

The Insight of Young People toward Drugs and Chemical Abuse in Zimbabwe

Brenda Palesa Makumbe¹, Prince Dzingirayi²

¹Student, Department of Social Work, Women's University in Africa, Harare, Zimbabwe

²Lecturer, Department of Psychology, Women's University in Africa, Harare, Zimbabwe

ABSTRACT

The abuse of drugs and chemicals among the young people is a silent pandemic which needs collective intervention. The young people are the pillar of development in the world over. The behavior of abusing drugs is seen as a fashion by the young people and effects has paralyzed the developmental milestones within communities. The aim of this research was to explore the insights of drugs and chemical abuse among the youth in Zimbabwe. The word chemicals has been used interchangeably with the word substance in this study. The study is a qualitative research which is backed with the descriptive research design. Data was collected from the young people from the age of 12 to 36 years through a purposive-snow balling and convenience sample since taking of some drugs is a secrete act. Thematic content analysis was used to analyze data gathered from the participants who resides in Kadoma area. The study found that there are different factors which had forced the young to participate in the uptake of drugs which are poverty, peer pressure, lack parental guidance, experimentation, genetic dispossession and depression. The study also found that young people have moved from predominately abusing marijuana alone and jump to use complex substances such as bronclee (ngoma), powder extracted from energy saver bulbs, mutoriro, mangemba, ital, tablets (white, blue and pink pill), cocaine and mangemba. The research predicts that young people can use drugs to revolt against their elders due to the influence of drugs. It was recommended to put in place strict sanction to anyone found in possession with drugs.

KEYWORDS: *Drugs, Chemicals, Substances, Abuse, Youth, Bronclee*

INTRODUCTION

Globally, the use of drugs and chemicals is now a silent pandemic amongst the young people. The youth constitutes the greater population in most communities. These young people are the productive segment and they decide the socio-economic and political status of the country. Sustainable development is anchored on the palm of the youth. This means the youth are the past, the present and the future. The youth always react differently from the comparative technological development which marred by peer influence, experimentation and media influence. Worldwide drugs and chemical abuse is the red tape of today's negative behavior exhibited by the youth. The youth in Zimbabwe has not been spared from such draconian behaviors. Young people are responding massively to the alluring promise of

today's chemical culture which seems to promise quick relief and instant gratification, popularity and an attractive peer group. The abuse of drugs has been there since time immemorial and has led to full blown addiction and side effects. Drugs and chemicals affects the psychological being of individuals and the community at large. The abuse of drugs and chemicals has exposed the young people to complex deviant behaviours such as unhealthy sexual acts, cyber-bullying, cyberporn, suicidal experimentation, complex criminal cases, parental murdering curiosity and impulsiveness, among others. These community discord has lured the researcher to conduct the study and address the gaps on insights of drugs and chemical abuse among the young people in Zimbabwe.

How to cite this paper: Brenda Palesa Makumbe | Prince Dzingirayi "The Insight of Young People toward Drugs and Chemical Abuse in Zimbabwe"

Published in International Journal of Trend in Scientific Research and Development (ijtsrd), ISSN: 2456-6470, Volume-6 | Issue-3, April 2022, pp.2062-2068,
URL: www.ijtsrd.com/papers/ijtsrd49908.pdf



IJTSRD49908

Copyright © 2022 by author (s) and International Journal of Trend in Scientific Research and Development Journal. This is an Open Access article distributed under the terms of the Creative Commons Attribution License (CC BY 4.0) (<http://creativecommons.org/licenses/by/4.0>)



