount in decisions that affect you to make a choice and to agree to participate in writing if you choose to participate in this study. As a child, proper written permission should have been obtained from parents or legal guardians for you to be approached and invited to participate.  This consent is obtained from you after your parents have given and signed permission for you to participate.

The researcher is investigating a problem that is relevant to you as an initiative to prevent the abuse of substances by young people in order to develop a school-based intervention programme. The study poses no risks of harm as the researcher will not reveal your information as a participant to avoid embarrassment and psychological harm. The researcher will not harm you emotionally and physically. The researcher will be sensitive to you as a participant, and will make referrals to other social workers and psychologists in cases where you are harmed emotionally and psychologically. This includes your acceptance and permission from your parent(s). You are protected from abuse and neglect. In case where a case of abuse is identified, the matter will be reported to the area social worker or nearby police station. The collection of data will take place at your school through interviews or a questionnaire.

You are kindly invited to take part in the study. The session will take approximately one and half hours. You are kindly requested to read and sign the child consent form provided to you. Your participation is voluntary and anonymous.

Thanking you in anticipation.

Mr. Mabasa Matimba Allan

PhD Social Work Candidate

University of Limpopo, Turfloop Campus

Contact number: 076 7885 677

Signature:_____

Date:_____

# Appendix F: Interview Schedule

**Learners**

a) What types of substances do the youth use in schools?

b) How do socio-cultural practices that fuel substance abuse affect the youth in schools?

c) How frequently do socio-cultural occasions happen in rural areas?

d) What are the influences of socio-cultural practices towards substance abuse amongst the youth in rural areas?

e) Development of a school-based intervention programme on the impact of socio-cultural practices towards substance abuse amongst the youth should be developed in terms of the following phases:

Phase 1: Analyse the situation

Phase 2: Plan with the target group on the implementation strategy

Phase 3: Implement the programme- Session on types of substances abused in rural areas

     -Session on socio-cultural practices towards substance abuse

     - Session on social life skills

Phase 4: Evaluate the programme

If yes substantiate your answer

**Educators**

a) Which substances are used by the youth in rural settings?

b) In your own understanding, how do socio-cultural practices contribute to substance abuse amongst the youth in rural areas?

c) How often are socio-cultural events held in rural areas?

d) What are your views on the establishment of a school-based intervention programme on the impact of socio-cultural practices towards substance abuse amongst the youth?

**SGB**

a) In your view, what types of substances do the youth use in rural schools?

b) How do socio-cultural practices lead to substance abuse amongst the youth in schools?

c) How likely are the occurrences of socio-cultural events in rural areas?

d) What is the impact of socio-cultural practices towards substance abuse amongst the youth in rural areas?

e) What are your views about the development of a socio-cultural school-based intervention programme on substance abuse for the youth-in-school?

**Social workers**

a) Briefly outline the types of substances that the youth use in rural schools?

b) In your view, explain how do socio-cultural practices influence substance abuse amongst the youth in rural schools?

c) Do you support the idea of establishing a school-based intervention programme on the impact of socio-cultural practices towards substance abuse amongst the youth? If yes, substantiate your answer….

d) The development of a school-based intervention programme on the impact of socio-cultural practices towards substance abuse amongst the youth should be developed in terms of the following phases:

Phase 1: Analyse the situation

Phase 2: Plan with the target group on the implementation strategy

Phase 3: Implement the programme- Session on types of substances abused in rural areas

      -Session on socio-cultural practices towards substance abuse

      - Session on social life skills

Phase 4: Evaluate the programme

If yes, make comments

…………………………………………………………………………………………

    e) What role social workers need to play in implementing the programme?

