

**CAUSES AND EFFECTS OF DRUG ABUSE AMONG PRIMARY SCHOOL LEARNERS IN
SHIBUYUNJI DISTRICT, ZAMBIA**

BY

MISHECK VICTOR SHIBALIKA

**A dissertation submitted to the University of Zambia in partial fulfilment of the requirements for
the award of the degree of Master of Education in Primary Education**

THE UNIVERSITY OF ZAMBIA

LUSAKA

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AUTHOR'S DECLARATION

I, **Misheck Victor Shibalika**, do hereby declare that this dissertation is my original work and that all the works of other persons used in this dissertation have been duly acknowledged; and that this work has never been presented to the University of Zambia or any other university for academic award.

Signed;

Date;

APPROVAL

This dissertation of **Misheck Victor Shibalika** has been approved as a partial fulfilment of the requirements for the award of the degree of Master of Education in Primary Education of the University of Zambia.

Examiners' Signature

Examiner 1; Dr. I.M. MULENGA

Sign;

Date;

Examiner 2; Dr. R. MAMBWE

Sign;

Date;

Examiner 3; Dr. K. KALIMAPOSO

Sign;

Date;

Supervisor; Dr. B. CHILESHE

Sign;

Date;

Chairperson of the Board of Examiners; Dr. T. NJOBVU

Sign;

Date;

ABSTRACT

The purpose of this study was to investigate the causes and effects of drug abuse among primary school learners in Shibuyunji district of Zambia. Guided by Albert Bandura's social cognitive theory, the study was qualitative in nature and relied on verbal narrative or descriptions. Four schools in the district were purposively sampled for the study and a sample of 48 participants was selected. These included head teachers, guidance and counselling teachers, learners, and parents in the four selected primary schools. The research instruments used to collect data were semi-structured interview guides and focus group discussions. Data analysis involved thematic analysis. The researcher concluded that respondents had a good understanding of the meaning of drug abuse and the challenges which came with drug abuse at school. The researcher further established that the causes of drug abuse in Shibuyunji district were peer pressure, lack of recreational activities, curiosity and amusement, lack of parental supervision, prevalence of drugs in the locality and poverty, and that the effects of drug abuse were deviant behaviour predisposing crime, drug addiction, rebellious behaviour towards authority, lower academic performance and expulsion or suspension from school. The study's recommendations were that there was great need to strengthen guidance and counseling in schools, and to enhance communication between administration and learners about the need for drug-free school environments.

Keywords; Drug abuse, primary school learners, Shibuyunji district, interventions, sensitisation.

DEDICATION

This dissertation is dedicated to my dear beloved father Mr. John James Shibalika, my late mother Enala Shibalika and my friends Maggie Bwalya Lombe and Pamela Kalenga Chipongwe for their continued support and encouragement rendered to me during the course of my study.

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ACRONYMS AND ABBREVIATIONS

AIDS	:	Acquired Immune Deficiency Syndrome
CDC	:	Curriculum Development Centre
CNS	:	Central Nervous System
DEBS	:	District Education Board Secretary
DEC	:	Drug Enforcement Commission
DMIP	:	Drug Master Plan Implementation Project
EU	:	European Union
HIV	:	Human Immuno-Deficiency Virus
MoE	:	Ministry of Education
MoGE	:	Ministry of General Education
NECD	:	National Education Campaign Division
NIDA	:	National Institute Drug Abuse
OECD	:	Organisation for Economic Co-operation and Development
OSTs	:	Opioid Substitution Therapies
STDs	:	Sexually Transmitted Diseases
STIs	:	Sexually Transmitted Infections
UTH	:	University Teaching Hospital
UNAIDS	:	Joint United Nations Programme on HIV/Acquired Immune Deficiency Syndrome
UNDCP	:	United Nations Institutional Drug Control Programme
UNODC	:	United Nations Office on Drugs and Crime
UNESCO	:	United Nations Educational Scientific and Cultural Organisation
WHO	:	World Health Organisation

CHAPTER ONE: INTRODUCTION

1.0 Overview

In this chapter, the researcher presents the background to the study, the statement of the problem and the purpose of the study. The researcher further brings out the main and specific research objectives, specific research questions, significance of the study, delimitation of the study, limitations of the study and operational definitions of terms used in the study. Finally, the conceptual and theoretical frameworks that guided this study are explained.

1.1 Background

According to Ondieki and Mokuia (2012), the issue of drug abuse has been in existence for thousands of years. It is as old as human beings and has been an integral part of most societies. Currently, drug abuse is a problem experienced by both young and old people although its impact tends to be particularly intense among young people. Chesang (2013) indicated that drug abuse is one of the top problems confronting nations today, especially among the youths who also happen to be learners. Besides that, drug abuse is not confined to young people in certain geographical areas or from particular socio-economic backgrounds but affects people irrespective of their race, political and economic standing, gender and sexual orientation, educational standing, age and place of residence (Chesang, 2013; Masilo, 2012).

The situation of drug and alcohol abuse in Africa is not very different from how it is in other parts of the world. In Zambia, like in many African countries, drug abuse has been recognised as a growing problem among adolescents (INCB, 1993), particularly 13-15-year-olds, the age at which learners are at primary school. Alcohol and marijuana (used interchangeably with cannabis) are reported to be the most abused drugs followed by volatile solvents and hard drugs such as heroin and cocaine (INCB, 1993). Much of what is known about drug abuse in Zambia comes from the Drug Enforcement Commission (DEC) reports based on institutional arrests, and counselling data and treatment records from psychiatric clinics and hospitals.

Drug abuse by adolescents does not only confine itself to homes but also in schools where learners experience independence from the authority of their parents. In recent times, teachers

have been struggling with drug-related issues of indiscipline which normally takes away a lot of teaching and learning time in schools. The reported frequencies of riots in government schools and underage patronage of bars, pupil suicide attempts, illegal abortions, school suspensions and expulsions due to non-compliance with school rules and drunken misbehaviour while attending lessons could all be pointing to the assumption that some learners indulge themselves in drug abuse. The proliferation of outlets that sell different types of drugs creates even a higher temptation for learners' involvement in drug abuse (Magnani, 2000).

The Zambian government has recognised the prevalence of drug abuse among the youths in the country. To this effect, it has taken various measures to combat the problem. For example, in 1989, the government established the Drug Enforcement Commission (DEC) under an Act of Parliament. The dual mandate of DEC was to enforce the drug law and to educate the public on the dangers of drug abuse (EU/DEC, 1999). By 1994, the National Education Campaign Division (NECD), a department within DEC, started conducting awareness campaigns through sensitisation programmes. It formulated a special school-based programme known as Institutions of Learning Programme. This was the beginning of formal efforts by government to address the issue of drug abuse in schools. The programme was carried out through the European Union sponsored Drug Master Plan Implementation Project (DMIP). The project ran between 1998 and 2001. As a result of the DMIP, drug demand reduction activities were enhanced in institutions of learning (EU/DEC, 2001).

In 1996, the Zambian education policy, 'Educating Our Future', spelt out the issues of health education in schools. Although it did not make direct mention of drug issues, it spelt out that the curriculum for basic and high school education should address among other issues, health education and personal well-being, social and moral education by integrating some aspects of these issues in major subject areas. Co-curricular activities and guidance and counselling services were some of the strategies proposed in which psychosocial issues could be addressed (MoE 1996).

The current situation is that the Ministry of General Education (which has jurisdiction over primary education) has included aspects of anti-drug abuse facts into the school curriculum

and have in some schools established guidance and counselling departments which deal with, among other things, drug abuse issues. In addition, through the Institution of Learning Programme, the Drug Enforcement Commission (DEC) conducts awareness campaigns among pupils on the dangers of drug abuse.

Despite all the measures that government has undertaken to abate drug abuse in schools, the vice has continued to rise. For example, even with the minimum legal drinking age of 18 years, many adolescents below this age have continued abusing alcohol. Juveniles as young as nine years have been patronising drinking places and illegally consuming intoxicating liquor. Underage drinking in Zambia is on the increase and is perpetuated by bar owners who do not abide by the law that restricts all those who are below the age of 18 from consuming alcohol (Kangwa, 2019). Notwithstanding the prevalence of drug abuse among school children in Zambia, little is known about the causes and effects of drug abuse among learners in primary schools in Shibuyunji district. To aid the design and implementation of effective public health interventions, there is a need to investigate the causes and effects of drug abuse among primary school learners. The health, social and educational consequences of drug abuse have been raised concerning whether the drug abuse school-based preventive strategies used are working or not hence the need to investigate the causes and effects of drug abuse among primary school learners in Shibujunji district because no research has been done on drug abuse among primary school learners in the district so far.

1.2 Statement of the Problem

Stakeholders (parents, learners, and teachers) play an important role at various stages of the planning, implementation and evaluation of substance abuse interventions. It is therefore, important to get and understand their views about the causes and effects of drug abuse in the country as well as their opinions on the strategies for developing effective and sustainable drug abuse interventions in the country. Studies carried out in Zambia, such as Masiye and Ndhlovu (2016), show evidence of drug abuse among youths and pupils in schools. However, up to now, very few studies have been conducted on the views of stakeholders in the country on the matter of drug abuse, particularly in rural areas and among primary school-going learners. Therefore, a paucity of information exists and hence it is not known what views

stakeholders have concerning the causes and effects of drug abuse among primary school-going learners in rural areas. In the absence of such studies, there is no framework for making decisions on matters related to the development of drug abuse control interventions in the country. If measures to stop learners from abusing drugs in primary schools in Shibuyunji district are not put in place, it may lead to continued poor performance and high dropout rates among learners. Furthermore, if drug-abusing learners are not helped early in life, drug abuse may lead to damage that may be difficult or impossible to reverse later in life.

1.3 Purpose of the Study

The purpose of the study was to investigate stakeholders' views on the causes and effects of drug abuse among primary school learners in Shibuyunji district of Zambia.

1.4 Research Objectives

The following objectives were formulated for the study;

- (a) To establish stakeholders' views on drug abuse by primary school-going children in Shibuyunji district.
- (b) To determine the causes and effects of drug abuse on primary school-going children in Shibuyunji district.
- (c) To determine the strategies for developing effective drug abuse interventions for primary schools in Shibuyunji district.

1.5 Research Questions

The study will be guided by the following research questions;

- (a) What are the stakeholders' views on drug abuse by primary school-going children in Shibuyunji district?
- (b) What are the causes and effects of drug abuse on primary school-going children in Shibuyunji district?
- (c) What strategies can be used to develop effective drug abuse interventions for primary schools in Shibuyunji district?

1.6 Theoretical Framework

This study was guided by Albert Bandura's social cognitive theory (Bandura, 1986). The theory puts emphasis on acquisition of social behaviours through the observation of other people's behaviours in a social context. According to Bandura, behaviour change is influenced by mainly three things; environment, people and behaviour. Observing other people engage in behaviours that seem attractive lead to the desire to engage in the same behaviour. The theory emphasises cognitive processes that promote learning of behaviours. Apart from cognitive processes, acquisition of a behaviour also depends on the environment and the behaviour itself. This means that people determine the behaviour they wish to acquire, but they are also influenced by environmental factors. The environment includes both physical and social. The social environment includes people that learners frequently get into contact with.

People whose behaviour, example, or success is imitated by other people are called role or social models (Gauntlett, 2002; Chileshe, 2018). In the social cognitive theory, Bandura postulates that role modeling affects behaviour acquisition and shaping of the behaviours in the society. Pupils who engage in drug abuse, most likely learn the behaviour from the role models who could be their parents, other adults, teachers, peers and celebrities in the community. In case these role models get involved in drug abuse, the pupils may desire to engage in such behaviour too.

According to Turner (1991), children look up to a variety of role models to help them shape how they behave in school, relationships or when making difficult decisions. For many children, the most important role models are their parents and caregivers. Apart from being role models, parents may want to help their children choose positive role models. Children may also copy the behaviour of adults from the society where they come from because children always look up to elders as role models. Therefore, whatever elders do may be taken as a sacrosanct by the children. If there are adults or people with good behaviour in society who do not take alcohol or smoke marijuana, the children may emulate that positive behaviour from such elders and may become responsible members of the community or society.

Children also look up to their teachers. Teachers follow learners through each pivotal stage of development. Because teachers spend six to eight hours daily with learners, they are poised to become one of the most influential people in the learners' lives. After their parents, children will thus first learn from the teacher. A school is, therefore, as much a place of social learning as academic learning. It is incumbent, therefore, upon teachers to portray good behaviour to the learners. Apart from parents, adults and teachers, children also learn from their peers. Peers can act as conduits of information as well as desired behaviour. In this way, peer supporters act as positive role models who have the ability to create the basis for preferred normative social behaviour, attitude and beliefs (McDonald et al., 2000). Lastly, children may also try to copy the behaviour and appearance of celebrities such as athletes and entertainers, and characters from books, television, movies and video games.

Evident from the preceding paragraphs is that role models can either be positive or negative. Positive role models are individuals who have achieved outstanding success; they are widely expected to inspire others to pursue similar excellence (Lockwood, Jordan & Kunda, 2002). Negative role models, on the other hand, may also influence children's behaviour and that sometimes widely admired public figures can make poor personal choices. Turner (1991) asserted that young children may assume that the behaviours of negative role models are typical, safe and acceptable. It is, therefore, imperative for parents and caregivers to intervene by recognizing that role models who embrace inappropriate behaviour, violence, and gender stereotypes, and drug and alcohol abuse are not acceptable. By exposing young people to positive role models and providing the knowledge and skills needed to avoid risk and problem behaviours such as drug abuse, parents and care givers can reduce risk or problem behaviours as well as help children to maintain and improve their health and well-being (Burmester, 2002; Visser, 2004; Turner & Shepherd, 1999).

The social cognitive theory is relevant to this study because it forms the basis for studying the factors that determine the development of behaviour among learners. According to the theory, behaviour change is influenced mainly by three factors; personal factors, social factors and environmental factors. This helps the study to focus on these three factors when trying to explain the behaviour of the primary school children who were studied. The theory focuses the study on the environment where the learners come from, such as their homes and the

schools which they attend. It also focuses the study on people (parents, other adults, teachers, peers) who interact with the learners (that is, people who might be the role models to the learners). Moreover, this study connects well with Albert Bandura's Theoretical Framework because it relates to school children's behaviour in schools. Lastly, the theory focuses the study on the behaviour of the learners, for example, their curiosity to do risky activities which make them vulnerable to drugs and drug abuse.

According to Ormrod (2014), the social cognitive theory is one of the first theories to identify social and environmental factors as having an impact on learner motivation. The theory has both strengths and weaknesses. One of its strengths is that it is a comprehensive theory that takes human behaviour, cognition and environment into account. It also addresses how reinforcement and punishment as well as self-efficacy effect motivation and how an individual will work to attain goals. The theory also focuses on the importance of self-regulation in learning. However, the theory has the weakness that it does not address full complexities of human differences beyond acknowledging that they exist. For example, the theory does not focus on personality traits, biological differences, mood, etc., when explaining behaviours and their associated cognitive processes. It is also a loosely organised theory with few research-based systematic procedures or protocols to follow in the classroom.

1.7 Conceptual Framework

The conceptual framework for this study is drawn from Chambers model. Chambers (1983) argued that certain types and extents of deprivation experienced at particular points in life during early childhood, can lead to damage that is difficult if not impossible to reverse later in life. According to Chambers, there is evidence to suggest that the longer poverty and unfavourable environment lasts, the more difficult it becomes to escape. For example, in the U.S.A, people who have been in poverty and unfavourable conditions for more than four years have a 90 percent probability of engaging in drug abuse (Yaqub, 2002). It can be argued, therefore, that if drug-abusing learners are not helped early in life, drug abuse can lead to damage that is difficult or impossible to reverse later in life. To help learners who are abusing drugs requires to first identify the causes (or factors) of drug abuse, the effects of the abuse, and the interventions that are required to curb the vice. The ultimate result is moving from

drug-abusing primary schools to drug-free primary schools. This conceptual framework is represented schematically in Figure 1.