Background of the study

In Zimbabwe the youth are individuals from the age range of 12-36years. Drugs has been abused for hundreds of years all over the world their effects have been felt and known. It is believed that the uptake of drugs helped the young people to be courageous and fought the colonial masters in Zimbabwe. The economic challenges and employment status of Zimbabwe has trapped the young people to participate in the abuse of drugs. The use of drugs, substance and chemicals abuse has negative impact on both the user and on the fabric of the society. Drugs and chemicals affect the body and brain. Different drugs have different effects; some effects of drugs include health consequences that are long lasting and permanent. They can even continue after a person has stopped taking the substance. According to Levy (2020) the use of tobacco, alcohol and other drugs by young people has been recognized as a serious public health problem. Young people believe taking drugs is a fashionable way of living. Many young individuals especially in artisanal prone areas such as Kadoma tend to engage in risky behaviors such as drug abuse, sexual intercourse and crime. The inappropriate use of chemicals involves both licit and illicit substances. Substances of abuse commonly include alcohol, tobacco, marijuana and cocaine this drug abuse has the most serious impact on development of youth. Adolescence is a subset of youth and is a confusing and complex period in life, a time of questioning, exploring and risk taking. Drug experimenting is becoming an increasingly prevalent part of an adolescent's rite passage.

Kadoma town is a spine for artisanal miners and is the centre for drugs and chemical trading. The artisanal miners' behavior had influenced most young people to indulge in abusing complex drugs.

Drugs are chemicals used in the treatment, cure, prevention or diagnosis of disease or to enhance physical and mental well-being (De Miranda, 1987) Furthermore, a drug also refers to chemical substances that affect the central nervous system, such as tobacco, alcohol, dagga, cocaine, and heroin. These drugs are used for perceived beneficial effects on perception, consciousness, personality and behavior. These chemical substances, both medicinal and recreation can be administered in a number of ways; orally, inhaled, injected and rectally. These substances can be legal or illegal. Chemical abuse refers to chronic chemical substance to alter states of body or mind, other than medically warranted purposes leading to effects that are detrimental to the individual's physical or mental health or the welfare of others (Rice & Dolgin, 2008).

According to WHO, (2000), it is estimated that 25% to 90% of young people especially adolescents use psychoactive substances of one form or another. Research has shown the acute rise in substance abuse due to new emerging drugs and untraceable web based trading World Drug Report (WDR), (2012; 2015). Globally, findings from the WDR (2014; 2015) indicate that people using illicit drugs have dramatically increased to a quarter of a billion in 2014 compared to 230 million in 2010, 243 million in 2012, with an escalation of 246-324 million in 2013. These range from licit drugs such as prescribed drugs, alcohol and cigarettes, to illicit drugs such as marijuana and heroin. They also use industrial products such as glue, petrol and solvents. According to Jumbe and Mwenda (2021) adolescent substance use continues to be a growing major public problem in Africa. An overall of 42% among adolescents in Sub-Saharan Africa, abuse drugs. Drug abuse among the youth in Zimbabwe has reached crisis levels and the number of youths engaging in drug abuse is increasing yearly. The average age of a first-time substance user is 12 years, which is similar to findings in European countries (Karen Lesly, 2008; Parrott, et al., 2004). The urban streets in Zimbabwe are awash with all kinds of drugs from marijuana to broncleer, Histalix, Cocaine, crystal methamphetamine (dombo), musombodhiya and all sorts of drugs just to mention few (ZCLDNA 2014). It is estimated that 60% of the youth are on illicit drugs in Zimbabwe. The Voice of Africa (VOA), in 2015 estimated that the unofficial number of substance abusers in Zimbabwe to be between 1. 2 million countrywide and also indicated that the police were recording more than 100 cases of substance abuse by adolescents every month in Harare alone while statistics from Anti-Drug Abuse Association of Zimbabwe (ADAAZ) said up to 43% of adolescents are found in possession of cigarettes in school. The Herald, dated 14 August 2014 reported that 65% Zimbabwe youths suffer from drug induced mental problems. The above supposition indicates that there is a serious crisis faced by young people which needs effort to resolve.

