PERCEPTIONS OF ALCOHOL USE AND ITS BEHAVIOURAL IMPACT UPON HIGH SCHOOL LEARNERS AT MAKGOFE AREA IN THE LIMPOPO PROVINCE

ΒY

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DEDICATION

I dedicate this research to my Lord Jesus Christ, my parents Rosina and Samuel Mohlabeng, who have been with me always giving me wisdom and courage throughout my studies. Thank you for being with me.

DECLARATION

I declare that "*Perceptions of Alcohol Use and its behavioural impact upon high school learners at Makgofe Area in the Limpopo Province*" is my independent work and has not been previously submitted for any degree or examination at another University. All the sources used have been acknowledged and referenced.

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Date

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ABSTRACT

The aim of the study is to investigate the perceptions of alcohol use and its behavioral impact upon learners at Makgofe Area in the Limpopo Province. Quantitative, descriptive research was conducted to determine if there were any differences between the perceptions and the behavioural impact of alcohol use. Data was collected using a semi-structured questionnaire. A total number of 100 participants, divided into two groups, took part in the study. Fifty (50) learners, who drink alcohol, formed the experimental group, while another fifty (50) learners, who do not drink alcohol, formed the control group. Data was analysed using SPSS. The study has highlighted the perceptions held by learners using alcohol perceive its usage positively. It was also found that leaners using alcohol perceive alcohol as having a positive impact on their behaviour. The study concludes by advocating psycho education regarding the use and effects of alcohol at schools around Limpopo Province.

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CHAPTER 1

OVERVIEW OF THE STUDY

1.1 INTRODUCTION

Alcohol abuse among adolescents in all parts of the world continues to be a significant health problem (Roscha-Silva, De Marinda, & Erasmus, 1996). More recently, concern has been expressed regarding the rapid increase of alcohol use and abuse, especially in Third World countries (Gilramy, 2000). Substance use and abuse including alcohol, especially among the youth has been identified as an important challenge that needs to be dealt with, to improve the health and economy of South Africa (Bauman & Phongsavan, 1999).

In South Africa, there is growing concern about alcohol misuse among young people (Gumede, 1995). Reports on the drinking rates of young people in a nation-wide survey are considered to be high, especially among males (Parry & Bennetts, 1998). According to Santrock (1998) adolescents are attracted to drugs because drugs help them to adapt to an ever-changing environment, which includes giving in to peer pressure and feeling of belonging to a social group. Alcohol negatively affects people, especially young people directly and indirectly regardless of age or including gender, culture, education, or socioeconomic status (Williams, Ansell, & Milne, 1997). Furthermore, Lewis (1996) states that adolescents who are chemically dependent experience disruption in relationships with family, teachers, peers, and show deterioration of school and work performance. Therefore, the use of alcohol by learners has a number of negative implications for the health and well-being of individuals. These include major risks for injury and death from interpersonal violence, motor vehicle accidents, engaging in high risk sexual behaviour, increased suicidal ideation and behaviour (Flisher, Ziervogel, & Charlton, 1996; Miller, Lesting, & Smith, 2001).

1.2 BACKGROUND INFORMATION

Alcohol use and abuse is recognized as one of the greatest health and social problems in South Africa (Bauman & Phongsavan, 1999). It has been suggested that in Africa, the combination of traditional cultural practices and the increasingly pervasive 'Westernisation' may be responsible for the increase in drug and alcohol misuse (Morojele, Flisher, & Muller, 2002). These might be because people over use alcohol trying to adopt westernisation style.

The consumption of alcohol beverages in South Africa seems to have a long history. During the pre-colonial times alcohol drinking was mainly the preserve of elders and senior members of the society including traditional healers, and was uncommon among youth and women of childbearing age (Gumede, 1995). Furthermore, alcohol was mainly consumed during different types of festivities and ritual ceremonies, including weddings, ceremonies held for the deceased, coming-of-age ceremonies for both boys and girls, meetings of reconciliation, ceremonies for propitiation of ancestral spirits, and graduation ceremonies of diviners (Gumede, 1995). Traditionally, these were used for relaxation purposes. However, nowadays learners are abusing alcohol that was traditionally consumed by adults for different reasons (Singh, Maharaja, & Shipp, 1991).

1.3 STATEMENT OF PROBLEM

Alcohol abuse is among the most pressing global public health problems, with its genesis in adolescence (Bauman & Phongsavan, 1999). Alcohol has been identified as one of the major problems that negatively affects young people in South Africa including learners (Bauman & Phongsavan, 1999). It does seem that most learners use alcohol. Alcohol is known to have several effects. Studies have revealed that the effects of alcohol use result in psychological, behavioural and social consequences. It has been observed by the researcher that young people in Limpopo Province, especially learners in Makgofe area are being

affected by the use of alcohol at an early age. There seems to be a growing rate of alcohol consumption among high school learners at Makgofe area. This is an area that needs to be researched in order to understand the perceptions held by learners regarding the use of alcohol and the resulting perceived behavioural impact. Therefore, the question that needs to be addressed is how learners perceive alcohol use and its impact on behaviour.

1.4 AIM OF THE STUDY

The aim of this study is to investigate the perceptions held by high school learners towards alcohol use and its impact on behaviour.

1.5 OBJECTIVES OF THE STUDY

- To determine how learners perceive alcohol use.
- To find out how learners perceive the impact of alcohol use on behaviour.

1.6 MOTIVATION OF THE STUDY

The researcher was motivated by her observation of high school learners consuming large amounts of alcohol at an early age. The goal of the study is to understand perceptions held by learners regarding alcohol and to change behaviour.

1.7 THE SIGNIFICANCE OF THE STUDY

The study is significant in that it seeks to find out the perceptions of alcohol use among learners. The study also seeks to improve knowledge and understanding of the perceptions and behavioural impact that result from alcohol use by learners.

1.8 HYPOTHESES

Hypotheses of the study are as follows:

- Learners using alcohol perceive its use in a positive light.
- Learners who use alcohol perceive it as having a positive impact on their behaviour.

1.9 OPERATIONAL DEFINITION

1.9.1 Learners

The word "learner" refers to a person who is gaining knowledge or skills (Oxford dictionary, 2006). A learner is someone who is learning something, beginner or a school pupil. Therefore, a learner can be defined as someone who acquires knowledge and skills through formal learning. In this study the learner refers to a child who is attending school and is between the ages of 12 to 19 years of age.

1.9.2 Alcohol

The word "alcohol" refers to drinks containing ethanol and it has a negative effect on behaviour, thinking and feeling. Alcohol is also referred to as drinks such as beer, wine, that can make people drunk (Oxford dictionary, 2006). Therefore, alcohol can be referred to as a drink that adversely affects makes people's judgment and impairs behaviour.

1.9.3 Behaviour

The word "behaviour" refers to the actions or reactions of an organism, usually in relation to the environment. It also refers to the way a person, an animal, plant, and chemical behaves or functions in a particular situation (Oxford dictionary, 2006). Dusenbery (2009) defines behaviour as the actions and mannerisms made by organisms, systems, or artificial entities in conjunction with its environment, which includes the other systems or organisms around as well as the physical environment. Therefore, the word "behaviour" means the way a person reacts in a particular situation or environment.

1.9.4 Impact

The word "impact" means to have an effect on something (Oxford dictionary, 2006). Impact is also defined as a phenomenon that follows and is caused by some previous phenomenon. Therefore the word impact can be defined as consequences or results caused by something.

1.9.5 Behavioural Impact

The word "behavioural impact" in the study refers to the consequences or effects of the reaction of an individual in a particular situation or environment.

1.9.6 Perception

The word "perception" refers to an idea, a belief and image one has as a result of how one sees or understands something (Oxford dictionary, 2006). Perception is the process of attaining awareness or understanding of the environment by organizing and interpreting sensory. The word "perception" therefore, refers to the way a person perceives a particular situation in the environment.

An outline of the study has been done in the form of an introductory chapter. In summary, the chapter's focus was on background information, statement of the problem, and definitions of the terms used in the study. The next chapter will focus on available literature and theoretical framework relevant to the research topic.

CHAPTER 2

LITERATURE REVIEW

2.1. INTRODUCTORY REMARKS

The use of alcohol and other substances by young people is recognized as a major public health problem in South Africa, as alcohol is the second most common primary substance used among adolescents in Kwa-zulu Natal and Gauteng (Felts, Chewier, & Barnes, 1992). It has been noted that the quantity and frequency of alcohol consumption among adolescents in South Africa are on the increase and the age at which drinking starts is declining (Flisher, Ziervogel, Chalton, Leger, & Robertson, 1993).