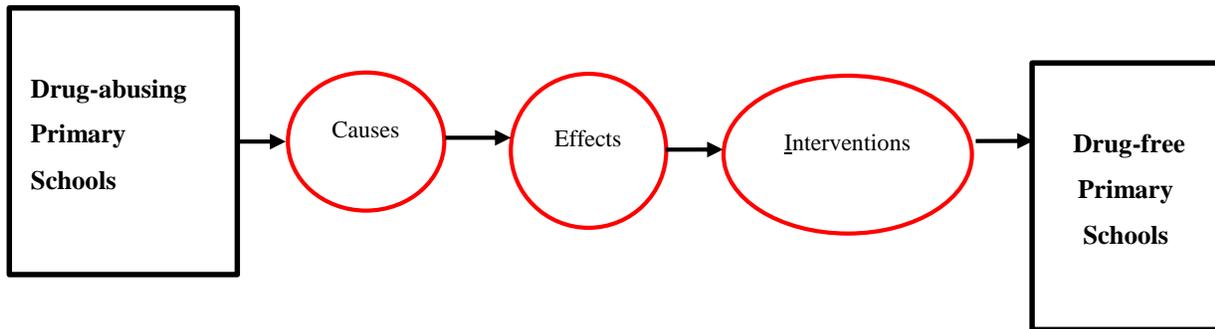


Figure 1; Schematic representation of the conceptual framework.

This conceptual framework underscores the need to pursue strategies that can prevent hazardous consumption of drugs by primary school learners. It identifies and addresses the risk factors associated with drug abuse.

1.8 Significance

The significance of the study is that the findings might influence some changes in the way learners, parents and teachers view drug abuse among primary school learners. Through the various views from the parents, teachers and the learners themselves, policy direction may be changed to suit the challenges of drug abuse learners, parents and teachers are going through. The Ministry of General Education may use the findings of the study to find out ways of preventing drug abuse through enlightened campaigns in schools, promotion of awareness on the dangers of drugs and how drugs affect an individual, the family and society at large.

1.9 Delimitation

The study was conducted in Shibuyunji district of Central Province and was only confined to four (4) selected primary schools. Further, the study only limited to the views that stakeholders had about the causes and effects of drug abuse among primary school-going learners in Shibuyunji district.

1.10 Limitations

This study and its findings were subjected to certain limitations. First, drug abuse is a sensitive issue in the Zambian society. Activities related to drug abuse are done with a lot of secrecy. Therefore, some respondents such as pupils in the primary schools that were surveyed were not willing to admit to drug abuse fearing to be exposed to society. For this reason, Connell et al. (2010) asserted that results of the analyses based upon adolescent self-report of sensitive behaviours, such as drug abuse, may raise questions about the validity of such reports. Available evidence, however, indicates that adolescents generally provide accurate reports of drug use (Harrison, Haaga, & Richards, 1993). Further, since the study was limited to four public primary schools in Shibuyunji district, the findings may not be generalised to all primary schools in Zambia but may only apply to the schools surveyed or other schools with similar characteristics.

Despite these limitations, it is expected that this study will contribute information to the views of stakeholders on the causes and effects of drug abuse.

1.11 Operational Definition of Terms

In the context of this study, the following concepts were given operational definitions;

Abuse: Usage levels that have short-term acute personal or social consequences.

Drug: Any substance which, when ingested by a living organism, alters one or more of its physiological functions. They include, but not limited to, alcohol, tobacco, marijuana, inhalants, pain medications, and other hard drug use.

Drug abuse: This is the sporadic or persistent excessive use of any substance for any reason other than its acceptable medical use. Such use is normally unacceptable to the society and dangerous to the individual as well as society.

Drug dependence: Repeated drug taking that usually results in a person needing drugs to function.

Legal/licit drug: A drug socially accepted and readily available.

Prevalence: The magnitude of drug use among a particular population.

Peer pressure: Tendency to conform to the values and expectations of the peer group.

Stakeholder: Any person, or group of people, who has an interest in and may be affected by the educational process taking place in schools in Shibuyunji district.

Substance: Any material or drug that produces changes in mood, thinking, feeling, and/or behaviour that can cause dependence. The three commonly used psychoactive drugs are alcohol, cigarette and marijuana.

Substance Abuse: An excessive use of addictive substances especially when such consumption or misuse of a substance is not for therapeutic purposes but rather for the purpose of altering the normal functioning of the mind and body.

Substance use: A broad term that covers taking of all substances within which there are stages such as substance free (that is, non-use), experimental use, recreational use, and harmful use.

1.12 Summary

In this chapter, the researcher has provided an introduction to the study and gave the background and stated the problem. The researcher has also noted that, although stakeholders play an important role at various stages of planning, implementation and evaluation of substance abuse interventions, very few studies have been done in Zambia on the views of stakeholders on the matter of drug abuse. The researcher therefore, notes the need for such a

study in Shibuyunji district in order to forestall poor performance and high dropout rates among learners which have been characteristic in other areas (Njeri & Ngesu, 2014).

CHAPTER TWO: LITERATURE REVIEW

2.0 Overview

In this chapter, the researcher covered a review of literature related to the study. The chapter consists of the following; causes of drug abuse, effects of drug abuse and the interventions to drug abuse among primary school learners.

2.1 Concepts of Drugs and Drug Abuse

A drug is defined as any natural or artificial substance, other than food, that by its chemical nature alters the structure or function of a living organism (Oakey & Charles, 2017). Gerrard et al. (1999) defined a drug as any chemical entity or mixture of entities other than those required for the maintenance of normal health (like food and medicine), the administration of which alters biological function and possibly structure. Ike (2009) introduced an element of danger to those who consume drugs in his definition. He described drugs as harmful and that they alter the organic functions and behaviour of those who take them. The definition given by the New Book of Knowledge (1992) puts emphasis on the pharmaceutical use of drugs that they are substances used to treat or prevent disease, to relieve pain, to help control mental or physical ailments, and even to help diagnose illness. From these definitions, it can be concluded that a drug is a chemical substance which can be taken by people for various purposes, medicinal or non-medicinal, and can either be beneficial or harmful to the people ingesting it. In the context of this study, drugs will be taken to include tobacco, cannabis, alcohol and illicit substances such as narcotics.

Drug abuse is defined as the misuse of drugs, be it legally or illegally, by taking them in excess thereby altering the body system. Instead of functioning normally, the body begins to operate abnormally. Joseph (1998) defined drug abuse as the harmful use of a drug when it is not prescribed by a medical doctor. Similarly, the World Book Encyclopedia (2002) defined drug abuse as the non-medical use of a drug that interferes with a healthy and productive life. These definitions appear to restrict themselves to pharmaceutical drugs and use for pharmaceutical purposes. However, some of the drugs normally abused by youths in Zambia may not fall into this category. The drugs include alcohol, particularly opaque beer (*Chibuku*) and locally

brewed wines and whiskies (*utuujilijili*), cigarettes and marijuana (cannabis). The youths may also abuse stimulant drugs (such as amphetamines), narcotics (such as opium and heroin), depressants (such as barbiturates), hallucinogens (such as lysergic acid diethylamide), and inhalants (glues and aerosol) (Coastal Post online, 2005). The term ‘substance abuse’ is broader than the term ‘drug abuse’ because not all abused chemicals are drugs (Ndambuki, 2003).

Riggs (2003) postulated that drug abuse occurs at all social and economic levels of society, from the wealthy to the impoverished, and among young people as well as adults. However, when the subject of drug use comes up, it is often in relation to young people. This is because, for young people, use, even in moderation, constitutes abuse. Furthermore, the World Youth Report (2003) provided two reasons why the use of drugs by youths is topical. The first reason is that it is during the younger years that most substance use begins. At this stage, the young want to experiment on what they see elders do in their communities; they also want to show their peers that they are courageous and are not afraid of drugs. According to the report, if a person has not begun to use alcohol, tobacco or an illicit substance during this period, it is unlikely he or she ever will. The second reason is that young people in almost all countries tend to use substances to a greater extent and in riskier ways than do older people, and this behaviour can result in significant problems in the short- and long-terms. After years of continued use of drugs, young people develop a condition called drug dependence. This can be psychological, physiological, or both. Adolescence and young adulthood is, therefore, a critical period in the children’s lives where they need positive role models and close guidance by adults.

Connell et al. (2014) identified four patterns of drug use, namely non-users, experimenters, occasional users, and frequent users. These patterns provide a useful scheme which can be adopted by this study to classify drug users among primary school learners in Shibuyunji district. Furthermore, literature shows that drug abuse has both causes and effects (Mugo, 2005). Therefore, the sections that follow will review literature on the causes and effects of drug abuse among school-going children.

2.2 Causes of Drug Abuse among Learners

There are many causes or predictors of drug abuse among learners. According to Evans and Bosworth (1997), young people use substances for many of the same reasons that adults do, that is, to relieve stress or heighten enjoyment. However, there are some reasons for use that arise from needs specifically related to adolescent development. Those cited by literature include curiosity, peer pressure, family factors, genetic disposition, availability and affordability of drugs, mass media and advertising. Others include the desire to take risks, demonstrate autonomy and independence, develop values distinct from parental and societal authority, and seek novel and exciting experiences. In this section, the researcher reviews literature on these causes of drug abuse among learners.

2.2.1 Curiosity

Some learners abuse drugs out of curiosity, that is, the urge to try something new. This means that they like to taste and see what they will look like after use. It is actually this anxiety which develops the urge in them to want to have a feel of these drugs and what they can do to them. Unfortunately, at the end they become addicts and start to experience the effects related with drug abuse (Kilonzo & Mbatia, 1996). In a survey carried out in Budapest in 2003 with a sample of secondary school learners, 75.8% of the respondents said they first tried illegal drugs out of curiosity (Paksi & Elekes, 2004). This is a significantly high percent. Related to curiosity is lack of basic knowledge about the effects and dangers of consuming drugs (Passer, 2001). Because of lack of knowledge, young people are easily influenced by their peers to experiment with cigarettes, alcohol and other harmful substances. Regrettably, many young people are highly influenced by their peers and mimic their behaviours.

2.2.2 Peer pressure

Azuz (2012) asserted that young people may be under pressure from family or friends to perform beyond their capacity in any field related to academics, sports or winning over friends and under the false impression that drugs may help them. Learners in schools may influence their peers that when they take drugs, they become intelligent and perform better in class. Hence, young children in primary schools fall into the vicious cycle of drug abuse. In their

study of secondary school learners in Kisii District of Kenya, Ondieki and Mokuia (2012) found that peer influence played a major role in learners' use of drugs with 45% of alcohol users and 33% of the smokers having copied the habit from their friends. Similarly, a study by Griensven et al. (2001) among vocational school students in Thailand indicated that 21% of female participants and 6.5% of male participants reported that they had been coerced (either physically or mentally) into sexual contact or intercourse.

Peer pressure has frequently been identified as a cause of initial drug abuse. This is where friends and associates encourage their friends to engage in drug taking and such encouragement often appears to be an important precursor of drug abuse because individuals need to become convinced that drugs are safe, attractive, beneficial or prestigious before they engage in using them. This gives them moral departure from anti-drug to drug use and ignore what they have been told by their parents and other authority persons, about not to use drugs because they are dangerous to their health (Kilonzo & Mbatia, 1996). Therefore, peers can be negative role models to primary-school-going learners. In this regard, parents and guardians should always be aware of the kind of friends their children mingle with. Involvement in delinquent or antisocial behaviour also increases the likelihood of drug use during adolescence (Farrell et al., 2005).

2.2.3 Family Factors

According to Kalpana and Kavya (2008), drug abuse has also been attributed to adverse family problems, particularly broken homes and early separation of parents. Parents and families play a critical role in supporting the development of their children (Bray et al., 2001). Parental monitoring of children's behaviour and strong parent-child relationships are positively correlated with decreased drug use among learners (Adlaf & Ivis, 1996). Conversely, studies have documented an association between low levels of closeness with parents and drug use among adolescents and young persons (Adebisi, Owoaje, & Asuzu, 2008; Ary et al., 1999). Kalpana and Kavya (2008) asserted that poor socialization process where children are socialised with adults who abuse drugs can cause drug abuse. If elders such as parents and grandparents in the family engage in drug abuse, young people in that family are more likely to start abusing the same drugs or a different substance. In this case, adult

members of the family act as negative role models. Similarly, Nasibi (2003) asserted that breakdown in social structure of society, which includes the family and its role of inculcating morals to young ones, has contributed to drug abuse. Likewise, Ondieki and Mokuu (2012) posited that some families are characterised by issues of immorality, spiritual emptiness, lack of direction and purpose in life among other problems. When children are socialised by such families, it becomes easy for them to start abusing drugs.

2.2.4 Genetic disposition

Kalpana and Kavya (2008) also alluded to the fact that one of the factors which cause individuals to abuse drugs is genetic predisposition. Predisposition is the capacity that humans are born with to do certain things. This implies that genes from parents are carried from one generation to another and that means genetics plays a factor in some form of drug abuse, especially alcohol. According to literature, scientists estimate that genetics make up about 40 to 60 percent of someone's risk for developing addiction; the remaining 40 percent is attributed to environmental factors (Szalavitz, 2015). The following quotation from Szalavitz aptly summarises the importance of genetic disposition; *One drunkard begets another, wrote the Greek philosopher Plutarch nearly 2,000 years ago, demonstrating the age-old wisdom of the observation that alcoholism runs in families* (para. 1). Drug abuse can also result from self-medication through use of psychotropic drugs used to treat anxiety and depression of which opiates give ready relief from pain (Kalpana & Kavya, 2008). For instance, in Thailand, opium is used for remedy of cough, diarrhea or depression although the regular use of such leads to addiction.

2.2.5 Easy availability and affordability

Many theoretical perspectives emphasise the ready availability of drugs within the adolescents' community as a risk factor for engaging in drug use (Connell et al., 2010). Factors like relatively easy availability and affordability of drugs may push young people into drug abuse. If the drug is cheap and available, most adolescents can afford. Alcoholic drinks, especially home-brewed ones, and cannabis can be quite cheap and readily available to school-going children. In the study by Ondieki and Mokuu (2012), the availability of the drugs

was found to be associated with the use. Alcohol, the most used drug, was found to be the most available.

2.2.6 Mass Media and the Advertising Industry

Coombs (2002) stated that drug-glamorising industries, such as the entertainment media, music, fashion paraphernalia and advertising play a large role in drug abuse addiction. All these industries glamorise the drug lifestyle making it attractive and appealing as high life especially to young people (Ondieki & Mokuu, 2012). Commenting on the findings of their study in Kenya, Ondieki and Mokuu (2012, p. 470) stated that,

drug advertisements were found to have struck a positive first impression among the students. Most students got the impression that it was fun to use the drugs. Precautionary messages on the commercials went largely unnoticed.

Similarly, in the World Youth Report 2003 (United Nations, 2004) it was explained that an unprecedented level of access to media by youth worldwide has meant that more young people than ever are “consuming” a globalised, Western-dominated pop culture that tends to tolerate substance use. The tobacco and alcohol industries have added to this environment by utilising their powerful marketing capacities (especially advertising) to influence young people.

2.2.7 Social Factors

Apart from family factors, conditions in the larger society also play a role in drug abuse among young people. This point has been argued by the World Youth Report 2003 (United Nations, 2004). One such factor is that substance use, once frowned upon, has found increasing acceptance in many regions of the world. Thus, society has become tolerant of drug abuse. Also, the youth living in societies where life is difficult (for example, in depressed communities in the developing world and poor neighbourhoods in developed countries), a group often termed “especially vulnerable”, tend to use drugs to relieve the pressures deriving from difficult circumstances, which may include physical or emotional pain or neglect, violence, homelessness, and sexual abuse. For such teenagers, then, what may be required would be food, stable housing, more jobs, more education and more scholarships rather than more prevention programmes focusing on risk behaviours. According to the World Youth

Report 2003, these observations underscore the importance of building on “protective” factors rather than focusing only on reducing risk factors in prevention work.