Types of abused Drugs and Chemicals

Young people abuse both legal and illegal drugs. Legal drugs are considered permissible for use and are either prescribed by a physician (prescription medications) or are available over the counter at a pharmacy or other outlet. They are intended for medical purpose such as to ease pain symptoms and treat health conditions to name a few pain relievers, cold and flu medicines and slimming tablets (Graig & Baucum, 2001). In addition, there are other agents such as alcohol beverages, nicotine, solvents in glue and petrol. Illegal drugs are regulated or

unlawful substances such as cocaine, crystal, methamphetamine (meth), anabolic steroids, heroin and cannabis which are usually obtained by dishonest or prohibited means (De Miranda, 1987).

The most popular substances differ between age groups. Young people tend to favor inhalant substances such as breathing the fumes of household, cleaners, glues or pens, whereas older teens are more likely to use synthetic marijuana and prescription medications particularly pain relievers.

According to Levy (2020) in modern western society substance abuse is an easy way for adolescents to satisfy the normal developmental need to take risks and seek thrills. About 70% of adolescents try alcohol before high school graduation. Due to socio economic status developing countries often tend to have more complex problems with drug abuse like alcohol, tobacco, and marijuana, use of cannabis and sniffing of glue. While in developed countries such as USA abusing of drugs is seen as socially acceptable behavior. Data from the National Institute on Drug Abuse (AIDA) and the Centers for Disease Control and Prevention (CDC) reveal high numbers of adolescents substance use in the United States (Whitesell, Bachand& Peel, 2013).

Psychological and physical effects of drugs and chemical abuse

Substance abuse poses threats to mental health and physical well-being of young people. According to Turner (2001) alcohol and drug abuse lead to teenager depression which can be debilitating and can cause teenagers to lose their ability to function successfully in schools. Turner (2001) further notes that, teenager depression increases sexual promiscuity among adolescents and the likelihood of early pregnancies leading to school drop-outs rate to those of school going age. Similarly, Andrade et al and Ramisetty et al (2006) illustrated that, adolescents engaging in alcohol and drug abuse significantly have higher rates of depression, suicide, anxiety, conduct disorder and unsafe sexual practices with multiple partners.

Prinio (2015) also noted that, substance abuse has got short term effects and these include the loss of coordination and distortion in the sense of time vision and hearing, sleepiness, reddening of the eyes, increased appetite and relaxed muscles. Jeram (2010) also noted that substance abuse increases the chances of suffering from cancer of the throat, larynx, bladder, pancreas and kidney. Similarly, Pagare (2003) states that effects of substance abuse include lung problems like burning of the lungs and tuberculosis, vomiting, cancer, death, teeth and facial problem, heart or kidney problems.

Social Effects of Drug and Chemicals Abuse

Dependence to any drugs is damaging to the individual as well to society (Alloy et al., 1996; Butcher et al., 2004). Drugs and chemical abuse does not only affect the individual, it also affects the family, friends, teachers at school and other members of the community. Adolescents abusing substances may become withdrawn, moody, irritable or aggressive. That often leads to deterioration in family, peer group, and school relationships (Parrott et al., 2004). These adolescents' academic performance drops and truancy often increases (Berk, 2007). They also end up being expelled from school due to their behavior.

Furthermore, school children who use substances often suffer from impairment of short-term memory and other intellectual faculties, impaired tracking ability in sensory and perceptual functions, preoccupation with acquiring substances, adverse emotional and social development and thus generally impaired classroom performance. Reduced cognitive efficiency leads to poor academic performance, resulting in a decrease in self-esteem and the adolescent may eventually drop out altogether. This contributes to instability in an individual's sense of identity which, in turn, is likely to contribute to further substance consumption, thus creating a vicious circle (Lakhanpal&Agnihotri, 2007).

Adolescents who abuse substances may neglect their schoolwork and even be absent from school. They are less likely to value academic achievements; they expect less academic success and in fact obtain lower grades. In addition to that, they also become aggressive towards teachers and other learners (Donald et al., 2007). Some substances are expensive, thus a need to sustain the dependence may lead to theft, involvement in violence and eventually even to organized drug-related crime. Some adolescents drop out of school and turn to other crimes such as robbery and gang-related activities to support their habit. It is also believed that over half of all murderers are committed under the influence of substances, as are rape, assault and family violence (Parrott et al., 2004; Zastrow, 2004). This adds to the danger to the adolescents and to others (Donald et al., 2007). Drugs can trigger violent reactions and users can harm themselves or others.