# Appendix G: Questionnaire

**Learners**

a) The types of substances abused mostly in various socio-cultural events include commercial beers, dagga or marijuana, tobacco, mporosi, chibuku, ndzi ta ku nyisa, xikwembu ndzi teki in rural areas

| Agree | | Strongly agree | | Neutral | | Disagree | | Strongly disagree | |
|---|---|---|---|---|---|---|---|---|---|

b) To what extent do socio-cultural practices fuel substance abuse amongst the youth in rural schools?

| Low | | Moderately low | | Neutral | | Moderately high | | High | |
|---|---|---|---|---|---|---|---|---|---|

c) Having plenty traditional beer brew points and cheap, affordable, readily available and accessible traditional beer and unorthodox home-brewed beer fuels substance abuse in rural areas?

| Agree | | Strongly agree | | Neutral | | Disagree | | Strongly disagree | |
|---|---|---|---|---|---|---|---|---|---|

d) How likely are traditional events in rural areas such as "xiseveseve", "vukhomba", "van'waswimanimani", "xigubu", "xibelani", and "makhwaya" promote substance abuse?

| Low | | Moderately low | | Neutral | | Moderately high | | High | |
|---|---|---|---|---|---|---|---|---|---|

f) Socio-cultural practices have direct impact on substance abuse amongst the youth in rural areas?

| Agree | | Strongly agree | | Neutral | | Disagree | | Strongly disagree | |
|---|---|---|---|---|---|---|---|---|---|

g) Does the following contribute to substance abuse?

| | Agree | Disagree |
|---|---|---|
| Parental influence, | | |

| Role modeling, | | |
|---|---|---|
| Advertising and promotion, | | |
| Poor socio-economic factors, | | |
| Violence and criminal offences, | | |
| School related problems, | | |
| Risky sexual practices. | | |

g) The development of a school-based intervention programme on the impact of socio-cultural practices towards substance abuse amongst the youth should be developed in terms of the following phases:

Phase 1: Analyse the situation

Phase 2: Plan with the target group on the implementation strategy

Phase 3: Implement the programme- Session on types of substances abused in rural areas

       -Session on socio-cultural practices towards substance abuse

       - Session on social life skills

Phase 4: Evaluation

| Agree | | Strongly agree | | Neutral | | Disagree | | Strongly disagree | |
|---|---|---|---|---|---|---|---|---|---|

h) Which one of the two names best suits the programme?

| Hambanani | | Tshikani | |
|---|---|---|---|

# Appendix H: Ethical Clearance



**University of Limpopo**
Department of Research Administration and Development
Private Bag X1106, Sovenga, 0727, South Africa
Tel: (015) 268 2212, Fax: (015) 268 2306, Email:noko.monene@ul.ac.za

| | |
|---|---|
| **TURFLOOP RESEARCH ETHICS** | |
| **COMMITTEE CLEARANCE CERTIFICATE** | |

**MEETING:**          03 November 2016

**PROJECT NUMBER:**          TREC/176/2016: PG

**PROJECT:**

**Title:**          Impacts of socio-cultural practices towards substance abuse amongst the rural youth: Development of a school-based intervention programme

**Researchers:**          Mr MA Mabasa
**Supervisor:**          Prof JC Makhubele
**Co-Supervisor:**          N/A
**School:**          Social Sciences
**Degree:**          PhD in Social Work

PROF TAB MASHEGO
CHAIRPERSON: TURFLOOP RESEARCH ETHICS COMMITTEE

The Turfloop Research Ethics Committee (TREC) is registered with the National Health Research Ethics Council, Registration Number: **REC-0310111-031**

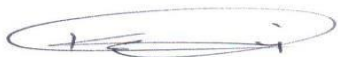| |
|---|
| **Note:** |
| i)   Should any departure be contemplated from the research procedure as approved, the researcher(s) must re-submit the protocol to the committee. |
| ii)   The budget for the research will be considered separately from the protocol. **PLEASE QUOTE THE PROTOCOL NUMBER IN ALL ENQUIRIES.** |

*Finding solutions for Africa*

# Appendix I: Editorial Letter

Enq. Kubayi SJ                                          Po Box 29

Email.  kubayij@yahoo.com                    Khomanani

Cell No. 079 484 8449                              0933

                                                                 23 March 2018


**SUBJECT: EDITING OF PhD THESIS**

This is to certify that the doctoral thesis in Social Work entitled 'Impact of socio-cultural practices on substance abuse amongst the rural youth: Towards the development of a school-based intervention programme by Mabasa Matimba Allan (student number 200521048) was edited by me, and that unless further tampered with, I am content that all grammatical errors have been eliminated.


Regards




Dr SJ Kubayi (DLitt et Phil (UNISA)

Senior Lecturer (Department of Translation Studies and Linguistics – UL)

# Annexure J: Map of South Africa