The factors discussed in this section point to many reasons why learners indulge in drug abuse. What was unknown was whether these factors are the prevalent causes of drug abuse among primary school-going learners in Shibuyunji district.

2.3 Global Causes of Drug Abuse

Drug abuse is a widespread global problem, especially among the youth. Literature shows that the problem is significant in several countries. Alcohol, tobacco and cannabis have remained the substances most commonly used by youth around the world (World Youth Report 2003). The causes of drug abuse may vary from continent to continent as well as country to country. At continental level, research has also shown that Australia, Europe and the United States of America have reported a significant increase in drug abuse among school-going adolescents and youths. It is reported that drug abuse during adolescence is common and the reasons driving these adolescents to abuse drugs include curiosity, experimentation, amusement, reducing stress and sense of maturity. Apart from that, other reasons are peer pressure, drug addict parents and economic reasons which drive adolescents to engage in drug abuse.

At country level, a study done in Nepal, a country in Asia, reported that the causes of drug abuse in that country were psychological, socio-cultural, peer pressure, school and college stresses, and mass media (Azuz, 2012). In addition to these, learners reported bad relationship with family, to feel relaxed, failing in exams and film stars and idols which are shown on television as causes for drug abuse. In Malaysia, findings indicated that the common drug abuse behaviours in schools were smoking, consuming alcohol, using marijuana and glue sniffing (Blandford, 1998).

King'endo (2015) studied the behaviour disorders displayed by secondary school learners in Kenya as a result of substance abuse. Using questionnaires to collect data, she interviewed learners and teachers about drug abuse practices and the factors that led learners to abuse drugs. The responses from the learners revealed that there was no drug abuse programme in schools and learners addicted to drugs were not attended to. The teachers revealed that they

did not have any training on drug abuse problems and lacked skills and knowledge to deal with drug related behaviour disorders among learners. Another study in Kenya was done by Muthikwa (2016). She examined the effects of drug abuse on primary school pupils' academic performance in Kakuma Refugee Camp, Turkana County, Kenya. One of the objectives of study was to determine the degree of drug and substance abuse among primary school pupils. The findings indicated that primary school-going learners generally abused alcohol, tobacco, bhang and khat. The causes cited for drug abuse were parental influence, the influence of extended family members, idleness, availability of drugs in schools, and peer influence. This study is particularly important to the current study because it addresses drug abuse among learners in the primary school sector.

In Kenya, like in the United States of America, alcohol use was the most prevalent “drug of choice” among high school learners (Connell et al., 2010; Ondieki & Mokuu, 2012). But differences also exist among countries. For instance, Olumide et al. (2014) noted that available data for low- and middle-income countries revealed that adolescents often used socially acceptable and affordable substances such as alcohol, cigarettes and legal substances such as inhalants and cough syrup. For China, however, studies showed that there was a rise in injection drug use among youths, which correlated with increased rates of HIV among them.

Tshitangano and Tosin (2015) studied the prevalence of substance abuse amongst rural secondary school learners in Limpopo Province of South Africa. Contrary to the majority of research findings, their finding was that rural secondary school learners in South Africa had a low prevalence rate of substance abuse. However, they still recommended the need for a counselling programme in each school to provide support and refer drug-abusing learners to appropriate institutions for rehabilitation.

Obot (1990) asserted that drug abuse has become a significant problem on the African continent. As early as the 1990s, Obot's study showed that the most abused drugs in many African countries were alcohol and cannabis. A more recent meta-analysis study by Olawole-Isaac et al. (2018) still showed a high use of these drugs, although cocaine and heroin had been added to the problem in some countries. Obot attributed the expanded drug problem to drug trafficking in countries like Nigeria. The same reason was reported by Ondieki and

Mokua (2012), who asserted that international drug peddlers had invaded Kenya, bringing in all sorts of drugs into the country.

The causes of drug abuse on the continent are similar to global causes. Ashikoya and Ali (2005) attributed use of drugs among adolescents to many reasons including curiosity, feeling good, reduction of stress and to just feeling grown up. For Kenya, Ondieki and Mokua (2012) stated that drug abuse could be induced by peer pressure, curiosity, personality traits, age and accessibility and affordability.

For the entire sub-Saharan Africa, Olawole-Isaac et al. (2018) found that parental factors had a significant influence on adolescent use of substances and recommended appropriate guidance and counselling in the proper use of drugs, and holistic policies that might discourage unnecessary substance and alcohol use among parents and adolescents.

2.4 Causes of Drug Abuse in Zambia

Studies done in Zambia have shown that learners do take drugs (for example, Haworth, 1982; Sizya, Rudatsikira & Muula, 2007; Masiye, 2016; Masiye & Ndhlovu, 2016; and Kangwa, 2019). Drug abuse among learners in Zambia is caused by several factors, including peer pressure, curiosity, as well as the traditional belief that when one takes drugs, they become intelligent and perform better in class (Masiye, Ndlobvu & Kasonde, 2012). Masiye and Ndhlovu (2016) studied drug abuse among basic and high school learners in Livingstone, a town located in the southern region of the country. Among the causes of drug abuse that these two scholars found were peer pressure, personal and emotional problems propelled by poor parent-child relationship, and availability of cheap drugs and alcohol in the community. This study also established that parents, siblings and other adults served as role models for drug abuse among pupils. Another study by Kangwa (2019) was conducted to investigate the factors that contributed to alcohol abuse among school-going learners in secondary schools Lusaka Urban. This study revealed having parents and family members that drink, lack of parental involvement, poor self-control, having friends that drink, peer pressure, stress and depression as the major contributing factors.

A survey carried out by the Zambia Global School Health Survey (2004) showed that alcohol consumption among school going children was high. The prevalence of alcohol use among learners then (that is, drinking at least one drink containing alcohol on one or more of the past 30 days) was 42.6%. The study further revealed that 36.4% of the learners were 13 years or younger when they had their first drink of alcohol other than a few sips; 26.5% were 13 years old or younger when they first tried marijuana or hashish. This age indicates that most of these learners were probably at primary school when they started using these substances.

Difficulty exists in trying to compare data on drug abuse among school-going learners from different regions of the world. UNODC (2018) explained that the paucity of drug use survey data from different regions, as well as the different measures of prevalence and age groups used in the surveys available, make it difficult to construct a global comparison of drug use between countries. According to the World Youth Report 2003, national student drug-use data that are recent and reasonably comparable are available only from Australia, Europe and the United States. There is, therefore, need for studies like this one in countries like Zambia which tend to lag behind in the provision of learner drug-use data. Furthermore, most of the studies available (e.g., Florenzano et al., 1982; Achalu & Duncan, 1987; Ondigo, Birech, & Gakuru, 2019) are on secondary school- and college-going learners, and not primary school-going learners. Therefore, a gap exists in the literature which needs filling up.

2.5 Effects of Drug Abuse

According to Babbie (1983), there are short and long term-term effects of drug abuse. Short-term effects are those that appear only a few minutes after the intake of drugs. The drug abuser feels a false sense of well-being and a pleasant drowsiness. They may experience distorted vision, hearing and coordination, impaired judgment, and have bad breath and hangovers. Drugs also have long-term effects that lead to serious damage on human health due to constant and excessive use. These effects show over a course of time and are usually caused by progressive damage to different body organs, causing impairment of both physical and mental functioning. The sections that follow review literature on the effects of drug abuse.

2.5.1 Effects on Learning

According to Nyakenmwa (2016), young people who persistently abuse drugs often experience cognitive and behavioural problems which affect their academic performance. These problems include hand tremours (which make writing difficult), declining performance, absenteeism from school, undone school work as well as increased potential for dropping out of school (Azuz, 2012). Drug abuse among the youth is also associated with a low level of commitment to education and higher truancy rates. Furthermore, the use of cannabis is associated with a decline in intelligence quotient scores before age 18 years (Das et al., 2016). Apart from learning problems that the drug-abusing youths cause upon themselves, they may also cause problems for other learners. Nyakemwa (2016) posited that drug-abusing learners present obstacles to learning for their classmates through acts of disorderly behaviour and violence in the classroom. Outside the classroom, drug abusing learners may disturb the maintenance of an orderly and safe school atmosphere conducive for learning. They may also destroy school property, an act which is also an obstacle to learning.

2.5.2 Effects on personal health

Poor health and safety are other effects of drug abuse, where the psychoactive drugs affect the central nervous system and act by altering a person's feelings, thoughts and behaviour. Drug abuse can lead to compromised quality of life and several long-term physical ailments, including loss of appetite, stomach ailment, skin problems, liver (cirrhosis), heart and central nervous system damage, and memory loss (NIDA, 2007). Drug abuse can also weaken the immune system and make the learner more vulnerable to acquire infections.

Drugs act by directly affecting the brain or the central nervous system (CNS) leading to various health complications and behavioural problems. Injuries due to accidents (such as car accidents), physical disabilities and diseases, and the other effects of possible overdoses are among the health-related consequences of youth drug abuse. For example, Yi, Williams, and Dufour (2001) noted that 20 percent of all traffic crashes of 16- to 20-year-olds in the United States of America involved alcohol. Apart from that, disproportionate numbers of youth

involved with drugs face an increased risk of death through suicide and homicide (Passer, 2001). This reduces the life expectancy of these young people.

Reviewed studies show that drug abuse can also lead to health situations such as HIV/AIDS and sexually transmitted diseases (STDs). Although drug abuse in itself is not a cause of these conditions, young people who are under the influence of drugs may engage in risky behaviours, such as unsafe sex or sharing needles that make them more susceptible to these infections and unwanted pregnancies (The Awake Magazine, March 27, 2003; Olumide, et al., 2014). For example, in the study of vocational students in Thailand mentioned earlier, Van Griensven et al. (2001) reported worrisome drug use and sexual behaviour. Only 15 per cent of male and 10 per cent of female students reported consistent use of condoms with their most recent steady partner. This correlated with high rates of alcohol and methamphetamine use, which may have caused poor judgment. The transmission of HIV/AIDS primarily occurs through exposure to body fluids of an infected person during sexual contact or through sharing of unsterile drug injection equipment. In China, a rise in injection drug use among youths correlated with increased rates of HIV infections among them (Wu, 2002). According to NIDA (2007), injection of drugs such as heroin, cocaine, and methamphetamine accounted for about 12 percent of new AIDS cases. Although the rates of AIDS diagnosis appeared to be relatively low among teenagers, compared with most other age groups, it is likely that many young adults with AIDS were actually infected with HIV as adolescents. This is because AIDS has a long latency period before symptoms appear. Apart from exposure to contracting HIV/AIDS and STDs young girls can also be exposed to unanticipated pregnancy.

Ultimately, drug abuse can lead to death. Existing studies have found that accidental and intentional fatalities that are associated with drug use represent one of the leading preventable causes of death for the 15 to 24-year-old population (NIDA, March 23, 2017; Chakravarthy, Shah, & Lotfipour, 2013). At high doses, some drugs can cause seizures, coma and death. The young drug abusers may die suddenly from an overdose when they take too much for the body to bear. According to the CDC Wonder (cited in NIDA, January 29 2019), more than 70,200 Americans died from drug overdoses in 2017. Eventual death can also result when the young abusers contract HIV/AIDS, as observed in the preceding paragraph.

2.5.3 Effects on mental health

According to UNDCP (1995), mental health or psychiatric problems such as depression, developmental lags, apathy, withdrawal and other psychosocial dysfunctions are frequently linked to drug abuse among adolescents. Drug abuse can lead to brain abnormalities, slowed thinking, and impaired learning and memory. Studies show that drug-abusing youths are at higher risk than non-users for mental health problems, including depression, conduct problems, personality disorders, suicidal thoughts, attempted suicide and suicide. Marijuana use, which is prevalent among youth, has been shown to interfere with short term memory, hearing and psychomotor skills. Motivation and psychosexual emotional development also may be involved. The abusers may have compulsion to take the drugs on a continuous or periodic basis, in order to experience the effects, and sometimes to avoid the discomforts of its absence (Matowo, 2013). School-going children, on the contrary, need to be of sound mind if they are to perform well at school.

2.5.4 Effects on peer relations

Silver (1984) posited that drug abusing youths are often alienated from and stigmatised by their peers. He asserts that adolescents using drugs also often disengage from school and community activities, depriving their peers and communities the positive contributions they might otherwise have made. Similarly, Blandford (1998) asserted that learners who abuse drugs develop poor relationships and behaviour towards their colleagues and teachers.

Furthermore, in addition to personal adversities, the abuse of drugs by youths may result in family crises and jeopardise many aspects of family life, sometimes even resulting into family dysfunction. In this case, both siblings and parents are profoundly affected by drug involved youth and can drain a family's financial and emotional resources (Silver, 1984).

2.5.5 Effects on social and economic well-being

According to Babbie (1983), many of the families with a drug user also have difficulties in running the day-to-day activities of the house, as the available resources are spent on drugs rather than on basic needs, and could lead to debt. Consequently, this has a great psychological

impact on other family members and leads to a disturbed emotional and psychological state among family members, which in turn affects their level of happiness and psychological stability. The social and economic costs also result from the financial losses and distress suffered by drug-related crime victims, increased burdens for the support of adolescents and young adults who are not able to become self-supporting and greater demands for medical and other treatment services for these youths.

According to Babbie (1983), drug abuse influences not only the individuals but their families and communities. The person who gets addicted often loses interest in other activities be it school, job or any other responsibility. Consequently, they are not able to take care of their responsibilities and may become a liability for their families. It is also expensive to buy drugs on a regular basis, hence, in desperation, addicted individuals may be forced to engage in petty crimes to raise money needed to buy their drugs.

2.5.6 Effects on personal growth

According to Charles and Alexander (2007), drug abuse can retard the growth and development of children; when they become addicted to drugs, children drop hormones which affects their height and weight as well as late secondary growth such as menstrual periods in girls and low sperm count in boys. Drugs may also affect adolescents and young adults more quickly than adults. This is because adolescence is the time of brain development and the inadvertent short-term and long-term biological consequences of drug exposure during adolescence can create harm and a long-term vulnerability to future drug effects. These long-term changes maybe at the root of drug abuse problems well into the adult years.

2.5.7 Involvement in crime

Drug-abusing learners may engage in different crimes like rape, public nuisances and petty thefts. Most children are at schools with new friends and making friendship with boys and girls. Therefore, the use of alcohol and drugs by children can mess them up in many ways. For instance, when they are under the influence of drugs, boys and girls can jump into action too fast without making any judgment whether it is bad or good as they are driven by self-

esteem. Here, they can lie, cheat and lose interest in schooling and other activities (Drug Commission Report, 2005).

For learners, drug abuse can lead to poor academic performance in class, low concentration, indiscipline and violence, failure to do assignments and high dropout rates. According to Azuz (2012), young people who persistently abuse drugs often experience an array of problems, including academic difficulties, health-related problems (including mental health), poor peer relations and there are consequences for family members, the community and the entire society. These are the effects that this study will document concerning drug abuse among primary school children in Shibuyunji district.

2.6 Global Effects of Drug Abuse

The use of various drugs is a widespread phenomenon among learners worldwide and is increasing at an alarming rate (Sahu & Sahu, 2012). Babbie (2003) alluded to the fact that young people, particularly school-going children, are becoming the largest hostage of the threat of substance abuse and their vulnerability is increasing gradually.

In India, drug abuse has become a large phenomenon affecting all segments of society (Babbie, 1983) and has become an issue of national importance. Concerns have focused not only on the physiological and behavioural impact of drug abuse on the youths but also on the public health hazards. The increasing production, distribution, promotion and availability of drugs together with the changing values of society, has resulted in rising drug abuse related problems emerging as a major public health concern in India. Sociologists, social workers, psychiatrists, mental health professionals, educators and politicians are ever more identifying drug use and abuse as a critical public health problem. However, despite attempts to limit access to psychoactive substances by young people, the use of such substances continues to be common among both adults and adolescents (Babbie, 1983).