When teenagers depend on alcohol and other substances to deal with daily stresses, they fail to learn responsible decision-making skills and alternative coping mechanisms. These young people show serious adjustment problems, including chronic anxiety, depression and antisocial behavior, which are both the cause and consequences of taking drugs

(Simons, 2007). They often enter into marriage, childbearing and the work world prematurely and fail at them. These are painful outcomes that encourage further addictive behavior (Berk, 2007). Substance use does not only have an effect on the adolescents using them, it also has a negative effect on the lives of other people.

Economic Effects of Drugs and Chemical Abuse

Drug abuse has a negative impact on the economy of the country. This includes a range of problems such as inefficiency, impaired work performance, accidents and absenteeism at a considerable cost to both industry and society (Parrott et al., 2004). Work productivity declines.

For example, 2.5 million workdays are lost due to absenteeism arising from substance-related illnesses (Department of Social Development, 2006). Furthermore, the use of substances has a negative impact on the health care system including the depletion of scarce resources available to improve the health of people (Department of Health, 2007). Medical resources are wasted and lives are lost in substance-related accidents. A high amount of money is spent in hospitals, on prevention campaigns and in treatment centres for substance dependents (Alloy et al.).

Although most people who abuse substances do not seek professional help, people who abuse alcohol constitute a large proportion of new admissions to mental hospitals and general hospitals (Davison et al., 2004; Department of Social Development, 2006). Other costs include repairs to property damaged by addicts, food and accommodation in prisons, transportation of addicts to courts in terms of those still awaiting trial (United Nations Office on Drugs and Crime, 2008). Medication for treatment of substances is also expensive. The use of alcohol and other substances presents law-enforcement problems as well. Substance dependence is a financial burden for the country.

The adolescent not only suffers progressive physical and psychological deterioration but also loses the ability psychologically, socially and often economically to break out of the cycle of substance abuse (Donald et al., 2007). The health and socioeconomic consequences of substance use and abuse undermine democracy, good governance and has a negative impact on the country. As with alcohol, the socio-economic cost of smoking is staggering. Each year smokers compile over 80 million lost days and 145 million days of disability, considerably more than do nonsmoking peers.

Theoretical Frameworks

The social learning theory was used as the bedrock of the study. The main assumptions of the social learning theory is that drug and chemical abuse is a learned behavior which is determined by the environment. The behavior can be changed, reinforced and can also be extinction. Social learning theories focus on the interaction between the individual and the environment in shaping patterns of substance use. According to these theories, adolescents abuse substances because they have seen their parents, peers, and other people abuse substances (Carson et al., 2000). The experiences and lessons that adolescents learn from important figures in society have a significant impact on them. Children who are exposed to negative role models early in their lives or experience other negative circumstances because the adults around them provide limited audience often falter on the difficult steps they must take in life (Vega, 1993 cited in Carson et al., 2000). These formative experiences can have a direct influence on whether a youngster becomes involved in maladaptive behavior such as alcohol or substance abuse. Parents influence substance use through their attitudes, values, behavior and through the kinds of relationships they have with their children. Parents who believe that substance use is harmful, socially unacceptable or morally wrong and who convey these attitudes to their children, are less likely to have children who engage in substance use.

However, parental use of alcohol, tobacco, cannabis and other illegal substances positively correlated to the illegal use of these substances by their children (Conger, 1991). Another strong motive for experimenting with substances is the social pressure to be like friends or to be part of a social group. Unconventional adolescents tend to select deviant peers who share characteristics similar to their own personality attributes.

Aim of the study

To explore the effects and insights of drugs and chemical abuse among the young people in Zimbabwe.