In South Africa, different researchers such as Madu and Matla (2003); and Felts, Chewier and Barnes (1992) among others, have investigated issues associated with alcohol use and abuse among adolescents. Literature pertaining to the alcohol and its use is now examined. These include alcohol use and abuse, effects of alcohol, prevalence of alcohol and theoretical perspectives.

This research will provide an understanding on how learners perceive alcohol use. The research also shares a light on what areas to focus on when addressing the problem of alcohol use among learners.

2.2. EFFECTS OF ALCOHOL USE

Alcohol use may result in social, behavioural and physiological effects. These effects are discussed below:

2.3.1 Social Effects of Alcohol Use

Fibkins and Williams (1993) discovered that alcohol use negatively affects the family unit, as youth become more hostile, and their decision-making becomes greatly impaired. Adolescents who use alcohol find that their family relationships suffer greatly. They also set a bad example for younger siblings, and they create much more hostility to the family as a whole. Adolescents, from age 12 to 17, who use alcohol are more likely to report behavioural problems, especially aggressiveness, delinguent and criminal behaviours, this is according to a study by Substance Abuse and Mental Services Administration. Families of alcohol using adolescents exhibit high degrees of negativity (Robins, Helzer, & Davis, 1998). Parents or parent figures may blame each other for what they perceive as a failure in raising the child. For example, one parent may accuse the other of being a "bad example," or for not "being there" when the youngster needed him or her. The adolescent, in turn, may speak about the accused parent of setting a bad example with disrespect and resentment. The communication among family members is contaminated with anger, bitterness, and animosity (Robins et al., 1998). This shows that alcohol use does not affect only those who are using it but the family as a whole.

2.3.2 Behavioural Effects of Alcohol Use

Alcohol use among adolescents has been associated with problems such as violence-related injuries, arrests from impaired driving, aggressive or violent behaviour, and expulsion from school (Flisher et al., 1993, Hardcastle, 1994). Findings from Hingson, Heeren, Zakocs, Kopstein, and Wechsler, (2002) point to the high rates of alcohol use and unprotected sex among college students. In their study, 40% of participants reported that they did not use a condom during their last occasion of sex and 32% reported alcohol consumption prior to sex. The above mentioned statement shows that there is a relationship of some sort between alcohol use and risky sexual behaviour among students. Findings above show that alcohol is linked to behavioural problems that affect students.

Alcohol use prior to sex was strongly related to unprotected sex for encounters involving non-steady partners. The moderating effect of partner type observed in this study is particularly noteworthy, in light of the fact that alcohol use itself was far more common for sexual encounters involving non-steady partners. Whereas 55% of encounters with non-steady partners involved alcohol use, only 22% of sexual occasions with a steady partner were preceded by alcohol use (Hingson et al., 2002).

In contrast, alcohol and sexual activity often co-occurred; results indicate that alcohol did not have a "main effect" on sexual risk (Steele & Josephs, 1990). They speculated that alcohol often contributes to unplanned sexual activity with a new or "casual" partner. Perhaps because such drinking-related sexual encounters are more spontaneous, they are also less likely to include condom use. In contrast, for the small subset of people who have casual sex with a non-steady partner while sober only 13% the complete sample, such encounters may be more purposeful or planned; part of planning for such occasions may include having a condom ready for use during such encounters. Therefore, this shows that alcohol can play a role on how they one thinks under certain circumstances (Steele & Josephs, 1990).

A study conducted by Morojele et al., (2002), points out that drinking among teenagers is associated with a number of negative consequences. The study examined the relationship between alcohol use and sexual behaviour among learners from four private schools in Cape Town. They also found significant correlations between alcohol use and sexual behaviour variables.

Morojele, Kachieng, Moloko, Nkoko, Parry, and Nkowane (2006) indicated that there is a relationship between alcohol consumption and sexual risk behaviour in both men and women. Furthermore, they indicated that alcohol consumption makes people become more flirtatious, sexually provocative and courageous and less inhibited about revealing their sexual desires to others. Many casual sexual encounters occurred while men were drinking in bars/shebeens.

Similar findings were found by Mabille (2009), who indicated that there is a high likelihood of an individual engaging in irresponsible sex after consumption of alcohol. The study by Mabille (2009) further revealed that the amount of alcohol intake is the predictor of sexual involvement. Alcohol consumption is also believed to increase levels of sexual arousal and desire, particularly where potential casual sexual partners or sex workers were involved. Whether and how alcohol would affect subsequent sexual behaviour seemed to also depend on the drinking context, quantities consumed and the actors.

Another study found that risky sexual behaviour may accompany drinking: unwanted pregnancy, sexually transmitted diseases, and sexual assault and date rape (Grunbaum, Kann, Kinchen, Williams, Ross, & Lowry, 2002). Catalina, Stafford, and Scott (2003) identify that problem drinking among teenagers is associated with a number of negative consequences. Ouellette, Gerrard, Gibbons, and Reis-Bergan (1999) also found that among teenagers who report drinking, 83.8% said they had experienced at least one alcohol-related problem in the past twelve months. These problems included hangovers, behaving in ways they regret, getting into arguments because of drinking, and being unable to remember part of the evening.

Derman, Cooper, and Agocha (1998) found that alcohol use is associated with greater sexual risk taking. Similar findings were also found by Fergusson and Lynskey (1996) that adolescents who used alcohol reported an earlier onset of sexual activity. The above literature shows that alcohol use has a number of negative consequences to young people. Learners seem to be aware that alcohol use is associated with negative behaviour.

A study by Flisher, et al., (1996) conducted among Cape Peninsula high school learners revealed that a statistically significant relationship exists between alcohol bingeing and sexual intercourse, with a stronger correlation among boys than among girls. The findings show that alcohol use and risky sexual intercourse is associated more with males than female learners.

A study by Simpson (1996), among 176 predominantly white, female secondyear psychology students at Rhodes University, Grahamstown in the Eastern Cape, indicate a significant association between alcohol use and the number of sexual partners and knowledge of HIV transmission. However, alcohol use was not significantly related to frequency of condom use or respondents' perceived risk of HIV infection. Although the students had high levels of knowledge regarding safe sex practices, only 15% of the sexually active respondents used condoms regularly.

A previous study, conducted in 1995 examining the risk factors for teenage pregnancy among sexually active black adolescences in Cape Town, was that alcohol use was not associated with sexual risk behavior that leads to pregnancy (Vundule, Maforah, Jewkes, & Jordaan, 2001). Southern African Development Community (1998) report that academic failure, absenteeism and repeating a grade among grade 8 and 11 learner's in Cape Town as a result of alcohol use. Gilramy 2000, states that alcohol is widely misused by South African adolescents. The high rate of binge-drinking is a cause for concern, given the significant associations between alcohol use, academic failure and high risk sexual behaviour (Flisher, Evans, Muller, & Lombard 2003a; Parry & Karim, 1999). This finding shows that alcohol does contribute to academic failure and poor performances of learners at schools.

Peltzer and Phaswana (1999) conducted a study, which shows that the majority of the participants believe that the use of alcohol and cannabis were problematic, even though they acknowledged they were useful in some ways. Regarding the usefulness of these substances, participants indicate that they both help one to cope with a difficult situation, believing that they are energizers, they stimulate one's mind, they are curative, and they relieve stress and cause one to become brave. Henry (2001) also reported that 10% of the alcohol users in their study indicated that they use alcohol for relaxation, and 11% say that it is easier to have a good time and socialize when they are drunk. Therefore, it could be

concluded that some individuals believe that alcohol is useful in some ways and can help them cope with difficult situations.

According to the three informants' views, in a study conducted by Hanson (2007), their main reasons for engaging in alcohol consumption are to 'have some fun', 'make friends' and sometimes for 'releasing tension' as well as 'forgetting about responsibilities'. It has been suggested from the results that young adults tend to perceive alcohol use as part of a desirable lifestyle of having a good time and being "one of the gang" (Hanson, 2007). They generally believe that their drinking behaviour and consumption patterns are normal and not in danger. Young people attach different meanings to alcohol usage. Others interpret it as a sign of maturity or adulthood, while some use it to belong in a particular group. Henry (2001) found that, young people in South Africa use alcohol for different reasons. This includes for relaxation purposes, to have good time and to socialize better. Used as coping strategies, alcohol may, however, be ineffective and may also exacerbate the problem the adolescent is experiencing.