In Kenya, a study by Njeri and Ngesu (2014) among secondary school learners found that drug abuse caused poor performance and development of aggressive behaviour among learners. These effects made it difficult for such learners to concentrate on studies or even interact with fellow learners and teachers. Similarly, Okari (2018) studied the effects of drug

abuse among secondary school learners in Masaba North Sub-County, in Kenya. His findings were that drug abuse led to school dropouts, strained relationships with other learners, lack of interest in studying, truancy, and low concentration span. Other effects were health problems, such as anxiety, headaches, feeling sleepy and confusion, leading to academic decline. In Tanzania, a study carried out by Masenga (2017) showed that drug abuse had a negative impact on the academic performance of learners and that class attendance for learners who were involved in consumption of drugs was observed to be poor.

Kaluwe (2019) studied the effects of drug abuse on pupils' academic performance, a case study of one of the primary schools in Windhoek, Namibia. Her findings were that drug abuse led to crime, violence, poor academic performance, school dropouts, corruption and drainage of resources that could be used for social and economic development. The World Health Organisation report on drug abuse in southern Africa showed that negative consequences were common traits of substance use (WHO, 2003). These included sexual violence (for example, rape), physical violence, criminal activity, neglect of social responsibilities, disease, injury and loss of life. Harmful effects occurred with any psychoactive substance use and early initiation was found to be associated with an increased risk of developing addiction and adulthood dependence.

2.7 Effects of Drug Abuse in Zambia

In Zambia, not many studies have been conducted on the effects of drug abuse on school-going children. However, a study conducted by Kasonde, Ndlobvu and Masiye (2012) explained that the effects of drug abuse in Zambia are almost similar to other parts of the world. Like elsewhere in the world, drug abuse results in the youths involving themselves in all kinds of vices and suffering from the consequences of abusing drugs. For example, learners in schools would get involved in unsafe behaviour with their colleagues. Consequently, this leads them into losing concentration on academic work and other activities.

The results of the studies cited in this section all show that drug abuse is real among school learners and can have a detrimental effect on them. However, it is clear again that most of these studies have concentrated on learners in institutions of learning that are higher than the

primary school. This presents a gap which necessitates a study such as this one, focusing on the views of stakeholders on the causes and effects of drug abuse among primary school learners.

2.8 Interventions for Drug Abuse Among Primary School Learners

Adolescence represents a period of increased experimentation and use of alcohol, tobacco, and other drugs (CDC, 2006). Young people are an obvious and important focus for prevention because the period between being a child and being a young adult is when most people are initially exposed to drugs, and when they are most likely to initiate use. Scholars, such as Das et al. (2016) and King'endo (2015), have proposed several interventions against drug abuse among learners. The remedies include sensitisation, guidance and counseling, recreation and anti-drug clubs, establishing close family relationships with the learners, and punishing offending learners. According to Passer (2001), prevention of drug abuse may be achieved by paying attention to these interventions. Therefore, this section discusses the various interventions that have been proposed.

2.8.1 Educational interventions

Sensitisation, guidance and counselling are referred to as educational interventions. Such interventions can be family- or classroom-based and can be used to teach young people an array of ideas and skills. According to Fischer (2015), the interventions can be used to correct young people's misconceptions about common drug use and how to handle peer pressure. Guidance and counselling helps to counsel the learners who are involved in drug abuse as well as sensitising them on the dangers of drugs to their well-being (Masiye & Ndlovu, 2016). By being aware of the implications of drug abuse and developing skills to manage peer pressure, learners can manage peer pressure. Passer (2001) asserted that young people should also be educated to recognise that a friend is someone who cares, protects and looks after the welfare of their friends rather than coerce or initiate them into unhealthy habits. Empowered with adequate information and skills, young people should be able to decide that it is their body, their life and hence, they should be making well informed and responsible decisions. In addition to saving themselves from adopting risky behaviour under peer pressure, learners

will also persuade their peers not to engage in unhealthy behaviours such as drug abuse. As habits related to smoking, drinking and abuse of other substances are formed during preadolescence and early adolescence, this is an important age to invest in prevention efforts.

2.8.2 Recreation

Recreation is yet another intervention. There is need to have social and recreational activities which can keep learners busy and distract them from bad vices such as drug abuse. Recreation, including sport and clubs, can be used to divert learners from drug abuse. According to Jhanjee (2014), participation in sports is beneficial to youths as it transmits social values. There are other potential benefits for young people involved in sport, including improved academic performance, increased self-esteem, as well as the ability to manage stress better. Nevertheless, youth involvement in sport has both positives and negatives associated to drug abuse. The positive side of it points to the fact that participation in sports among youths serves as a protective factor against drug abuse whereas the negative side points to the fact that youths who are involved in sports programmes are more likely to abuse drugs (United Nations,2002). Sport has been utilised as an intervention strategy for drug abuse prevention and has a direct bearing on the physical well-being of individuals who abuse substance in rehabilitation programmes. Sport can generate self-esteem and build character for youths known to be abusing substances which may not be possible through educational achievements or other forms of social support (Jhanjee, 2014).

Masiye and Ndlobvu (2016), who have studied drug abuse among learners in Zambia, explained that clubs, such as anti-drug abuse, anti-AIDS, debate, drama and wildlife conservation, can help to sensitise the learners on the dangers of drugs and, together with sport, can help to keep the youths busy with activities that distract them from bad vices such as drug abuse and others.

2.8.3 Family Factors

Another intervention is to establish close family relationships with the children where parents would have to monitor the children to ensure that they do not engage in drug abuse. Coombs et al. (1991) cited in Ondieki and Mokuia (2012) conducted a comparative study on 225

adolescent drug users and an equal number of abstainers in Kenya. Their study revealed that drug-free children not only felt closer to their parents but considered it important to get along with them. On the other hand, the drug users bore such characteristics as loneliness, rejection, isolation and constant punishment. Ondieki and Mokuu (2012) also suggested that parents and guardians should be informed during the teachers' and parents' meetings that their use of drugs could be copied by the children. This would help the parents to refrain from using drugs.

Furthermore, interventions do not exclusively or specifically focus on drug or alcohol abuse; they aim to develop pro-social behaviour and social skills more generally. They have benefits beyond the reduction of drug abuse, such as the reduction of violence and mental health problems. Additionally, the interventions aimed at drug abuse prevention for which supportive research evidence exists are the strengthening family programme for young people aged 10-14 years and their parents, and social or life skills training (Alfonso, 2011).

2.8.4 Reward and punishment

Social cognitive theory addresses how reinforcement and punishment work to attain social goals. Behavioural research has shown that both incentives (disincentives) and rewards (penalties) can exert a powerful influence on behaviour (Bolderdijk, Lehman, & Geller, 2012) and that offering a reward for a behaviour can increase the behaviour's frequency and contribute to organisational success (Gneezy, Meier, & Rey-Biel, 2011; Armstrong, 2013). Therefore, offering a reward to drug-free learners can reinforce this behaviour while instituting punishment on drug-abusing learners may deter this behaviour. Similarly, enforcing rules and regulations can also prevent and mediate risk behaviours such as violence and drug abuse (Jhanjee (2014). Behavioural research has documented how adequate rules and regulations contribute positively to the formation of good behaviour among learners (Heimlich & Ardoin, 2008). Ondieki and Mokuu (2012) are of the view that parents and schools should deal firmly with learners found to use drugs. According to them, government should also revise the regulation on the minimum age for alcohol consumption considering that there are learners in high school who are well above 18 years of age.

There have been counter-claims concerning the effectiveness punishment and reward. One of them is that reinforcement and punishment may not always work because people usually despise to be coerced into doing something. According to Handy (1993), coercion makes people feel belittled and powerless, and they don't like that. In addition, some individuals have a tendency to ignore reinforcement contingencies because they lack self-confidence, the perception of whether or not they have the ability to bring about change through their own behaviour (Baumeister, 1999; Millet, 2005). Gruskin et al. (2001) also noted that penalties associated with the use of drugs can be harsh, and users often become more marginalised in their communities. The general stigma surrounding drug use can be a significant barrier to reaching and helping these young people and may very well contribute to more problematic use (World Youth Report 2003).

2.8.5 Limiting availability of drugs

Limiting the availability of drugs is an environmental intervention that can be used to prevent abuse of drugs by school-going children. If it's not available, it cannot be used. However, even where drugs are available, those who sell them should not supply the drugs to young children. Fischer (2015) asserted that, ideally, preventive interventions should stop young people from starting use, but they can also delay initiation of drug use and prevent young people from becoming regular and dependent users.

2.8.6 Ecological approach

According to Bertrand (2013), ecological approaches have efficacy across different forms of drug abuse. Opioid substitution therapies (OSTs) are the most extensively studied and controversial forms of treatment. An OST is a type of harm reduction initiative that offers people who are dependent on opioids (such as heroin) an alternative prescribed medicine, which is swallowed rather than injected (Avert, 2019). There is strong evidence that OST is effective in enabling people reduce or cease injecting drug use, greatly reducing their risk of HIV infection (MacArthur et al., 2012; UNAIDS, 2016); it also helps to avoid swings between intoxication and withdrawal (Bertrand, 2013). The initiatives are usually taken under direct supervision, especially during the early stages of treatment. These forms of treatment can

enable young people to establish a healthier life style, which for some individuals is the main benefit of the treatment while for others, having a healthier life style can lead to sustained abstinence from the use of illicit drugs.

According to Leavell and Clark (1965), the public health sector distinguishes between primary, secondary and tertiary prevention. The aim of primary prevention is to ensure that a disorder, a process or a problem does not develop. Secondary prevention is aimed at recognising, identifying or changing a disorder, a process or a problem at the earliest possible point in time. The aim of tertiary prevention is to stop or delay the progress of a disorder, a process or a problem and its consequences, even if the underlying condition continues to exist. This study established the kinds of intervention schools are undertaking in the study area.

2.9 Global Interventions to Drug Abuse

The Good Behaviour game, a classroom behaviour management approach delivered in some primary and elementary schools in the United States of America and some countries in Europe when children are between 5 and 7 years, has reported positive outcomes 15 years after interventions, when young people were aged between 20 and 21 years (Alfonso, 2011). The good behaviour game is a game where learners who portray good behaviour in class are used in a game as role models by showing to their colleagues in class why it is important to behave well in school, class and outside the classroom. The game is usually done in form of drama and involves four to eight learners who are used as role models. Alfonso (2011) asserted that beyond primary interventions prevention, research from several countries, such as Brazil, Australia, India and the United States, has examined the secondary prevention of drug abuse, based on screening and brief intervention in primary care and other settings. He further asserted that brief intervention in a clinical arrangement can reduce cocaine and heroin abuse, even without meaningful contact with the treatment system.

Interventions used in Africa to prevent drug abuse are not very different from the other parts of the world. In Nigeria and other Western African countries, prevention comes in different forms, ranging from school programmes to community-based interventions, and mass media as well as social marketing approaches (Azuike, Dirisu & Oni, 2012). Prevention programmes

tend to target adolescents by highlighting the dangers of drugs, provision of accurate information, improving self-esteem and teaching skills to resist peer pressure. Other approaches are said to be based on non-drug focused strategies which target the overall development of the child and which seem to have impact on anti-social behaviour, drug abuse, and overall health educational performance.

In South Africa, there are many intervention strategies implemented to address drug abuse among young people (UNODC, 2014). These are nearly developmental strategies, harm reduction approaches, therapeutic communities and brief interventions. Developmental strategies seek to reach individuals at different age groups or developmental phases. The most effective of developmental interventions are the ones that are delivered during early childhood with messages relaying the harms of drug abuse as well as the interventions aimed at capacitating young people to resist social influences of initiating substance use. Harm reduction approaches, on the other hand, specifically target risky patterns of drug abuse or the environments in which it occurs. These interventions seek to mitigate the harm caused by drugs. When addressing substance use among young people, a combination of harm reduction strategies and early brief interventions are considered to be effective. Therapeutic communities, such as traditional residential rehabilitation programmes, are long term approaches to providing skills and developing attitudes that help drug abusing individuals make long-term substance free style changes. Brief interventions are effective intervention approaches for problematic substance use among young people due to the fact that young people who are at risk or abuse drugs are identified quicker and interventions following the screening allow for behaviour modification. Brief interventions work especially well for alcohol abuse and maybe just as feasible for reducing young people's abuse of tobacco, cannabis and methamphetamine.

2.10 Interventions to Drug Abuse in Zambia

The interventions to drug abuse in Zambian schools may not necessarily be different from other parts of the world. Masiye and Ndlobvu (2016) studied drug abuse among secondary school learners in Zambia. Their study revealed that preventive strategies in Zambian secondary schools ranged from anti-drug clubs, guidance and counselling, recreation, life-

skills training, and punishing the offenders by law, among others. Sixty-two percent of the learners who participated in the study acknowledged that these efforts had led to increased knowledge about drug abuse and its effects among the learners. However, the study does not specify whether this increase in knowledge was accompanied by behaviour change. As late as 2018, there were no in-patient substance abuse treatment centres or radio and television programmes to raise public awareness of treatment options for substance abusing young people (Akiba et al., 2018).

Masiye and Ndlobvu (2016) recommended several interventions for abating drug abuse in schools. One of the recommendations is that school-based drug prevention should be based on more interactive strategies and that providers of drug abuse preventive education should teach pupils more of drug refusal skills in combination with social life skills. Further, teachers and peer educators should receive training in drug abuse preventive education while DEC officers should provide drug abuse preventive education to schools on a regular basis. This will require increased funding to National Education Campaign Division of DEC to enable it to use research evidence-based strategies. Such recommendations need to be followed up by studies such as the current one.

The Ministry of General Education (MoGE) has been working in liaison with the Drug Enforcement Commission to conduct preventive education in schools (Drug Enforcement Commission Report, 2007). Further MoGE has infused aspects of anti-drug abuse facts into the school curriculum and has established guidance and counseling departments in some schools, which deal with, among others, drug abuse issues. The Drug Enforcement Commission, through its Institution of Learning Programme, conducts awareness campaigns among learners on the dangers of drug and alcohol abuse. It would be interesting to find out, through this study, what all these efforts by different stakeholders have yielded.

2.11 Research Gap

An accurate understanding of the nature and extent of drug abuse by young people is critical to the development of evidence-based responses (United Nations, 2004). Yet, extant literature shows that there is still inadequate information from different regions of the world,

particularly developing ones, on the scourge (UNODC, 2018). Within developing countries, investigations have tended to concentrate on youths in urban areas, even though rural youths also take part in drug abuse and need appropriate interventions. Most of the literature reviewed in this study shows that few studies have been done on drug abuse among primary school learners in Zambia. As pointed out above, studies like Masiye and Ndhlovu (2016), were conducted among basic and secondary school learners, and in an urban setting. Clearly, the contexts in which primary school learners in a rural area find themselves are quite different from those obtaining among secondary school learners in an urban area. Therefore, there was need to investigate the stakeholders' views on the causes and effects of drug abuse among primary school learners in Shibuyunji district of Zambia.

2.12 Summary

In this chapter, literature which is related to this study was reviewed. The researcher delved into what literature says about the causes, effects and interventions of drug abuse among school-going children. The researcher noted that most of the causes and effects of drug abuse among adolescent school-going children are the same across the world, and therefore, the interventions are also more or less the same. However, the literature showed that most of the studies done so far have tended to concentrate in urban areas; rural areas, such as Shibujunji district, have little been studied although learners are likely to abuse drugs even in those areas. This constituted a gap which this study sought to explore.

CHAPTER THREE: METHODOLOGY

3.0 Overview

In this chapter, the researcher devoted to specifying the steps and the methodology that was taken in carrying out the research. The researcher spelt out the research paradigm, research design, study population, sample size, as well as data collection and analysis procedures.

3.1 Research Paradigm

The qualitative research methodology approach was employed in this study to provide insights into the causes and effects of drug abuse among primary school learners in Shibuyunji district. Qualitative research approach was chosen for this study because it enabled the researcher to carry out the study in its natural environment based on its relevance on research strategy that is flexible and interactive (Kombo and Tromp, 2006). It allowed the researcher to in-depth data from Head teachers, guidance and counselling teachers, learners and the parents in Shibuyunji district since qualitative research is concerned with what goes on in social settings to understand the social phenomenon (Mulenga, 2015).