Methodology and setting

The descriptive research design was used in the study to unpack the qualitative multi-perspective approach to social orientation of drugs and chemical abuse by the young people in Zimbabwe. The descriptive design was used to ensure that this study concentrates on the behaviors of young people obtained on the effects of drugs and chemical abuse. This was done through direct observation, focus group discussions and interviews from key informants until data saturation with the aim of drawing much information

as possible regarding drugs and chemical abuse. Data was gathered from both young men and females from the age of 12-36 who take drugs and chemicals. The study was conducted in areas around Kadoma town. The researcher employed the purposive-snow ball and convenience sampling to gather data from the participants. The purposive-snow ball sampling method was used since abusing drugs and chemicals is illegal hence it is secretive behavior. Thematic content analysis was used to analyse data gathered from the participants. The data was coded into themes and each theme was subjected to conversational interpretation in a way to understand the perspective of the participants.

ETHICAL CONSIDERATIONS

Ethical issues that were considered in this study are permission to collect data, debriefing, voluntary participation, informed consent, confidentiality and the protection of participants (Berg, 2001; Kerlinger & Lee, 2000; Newman, 2000; Patton, 2001; Seidman, 1998).

RESULTS AND DISCUSSIONS

The study had come out the following themes from the responses of the participants:

Causes of drug and chemical abuse

Drug abuse can be attributed to both genetic and environmental factors. The following are the factors relating to drug abuse.

➤ Poor relationship with parents and guardians

Some participants reported permissive and authoritarian parenting styles in their families, the following was expressed by the participants: *My mother is too strict; she is ok but is very strict which worries him* Participant 4. Participant 3 said *My step-father does not allow me to play he always wants me to work at home*. Participants also reported that they were ill-treated at home, for example, my parents ill-treated and beat me a lot (Participant 3); and „my mother ill-treats me, keeps on telling that she does not love me and chases me away without any reason (Participant 9).

➤ Peer pressure

Young people indicated that they started taking substances due to peer pressure. The influence of friends was articulated as a key factor. The frequency of the talk about the influence of friends was perhaps to be expected, given that peer group is frequently perceived as the major reason or cause of substance abuse among adolescents. In the following extracts, participants explained how their friends influenced them to use substances. *I used drugs because of my friends my friends introduced me to drugs, they asked me to contribute money so that we can buy marijuana*

(Participant 3) my friends told me to smoke, at first I refused but later on I joined them” (Participant 2) It was because of my friend I smoked cigarette and drink alcohol with my friends (Participant 7) my friends told me to smoke and drink alcohol (Participant 4) ; My friends convinced me to smoke dagga (Participant 2) and my friends told me to use drugs in order to forget my problems” (Participant 6). I was lonely and my friends told me to use drugs to relieve stress” (Participant 6); My friends told me not to be stressed because I will die of heart attack). I relied on my friends for care and support, thus I had no choice but to join them in using drugs.

➤ Poverty

Poverty was noted as one of the factors associated with substance abuse among young people. It must be noted that, 5 of the young people interviewed succumbed to drug abuse as a result of their levels of poverty which is so difficult to approach with a sober mind-set. Grace (*not real name*) aged 17 during the in-depth interviews has this to say:

‘I abuse marijuana in order to avoid over thinking about stressful situations at home. (Grace)

This shows that the adolescents opt to abuse substances in order to run away from the ugly reality which is difficult to embrace with a sober mind.

➤ Access to drugs either at school or at home

The means of obtaining substances varied amongst the participants. Other participants obtained money from home, whereas others used their pocket money or earned a salary that could support their substance use. In some instances their friends bought substances for them, for example, as participants explained: „I used pocket money” (Participant 3) „We contributed money with my friends” (Participant 1, 4); „We contributed money to buy dagga” (Participant 2); „If I do not have money to buy drugs, my friends bought them. I have friends who are employed; they buy alcohol for me” (Participant 4). I do part-time jobs and use money earned to buy drugs” (Participant 6); I help people to carry their groceries and use money earned to buy drugs” (Participant 8). Thus participants use various means to ensure that they have substances.