The youth in South Africa use alcohol to have a sense of belonging, and to avoid alienation (Blumenthal & Kupfer, 1990). Alcohol use is reported to be creating emotional highs, and a counterfeit sense of well-being that temporarily supplements, such pressures and feelings (Hepworth, Farley, & Griffiths, 1988). The use of alcohol for personal gratification and temporary adaptation carries a very high price such as, alcohol dependence, personal and social disorganization, and a predisposition to serious and even fatal diseases and accidents (Gullotta, Adams, & Montemayor, 1995).

A study conducted by Leteka (2003), shows that more participants think that a drink once in a while does no harm. They also believe that getting drunk is more fun. The study also indicated that these factors seem to carry danger for future drinking habits with a high risk of alcohol related problems.

Ronieawathee (2009), found than seventy percentages of the respondents in his study agreed that the use of drugs makes it difficult for the learner to cope with school work. This is because of not understanding concepts, difficult in attaining skills taught and performing poorly on assessments. The study further showed that participants agreed that drug abuse gives rise to unacceptable behaviours.

A study by Dube (2007), found that drug usage is associated with poor school work and changes in behaviour. Furthermore, the study indicated that learners lose concentration, absent themselves from school, lose appetite and have sleeping problems.

In another study, it was discovered that personal attributes, psychological difficulties and environmental domains are correlated with high school student alcohol use. The findings also suggest that in order for adolescent alcohol prevention programmes to be effective, focus has to be on addressing the above mentioned domains (Onya, Tessera, Myers, & Flisher, 2012)

2.4. THE PREVALENCE OF ALCOHOL USE IN SOUTH AFRICA

A survey among African youth aged 10-21 from urban and rural areas in South Africa revealed that 11.3% of urban males and 19.6% of rural males consumed on average 10 centilitres of alcohols on average per day, which is equivalent to almost five 340ml beers per person (Rocha-Silva, et al., 1996). The corresponding percentages for females were 6.1% in urban areas and 7.7% in rural areas. Among many youths, the first exposure to the use of alcohol was generally through a friend. The most common context within which alcohol is consumed among urban and rural males is at shebeens, taverns or homes where they have to pay for their drink. For urban females it was at the home of friends where they either brought their own drink or got it for free. For rural females it was at home (Rocha-Silva et al., 1996).The study further revealed that among both men and women, persons with either low or high levels of education are

more likely to drink than those with moderate education (grade 4 - 9). For males the highest current drinking levels were reported in the Free State and Gauteng (50% or more) and the lowest levels were reported in the Northern Province (28%). For females, the lowest levels were also recorded in the Northern Province (9%), with the highest levels being in the Free State, Western Cape and Northern Cape (23%-25%).

In their study, Flisher, Evans, Muller, and Lombard (2003b) found 53.2% of alcohol consumption (respectively) among high-school students in the Cape Peninsula, South Africa. They also found that the prevalence rates of 34.7% for alcohol use among Grade 8 black students in Cape Town, South Africa. It was further found that there was prevalence of 55.4% for alcohol drinking among Grade 11 black students. Among the females in Grade 11, the prevalence was 18.3% for alcohol use. A representative survey of 39 state-funded high schools in Cape Town in 1997 found that 36.5% of male and 18.7% of female students in grade 11 reported binge-drinking in the 2 weeks prior to the study.

The 1998 study involving a representative sample of 38 schools in Durban found that 53.3% of male and 28.9% of female students in grade 11 reported bingedrinking in the 2 weeks prior to the study (Flisher et al., 2003b) .In a study of 35 state schools in Pretoria in 2000, 40% of students reported drinking to intoxication occasionally during the course of a typical month (Flisher et al., 2003b).

A study conducted by Malema, (2003) in Mankweng area shows that the prevalence of substance abuse among high school learners was high. In the same study it was found that alcohol was the most widely used substance in secondary schools followed by tobacco, inhalants, dagga and other drugs. Madu and Matla (2003) found that among high school adolescents there was a high prevalence of alcohol as compared to other substances. The difference may be

so because of greater availability and accessibility of alcohol than the illicit drugs and greater social acceptability of alcohol use as compared to illicit drugs.

Similar results were also found by Leite & Parrish, (1994) who noted that alcohol was particularly more attractive to the youth than illicit drugs. Again, the study showed that substance abuse was high in males than females. This means that alcohol is used more by females for entertainment purposes and as a means of socialization for males. The above literature shows that alcohol is easily accessible among adolescents and also that it is more associated with males than females.

Madu and Matla (2003) also indicated that culturally, alcohol drinking is more acceptable among males than among females in black South African communities. Furthermore, they also indicated that in parties organized by the youth for the youth, cultural strictness is lowered, thus female adolescents may take advantage of it and drink alcohol more than they would usually do. The literature above shows that alcohol use is a major concern among youth worldwide, with alcohol as the most commonly used substance.

Alcohol use has been identified by several researchers as a severe social problem for young people in South Africa. The literature reviewed above indicates that alcohol is affecting young people in different parts of the country and has been identified as a major problem. In this research several theories will be looked at in order to explain and give guidance as to what leads or contributes to the use of alcohol among high school learners. Below are theoretical perspectives and framework used in the study to explain possible causes of alcohol use and abuse.

2.5 THEORETICAL PERSPECTIVES

There are different theories that explain the causes of substance abuse. Various theories will be discussed, but the main focus will be on the social learning theory. These include the following: Bio-psycho-social Model, Psychodynamic Theory and Social Learning Theory.

2.5.1 The Bio-psycho-social Model

The model suggests that several processes (cognitive, physiological, and stress reaction) may intervene between the occurrence of a potential stressful events and the occurrence of an adverse reaction (Wills & Shiffman, 1985). The bio-psycho-social model is based on two central premises. The first one is that substance may be used as a coping mechanism for two independent reasons. The first reason is that they can reduce negative effect, or they can increase positive affect. Individuals may use a substance to reduce negative affect when they are anxious or over aroused, or they may also use the same substance to enhance positive affect when they are fatigued, depressed, or under aroused.

The second premise is that it is used to distinguish between two types of stresscoping skills: generic responses that help the individual to deal with a variety of stressors and responses that are used to cope with temptations for substance use. Skills to cope with stress are distinguished from skills relevant for coping with temptation. This model conceptualizes substance abuse as a product of deficiency in coping skills that are relevant to a variety of stressors. When faced with personal or social pressure to use substance, youth with social skills deficits are more likely to engage in usage. Learners in this regard may turn to use alcohol either as a coping mechanism or stress coping.

2.5.2 Psychodynamic Theory

Sigmund Freud identified four stages of psychosexual development in his psychodynamic theory. He identified the oral stage as the first stage where an

infant's, needs for example, perceptions, and modes of expression are primarily centred in the mouth, lips, tongue, and other organs related to the oral zone. This implies that the body organs listed above are primarily a means of communication. The stage is responsible for establishing a trusting dependence on nursing and sustaining objects, to establish comfortable expression and gratification of oral libidinal needs without excessive conflict or ambivalence from oral sadistic wishes (Sadock & Sadock, 2003).

The stage can have pathological implications if it is not resolved properly; this include oral fixation. In this case alcohol is used as a means of communication/expression of one's needs. People might resort to alcohol usage because they have not established comfortable expression and gratification of oral libidinal needs (Sadock & Sadock, 2003).

Sigmund Freud proposed that if the nursing child's appetite were thwarted during any libidinal development stage, the anxiety would persist into adulthood as a neurosis (functional mental disorder). Therefore, an infantile oral fixation (oral craving) would be manifest as an obsession with oral stimulation; yet, if weaned either too early or too late, the infant might fail in resolving the emotional conflicts of the oral, first stage of psychosexual development and he or she might develop a maladaptive oral fixation.

The infant, who is neglected, insufficiently fed, that is or who is over-protected (over-fed) in the course of being nursed might become an orally-fixated man or woman. Said oral-stage fixation might have two effects:

- The neglected child might become a psychologically dependent adult continually seeking the oral stimulation denied in infancy, thereby becoming a manipulative person in fulfilling his or her needs, rather than maturing to independence;
- The over-protected child might resist maturation and return to dependence upon others in fulfilling his or her needs.