Qualitative method deals principally with verbal data which helped the researcher in understanding social phenomenon from the participants' perspective, thereby developing a deeper understanding of the phenomenon under investigation, as it allowed the researcher to probe further in order to get more insights of the problem. Qualitative method was adopted specifically for this study as it allowed for a detailed and intensive analysis of the nature and complexity of the subject matter.

3.2 Research Design

The descriptive research design was employed in this study. According to Griffith (2001), a descriptive research design is devoted to the gathering of information about prevailing conditions or situations for the purpose of description and interpretation. The descriptive research design helped the researcher to accurately and systematically describe the views of the stakeholders in the study area concerning the causes and effects of drug abuse among primary school children.

This involved first observing and recording the views of the stakeholders which were then tabulated, analysed and interpreted. The design enabled the researcher to make comparisons (for example, with existing literature) and identify trends and relationships in drug abuse by the learners. The results helped to gauge stakeholders' opinion about the problem and the interventions that should be undertaken.

Being qualitative in nature, the study relied on verbal narrative or description. This approach helped the researcher to clearly describe the underlying causes, motivations, and effects of drug abuse among the learners in the study area.

3.3 Study Area

The study was done in Shibuyunji district of Central Province in Zambia. The district is largely rural, although it is only a few kilometres from Lusaka, the capital city of Zambia. The area was picked purposively because, hitherto, no research has been conducted on drug abuse among primary school learners in the district. Yet, adolescents residing in rural communities like Shibuyunji are at significant risk of drug use. Christie and Viner (2005) explained that these adolescents have high rates of impulsivity because of their age, and therefore a proclivity to engaging in risky behaviours. Apart from that, poverty and instability in disadvantaged communities lead to significant amounts of stress that, when compounded by limited access to health information, could result in an increased tendency to use substances (World YOUTH Report, 2003).

3.4 Target Population

Scholars have defined a target population as an entire group of people, events or objects which has common desirable characteristic, from which a sample to be used in the study is taken from, and to which researchers are interested in generalizing their results (Mugenda and Mugenda, 1999; Creswell, 2005; Kombo & Tromp, 2006a). In this study, the target population comprised all the head teachers, guidance and counselling teachers, learners, and parents in the four selected primary schools in Shibuyunji district.

3.5 Sample Size

According to Jackson (1999), a sample size is a group of people, events or objects chosen from a larger population with the aim of yielding information about this population as a whole. The total sample size for this study comprised 48 participants as follows; four guidance and counselling teachers (one from each of the participating schools), thirty-two learners (eight

	Student Group (n = 32)		Parent Group (n = 8)		Guidance Teachers (n = 4)		Head Teachers (n = 4)	
Male	Female	Male	Female	Male	Female	Male	Female	Male
Age range	14–16	14–16	40–60	40–60	30–60	30–60	40-60	40-60
Interview	-	-	3	5	2	2	1	3
Focus group discussion	16	16	-	-	-	-	-	-
No. of participants (%)	16 (50)	16 (50)	37.5	62.5	37.5	62.5	25	75

from each of the four sampled primary schools), eight parents from the local communities (that is, two from each selected primary school) and four head teachers. Four schools in the district were also purposively selected because they are located in areas suspected to be affected by drug abuse among learners. For the purpose of a qualitative survey, this sample size was reasonably adequate.

Table 1; Participant characteristics.

Guidance teachers were included because they keep records of information about learners suspected to be involved in drug abuse. Head teachers were also included because they are the school managers and are, therefore, in a better position to know the behaviour of their learners, and the difficulties that schools experience as a result of drug abuse. The 32 learners were included because learners constitute a group of key stakeholders and provided pertinent

information about the causes and effects of drug abuse among primary school children, and the solutions. Additionally, for the purpose of focus group discussion, a cohort of 32 learners was sufficient, that is 8 from each of the 4 selected schools. Finally, parents were included in this study because they play a crucial role in supporting the development of their children, and can provide insightful information about what takes place at home.

3.6 Sampling Techniques and Procedure

Sampling procedure refers to how subjects, respondents or participants are to be selected from the target population for observation (Mugenda & Mugenda, 2003). In this study, the researcher used quota sampling to select thirty-two (32) learners. Learners were randomly selected from all the grades with the help of guidance teachers. This was done in order to have a balanced sample of learners from the schools. The sampling procedure was used to ensure inclusion of both male and female learners in the sample (Fouske, 2002). It was important that the two genders (male and female) were represented in the sample so that views could be obtained from both groups. The exact number of boys and girls could only be determined after their proportions in the populations of the four schools were known. The four schools in the district were also purposively selected because they are located in areas suspected to be affected by drug abuse among learners. With the help of the guidance teacher in each school, the researcher selected learners depending on their ability to provide useful information. Inclusion of learners in the study was crucial because there had been instances in which young people had questioned observations made by adult informants about issues which affected the youth (United Nations, 2004).

The study used convenience sampling to select parents to participate in the study. This means that the researcher selected parents who were easy to reach or find (Given, 2008). This approach was necessary because it was not possible to get a list of all the parents who had children at the four selected schools. Even if the list was to be provided, some parents would not have been accessible for various reasons, such as living long distances away from the schools.

Expert purposive sampling method was used to select head teachers and guidance teachers from the sampled schools. This means that this category of participants was intentionally selected to provide information on how and why learners were involved in drug abuse and the interventions that schools were undertaking. This was in line with the proposition by Creswell and Plano (2007) that, in purposive sampling, the researcher intentionally selects individuals and sites which are rich in information.

3.7 Description of Research instruments

Research instruments are tools that the researcher uses in collecting necessary data (Kasonde, 2014). In this study, two types of data collection instruments were employed and these were focus group discussion and semi structured interview guides.

3.8 Focus Group Discussion Guide for Learners

Focus group discussion involves interacting with participants who share certain characteristics relevant to the study. Persons of the same social status who have the same level of understanding and experience are selected. However, there must be thorough planning and careful facilitation in order to avoid some members of the group dominating other group members during an interview session so as to encourage equal participation from all group members (Mulenga, 2015). In this study, a focus group discussion guide was used to collect information from learners on drug abuse among primary school learners in Shibuyunji district. The groups comprised eight learners from each of the four selected primary schools. Of the eight learners from each of the four selected primary schools four were boys while the other four were girls.

3.9 Focus Group Discussion Guide for Parents

In this study, focus group discussion guide was used to collect information from parents on drug abuse among primary school learners in Shibuyunji district. The groups comprised three parents from each of the four selected primary schools bringing the total number of parents from the four selected primary schools to twelve.

3.10 Semi- Structured Interview Guide

Semi- structured interviews are non-standardized and are frequently used in qualitative studies to answer research questions in detail. Kasonde (2014) noted that the researcher would have a list of key themes, issues, and questions to be covered. In this type of interview, the order of questions can be changed depending on the direction of the interview and additional questions can be asked.

The choice of the method was based on Bryman (2004) who articulated that, if one wanted to understand people's world and their life, she/he should talk with them. Interviews helped the researcher to understand the respondents' point of view and experiences. The method was considered relevant for this study because the researcher looked at respondents as people who had unique experience. The interview helped the researcher to collect data from participants with the real lived experience. It enabled the researcher to learn about guidance teachers' and Head teachers' feelings and experiences. Apart from that, it also enabled the researcher to learn about the guidance teachers' and Head teachers' feelings and expectations. The researcher used this instrument to collect data from guidance and counselling teachers and head teachers respectively. The researcher sought permission from participants to have responses recorded. This accorded the researcher a chance to have a verbatim response as well as hand written responses by the researcher for the purpose of cross checking and verifications of responses.

3.12 Semi-Structured Interview Guide for Head teachers

A semi-structured interview guide was used to conduct interviews with all head teachers of the sampled schools to collect information on drug abuse among primary school learners in Shibuyunji district. The method was chosen as it allowed the researcher to probe further for more clarifications on the topic as Mulenga (2015 stated that the advantage of semi-structured interviews is that it can give greater depth than a questionnaire, because the researcher can probe or encourage respondents to elaborate their answers and also can cross check information.

3.13 Semi-Structured Interview Guide for the Guidance and Counselling Teachers

A semi-structured interview guide was used to conduct interviews with the Guidance and Counselling Teachers to collect information on drug abuse among primary school learners in Shibuyunji district. The researcher used this interview to find out from the Guidance and counselling Teachers the strategies that had been put in place to curb drug abuse among primary school learners in Shibuyunji district. The researcher also endeavoured to enquire if there were any challenges the schools were faced with in as far as drug abuse was concerned among school learners.

3.14 Data Collection Methods

The following research instruments were used to collect the necessary data; semi-structured interviews and focus group discussion. The semi-structured interview guides were used to interview the head teachers, guidance teachers and the parents while the focus group discussion was used to get information from the learners.

3.15 Data Collection Procedures

Data collection procedures entails setting the boundaries for the study and collection of data as well as the steps taken in gathering information to answer research questions (Creswell, 2007). In this study the researcher got clearance from The University of Zambia Ethics Committee before data collection. The researcher sought an introductory letter from the Assistant Dean Postgraduate in the School of Education at the University of Zambia to take to the District Education Board Secretary for Shibuyunji district and the head teachers for the selected primary schools where research was done.

This was done to facilitate data collection in the field. It was to enable the researcher to interact with the head teachers and guidance and counselling teachers without interference. The researcher further got consent from participants and research instruments were administered. The researcher then decided with the head teachers on the convenient day to have an interview with them. Another visit was made to make arrangement with the guidance and counselling

teachers for a possible day to conduct an interview with them. Data analysis procedure is described in the next section.

3.15.1 Data Analysis procedure

Data analysis in the qualitative model comprises three levels of activities, which are: data reduction, data display and conclusion drawing or verification (Miles and Huberman, 1994). However, in the process of analysing qualitative data there is no single methodology which is universally applicable for the purpose of analysis of qualitative data, what determines the methodology are the research objectives Ghosh (2013).

From the onset of data collection, the researcher began to familiarise with the information collected by listening to the interview recordings time and again or repeatedly as well as reading through data carefully while taking note of themes or codes. Data was then summarized according to what was heard in terms of common words, phrases, themes or patterns which helped the researcher in understanding and interpretation of the data. This helped the researcher to assess how major categories were related to each other and their subcategories. Then selective coding was done with the intention to bring together the themes identified in the data to determine how they were related to one another.

The researcher, therefore, used different methodologies of data analysis and these were thematic and content analysis. In an effort to make sense of the data collected in terms of participants' explanations or definitions of the situation, noting patterns, themes, categories and regularities as explained by Cohen, Manion and Morrison (2007), data was then organised, accounted for and explained according to participants' views, values, feelings and experiences in an attempt to construct their understanding of the phenomenon. The analysed data was interpreted by identifying the emerging patterns, concepts and explanations from the participants where the researcher closely examined the interview and group discussion data to identify common themes-topics and patterns of the meaning that came up repeatedly in relation to the theory that was adopted for this study, the reviewed related literature in chapter 2 and the newly found knowledge. The data was presented using verbatim quotations from the participants. The use of verbatims was useful to give participants a voice (Corden & Sainsbury, 2006).

Consideration was also given to whether or not qualitative data could be represented using descriptive statistics. Therefore, for each of the causes, effects and interventions, the verbal data was quantified, that is, the narrative descriptions were transformed to numerical values to determine which cause, effect, or intervention was most frequent. This data was then presented in form of tables and graphs.

3.15.2 Trustworthiness

In qualitative research, credibility, dependability, transferability, conformability and authenticity are used to describe what characterizes the aspects of trustworthiness of data (Patton, 1990). Creswell (2007) observed that eight procedures of trustworthiness prolonged engagement and persistent observation in the field; triangulation and multiple sourcing of data; peer review and debriefing for external checks; negative case analysis; clarifying of researcher bias; member checking; thick description; and external audits. Since in qualitative studies researchers do not use instruments with established metrics to determine validity and reliability, trustworthiness is used to establish it (Bless and Achola, 1988). In this study, trustworthiness focused on credibility, dependability and conformability of the study.

3.15.3 Credibility

Credibility is defined as the confidence that can be placed in the truth of the research findings (Kombo and Tromp, 2006). This ensures that the research findings are true and accurate. In this study, credibility was ensured through the use of various methods for data collection (triangulation). Triangulation was used to enhance credibility and increase the depth and breadth of the findings, thus emphasising comprehensiveness as multiple of data was triangulated and different sources of data was utilised to give a clear and distinctive description of the research context, selection and characteristics of respondents, data collection, as well as the procedure for data analysis. The researcher compared the findings from the interviews and focus group meetings in order to check whether the analysed data represented the phenomenon under study.

3.15.4 Dependability

Dependability refers to the stability of findings over time (Newby, 2010). It involves participants evaluating the findings, interpretation and recommendations of the study to make sure that they are all supported by data received from the informants of the study (Creswell, 2007). Dependability was maintained by ensuring that the results were fully explained and every detail was given. Inquiry audit also helped to ensure that the findings were consistent and could be repeated.

3.15.5 Conformability

Conformability refers to the degree to which the results of an inquiry could be confirmed or corroborated by other researchers (Creswell, 2007). It ensures neutrality in the research findings. In this study, the researcher ensured that the findings were based on participant's responses and not any potential bias or personal motivations. To ensure that this is done correctly, the researcher recorded interviews and member checking. The researcher also ensured that the study's findings were based on participants' responses and not biased or on the researcher's own personal motivation when interpreting what the participants said. Authenticity is also an important aspect in qualitative research as it gives the researcher reassurance that both the conduct and evaluation of research are genuine and credible. For this study, the researcher focused on describing the participants' experiences as faithfully as possible and fairly.

3.16 Ethical Considerations

According to Gall (1996), ethical issues are an integral part of the research planning and implementation process. Ethics in research refers to a code of conduct or expected social norm of behaviour while conducting research. In this study, the researcher conformed to ethical conduct by observing several things. To begin with, the researcher asked for permission from the District Education Board Secretary (DEBS) for Shibuyunji district and the head teachers of the four selected primary schools. Secondly, informed consent was sought from the participants before involving them in the study. This was done by asking the participants to sign consent forms before participating in the study. Thirdly, the researcher also assured the

participants of confidentiality with regards to the information they availed. Anonymity was ensured by not asking for the participants' names or any other form of identification.

Ethics are concerned with ensuring that the interests and well-fare of the researcher and participants are not harmed as a result of research being conducted. Mulenga (2015) noted that researchers would harm the individuals or groups they studied when research participants experience anxiety, stress, guilt and damage to self-esteem during data collection and in the interpretations made from the data they provide. This study abided to ethical considerations that aimed at protecting those who were involved in the research. In this research participants were briefed about the whole purpose of the research. The researcher emphasized that it was an academic research meant for the fulfilment of one of the requirements for a master's programme in education at the University of Zambia. Due to the sensitive nature of the study, it raised important ethical issues which needed careful considerations during the research process. Considerations were taken to adhere strictly to ethical measures as outlined by University of Zambia research regulations.

Ethical issues were taken into serious consideration during the research for the good of both the researcher and participants. Since research concerns two groups of people; those conducting research, who should be aware of their obligations and responsibilities, and the "researched upon", who have basic rights that should be protected. Because of that, the researcher sought an approval from the University of Zambia Directorate of Research and Graduate Studies. A covering letter explaining the purpose of the study was availed to participants so that they are free to give information. Further, the covering letter introduced the study to the respondents. At the beginning of any interview an introductory statement directing respondents on how the interaction was to proceed and gave an assurance on the confidentiality of the information was provided.