➤ Experimentation

Participants do experiment with substances during adolescent stage. They used substances in order to taste them, and to feel high. The participants reported that *I wanted to experience and have some fun by testing it* (Participant 2). *I wanted to feel happy I wanted to feel and I wanted to enjoy myself* (Participant 3). One participant reported that my cousin introduced me to drugs during school holidays

while visiting Harare (Participant 1). In addition, one participant reported that "I started on my own. I thought it was normal or right to use it" (Participant 5).

➤ Genetic disposition

There is evidence of substance use in the families of the participants. This was reported by some participants that there is someone using substances in their families: "my uncle smoke cigarette's" (Participant 2, 3); "My uncle requested me to lit cigarette for him" (Participant 3); "my uncle smokes boxer cigarette" (Participant 4); "my uncle smokes cigarette and drinks alcohol."

➤ Depression

Most of the participants reported stress as the cause for their use of substances. One of the participants reported that: "I feel stressed and I worry a lot, which stresses me a lot. I am unable to sleep" (Participant 4, 9). Furthermore, most of the participants mentioned the function of using substances as relieving stress. Other components of depression described by the young people included irritability, unrelenting anger and powerlessness. Most of the participants indicated that they had problems at home. As participants reported, "I had problems at home" (Participant, 4, 8) "my step father ill-treated me," (Participant 4).

Types of Substances Abused Adolescents

Currently young people have shifted from predominantly abusing marijuana alone to the use of emerging substances that are now available in the fashion. Some of the common identified substances include bronlee (ngoma), powder extracted from energy saver bulbs, mutoriro, mangemba, ital, tablets (white, blue and pink pill), cocaine and mangemba. (Pluddermann et al, 2007) pointed out that crystalemethy (dombo) is coming from South Africa, Cape Town.

Discussions

There is evidence of progression in the use of legal and illegal substances. Participants reported having used alcohol and then cannabis. However, unlike in other studies wherein the youth often start by taking the acceptable drugs such as tobacco and alcohol, and then proceeded to use cannabis, bronlee and dombo among others. Some participants in the current study began with hard substances such as cannabis and heroin and then go for the most socially acceptable substances like alcohol and tobacco. Participants in this study begin with both hard and socially acceptable substances.

The research found that drugs and substance abuse are being used as a scapegoat of committing crimes. It has been noted that most adolescents commit crimes

under the influence of alcohol. This is in agreement with WHO (2002) in which most adolescents are being involved in the committing of crimes in societies. They chose to perform these crimes so as to run away from reality and they use drugs to boost their bravery and courage while committing crimes. This means they commit under the influence of drugs and chemical substances.

Young people obtain substances through various ways. These range from using pocket money, doing part-time jobs, obtaining substances from their friends. In some instances, they also contribute money in order to buy the substances. This means that they do not struggle to buy substances; they have found the means to do this. Some participants even do part-time jobs to earn money to buy substances. Their intentions of doing part-time jobs are positive in that they gain working experience, but they do not use the money wisely. Furthermore, their idea of each member contributing to buy substances is not positive because it can encourage them to steal money at home in order to buy substances. As previously mentioned, friends do contribute to substance abuse, because they are the ones who will buy substances if their fellow friends do not have the money to do so. The participants also seem to abuse their pocket money. This implies a lack of responsibility by these youth, in the sense that they are not using the money provided to them for its intended purpose. They might end up growing up as irresponsible parents who will not be able to use their own salaries or money earned efficiently. As a result they may fail to provide for themselves and their own families. Parents are also giving their children money and not monitoring how they use it. This causes many adolescents to fall prey to substance abuse because they have the means to buy them. They know that their parents will not ask them how they spend their pocket money.

As mentioned previously, some of the participants were experiencing a lot of stress, and the use of substance use was the only available means to make them happy and to forget their problems. Another reason for trying substances was for fun. Adolescents in this study used substances to entertain themselves. There are no entertainment centers for the youth where these adolescents are residing; as a result substance abuse might have been the only available way of entertaining themselves. Depression also seems to be one of the reasons for substance abuse among adolescents. The findings revealed that adolescents are overwhelmed by the challenges in their own lives, their families, and the society in which they live. The majority of the participants are from poor families which makes it difficult for their

parents to provide for their needs. These adolescents become stressed if their needs are not met. This then leads them to abuse substances in order to forget their problems. They then resort to substance abuse as a way of coping with their problems, not realizing that their use of substances will not solve their problems. Instead, the use of substances aggravates their problems.