Theoretically, oral-stage fixations are manifested as smoking, continual oral stimulus (eating, chewing objects), and alcoholism. The psychodynamic theory therefore emphasizes on how the resolution of psychosexual stage can affect the behaviour.

2.5.3 Social Learning Theory

The social learning theory is adapted as the theoretical framework that supports the research topic. The social learning theory of Bandura emphasizes the importance of observing and modeling the behaviours, attitudes, and emotional reactions of others. Bandura (1977) states:

"Learning would be exceedingly laborious, not to mention hazardous, if people had to rely solely on the effects of their own actions to inform them what to do. Fortunately, most human behaviour is learned observationally through modeling: from observing others one forms an idea of how new behaviours are performed, and on later occasions this coded information serves as a guide for action (p. 22)."

Social learning theory explains human behaviour in terms of continuous reciprocal interaction between cognitive, behavioural, an environmental influences. The component processes underlying observational learning are:

- a. Attention, including modeled events (distinctiveness, affective valence, complexity, prevalence, functional value) and observer characteristics (sensory capacities, arousal level, perceptual set, past reinforcement),
- b. Retention, including symbolic coding, cognitive organization, symbolic rehearsal, motor rehearsal),
- c. Motor reproduction, including physical capabilities, self-observation of reproduction, accuracy of feedback, and
- d. Motivation, including external, vicarious and self-reinforcement.

Social learning theory suggests that behavioural patterns is more or less problematic depending on the opportunities and social influences to which one is exposed, the skilfulness which this performs, and balance of reward one receives from participation in these activities. The reward one receives for behaviour directly affects the likelihood that one continues that behaviour (Bandura, 1977).

The theory suggests that whatever the reward one gets, it has an influence on an individual's behaviour. These rewards are themselves a function of the opportunities available for participation in groups and activities, as well as the skills an individual applies in his or her behaviour. Learners who use alcohol tend to associate the reward that they get from alcohol with the positive reward. Thus, the social learning theory places emphasis on how learning can affect behaviour.

In conclusion, this chapter focused on reviewing the available literature on the topic and also applying relevant theories to the topic. The following chapter will focus on the research methodology and designs.

CHAPTER 3

RESEARCH METHODOLOGY

3.1. RESEARCH DESIGN

Mouton (2001) defines a research design as a plan or blueprint of how one intends conducting the research. The present research is quantitative and exploratory in nature. Exploratory research is a type of study conducted to gain insight into a situation, phenomenon, and community or individual that was not explored before (Bless & Higson-Smith, 1995). Quantitative research is often an interactive process whereby evidence is evaluated, theories and hypotheses are refined, technical advances are made, and so on (Adler, & Adler, 1987). This type of research is conducted because the problem has not been researched in Makgofe area before.

Two variables were investigated: the independent and dependent variables. Independent variable refers to factors which the researcher selects and manipulates in order to determine its effects on the observed phenomenon, while dependent variable is that factor which the researcher observed and measures to determine how it was affected by the independent variable (Welman, Kruger, Michell, 2005). The dependent variable in this study is high school learners and the independent variable is the use of alcohol.

3.2. HYPOTHESES

- Learners using alcohol perceive its use in a positive light.
- Learners who use alcohol perceive it as having a positive impact on their behaviour.

3.3. SAMPLE

The sample of study is sourced from high school learners in Makgofe area. Participants were between the ages of 12 and 19. The researcher decided to sample school learners in this age range because it was noticed they are the ones who use alcohol and are affected by it more in the area. The study includes both female and male learners who drink alcohol. The sample size is 100, consisting of 50 alcohol drinkers and 50 non-alcohol drinkers.

3.3. SAMPLING METHOD

Convenience sampling was used to select participants. In convenience sampling, any case that happens to cross the researchers' path and has some relevance to the phenomenon under investigation is included in the sample until a desired number is obtained (Singleton, Straits, Straits, & McAllister, 1988). The sample was chosen from both learners who drink alcohol and non-alcohol drinkers.

In step one the researcher approached learners who drink alcohol. Then the researcher asked them to participate in the study. The purpose of the research was explained to the learners and that participation was voluntary and confidential. After the learners agreed to participate in the study they were given questionnaires to fill in. In step two the researcher also approached the learners who do not drink alcohol and asked them to participate in the study. The same procedure used in step one was adopted. The questionnaire took about 10 minutes on average to complete. Some learners answered the questionnaires on the spot, while others took them home and returned them the following day. The questionnaires were then collected for analysis.

3.4. INSTRUMENTS OF DATA COLLECTION

Three types of instruments were used namely, the biographical information, Alcohol Expectancy Questionnaire (AEQ-A) and Student Alcohol Questionnaire (SAQ).

3.4.1. Biographical Information Section

The biographical information section is used to collect data, namely age, gender, grade, ethnicity and language.

3.4.2. Alcohol Expectancy Questionnaire for Adolescents (AEQ-A)

The Alcohol Expectancy Questionnaire is developed by Christiansen, Goldman and Inn in 1982. The AEQ-A assess adolescents' perceptions of alcohol effects. The questionnaire is the revised version of adult alcohol expectancy questionnaire, which is based on the same approach but refers to expectations of alcohol use that are specifically relevant for adolescents. The AEQ-A measures both positive and negative effects of alcohol use. Internal consistencies of these scales ranged between 0.47 and 0.82 for University students (Brown, Christiansen, & Goldman, 1987).

The instrument contains 90 true/ false items that are partially derived from the statements comprising the adult AEQ and partially from interviews with 12 to 19 year old adolescents. The researcher adopted 10 questions on global positive change and 15 physical and social pleasures. The scale asks questions such as, drinking alcohol makes a person feel good and happy and drinking alcohol makes bad impression on others.

3.4.3 The Student Alcohol Questionnaire (SAQ)

The Student Alcohol Questionnaire (Engs, 1975) was used to measure the amounts of alcohol consumption and consequences. Only items based on alcohol consumption are adopted in this study.

As part of its development, the instrument are subjected to face validity by a panel of experts and by college students. Various reliability analyses including test-retest and internal reliability procedures were performed. Both the test-retest reliability and the Kuder-Richardson reliability is 0.79 and for the knowledge subscales with the Cronbach alpha of 0.86 (Engs, 1978).

3.5. DATA COLLECTION PROCEDURE

Firstly, permission from University of Limpopo Ethics Committee was obtained. The researcher took the letter to the headman at Makgofe area. The permission letter from ethics committee was given to the headman. The researcher asked for permission to conduct research in the area. The permission from the headman of (Makgofe area) was obtained to conduct research at Makgofe area. After the researcher was granted permission she then approached tavern owners around the area to ask for permission to conduct research in their taverns. The permission was granted by tavern owners. The researcher informed the participants that participation in the study is voluntary, and they were informed about confidentiality and anonymity. The researcher then obtained informed consent from the participants before distributing the questionnaire.

The purpose of the research was clearly explained to the participants who took part in the study. The researcher approached learners who were in the tavern and asked for their permission to participate in the study. Collection of data was done in the presence of tavern owners for safety purposes. Participants were allowed to ask questions and they were also clarified. Permission from parents of underage participants was obtained through giving the participants consent form to give to their parents to sign. Data was then collected, using the questionnaires.

3.6 DATA ANALYSIS

Data was analysed using the Statistical Package for Social Sciences (SPSS) was used for analyzing data. The t-test was used to compare the values of the means from two samples and test whether it is likely that the samples are from populations having different mean values (De Vos, 2005). The t-test was used to compare the values of the means from the control group and the experimental group.

3.7 ETHICAL CONSIDERATIONS

The following ethical aspects were considered: informed consent and confidentiality.

- Informed consent, involves obtaining verbal consent from the participants in order to participate voluntarily in the research study. The participants were given information on what the research was all about.
- The researcher discussed the issue of confidentiality with the participants. The participants were also assured that their identity would not be disclosed.
- Participants were informed that they could withdraw from the research study at any time if they so wished.
- After-care psychological support was also provided to those who needed it. A number of less than five learners were referred to the nearest hospital for psychological interventions due to family or personal problems related to alcohol use. The researcher also assisted the participants in booking appointments with qualified psychologists.

This chapter focused on research methodology, which included research design, sample, sampling method and procedure, instruments of data collection, data analysis and ethical considerations. The next chapter is on the results of the study.

CHAPTER 4

RESULTS PRESENTATION

This chapter focuses on presentation of the study results. The overall results are presented in the following manner: frequency tables of demographic variables, alpha coefficient on reliability of the adopted AEQ for the perceptions of alcohol use and the adopted AEQ for perceived behavioural impact of alcohol use. Level of significance will also be indicated.