3.16.1 Reciprocity

In research, the participant's voluntary involvement in the study and their generosity may be reciprocated by favours or payments in cash or in kind from the researcher. According to Mulenga (2015) this may also help to build a mutual understanding between the researcher

and participants and considered as a way of honouring the participant's contribution to the study by the researcher. However, the researcher in this study avoided payment of any kind to the participants, as much as possible. In the first place the researcher had no money to pay participants. Secondly this could interfere with the participants' responses, thereby affecting the quality of data collected from them in the sense that, the research participants may give favourable responses to the researcher in an effort to just impress him or her. For this study, the researcher made sure that reciprocity did not influence the participants' responses in any way by not using any means of payments to appreciate the research participants in order to collect information from them. The findings of this study will be made available to the participants on request as a way of appreciating their contributions to the success of the study.

3.16.2 Confidentiality and Anonymity

Confidentiality in research implies that data identifying the participants will not be disclosed (Kvale and Brinkman, 2009 cited in Mwanza, 2019). Respondents were protected by not having their names or any form of identification disclosed in any way. Schools sampled were not mentioned and no form of identity was disclosed. The information that the researcher got was treated as highly confidential. The researcher ensured that the privacy of the respondents was not abrogated in any way. This was done simply to assure respondents that they would be protected so that they were motivated to give the information that the researcher was looking for during data collection process. The research highly respected the rights and dignity of the respondents, an emphasis to participants was made that it was voluntary and they were at liberty to leave the study at any time if they wished to as Kvale and Brinkman (2009) put it that informed consent involves obtaining voluntary participation of people involved and informing them of their rights to withdraw from the study at any time. All participants were assured of total confidentiality and their responses remained concealed.

It must, however, be pointed out that assuring confidentiality and anonymity may actually be quite difficult to put into practice in some research. This is the case where some institutions or participants may be readily identifiable because they may have unique features which make them easily recognizable (Frankfort-Nachmias and Nachmias, 1992: cited in Mulenga (2015)). These features may be recognised as the researcher describes the settings of the study and the

profiles of research participants Mulenga (2015). In this study, measures were put in place to ensure that the presentation of findings do not lead readers to easily identify the participants by name by referring to participants' official position, such as head teachers and guidance and counselling teachers. Participants were as well asked whether they were still willing to take part in the study.

3.16.3 Health and Safety of Participants

With the COVID 19 pandemic the health of the participants and that of the researcher may be at risk during the data collection process if no safety and health precautions were put in place. The researcher ensured that COVID 19 guidelines were strictly followed. Participants were requested to put on face masks and sanitise their hands to prevent the spread of corona virus. The researcher bought enough face masks to give to participants in case of situations where the participant did not have. Hand sanitizer was also provided by the researcher and social distancing was also highly observed.

3.17 Summary

In this chapter the researcher described the methodology that was used in this study. The population of study constituted the primary schools found in Shibuyunji district. From these, four schools were purposively selected and parents, learners, guidance and counselling teachers, and head teachers were selected for the study. The research design used was a descriptive qualitative survey which used interviews and focus groups to collect data. The data was analysed using thematic analysis and was presented using verbatim quotations. The next chapter presents the findings of the study.

CHAPTER FOUR: PRESENTATION OF FINDINGS

4.0 Overview

In this chapter, the researcher presents the findings of the study in terms of understanding of stakeholders' views on drug abuse, their views and opinions about its causes and effects, and their perceptions on the strategies for developing effective drug abuse interventions.

4.1 Views about Drug Abuse by Primary School-Going Learners

This section contains the views expressed by the participants over drug abuse by primary school-going learners in Shibuyunji district. It starts with their ability to define the terms drug and drug abuse, and moved onto their awareness that the problem existed in the district.

4.1.1 Understanding of the terms 'drug' and 'drug abuse'

To understand the participants' views on drug abuse by primary school-going learners, the participants were asked to state their views about drug abuse among primary school-going children. The participants perceived the risk of using drugs and acknowledged that young people as well as children are the most vulnerable group, who believe that using drugs is not dangerous.

One of the Head teachers defined a drug and drug abuse as follows;

A drug is a substance that changes someone's body chemistry. Drug abuse is the misuse of drugs or taking of substances for wrong reasons.

The third participant, a guidance and counselling teacher, stated that drug abuse is the taking of substances for wrong reasons.

Guidance and counselling teacher C defined drug abuse as;

Drug abuse is the taking of drugs in excess whether legally or illegally

One learners' focus group defined drug abuse as;

Drug abuse is the abnormal taking of drugs which changes or alters the body chemistry.

Another learners' focus group defined drug abuse as;

Drug abuse is the intake of drugs which are not allowed by law and can cause harm to anyone who takes them.

Additionally, another learners' focus group defined drug abuse as;

Drug abuse is the misuse of drugs

Furthermore, the last learners' focus group defined drug abuse as;

Drug abuse is the taking of drugs abnormally

Parent B defined drug abuse as;

Drug abuse is the taking of drugs for wrong reasons

Yet another parent defined drug abuse as;

Drug abuse is the misuse of substances

Parent D defined drug abuse as;

Drug abuse is misusing of substances which can cause harm to the human body.

Guidance and counselling teacher A defined drug abuse as;

Drug abuse is the misuse of drugs that can bring about ill health to a human being.

While guidance and counselling teacher B defined drug abuse as;

Drug abuse is the abnormal intake of drugs which can even lead to death

Furthermore, guidance and counselling teacher D defined drug abuse as;

Drug abuse is the taking of drugs excessively which can lead to health complications or death.

Parent B defined drug abuse as;

Drug abuse is the misuse of drugs or taking of substances for wrong reasons.

Yet parent C defined drug abuse as;

Drug abuse is the taking of drugs in an abnormal way and can cause harm to the one taking them.

Parent D defined drug abuse as;

Drug abuse is the misuse of drugs for medicinal or non-medicinal purposes.

4.1.2 Awareness of the existence of the problem

Participants were asked about the existence of the problem of drug use among teenage learners in the district. All the groups acknowledged that they were aware that the problem existed. Head teachers recognised that the problem of drug abuse was present in their schools, although in some cases no learners had been found using drugs. In such cases, teachers could only deduce that learners used drugs from their ‘abnormal’ behaviour.

Two of the head teachers stated that some learners in their schools abused drugs. Head teacher A had the following to say;

We have learners who take drugs in our school and the behaviour they portray is very abnormal because of the drugs they take.

And head teacher B added that;

Drug abuse is there in our school among these primary school learners, especially from grade 5 to 9.

The other two head teachers indicated that none of their learners was caught using drugs, but they could tell from the behaviour of some of the learners that they used drugs.

One of the head teachers from school C explained that;

Although we have never caught them red-handed, we know that our learners abuse drugs from the behaviour they portray. It is not a good thing at all for these learners to participate in drug abuse and, depending on what type of drugs they are involved in, they may ruin their lives.

The other head teacher from school D also stated that;

Even though we do not have any recorded cases of drug abuse among our learners, we can easily tell from the behaviour they portray that they are involved in drug abuse. For example, the unruly behaviour of some girls shows that they abuse drugs. In our school, girls seem to have an upper hand in drug abuse than the boys. At one time when we took a girl for pregnancy test at Nampundwe clinic and she tested positive, we could tell from the way she was able to point at the boy who was responsible for her pregnancy without shame that she was involved in drug abuse.

The Guidance and Counselling teachers, who are the mediator teachers, also noted that drug abuse was rampant among learners in their schools. Three of the teachers affirmed that there was evidence that learners were abusing drugs. A teacher from school A explained that;

Drug abuse among primary school learners is on the rise and recently in our school we recorded eight cases of drug abuse among our learners of which seven were boys and one was a girl.

Another one confirmed that;

Drug abuse at our school is there and it is really happening among our learners. We have interacted with our children and even recorded cases of drug abuse among our learners.

It was also explained by another teacher that;

Drug abuse among school-going children is there in Shibuyunji district and our school has not been spared because we even have recorded cases of drug abuse among our learners. The community attaches less importance to education and there is no difference between those who have been to school and those who have not been to school. Perhaps that is why the children or learners abuse drugs.

However, like the head teachers who said none of their learners was caught abusing drugs, one Guidance and Counselling teacher at one of the primary schools also stated that no learner had been caught abusing drugs. The teacher mentioned that;

Although drug abuse among our learners at our school is a common practice, we do not have evidence of drug abuse but we can tell from the behaviour our learners portray that they indulge themselves in drug abuse.

The researcher also elicited views from learners. The learners appeared to understand the difference between medical use of drugs and abuse of drugs. It was noted in one focus group when one learner explained that;

A drug is something which cures people when they are sick or something which destroys our immune system. For example, cocaine, alcohol and marijuana are drugs. A drug can also be said to be something which changes our body chemistry when it is taken.

The other members of the group also agreed with this understanding.

In focus group B it was also explained that;

A drug is a substance that you need to take when you are not feeling well. For example, Panadol and Coartem. A drug is also a substance that changes the body chemistry while drug abuse is the misuse of drugs. For example, alcohol, cocaine, marijuana and tobacco.

In the third focus group it was also agreed that;

A drug is a substance which can make you better or harm you. For example, beer, cocaine, tobacco, heroine, glue, petrol and beer are normally taken for wrong reasons and can be harmful to someone's body. Or taking of drugs more often for wrong reasons which is also called drug abuse. However, drugs such as Panadol and Bluefen, can make someone better when they are sick.

In the fourth focus group one learner explained that;

A drug is a substance that alters or modifies the body chemistry and makes someone act abnormally after taking it. For example, weed or marijuana, tobacco and alcohol.

Parents were also asked to indicate their views about drug abuse among school-going children in Shibuyunji District. All the parents interviewed stated that there was drug abuse among learners in the district. One of the parents attributed loitering among learners during class hours to drug abuse. The parent stated that;

Drug abuse is there among school-going children in Shibuyunji district and it is very high. For example, here at our school, you will find children are loitering around the shops instead of being in class.

Another parent attributed drug abuse to availability of the drug in the community. The parent explained that adults made the drugs readily available to the children. This is what the parent said;

Drug abuse among learners in Shibuyunji district is on the rise and the reasons are lack of security in terms of elders who can restrict the buying of drugs from the youths in the community. The increase in terms of drug abuse among these learners is the fact that they are readily available.

Another parent stated that the abuse of drugs meant that children who used them could not concentrate at school and became unruly. The parent stated that;

There is drug abuse among our school-going children in the district and it is disturbing them in terms of concentration on school issues because they take it before they even become of age. The most unfortunate part of these

children who indulge in drug abuse is that they become uncontrollable thereby making it difficult for teachers and us parents to put them in a good way.

Other parents also confirmed the abuse of drugs among the learners in the district. Their concern was that drugs had a bad effect on the health of the learners. Parent D said that;

Drug abuse is there among our school-going-children and children are not supposed to take drugs because they cannot perform well at school. For example, marijuana and alcohol can destroy their bodies by causing cancer and other diseases.

Yet another parent also commented that;

There is drug abuse among our children in Shibuyunji district and it is not good because drugs destroy our children's future.

In addition, another parent also explained that;

Drug abuse is there in our district Shibuyunji among school-going children and it is not good for these children to be involved in drug abuse because it disturbs their concentration on school thereby destroying their future.

One parent, while confirming the presence of drug abuse among some school-going children in the district, stated that the practice was not rampant and was only a problem among a few learners. The parent said that;

Drug abuse is there in our district although there are only a few learners who are involved in drug abuse from my observation.

Adults acting as role models was also brought out by one of the parents. The parent indicated that there were some adults in the community who abused alcohol. The parent explained that;

Drug abuse is rampant in Shibuyunji district and it is not only confined to school-going children but also adults in the community. Boys and girls hide in the mountains to smoke and drink instead of being in class for lessons.

It can therefore be concluded that all the categories of stakeholders had a good understanding of drug abuse by teenage primary school-going children in the study area. They were able to define the terms ‘drug’ and ‘drug abuse’ and clearly stated their views about drug abuse among the school teenagers.

4.2 Causes and Effects of Drug Abuse on Primary School-Going Children

Several views and opinions were obtained from the participants about the causes and effects of drug abuse among primary school-going-children in Shibuyunji district. The findings are presented in this section.

4.2.1 Causes of drug abuse among Primary School-Going Children

The researcher found that there were many causes of drug abuse among school-going children in Shibuyunji district. The causes are presented in this section.

(a) Peer Pressure

The participants cited peer pressure as the leading cause of drug abuse in the district. One of the head teachers indicated that the causes of drug abuse among learners were peer pressure and poverty. The head teachers explained that;

Peer pressure and poverty are the main causes of drug abuse among school-going children in our school. For most of the children, it is because of peer pressure from their friends. They are actually pushed by their colleagues into drug abuse.

Head teacher B said that;

Drug abuse in our school among learners is caused by peer pressure. This is where learners who are involved in drug abuse influence their colleagues to take part in abusing drugs.

Head teacher C responded that;

There is also peer pressure from the village and school environments, respectively. When peer pressure from both the village and school environments combines forces, these children end up drinking and smoking

because of the influence from their colleagues at school and the communities where they come from. Apart from that, our learners at our school indulge in drug abuse due to poverty so that they can relieve stress when there is hunger at home.

Guidance and counselling teacher A eluded that;

The causes of drug abuse in our school are peer pressure and home background. These children are normally influenced by their colleagues at school as well as the communities where they come from.

Guidance and counselling teacher B attested that;

Peer pressure has also contributed to drug abuse among our school-going children. Some children have left school but still have friends who are still in school and they attract them to join them in abusing drugs.

Guidance and counselling teacher from school C stated that;

Drug abuse among our learners at our school has mainly been due to peer pressure. Peer pressure is mainly where learners are being forced to drink beer and smoke by their fellow learners against their will. Some learners feel if they refuse to smoke or drink beer, they will be looked down upon by their friends.

Guidance and counselling teacher D explained that;

Drug abuse among our learners at our School is caused by peer pressure and broken homes. Peer pressure is where learners are influenced by their fellow learners to indulge themselves in drug abuse whereas broken homes implies that some learners come from homes where they are brought up by single parents who cannot take full control of them. There are also some learners who are raised by their grandparents who do not care or mind what their grandchildren do with their peers or friends.

Learner A said that;

Drug abuse is caused by peer pressure. Peer pressure is where a person has friends and would want to take because of pressure or influence from friends. Some learners would want to take drugs so as to prove a point to their friends that they are not afraid of taking the drugs which their peers

are taking. They actually do not want to be labelled as cowards by their colleagues.

Learner B remarked that;

Peer pressure is where a person is forced to take drugs against his or her will. In some cases, these learners who are forced to take drugs are made to believe that drugs are nice and they give a wonderful feeling when taken. Some learners are coaxed to believe that when they take drugs they cannot be challenged by anything in life. This has led to most of the learners to indulge in drug abuse.

Learner C eluded that;

Peer pressure is caused by group influence where friends force their friends to partake in drug abuse against their will. For example, some learners will be told by their colleagues or peers that if they do not take part in drug abuse they will not be part of the group. Hence for fear of losing their friends, they will be forced to indulge themselves in drug abuse just to appease their peers or friends.

Learner D also said that;

Drug abuse among learners at our school is mainly caused by group influences where friends influence their friends to take drugs. For instance, some learners will be forced to smoke dagger under the pretext that when one takes drugs, one feels high and cannot be challenged by anyone or anything in the society. Apart from that, they are made to believe that when one takes drugs, one becomes intelligent in class and cannot fail any subject.

Parent A observed that;

The main cause of drug abuse among our school-going children is peer pressure. This is where some learners are influenced by other learners to indulge themselves in drug abuse. For example, our children will be forced by their friends to indulge themselves in drug abuse after telling them that when you take drugs you become strong and hard working at home. In some instances, they are told that when they take drugs they become intelligent at school and cannot fail any examination. On the other hand, those who refuse to take part are threatened to be chased from their peer groups.

Therefore, for fear of losing their friends, our children are left with no option but to indulge themselves in drug abuse.

Parent B explained that;

These children abuse drugs because of peer pressure from their colleagues who force them to take drugs against their will. Some learners are coaxed to think that drugs are a solution to many problems they face in life. Therefore, they are easily persuaded to take part in drug abuse in order to solve those problems. Those who refuse are unceremoniously removed from these groupings because they are considered cowards.