Future prediction of drugs and chemical abuse

The researcher made the following predicts if nothing has been done to assist young people who abuse the drugs as well as chemicals:

- We are going to have an uncultured generation in the next ten years from the date of publication of this paper
- The young people are going to use drugs and chemicals as Dutch courage to revolt against the elders
- Young people are going to be abused by the politicians to cause violence in communities especially towards elections
- The life-span of drug and chemical abuser is not going to exceed 40years
- We are going to have complex criminal environments such as murder, robbery, entrepreneurial motivated crimes
- We are going to lose national identity

Recommendations

The research had the following recommendations which act as the solution to the problem of drugs and chemical abuse.

- There is need to empower the young people through employment creation. Engaging adolescents in income generating projects .The school going age should be kept hostage at school so that they fail to get time to purchase the drugs. For instance school going young people should be at school from 7am to 430 pm.
- Community education and community mobilization through media influence should be in place
- Serious sanctions and penalties should be enforced especially to those found in possession of drugs.
- There is need to conduct awareness campaigns
- There is need to use technology to detect drugs and chemicals in human beings and once caught will attract serious penalties

References

[1] Alloy, L. B., Acocella, J. & Richard, R. R. (1996). *Abnormal psychology: Current perspectives*. New York: McGraw-Hill, Inc.

[2] Barnard, A., Donald, D., Lazarus, S. &Peliwe, L. (2007). *Educational Psychology in Social Context*. (3rdEd.). Cape Town: Oxford University Press.

[3] Berk, L. E. (2007). *Development through the Lifespan*. (4th Ed.). Boston: Pearson Education Inc.

[4] Botvin, G. J. (2000). ' *Preventing Drug Abuse in Schools: Social and Competence Enhancement Approaches Targeting Individual-Level Etiology Factors*. ' *Addictive Behaviors*25:887-897

[5] Burns, N & Grove, S. K. (2001). *The Practice of Nursing Research*. Philadelphia: Saunders

[6] Carson, R. C. (2000). *Abnormal Psychology and Modern life*. (11th Ed.). London: Allyn & Bacon.

[7] Craig, G. J. &Baucum, D. (2001). *Human Development*. (9th Ed.). London: Prentice Hall

[8] Davison, G. C., Neale, J. M. &Kring, A. M. (2004). *Abnormal Psychology*. (9th ed.).

[9] De Miranda, S. (1987). *Drugs and Drug Abuse in Southern Africa*. Pretoria: Van Schaik

[10] Dishion, C. J., Bahr, S. J., Hoffman, J. P., and Harmon, E. E. (2002). Parenting practices as moderators in the relationship between peers and adolescents marijuana use. *American Jour of Marriage and the Family*, 66: 163 – 178.

[11] Drug Abuse and Substance Abuse Information/Partnership for a Drug Free America (N. D) Retrieved April 15, 2008, from <http://www.drugfree.org>

[12] Jumbe, S. &Mwenda T, K (2021) *Determinants of Adolescents Substance use in Africa*.

[13] Lakhanpal, P. &Agnihotri, A. K. (2007). *Drug Abuse an International Problem: A short review with special reference to African continent*. *Indian Journal of Forensic Medicine & Toxicology*.

[14] Neuman, W. L (2011). *Social Research Methods, Qualitative and Quantitative Approaches University of Wisconsin*, Pearson, New York

[15] Parrott, A., Morinan, A., Moss, A. &Scholey, A. (2004). *Understanding Drugs and Behaviour*. United Kingdom: John Wiley & Sons.

[16] World Health Organization. (2014). *Global status report on alcohol and health*. Geneva.