4.1 FREQUENCY TABLES FOR DEMOGRAPHIC VARIABLES

The study comprised 100 participants. Demographic variables are outlined in terms of gender, age, grade, and ethnicity. Learners' biographical data of both male and female alcohol drinkers and non-drinkers are presented below.

4.1.1 Distribution of Participants by Gender

There were a total number of 42(100%) females and 58 (100%) males who took part in the study. Fifty (50) of the participants were drinkers (22 female and 28 male). A total number of fifty (50) participants were non-drinkers (20 female and male 30 (see table 1). Majority of participants were male.

Gender	Alcohol drinkers	Non-alcohol drinker	Total
Female	22 (52.38%)	20 (47.6%)	42
Male	28 (47.62%)	30 (52.4 %)	58
Total	50 (100%)	50 (100%)	100

4.1.2 Distribution of Participants by Age

In this study, 22 participants were within the age range of 12 to 15 and 78 participants within the age range of 16 to 19. The majority of the participants were between the ages of 16 to 19 years.

		Age Non- Alcohol drinkers		Total
12-15	11 (22%)	12-15	11(22%)	22
16-19	39 (78. %)	16-19	39 (78%)	78
Total	50(100%)		50(100%)	100

Table 2 Distribution by Age

4.1.3 Distribution of participants by Grade

There were 24 participants in grade 8 to 9 and 26 participants in grade 12. The majorities of the participants were from grades 10 and 11, they were 50; in total number (see Table 3).

Table 3 Distribution by Grade Total Alcohol Non-alcohol Grade drinkers drinkers 8-9 16 (32%) 24 8 (16%) 10-11 50 28 (56%) 22 (44%) 26 14 (28%) 12 12 (24%) 50 (100%) 100 50 (100) Total

4.1.4 Distribution of Participants by Ethnic Language

There were 65 Sepedi speakers, 23 Tsonga speakers, 2 Venda speaking and 10 other language speakers participants. The majority of the participants were Speakers of Sepedi (see table 4).

Table 4 Distribution by Ethnic

Language		Total	
Ethinic group	Alcohol drinkers	Non-alcohol drinkers	
Sepedi	36 (72%)	29(58%)	23
Tsonga	8(16%)	15(30%)	65
Venda	1 (2%)	1 (2%)	2
Other	5(10 %)	5 (10%)	10
Total	50 (100%)	50 (100%)	100

4.2 ALPHA COEFFICIENT OF RELIABILITY ON SCALES

Adopted AEQ for perception of alcohol use and for the perceptions of behavioural impact of alcohol use

The alpha coefficient for the items is 0.470 (n = 100) suggesting that the items have relatively low internal consistency for both the adopted AEQ for perception of alcohol use and adopted AEQ for the perceptions of behavioural impact on alcohol use (**refer to Appendix**). It is worth noting that a reliability coefficient of 0.70 or higher is considered "acceptable" in most social science research situations.

4.3 PRESENTATION OF RESULTS

4.3.1 Results on the Perception of Alcohol Use

Among alcohol drinkers, male 26(52%) perceive its use positively than female 10(20%). While only 2(4%) of male and 10(20%) female drinkers perceive the use of alcohol negatively. On the other hand, among non-drinkers, 8(16%) male and 6(12%) female perceive the use of alcohol positively, while 22(44%) male and 16(32%) female perceive it negatively.

Perception of alcohol use	Negative perception		Positive percep	Total	
	Females	Males	Females	Males	
Alcohol drinkers	10 (20%)	2 (4%)	10(20%)	26(52%)	50(100%)
Non-alcohol drinkers	16 (32%)	22 (44%)	6(12%)	8(16%)	50(100%)
Total	26(52%)	24 (48%)	16(32%)	36(68%)	100

Table 5	Perceptior	n of Alcohol	Use
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4.3.2 T-test Results on the Perceptions of Alcohol Use

The table shows the P value of 0.000. This is less than 0.005. Therefore the results are significant (see Table 6).

	Test Value = 0					
					95% Confid Interval of Differend	the
	т	Df	Sig. (2- tailed)	Mean Difference	Lower	Uppe r
Perception of alcohol	28.191	99	.000	1.360	1.26	1.46

Table 6

4.3.2 Results on the Perceived Behavioural Impact of Alcohol Use

With regard to behavioural impact of alcohol use, 32(64%) male drinkers and 3(6%) female perceive alcohol as having a positive impact on behaviour, while 1(2%) male and 14(28%) females perceive alcohol as having a negative impact on behaviour (see Table 7).

Among non-drinkers, 4(8%) males and 11(22%) females perceive alcohol use as having a positive impact on behaviour. On the other hand, 14(28) males and 21(41%) female perceive the use of alcohol as having a negative impact on behaviour (see Table 7).

Positive behavioural Behavioural Negative behavioural Total impact of impact impact alcohol use Females Males Females Males 1(2%) 32(64%) Alcohol 14(28%) 3(6%) 50(100%) drinkers Non-alcohol 21(42%) 14 (28%) 11(22%) 4(8%) 50(100%) drinkers Total 35(70%) 15 (30%) 100 14(28%) 36(72%)

Table 7 Behavioural Impact of Alcohol Use

4.3.4 T-test Results for Perceived Behavioural Impact of Alcohol Use

T-test results for the impact of alcohol use on behaviour. The table below shows the P value of 0.000 which is less than 0.005 (see Table 8). This means that the results are significant.

		Test Value = 0					
			Sig. (2-	Mean Differenc	95% Confidence Interval of the Difference		
	Т	Df	tailed)	е	Lower	Upper	
Behavioural impact	28.3 55	99	.000	1.390	1.29	1.49	

Table 8 (Perceived Behavioural Impact of alcohol Use)

4.4 INTERPRETATION OF RESULTS

4.4.1 Demographic Results

The results show that 58 males and 42 females participated in the study. This means that males were more in the study than females. The age of participants is grouped into the following categories: age 12 to 15 and 16 to19. More participants are within the age group of 16 to19 years old. This means that alcohol use among learners is common in this age group. This also shows that learners access alcohol irrespective of their age. South African law regarding alcohol use states, that alcohol should not be sold to under age children, but the very same children seem to be accessing alcohol. The participants are doing grade 8 to 12 and more participants are from grades 10 and 11 and are speakers of Sepedi.

4.4.2 INTERPRETATION OF RESULTS ON PERCEPTION OF ALCOHOL USE AND THE BEHAVIOURAL IMPACT

4.4.2.1 Perception of alcohol use for drinkers

The results show that of all alcohol drinkers 26(52%), males and 10(20%) females perceive alcohol use in a positive manner. These results indicate that more males perceive alcohol use positively than females. This means that for males, alcohol use is associated with positive outcomes than among females. The contributing factor might be the fact that these learners are going through change with regard to developmental stages. Their age group falls under the developmental stage of identity versus role confusion as indicated by Erikson (Saddock & Saddock, 2003) .Thus, the positive perception held by learners may result in difficulties resolving the identity versus role stage. In this case learners might be struggling to resolve issues regarding the developmental stage they are experiencing.

The results also indicated that only 2(4%) of males and 10(20%) females drinkers perceive the use of alcohol negatively. Therefore, more females associate alcohol use negatively than males. This means that there are learners who use alcohol but still perceive it negatively. This further means that learners continue using alcohol even though they know that it has negative effects. Learners use of alcohol could be influenced by peer pressure, stress, family problems and personal problems.

The t-test results show the P-value of 0.000 which means that the results are significant and are in support of the hypothesis. The overall results indicate that learners who use alcohol perceive it in a positive manner.

4.4.2.2. Perception of alcohol use for non-drinkers

Among non-drinkers, 8(16%) males and 6(12%) females perceive the use of alcohol positively. This means that there are male and female non-drinkers who

perceive alcohol use positively. These results are ambiguous, since the participants themselves do not use alcohol, but have a positive perception regarding its use. Thus, there are some learners who perceive alcohol use positively even though they do not use it themselves. The type of results could be influenced by advertisement of alcohol on television or by seeing their role models or celebrities on TV drinking alcohol. These could have a major impact on learners' perceptions of alcohol use. Learners are more prone to using alcohol in the future because of the perceptions they have regarding alcohol.