Parent D said that;

Peer pressure is where some learners are influenced by other learners to indulge themselves in drug abuse. Their friends force them to indulge in drug abuse after telling them that when you take drugs you become brave and intelligent at school. This has made most learners to fall into this trap of drug abuse.

Parent E contended that;

The main causes of drug abuse among our school-going children in the district are peer pressure and curiosity. Peer pressure is where a pupil or pupils influence other learners to abuse drugs against their own will. On the other hand, curiosity is where some learners would want to take part in drug abuse just to have an experience or what it feels like to use or misuse drugs. Hence, they find themselves in drug abuse.

Parent F mentioned that;

Drug abuse among school-going children in Shibuyunji district is mostly caused by peer pressure. This is where certain learners force other learners to take drugs against their will. Those who refuse to take part are rebuked and considered to be cowards. Therefore, for fear of being labelled cowards, they are forced to join these groups which indulge themselves in drug abuse.

Parent G also said that;

Drug abuse among school-going children in Shibuyunji district is caused mainly by peer pressure where some learners in school force and influence other learners to indulge themselves in drug abuse against their will. This

is mainly done by forcing their colleagues or peers to take a puff of smoke or a sip of beer so as to have an experience of what it feels like.

Parent H eluded that;

Primary school-going children in our district mainly abuse drugs because of peer pressure from their colleagues who push them to take part in drug abuse. This is mainly done by coaxing their peers to smoke or drink beer so that they can get high and be ready to face any challenges in society because they believe drugs are a solution to any problem.

(b) Poverty

Poverty, including lack of financial support and food at home, was also cited as a cause of drug abuse.

Head teacher A explained that;

This is because of poverty where these children come from and they were easily lured into beer drinking and sex in order to earn a living. In one case, some girls from our school were given beer and some money by an Indian from the nearby mine in exchange for sex. The girls in question were forced to do that for survival purposes in order to earn a living due to poverty.

Head teacher B also explained that;

Apart from peer pressure, orphaned children lack good guidance from their guardians in the homes where they come from. For example, children or learners who are raised by grandparents who do not usually pay attention to what their grandchildren do with their peers or friends.

Guidance and counselling teacher A stated that;

Not only that [peer pressure and lack of recreation] but also poverty has caused our learners here to be involved in drug abuse so that they can be stress-free at home when there is hunger. They actually feel if they take drugs they will forget about their poverty and even replace some recreation facilities such sports and other sources of entertainment.

Learner B explained that;

... Poverty is when there is hunger where these learners come from and would want to take drugs to relieve themselves from such stress. They actually have a wrong impression that when they take drugs they will easily forget about any stress which may be caused by poverty at the homes where they come from.

Learner C also said that;

... poverty is lack of basic needs and forces these learners to take drugs in exchange for material things for survival. In some cases some learners even resort to prostitution in order for them to earn a living as they try to get basic needs such as clothes, shelter and food.

Learner D stated that;

There is also lack of financial support from the family, and, later, these children find themselves in drug abuse to earn a living. Some families do not support their children financially and hence these children find themselves in drug abuse as they resort to selling these drugs so as to make ends meet.

(c) Lack of parental guidance

Lack of parental guidance was also cited as a cause for drug abuse.

Head teacher A also stated that;

The major causes of drug abuse among school-going children in our school are lack of parental care and recreational activities. There are some parents who do not guide their children properly on the dangers of drug abuse. Some parents do not even mind what their children do outside their homes and this makes these learners feel at liberty to do whatever they want including indulging themselves in drug abuse.

Head teacher B eluded that;

Not only that [lack of recreation] but also children have no interest in education activities because their parents in the first place do not value and attach so much importance to school. Some parents have not gone very far in education and do not have the time to check on how their children perform at school.

Learner A stated that;

Some learners indulge in drug abuse after being orphaned and lack proper parental guidance. In most cases these are the children who are raised by their grandparents who do not mind or bother to check on the welfare of their grandchildren. Their grandchildren can do anything they want because they do not have their parents to be monitoring them closely.

Parent A said that;

The other cause of drug abuse among school-going children here in Shibuyunji district is the fact that some parents fail to control their children at a tender age by not telling them the dangers of drug abuse. These children are free to do anything they want because their parents do not bother to check on what they do and in whose company.

Parent B responded that;

Apart from that, these children copy from what their parents do since they themselves do not value education so as they drink beer and smoke dagga their children also copy and see it to be a normal thing. In some cases some parents even supply drugs to their children. They actually share drugs with their children.

(d) Modern life

Some participants attributed drug abuse to changing culture where children thought drug abuse was part of modern life.

Head teacher B said that;

Not only that but some learners feel it's a way of life in modern day. They actually take it as a luxury and make it part and parcel of their life. When

they are smoking, they feel powerful and brave as well as recognised by the society in modern day life.

Guidance and counselling teacher D explained that;

... there is also modern life style of society which has caused our learners to indulge in drug abuse. This is a situation where one would want to cope with modern life, especially here in Nampundwe people want to copy what the rest of the people are doing

(e) Lack of recreation (boredom)

Lack of recreational activities in the area was also cited as a cause for drug abuse. One of the head teachers explained that;

There is also lack of recreational activities such as playing football and other entertainment activities to keep the learners busy so that they can desist from abusing drugs. For example, in our community there is no ball to keep the children busy by playing soccer. The ball that was there was destroyed and this has led to most of the children resorting to drug abuse which they claim to be the only source of entertainment.

Head teacher C stated that;

Others [learners] still blame drug abuse on lack of recreational activities. They claim without any source of entertainment such as sporting activities to keep them busy all the time, it is very difficult for them to keep away from drug abuse completely.

Guidance and counselling teacher C explained that;

Drug abuse among our learners at our school has mainly been due to lack of recreational activities. Apart from that, boredom has also led these learners to be involved in drug abuse because they have nothing to keep them busy all the time. ... Lack of recreational activities such as entertainment and playing football has led to these learners to be abusing drugs.

Guidance and counselling teacher D stated that;

Furthermore, there is also lack of social amenities such as entertainment and sporting activities. It is very rare to find social amenities in rural areas such as pool table among others to keep the learners busy during their free time. On the other hand, it is difficult for some communities to access a ball to keep the learners occupied by playing football since soccer in these rural areas is the main sporting activity that entertains and keeps the learners busy all the time.

Learner A was of the view that;

Boredom can be caused by lack of recreational activities or when someone loses parents and the only way out for them is to resort to drug abuse. Learners indulge themselves in drug abuse because of lack of recreational activities such as sports and other entertainment facilities. When one loses one's parents one usually resorts to drug abuse to keep one busy all the time. Orphans are usually the number one victims because they have no guidance from the parents and the only thing they think of is drug abuse.

Learner B stated that;

Boredom is where someone has nothing to do to keep them busy and they end up resorting to drug abuse as a way of passing time. This usually happens when there is lack of entertainment such as sporting activities like soccer and social amenities such as pool table which are rarely found in rural areas to keep the learners entertained all the time. Lack of all these things has led to most of the learners indulging themselves in drug abuse to while away time.

Parent B explained that;

As if that were not enough, school-going children resort to drug abuse due to lack of recreational activities such as sports and other entertainment activities to keep them busy all the time. For example, in our community there is very limited source of entertainment for our children. They cannot play football because the community doesn't own a ball in the first place. Not only that but there is also lack of social amenities such as cinemas to keep them busy by watching movies as you know that this is a rural set up.

Parent C eluded that;

The main cause of drug abuse among our school-going children in the district is lack of recreational activities such as sports to keep them busy all the time. For instance, you can imagine our community doesn't even own a ball to keep our learners occupied during their free time by playing soccer. Not only that but there is also lack of other sources of entertainment such as social amenities like pool table being a rural area.

Parent H stated that;

Furthermore, these children abuse drugs due to boredom where they have nothing to do to keep them busy like playing football and other activities. For example, learners in our community have no ball to play to keep them entertained when they knock off from school. This has led to most of our children indulging in drug abuse.

(f) Home background (broken homes, adults drinking and smoking)

Home background was also cited as a cause for drug abuse. Homes where adults drunk and smoked were mentioned as a recipe for drug abuse by school-going children in Shibuyunji district. A head teacher explained that when children see adults using drugs, they copy those practices thinking they are normal and acceptable. The head teacher stated that;

Drug abuse in our school among learners is mainly caused by home background and peer pressure. Home background affects these children in such a way that they come from homes where their relatives such as uncles and siblings imbibe beer and smoke marijuana. Therefore, when these children see their relatives drink and smoke, they copy and think it is something normal.

Guidance and counselling teacher A said that;

Apart from that, drug abuse among our learners at our School is caused by separation of families (divorces) because when the children do not have both parents to look after them and providing proper care, they easily resort to drug abuse due to lack of parental guidance. It is actually very difficult for children to be raised in a proper manner by a single parent in an event where one parent passes on or if they are divorced.

Guidance and counselling teacher D mentioned that;

...broken homes are where mostly the orphaned children feel frustrated about life and resort to drug abuse. In an event where children lose one or both parents, they feel out of place without proper parental care hence they resort to drug abuse to while away time and to avoid stress and frustration as they claim.

Parent B stated that;

Drug abuse among school-going children in our district is mainly caused by poor home background. For example, in some homes, parents are unable to control their children by telling them the dangers of drug abuse because in the first place the parents themselves are not educated and they do not see the value of education. Therefore, drug abuse to them is just a normal thing.

Parent F also said that;

Apart from that, these children abuse drugs due to lack of values where the children are not raised properly by their parents. There are some children who are raised without being taught the importance of values in society by their parents. Therefore, they grow up not knowing the dangers of certain things such as drugs and beer. To these learners smoking and drinking are just as normal as any other thing.

(g) To perform better in class and in sports

There were some learners who deceived themselves that when they took drugs, the latter would make them more intelligent and perform better in class whereas others thought that when they took drugs they would perform better in sports activities.

Head teacher C stated that;

Some [learners] think that when they smoke, they become more intelligent at school and will be passing in all the subjects whereas others are of the view that drugs make them perform better in sports activities. They believe that when they smoke dagger they become better placed in class when it comes to calculations in Mathematics and of course other subjects which are considered to be very difficult. Apart from that, they believe that when

they take drugs, they become better players on the football pitch when playing football. They have the notion and claim that once they smoke dagger, they don't get tired on the pitch.

Parent E explained that;

Apart from that, boys and girls deceive themselves that when you take drugs you become intelligent and bright in class. These learners claim that once they smoke dagger all the subjects become easy in class and that they cannot fail any subject in any examination. They further claim that once they take drugs, they don't lose concentration in class when the teacher is teaching. This misconception has led to most of the learners indulging themselves in drug abuse thinking they will become intelligent after taking the drugs.

(h) Location of school near drinking places

There were some schools which were located near bars and this led the learners into temptations of wanting to drink and smoke whenever they knocked off from school on their way home.

Guidance and counselling teacher B said that;

The location of our school itself, near bars [drinking places], has contributed to drug abuse among children at our school. The learners usually pass through bars when going to school where they find adults or relatives [drinking beer and smoking tobacco]. They become so inquisitive to see what elders do and, in the process, they want to have an experience of what these elders feel like whenever they drink beer and smoke [tobacco]. This has led to many learners indulging themselves in drug abuse.

(i) Curiosity and amusement

Most of the learners wanted to have a taste of beer or a puff of smoke out of curiosity and amusement so as to have an experience of what it felt like when they did that.

Guidance and counselling teacher A mentioned that;

It is natural to be inquisitive and school-going teenagers are not immune to the urge. Many teenagers begin experimenting with drugs simply because they are curious and want to know what it feels like to smoke dagger or

imbibe beer. Therefore, whenever they see adults or their peers smoking or drinking, they become so inquisitive that they would also want to have a puff of the smoke or a sip of beer. Hence in trying to have a puff or sip just to have an experience of what it feels like, they end up indulging themselves in drug abuse.

The guidance and counselling teacher from school B put a lot of emphasis on the role played by curiosity. He stated that;

Curiosity makes learners do things that are not right because they are only interested in having an experience of what it feels like to do what their colleagues are doing. Hence they end up indulging themselves in bad vices such as drug abuse among others.

Learner A explained that;

Curiosity is where someone wants to experience what those who are involved in drug abuse feel like whenever they took drugs. As learners we really want to have an experience of what it feels like to smoke or drink and this has led most of us indulging ourselves in drug abuse arising from too much curiosity and anxiety.

Learner C also said that;

The abuse of drugs among learners at our school is mainly caused by curiosity, peer pressure and poverty. Curiosity is when friends take drugs others also want to take in order to have an experience of what their friends who take drugs feel like. Peer pressure is where some learners force their fellow learners to take drugs against their own will whereas poverty is lack of basic needs such as food, shelter and clothes. Some learners are forced to take drugs by their colleagues fearing to be rebuked or being looked down upon if they refuse to take the drugs. Others take drugs in order to acquire basic needs such as clothes, shelter and food which can only be acquired by indulging themselves in drug abuse.

Parent E stated that;

... curiosity is where learners want to experience what other learners feel like when they take drugs. This urge to have an experience is what has led

most of the learners indulging themselves in drug abuse because they become so inquisitive to have a feel of what it is to smoke and drink beer.

Parent H also said that;

Apart from that, these children want to follow what adults do in the communities where they come from just to have an experience of what it feels like to drink beer or smoke dagga. Whenever they see adults smoking and drinking beer, they become so anxious to have a taste of beer and smoke that they easily find themselves in drug abuse.

(j) Frustration

There were some learners who were frustrated due to the loss of their parents through death, poverty and in some cases some parents just failed to pay school fees for their children. Consequently, such learners resorted to drug abuse as a way of relieving stress.

Parent B explained that;

Furthermore, children indulge themselves in drug abuse because of frustrations. For example, where a parent fails to educate a child due to poverty and the latter resorts to drug abuse as a way of relieving stress. Some parents fail to sponsor their children at school due to poverty while others do not know the value of education and think that paying school fees for a child is a sheer waste of time and resources. Therefore, these children resort to smoking and beer drinking in order to relieve themselves from stress arising from not being able to go to school.

(k) Lack of proper guidance and counselling at school and in communities

Some learners in some schools resorted to drug abuse due to lack of proper guidance and counselling from the teachers and the members of the communities where they came from.

Guidance and counselling teacher D said that;

Not only that but also lack of guidance and counselling in schools and communities because, if learners were properly guided in homes and schools, there would have been low cases of drug abuse among these learners. Some schools do not guide their learners properly on the dangers of drugs on their health. Communities also do not give proper guidance to

these children on the dangers of drugs on their health. This has led to most of the learners indulging themselves in drug abuse due to this lack of proper guidance from the communities and schools.

(l) *Drugs readily available, accessible and cheap*

In some communities where these learners came from, drugs were easily accessible due to their availability on the market. Not only that, but also due to the fact that the drugs were also cheap and could easily be bought by the learners.

Learner A stated that;

Furthermore, because of the availability and easy access to drugs, some learners find themselves abusing drugs. Some learners indulge themselves in drug abuse because the drugs are found all over and they can easily access them from anywhere. In most of the communities the selling of drugs is not restricted to adults only but children as well and this has led to the majority of the learners indulging themselves in drug abuse.

Parent F eluded that;

Furthermore, school-going children abuse drugs because of the fact that these drugs are readily available on the market and that they are also cheap and can be easily accessed by these learners. Children easily access these drugs because they are cheap and affordable. Hence the children indulge themselves in drug abuse due to this reason of availability of drugs and the fact that drugs are cheap and easily accessible.

(m) *Ignorance (lack of knowledge about the effects of drugs)*

Most of the learners did not know the effects of drugs on their health. Hence they saw nothing wrong with indulging themselves in drug abuse due to ignorance.

Learner B explained that;

Apart from that, some learners take drugs because of ignorance of not knowing the dangers of taking drugs. These learners are not told the health hazards of taking drugs which can lead to health complications such as the

liver disease (cirrhosis) which is the inflammation of the liver where the latter swells as a result of taking too much alcohol.