The results also indicated that 22(44%) males and 16(32%) female non-, perceive alcohol use negatively. These results further show that the majority of the participants from the non-drinkers group perceive alcohol use negatively. In addition, this means that these learners are aware of the negative outcomes of alcohol use. This negative perception might be reinforced by the family structure, religion and individual experience regarding the use of alcohol.

4.4.2.3 Perceived behavioural impact for alcohol use on alcohol drinkers

Thirty two male alcohol drinkers', 32(64%) and 3(6%) female drinkers perceive alcohol use as having a positive impact on behaviour. More male learners associate alcohol use with positive behaviour as compared to female learners. Learner's' perception could be influenced by the temporary gratification that they receive from alcohol. Life challenges could be another contributing factor to learners believing that alcohol has a positive impact on behaviour. Learners could also be in denial of life challenges/problems that they face on a daily basis, hence their use of alcohol.

Furthermore, 1(2%) male and 14(28%) females perceive alcohol use as having a negative impact on behaviour. This means that more females associate alcohol as having a negative impact as compared to males. This could be because alcohol use seems to be more accepted among males than females.

The t-test shows the p-value of 0.000 which means that the results are significant and in support of the hypothesis. Therefore, alcohol use is perceived as having a positive impact on behaviour.

4.4.2.4 Perceived behavioural impact on alcohol use for non-drinkers

Among non-alcohol drinkers, 4(8%) males and 11(22%) females perceive alcohol use as having a positive impact on behaviour. Both males and females perceive alcohol as having a positive impact on behaviour.

Furthermore, 14(28%) males and 21(42%) females perceive alcohol intake as having a negative impact on behaviour. More female learners associate alcohol use with negative behaviour. These means female learners who do not use alcohol perceive its use as having a negative impact on behaviour than male learners do.

4.5 SUMMARY OF THE RESULTS

This chapter focused on the presentation of results, which included frequency tables of demographic variables, Alpha Coefficient, and t-test analysis. The results indicate the participants perceive alcohol use in a positive manner and that it impacts positively on behaviour. The alpha coefficient shows internal consistency of 0.470. The next chapter focuses on the discussion of results.

CHAPTER 5

DISCUSSION AND CONCLUSION

This chapter reveals the discussion of the findings of the study in relation to the existing literature and, applying as well as integrating theoretical framework. The limitations, conclusion and recommendations of the study will be given.

5.1 DISCUSSION OF THE RESULTS

Before going into the discussion of the results, hypotheses formulated are revisited.

- Learners who use alcohol perceive its use in a positive light.
- Learners who use alcohol perceive it as having a positive impact on their behaviour.

5.1.1 Perceptions of Alcohol Use

The first hypothesis states that learners using alcohol perceive it in a positive light. However, the results show that learners who use alcohol perceive it in a positive light. Learners continue to associate alcohol use with positive outcomes, factors which may lead to a high rate of alcohol use in future. Henry (2001) indicated that learners who use alcohol for relaxation purposes, have a good time and socialize better. Similar results were found by (Madu & Matla 2003). Another study by Hanson (2007) revealed that young people tend to perceive alcohol use as part of desirable lifestyle of having a good time and being "one of the gang". A similar result was also found in the study conducted by Leteka (2003) which, shows that more participants think that a drink once in a while does no harm and believing that getting drunk is more fun.

Learners seem to use alcohol to belong in a group and to be accepted by their peers. It does seems that learners use alcohol for approval purposes, that is to

be accepted by their friends and peers. Learners need to take responsibility in making the right choices for themselves and their future and not to be pleasing other people. They need to find other ways of having fun and making themselves happy. They must stay away from alcohol. This may include taking part in sports around their community and engaging themselves in useful activities that will help build their future and become successful individuals in life.

Apparently alcohol consumption is seen as a reward. Therefore the positive perception of alcohol seems to be a precipitating factor for alcohol consumption. Social learning theory advocated by Bandura suggests that whatever the rewards that one gets will have an influence on an individual's behaviour (Bandura, 1977). In this study the positive rewards learners believe to be having from alcohol tend to influence alcohol use. Most learners may turn to model the behaviour of others simply because they think it produces positive results. Learners, who are non-alcohol drinkers, may have had a negative experience with regard to the use of alcohol. This may have resulted in these learners' perception of alcohol use as being negative.

5.2.2 Perception on Behavioural Impact of Alcohol Use

The second hypothesis states that learners who use alcohol perceive it as having a positive impact on their behaviour. The t-test analysis indicates that learners who use alcohol perceive it as having a positive impact on their behaviour (t=28.355, df =99; p<0.000). Thus, the results are in support of the above stated hypothesis. Perception of alcohol seems to influence the perceived behavioural impact. Learners believe that alcohol use influence their behaviour positively. These thesis findings are supported by a study conducted by Peltzer and Phaswana (1999), who indicated a minority of the participants who took part in their study, acknowledged that the usage of alcohol was useful in some way.

Peltzer and Phaswana (1999) further state that, regarding the usefulness of alcohol, participants indicated that they both helped one to cope with a difficult

situation and that alcohol, energizes stimulates one's mind, has curative element, relieves one's stress and causes one to become brave. Positive perceptions held by learners towards alcohol use make them to perceive it as having a positive impact on their behaviour. Learners tend to ignore that the negative outcomes of alcohol use on behaviour. This could lead to a dangerous life-style and may also lead them to commit criminal offenses as well as become addicts of alcohol.

Ronieawathee's (2009), findings are not in support of the above mentioned hypothesis, however. In his study participants agreed that drugs abuse gave rise to unacceptable behaviour. Dube's (2007), findings are also against the findings of the present study as he revealed that drug usage is associated with poor school work and changes in behaviour. Hingson et al, (2002) also indicated that alcohol use is correlated to risky sexual behaviour. However, Steele and Josephs (1990) did not find a direct link between alcohol use and sexually risky behaviour.

5.3 LIMITATIONS OF THE STUDY

The accessibility of learners was problematic in the sense that some of the learners were under age and were not allowed in the taverns. The researcher had to rely on some learners who drink alcohol to bring their friends to participate in the study, a process which took time. Sometimes the participants would forget the questionnaires and the researcher would wait for a long time to get the questionnaires back. The findings of this study are applicable to only participants who took part in the study and cannot be used to generalize on other areas where the study was not conducted. The study also used an American instrument that was not standardized for South African population. This research is valued because it provides an understanding of the perceptions of alcohol use and the changes it has on behavior. Factors that cause alcohol use and prevention majors were not explored.

5.4 CONCLUSIONS

The study showed that learners have positive perception towards the use of alcohol. Furthermore, learners believe that alcohol use has a positive impact on behaviour. This is despite the fact that most learners know of the negative consequences of alcohol usage. Alcohol use can also disturb their school work and their general functioning. These perceptions can also lead to the development of alcoholism in future. Learners seem to continue to have great expectations from the usage of alcohol. The positive perceptions of alcohol use and its impact on behaviour among high school learners shows that there is a need for more awareness campaigns on alcohol use and the impact it has on behaviour. These findings suggest that more research in the area of alcohol use among school learners should be conducted.

5.5 **RECOMMENDATIONS**

Based on the findings of the study, the following recommendations are made:

- It is recommended that the Department of Education should consider implementing more awareness campaigns in schools and do follow-ups on those campaigns to make learners aware of the importance of not using alcohol.
- Counseling should be provided to learners using alcohol to help them overcome their problems and help them with problem solving skills.
- Parents need to play a role in discussing with learners the dangers of using alcohol.
- School Officials should also take part in emphasizing the consequences of alcohol use by high school learners.
- Community leaders should also participate in the fight against alcohol intake by learners through enforcing the law that under age children should not be seen taking alcohol.

REFERENCES

- Adler, P. A & Adler, P. (1987). *Membership roles in research.* Newburry Park. C. A. Sage.
- Bachman, J., Johnston, L., & O'Malley, P. (1987). *Monitoring the future: Questionnaire responses from the nation's high school seniors*. Ann Arbor, MI: Institute for Social Research.
- Bandura, A. (1977). Self-efficacy: Toward a unifying theory of behaviour change. *Psychological Review*, 84, 191-215.
- Bauman, A., & Phongsavan, P. (1999). Epidemiology of substance use in Adolescence: Prevalence, trends and policy implications. *Drug Alcohol Dependency*. 55: 187– 207.
- Birnbaum, I. M., Hartley, J. T., Johnson, M. K., & Taylor, T. H. (1980). Alcohol and elaborative schemes for sentences. *Journal of Experimental Psychology: Human Learning and Memory*, 6: 293–300.
- Bless, C., & Higson-Smith, C. (1995). Fundamentals of social research methods: an *African perspective*, 2nd ed. Cape Town: Juta.
- Blumenthal, S. ., & Kupfer, D. J. (1990). Suicide over the life cycle risk factors: Assessment and treatment of suicidal patients. American Psychiatric Press. Washington, DC.
- Brown, S., Christiansen, B., & Goldman, M. (1987). The alcohol expectancy questionnaire: An instrument for the assessment of adolescent and adult expectancies. *Journal of Studies on Alcohol*, 48: 483-491.
- Catalina, M. A., Stafford, J., & Scott, M. T. (2003). *High school drinking and its consequences.* University of South Allabama, Libra publishers.
- Christiansen, B. A., Goldman, M. S., & Inn, A. (1982). Development of alcohol-related expectancies in adolescents: Separating pharmacological from social learning influences. *Journal of Consulting and Clinical Psychology*, 50: 336-344
- Derman, K. H., Coopert, M. L., & Agocha, V. B. (1998). Sex-related alcohol expectancies as moderators of the relationship between alcohol use and risky sex in adolescents. *Journal of Studies on Alcohol*, 59: 71-77.

- De Vos, A. S. (2005). *Research at grass roots: for the social sciences and human service professions,* 3rd edition. Pretoria: Van Schaik.
- Dube, D. J. (2007). Social factors influencing adolescent drug abuse in high schools in *Atteridgeville* (Masters dissertation). Tshwane University of Technology, Pretoria, South Africa.
- Dusenbery, D. B. (2009). *Living at Micro Scale*. Harvard University Press, Cambridge, Mass.
- Engs, R. C. (1975). Drinking patterns and drinking problems of college students. *Journal* of Studies on Alcohol, 38: 2144-2156.
- Engs, R. C. (1978). College students' knowledge of alcohol and drinking. *Journal of the American College Health Association,* 26: 189-193.
- Felts, M. A., Chewier, T., & Barnes, R. (1992). Drug and suicidal ideation and behaviour among North Carolina public school students. *American Journal of Public Health*,82: 870–872.
- Fergusson, D. M., & Lynsky, M.T. (1996). Alcohol misuse and adolescent sexual behaviours and risk taking. *Pediatrics*, 98, 91-104.
- Fibkins, N., & William L. (1993). "Combating Student Tobacco Addiction in Secondary Schools," NASSP.
- Flisher, A.J., Ziervogel, C.F., Chalton, D.O., Leger P. H., & Robertson, B. A. (1993). Risk-taking behaviour of Cape Peninsula high school students Alcohol use. South African Medical Journal, 83(7): 480–482.
- Flisher, A.J., Ziervogel, C.F., & Charlton, D.O. (1996). Risk-taking behaviour of Cape Peninsula High School students' multivariate relationships among behaviours. *South African Medical Journal,* 86: 1094–1098.
- Flisher, A.J., Evans, J., Muller, M., & Lombard G. (2003a). Test–retest reliability of self-reported adolescent risk behaviour. *Journal of Adolescence*.
- Flisher, A. J., Evans, J. Muller, M., & Lombard G. (2003,b).Substance use by adolescents in Cape Town: Prevalence and correlates. *Journal of Adolescent Health*, 30,166.

- Gilramy, E. (2000). Substance abuse in young people. *Journal of Child Psychology and Psychiatry*, 41: 55–80.
- Gullotta, T. P., Adams, G. R., & Montemayor, R. (1995). Substance misuse in adolescence. Newbury Park, CA: Sage.
- Gumede, M. V. (1995). Alcohol use and abuse in South Africa: A socio-Medical problem. Pietermaritzburg: Reach Out Publishers.
- Grunbaum, J. A., Kann, L., Kinchen, S. A., Williams, B., Ross J. G. & Lowry R (2002). Youth risk behaviour surveillance United States, 2001, *Journal of School Health*, 72, 313–328.
- Hanson, D.J. (2007). Alcohol abuse. http://www2.postdam.edu/handsondj/alcoholabuse. html.
- Hardcastle, T. C. (1994). Alcohol use among Cape Peninsula adolescents. *South African Medical Journal*, 84, 172.
- Henry, J. K. (2001). *Family foundation* portrait of young South Africa. Johannesburg: Love Life.
- Hingson, R. W., Heeren, T., Zakocs, R. C., Kopstein, A., & Wechsler, H. (2002). Magnitude of alcohol-related mortality and morbidity among U.S. college students aged 18–24. *Journal of Studies on Alcohol*, 63, 136–144.
- Hepworth, D. H., Farley, W. O., & Griffiths, J. K. (1988). Clinical work with suicidal adolescents and their families. *Social Casework: Journal of Contemporary Social Work, April*, 195–203.
- Leite, J. S, & Parrish, J. K. (1994). Why kids are the way they are. *Adolescence* 73: 52–54.
- Leteka, J. M. M. (2003). Alcohol use/abuse among teenagers in selected high school s in Maseru City: The development of health education programme (Doctoral dissertation). University of South Africa, Pretoria, South Africa.
- Lewis, M. (1996). *Child and adolescent psychiatry: A comprehension Textbook.* Williams Wilkins & Baltimore.

- Mabille, P. A. (2009). The effect of alcohol abuse on high-risk sexual behaviour among students in Mafikeng (Masters dissertation). Stellenbosch University, South Africa.
- Madu, N. S., & Matla, M. P. (2003). Ilicits drugs use, cigarette smoking and alcohol drinking among a sample of high school adolescents in Pietersburg area of the Northern Province, South Africa. *Journal of adolescents*, 26: 121-136.
- Malema, M. I. (2005). Substance use among high school learners in Mankweng educational area, Limpopo Province, South Africa (Masters dissertation). University of Limpopo, Sovenga, South Africa.
- Miller, T. R., Lesting, D. C., & Smith, G. S. (2001). Injury risk among medically identified alcohol and drug abusers. *Alcohol: Clinical and Experimental Research*, 25, 54–59.
- Mouton, J. (2001). *How to succeed in your master's and doctoral studies:* A *South African guide and resource book.* Pretoria: J. L. Van Schaik.
- Morojele, N. K., Flisher, A. J. & Muller, M. (2002). Measurement of risk and protective factors for drug use and antisocial behaviour among high school students in South Africa. *Journal of Drug Education*, 32, 25–39.
- Morojele, N. K., Kachieng, M. A., Mokoko, E., Nkoko, M. A., Parry, C .D. H., & Nkowane, A. M. (2006). Alcohol use and sexual behaviour among risky drinkers and bar and sheeben patrols in Gauteng Province, South Africa. Social Science, Medical, 62, 217-227.
- Ouellette, J. A., Gerrard, M., Gibbons, F. X., & Reis-Bergan, M. (1999). Parents, peers and prototypes: Antecedents of adolescent alcohol expectancies, alcohol consumption, and alcohol-related life problems in rural youth. *Psychology of Addictive Behaviours*, 13, 187-197.
- Onya, H., Tessera, A., Myers, B., & Flisher, A. (2012). Adolescent alcohol use in rural South African high schools. *Journal of Psychiatry*, 15: 352-357.
- Oxford dictionary, (2006). Advanced learners's dictionary, 7th ed. Oxford University Press.
- Parry, C. D. H., & Bennetts, A. L. (1998). *Alcohol and public health in South Africa*. Cape Town: Oxford University Press.

- Parry, C. D. H., & Karim, Q. A. (1999). Country report: Substance abuse and HIV/AIDS in South Africa: Paper presented at the Global Research Network Meeting on HIV prevention in drug-using Populations. Atlanta, Georgia.
- Peltzer, K., & Phaswana, N. (1999). Substance use among South African university learners: A qualitative and quantitative study. *Urban Health and Development Bulletin*, 2, 36-45.
- Robins, L. N., Helzer, J. E., & Davis, D. H. (1998). Conduct problems as predictors of substance abuse. Straight and Devious Pathways from Childhood to Adulthood. New York: Oxford University Press.
- Rocha-Silva, L., de Miranda, S., & Erasmus, R. (1996). *Alcohol, tobacco and other drugs use among South African Youth*. Pretoria: Human Sciences Research Council.
- Ronieanawathee, H. J. (2009). *Substance abuse amongst secondary school learners* (Master of dissertation). University University of Zululand, KwaDlangezwa, South Africa.
- Sadock, B. J., & Sadock, V. A. (2003). Synopsis of psychiatry: Behavioural science/ clinical psychiatry, 9th ed. New York. Lippincott Williams & Wilkins.

Santrock, J. W. (1998). Adolescence. McGraw-Hill, Boston, United State of America.

- Singh, H, Maharaj, H. D., & Shipp, M. (1991). Pattern of substance abuse among secondary school students in Trinidad. *The Society of Public Health*, 105, 435-441.
- Simpson, M. R. (1996). *Knowledge of safe sex practices and HIV transmission: Propensity for risk taking, and alcohol/drug use in the etiology of unprotected sex* (Masters dissertation). Rhodes University, Grahamstown, South Africa.
- Singleton, R., Straits, B. C., Straits, M. M., & McAllister, R. J. (1988). Approaches to Social Research. New York: Oxford University Press.
- Steele, C. M., & Josephs, R. A. (1990). Alcohol myopia: Its prized and dangerous effects. *Journal of American Psychologist*, 45, 921–933.
- Vundule, C., Maforah, F., Jewkes, R., & Jordaan, E. (2001). Risk factors for teenage pregnancy among sexually active black adolescents in Cape Town: A case control study. South African Medical Journal, 91, 73-80.

- Welman, A., Kruget, M. D., & Michell, A. M. (2005). *Research Methodology, 3rd ed.* Cape Town: Oxford University Press.
- Wills, T. A. & Shiffaman, S. (1985). Coping and substance use: A conceptual framework, coping and substance use. New York: Academic Press.
- Williams, P. G., Ansell, S. M., & Milne, F. J. (1997). Illicit intravenous drug use in Johannesburg: Medical complications and prevalence of HIV infection. *South African Medical Journal*, 87 7, 889–891.

CONSENT FORM

PROJECT TITLE: Perception of alcohol use and its behavioural impact upon high school learners at Makgofe Area (in Limpopo Province).

(it is compulsory for the researcher to complete this field before submission to the Ethics Committee)

PROJECT LEADER: Mohlabeng K.M

(it is compulsory for the researcher to complete this field before submission to the Ethics Committee)

I, _________ hereby voluntarily consent to participate in the following project: Perception of alcohol use and its behavioural impact upon high school learners at Makgofe Area (in Limpopo Province).

(it is compulsory for the researcher to complete this field before submission to the Ethics Committee)

I realise that:

- 2. The procedure or treatment envisaged may hold some risk for me that cannot be foreseen at this stage.
- 3. The Ethics Committee has approved that individuals may be approached to participate in the study.
- 4. The research project, ie. The extent, aims and methods of the research, has been explained to me.
- 5. The project sets out the risks that can be reasonably expected as well as possible discomfort for persons participating in the research, an explanation of the anticipated advantages for myself or others that are reasonably expected from the research and alternative procedures that may be to my advantage.
- 6. I will be informed of any new information that may become available during the research that may influence my willingness to continue my participation.
- 7. Access to the records that pertain to my participation in the study will be restricted to persons directly involved in the research.
- 8. Any questions that I may have regarding the research, or related matters, will be answered by the researcher/s.
- 9. If I have any questions about, or problems regarding the study, or experience any undesirable effects, I may contact a member of the research team or Ms Noko Shai-Ragoboya.

- 10. Participation in this research is voluntary and I can withdraw my participation at any stage.
- 11. If any medical problem is identified at any stage during the research, or when I am vetted for participation, such condition will be discussed with me in confidence by a qualified person and/or I will be referred to my doctor.
- 12. I indemnify the University of Limpopo and all persons involved with the above project from any liability that may arise from my participation in the above project or that may be related to it, for whatever reasons, including negligence on the part of the mentioned persons.

SIGNATURE OF RESEARCHED PERSON

SIGNATURE OF WITNESS

SIGNATURE OF PERSON THAT INFORMED THE RESEARCHED PERSON SIGNATURE OF PARENT/GUARDIAN

Signed at______ this _____ day of ______ 20___

KEDIBONE M MOHLABENG Discipline of Psychology Faculty of Humanities School of Social Sciences University of Limpopo Mankweng, Polokwane

My name is Kedibone M Mohlabeng. I am currently studying for a Masters degree in Clinical Psychology with the Department of Psychology at the University of Limpopo. The study I am conducting forms part of the completion of my degree. Your participation in this study is voluntary. The questionnaire consists of 4 pages. Before filling it, please read the instructions carefully. Where you do not understand please ask the researcher for clarity. Note that the answers you give are very important to me.

SECTION A: BIOGRAPHICAL INFORMATION

1.	Gender:	Male		Female	
2.	How old are you?		years old		
3.	Ethnic Language:	Tsonga	Sotho	Venda	Other
4.	Highest level of e	ducation:	Grade		

SECTION B:

(a) How often have you consumed an alcoholic beverage on average during the past 6 months?

Not	Less than once a	1 to 4 times	5 to 10 times	More than
at	month	per month	per month	10 times
all				

(b) Have you ever consumed so much alcohol that you have become very drunk?NeverOnce2 to 3 times4 to 10 timesMore than 10 times

(c) When you drink **liquor**, how many drinks, on the average, do you usually drink at any one time?

Less than 1	1 or 2	3 or 4 drinks	5 or 6 drinks	Over 6
drink	drinks			drinks

SECTION C:

Instructions

The following questionnaire contains about 10 statements. Read each statement carefully and respond according to your own perception or beliefs about alcohol.

If you think that the statements is true, or mostly true, or true some of the time, then mark (X) "Agree" on the answer sheet. If you think the statement is false, or mostly false, then mark (X) "Disagree" on the statements below.

1 = Agree

2 = Disagree

1.	Drinking alcohol makes a person feel good and healthy.	1	2
2.	Drinking alcohol makes bad impression on others.	1	2
3.	Drinking alcohol makes a person happier with him/her.	1	2
4.	Drinking alcohol makes people worry less.	1	2

1 = Agree

2 = Disagree

5.	Drinking alcohol makes people feel more alert		
		1	2
6.	Drinking alcohol helps teenagers to do their homework.		
		1	2
7.	Teenagers drink alcohol because they feel forced to do so by their peers	1	2
8.	Drinking alcohol can keep a person's mind off his/her mistakes at school.	1	2
9.	It is easier to speak in front of a group of people after a		
	few drinks of alcohol.	1	2
10.	Parties are not as much fun if people are drinking		
	alcohol.	1	2

SECTION D

The following questionnaire contains about 15 statements. Read each statement carefully and respond according to your own perception or beliefs about the impact of alcohol on behavior.

If you think that the statements is true, or mostly true, or true some of the time, then mark (X) "Agree" on the answer sheet. If you think the statement is false, or mostly false, then mark (X) "Disagree" on the statements below.

1 = Agree 2 = Disagree

1	Teenagers drink alcohol in order to get attention	1	2
2	It is hard to reason with a person who is been drinking alcohol.	1	2
3	People are more creative and imaginative when they drink alcohol.	1	2

4	People feel more caring and giving after a few drinks of alcohol.	1	2
5	People are surer of themselves when they are drinking alcohol.	1	2
6	When drinking alcohol, people do not feel in control of their	1	2
	behavior, they are apt to do something they do not want to do.		
7	When talking to people word come to mind easier, after a few	1	2
	drinks of alcohol.		
8	People feel powerful, when drinking alcohol as if they can get	1	2
	other people to do what they want.		
9	People drink alcohol because it gives them a neat, thrilling, high	1	2
	feeling.		
10	People understand things better when they are drinking alcohol.	1	2
11	People are apt to become careless after a few drinks of alcohol.	1	2
12	A person enjoys people of the opposite sex more after she/he has	1	2
	been drinking alcohol.		
13	People can control their anger better when they are drinking	1	2
	alcohol.		
14	Drinking alcohol leads students not to do their homework.	1	2
15	People have stronger feelings when they are drinking alcohol.	1	2

P.O. Box 166 Seshego 0742

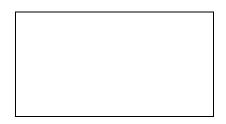
P.O.Box 1754 Makgofe

0784

RE: PERMISION TO CONDUCT RESEARCH AT MAKGOFE AREA.

This letter serves as a prof of permission granted to Kedibone Martha Mohlabeng, from the Kgoro at Makgofe or Kga Makgakga.

STAMP



SIGNATURE

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