Learner D mentioned that;

Lack of knowledge on the dangers of drug abuse, the location of our school near bars, and boredom, are also other causes. Some learners lack knowledge on the dangers of drugs and this lack of awareness has led to them indulging in drug abuse. On the other hand some learners indulge themselves in drug abuse due to boredom. The latter is a situation where learners have nothing to do to keep them busy. This usually comes as a result of lack of recreation activities such as sports and social amenities such as cinemas and pool table which are rarely available in rural areas. Apart from that, some schools are near bars and when children are going to school they usually pass through bars and they see adults drinking and smoking. Hence when they see these adults drinking and smoking, they are also forced to have an experience of what it feels like to smoke and drink. Consequently, they find themselves in drug abuse.

Parent B also affirmed that;

Not only that but also lack of knowledge on the dangers of drug abuse both on the parents' and children's side. Some parents do not have the knowledge on the dangers of drug abuse and cannot talk to their children about the health hazards of drug abuse. On the other hand, children do not also know the dangers of drugs on their health. Consequently, they indulge themselves in drug abuse without knowing the consequences.

Parent C stated that;

Apart from that, school-going children abuse drugs due to lack of knowledge on the dangers of drug abuse. They do not know that drugs can lead to brain damage, cirrhosis (liver disease), which is the inflammation of the liver where the latter swells and cannot function properly. They also do not know that drug abuse can eventually lead to death.

Parent D said that;

Drug abuse among our learners is mainly caused by lack of knowledge on the dangers of drug abuse. They are not aware that drug abuse can lead to brain abnormalities where the brain stops functioning in a normal way.

*They also do not know that drug abuse can lead to damaging the lungs.
They also do not realise that drug abuse can eventually lead to death.*

(n) Stress

Stress was also cited as a cause of drug abuse among the learners where they resorted to drug abuse as a way of forgetting the problems they encountered in order to get rid of stress.

Learner A stated that;

... others get involved in drug abuse due to the pressures of life and would want to get rid of those problems when they are stressed through drug abuse. Some learners have the notion that if they take drugs they will forget about their problems. As a result, they indulge themselves in drug abuse without realising the consequences of drug abuse.

Learner C said that;

Not only that, but also some learners are forced to take drugs because of stress so that they can forget some of the problems they face. The wrong notion they have is that when one takes drugs, one forgets about one's problems and all the stress is gone. Consequently, they indulge themselves in drug abuse.

Parent E explained that;

Not only that but also some children indulge themselves in drug abuse due to stress resulting from problems such as lack of financial support from their parents because of poverty. Therefore, they resort to drug abuse in order to forget about some of the problems in life.

The emerging themes from the study as cited by the participants were peer pressure, home background (particularly broken homes), curiosity, lack of recreational facilities (and, therefore, boredom), poverty (lack of resources to procure the basic needs), ignorance, and lack of proper guidance and counselling in schools and communities. These were the main reasons given as to why primary school-going learners in Shibuyunji district engaged in drug abuse. These reasons are summarised in Table 2.

Table 2; Causes and effects of drug abuse in primary schools in Shibuyunji district.

s/n	Causes	Frequency
1	Peer pressure	19
2	Poverty (e.g., lack of financial support and food at home)	5
3	Lack of parental guidance	8
4	'Modern' life	3
5	Lack of recreation (boredom)	11
6	Home background (broken homes, adults drinking and smoking)	5
7	To perform better in class and in sports	2
8	Location of school near drinking places	2
9	Curiosity and amusement	5
10	Frustration	2
11	Lack of proper guidance and counselling at school and in communities	1
12	Drugs readily available, accessible and cheap	2
13	Ignorance (lack of knowledge about the effects of drugs)	5
14	Stress	1

Table 2 shows that the most mentioned cause of drug abuse by teenage school-going children in Shibuyunji district was peer pressure. This was followed by lack of recreational facilities and lack of parental guidance. Minor causes cited were loneliness and stress.

4.2.2 Effects of drug abuse on Primary School-Going Children

Using drugs in primary school can cause severe short- and long-term effects. Therefore, participants were asked for views and opinions on the effects of drug abuse on the primary school-going learners in Shibuyunji district. The effects mentioned included disruption of learning, low academic performance. In this section, the researcher presents the findings of the study.

(a) Disrupt learning

One of the effects of drug abuse is that it disrupts learning; teachers have to attend to disciplinary cases instead of concentrating on teaching.

Head teacher A said that;

Many are times when teachers have to attend disciplinary cases instead of teaching in class and this disrupts or disturbs learning since instead of being in class, they will be forced to attend to disciplinary meetings and that consumes a lot of learning time.

Concerning the effects of drug abuse on primary school-going children, one head teacher explained that;

There are several effects of drug abuse among primary school-going children at our school and one of them is that it disturbs the learning process because teachers are forced to attend disciplinary meetings involving learners who abuse drugs instead of being in class teaching. This affects both learners who take drugs and those who do not take drugs because when their teachers attend disciplinary meetings, time is wasted and all the learners miss out on the lessons. Consequently, this impacts negatively on their performance because children who indulge themselves in drug abuse are non-performers on average as they perform poorly academically in class. For example, at one primary school, smoking of dagga is normally done by big boys who do not even do well in the final exams and end up dropping out of school.

Head teacher B explained that;

Lastly, when these children become unruly and misconduct themselves in school, they waste their own time for lessons because instead of teaching them in class, their teachers will be trying to settle disciplinary cases involving those learners who abuse drugs. This affects their performance in class because they deny themselves normal learning time and end up failing the final exam thereby dropping out of school.

Head teacher C stated that;

There are many effects of drug abuse among our school-going children at our school. To begin with, these learners who involve themselves in drug abuse lose respect for anyone including us teachers who teach them. Consequently, they make teachers' work very difficult because they do not concentrate on school work apart from disturbing the lessons in class.

Head teacher D also explained that;

Besides that, these learners lose a lot of learning time because instead of teaching in class, their teachers will be busy trying to settle disciplinary cases concerning drug abuse.

Guidance and counselling teacher B observed that;

These learners also waste their learning time in class because instead of teaching them, their teachers attend to disciplinary cases concerning drug abuse.

Guidance and counselling teacher C stated that;

Furthermore, they also disturb other learners in class and the lesson by the teacher may not be well taught.

Parent C also mentioned that;

Not only that but they also become violent to their teachers and elders in the community.

Parent F confirmed that;

Furthermore, drug abuse also makes them to be violent to their fellow learners and elders in the community.

(b) Low concentration and poor academic performance

Low concentration and poor academic performance were also cited as the effects of drug abuse. Learners could not concentrate much on school work and as a result, they performed badly.

Head teacher C stated that;

Apart from that, these children are non-performers and their presence in class does not mean anything at all. Some cannot even read and write despite being in grade 7 and 8 respectively.

Head teacher D explained that;

Furthermore, these learners have low concentration on academic work and this has led to their poor performance. Consequently, they have dropped out of school and have not gone beyond grades 7 and 9 respectively.

Guidance and counselling teacher from school B also re-echoed this observation by affirming that;

There are many effects of drug abuse among our primary school-going children at our school. To start with, these children are non-performers in class due to drug abuse resulting from loss of concentration on school work.

Learner C stated that;

The major effect of drug abuse among school-going children here at our school is that those who abuse drugs do not perform well during examinations and end up dropping out of school because in the first place they find school to be useless. Of course, it is not always the case that those who abuse drugs perform badly academically but there are rare cases where those who abuse drugs perform well.

Learner A explained that;

Apart from that, these learners usually do not concentrate on school work due to the effect of drugs on them. Instead of concentrating on academics, they will be just making noise in class as well as being violent to other learners and disrupting lessons in the process.

Parent H also mentioned that;

Furthermore, they also perform poorly in academic work leading them to dropping out of school. Drug abuse makes them lazy where school work is concerned and they fail to study adequately for the final examination.

Consequently, they fail the final examination and eventually drop out of school.

(c) Abscondment (absenteeism)

Abscondment or absenteeism was also cited as an effect of drug abuse among the learners.

Head teacher D stated that;

They also disturb other learners in class during lessons and most of the time they are absent from school. This really affects their performance in class because there is lack of consistency in reporting for lessons.

Guidance and counselling teacher B explained that;

Apart from that, drug abuse has led to absenteeism among these children, something which has also impacted negatively on the part of the teachers in the sense that when teachers prepare work adequately in class, they do not achieve their objectives because some learners will not concentrate in class due to hang over and the teachers will be forced to go back to the same work in order to make those learners understand and get the concept.

Guidance and counselling teacher C stated that;

Apart from that, they also miss lessons because of absenteeism. This really affects their performance in class and they cannot pass well in examinations leading to dropping out of school.

Guidance and counselling teacher D said that;

They also do not do well in school due to high rate of absenteeism which also leads to high dropout rate from school. When these learners miss lessons, they end up not following what the teacher taught in the previous lessons because of inconsistency.

Learner A commented that;

The main effect of drug abuse among school-going children here at our school is absenteeism. Most of the learners who abuse drugs have a tendency of missing lessons after taking the drugs. This development leads

to poor performance in class because they are not consistent in terms of attending lessons.

Learner D also said that;

Apart from that, they run away from classes to go and drink tujilijili [a kind of local whiskey]. This behaviour has led them to obtaining low points or grades thereby dropping out of school because they feel they have found the future in abusing drugs.

Furthermore, these learners absent themselves from school, another contributing factor to their poor performance in class.

(d) Violence, misconduct, vandalism, bullying and being vulgar

Violence, misconduct, vandalism, bullying and being vulgar were equally cited as the effects of drug abuse among the learners, where they could turn violent, misconduct themselves by bullying their fellow learners as well as being vulgar.

Head teacher B confirmed that;

Drug abuse among primary school-going children at our school has several effects on them. First and foremost, those learners who indulge themselves in drug abuse show misconduct behaviour at school and the communities where they come from.

Head teacher D stated that;

Drug abuse has several effects on our school-going children at our school. It is very sad to see these children becoming violent to their fellow learners and, in some cases, even us the teachers. As if that were not enough, these children have resorted to vandalism of property in the community as well as the school.

Guidance and counselling teacher B explained that;

Furthermore, they also become violent to fellow learners and even use vulgar language. In some cases, they lose respect for their teachers and use abusive language. Sometimes they even become violent to their teachers and make the latter's work difficult.

Learner A remarked that;

Furthermore, learners who indulge themselves in drug abuse become violent to the learners who do not participate in drug abuse. Fighting and insulting is the order of the day among these learners. As if that were not enough, they resort to stealing from their friends in order to buy the drugs which they have been addicted to and cannot do without.

Learner B also said that;

Apart from that, they become violent to fellow learners by fighting and insulting them in class thereby disturbing the lessons. For instance, when the teacher is not in class, they will be just making noise disturbing their colleagues who are studying preparing for the final examination.

Learner C stated that;

Furthermore, drug abuse among these learners leads to violence where they start fighting fellow learners and even teachers in some cases. Whenever they start behaving like this, they disrupt all the activities in school causing terror and instability among the teachers and fellow learners.

Parent A attested that;

These learners [who abuse drugs] also become violent to their fellow learners and teachers by fighting and insulting. In some cases, they steal things from their fellow learners in order to buy drugs which have made them addicts because they cannot do without them.

Parent B also stated that;

Above all, they misbehave a lot when they are under the influence of these drugs such as fighting and insulting people because they do not fear anyone. When these children are under the influence of drugs, they lose respect even for us their parents. Apart from that, they also steal from us in order for them to purchase the drugs.

Parent D explained that;

There are many effects of drug abuse on school-going children here at our school. For instance, when these children smoke dagga and drink beer, they

become rude to us their parents, their teachers and even their fellow learners.

Not only that but they also become violent using abusive and sarcastic language to anyone they find on the way.

Parent E also responded that;

Besides that, they become violent by fighting and insulting their colleagues at school. This is something which has led to the disruption of lessons because it gives fear to their peers. Not only that but they also resort to stealing to raise money for drugs.

Parent G stated that;

Apart from that, they also resort to vandalism of school property and the community where they come from. These children resort to destroying school property when they are under the influence of drugs. For instance, they have no regard for school furniture such as desks, tables and chairs on which they jump on without any care. They also resort to destroying property from the homes where they come from.

(e) Loss of respect and being rude

Loss of respect and being rude were also cited as the effects of drug abuse among learners. Whenever the learners took drugs, they became rude and lost respect for their teachers at school as well as adults in the communities where they hailed from.

Head teacher B explained that;

For example, at school, they become unruly by fighting and bullying their friends. Not only that but also these learners lose respect for us teachers and use vulgar language. They just become so uncontrollable that sometimes we find it a challenge to control them as a school administration.

Head teacher D mentioned that;

Apart from that, these learners have lost respect and they have become stubborn to the elders in the community. Additionally, it is difficult to

control these children because they are arrogant. They actually have no regard for us elders at school and the communities where they come from.

Guidance and counselling teacher B stated that;

Not only that but also these children lose respect and become rude to the teachers by openly challenging the latter as though they know it all, as well as elderly people in the community because they do not fear anyone in society.

Guidance and counselling teacher C explained that;

Drug abuse among school-going children in our school has several effects on the learners. First and foremost, they lose respect to both their teachers and their fellow learners. They become so unruly that they begin to bully and fight their colleagues and stealing from them so as to raise money to buy the drugs which they are addicted to.

Guidance and counselling teacher D eluded that;

Lastly, these learners show unruly behaviour to us their teachers and their fellow learners. Female teachers are mostly the victims as they are considered being weak. They would rather listen to a male teacher than a female. They are so rude that female teachers even fear them. This really makes teachers' work difficult.

Learner A said that;

Not only that but they also lose respect for both teachers at school and elders in the community where they come from. They have no regard for adults in the community as well as the teachers at school who teach them. This makes our teachers' work difficult. In the communities where they come from, they can insult elders at will without any remorse at all.

Learner B stated that;

Loss of respect for both teachers at school and the elderly in the community is the main effect of drug abuse among learners here at our school. Furthermore, use of abusive language to teachers and other learners is the order of the day. They can hail insults at elders and teachers without shame.

Learner D affirmed that;

The main effect of drug abuse among school-going children at our school is bad behaviour. For example, they insult anyone they find. Not only that but they also lose respect for both teachers and elders in the community. They can insult any elders in the community without any shame at all.

Parent A stated that;

The effects of drug abuse among school-going children in Shibuyunji district are lack of respect for teachers and other elders in the society, poor health, stealing and violence. Learners who take drugs have very poor health and they stop observing personal hygiene. They look shabby because they have no time to wash their clothes and take a bath on a daily basis.

Parent G explained that;

Not only that but they also lose respect to their teachers and us their parents. They can insult us parents and their teachers without any shame at all. In some cases, they even become violent to us their own parents who raised them. It is such a shame and disheartening to see our children rising against us.

Parent H said that;

Besides that, these children become violent to their fellow learners by fighting and bullying them. They can beat up their fellow learners at will and without any remorse at all. This has made their fellow learners move in fear within and outside the school environment when they knock off from school.

(f) Stealing /theft

Stealing or theft was equally cited as an effect of drug abuse among the learners, where they resorted to stealing things from their friends at school and the communities where they came from in order to raise money to buy drugs.

Head teacher B stated that;

... at home in the communities where they come from, they resort to stealing in order to find ways and means to raise money to buy these drugs especially in cases where they become addicted and cannot do without them (drugs). Addiction has driven these learners to unacceptable levels of violence and they can do anything in order to raise money to buy these drugs.

Head teacher C explained that;

These learners have also resorted to stealing things from their friends in school and the communities where they hail from in order to purchase drugs. As a result, they have become bad citizens by being trouble makers and non-productive in the community. They are addicted and cannot do without these drugs. Hence, they can do anything in order to raise money to buy these drugs.

Head teacher D said that;

Not only that but also these learners have resorted to stealing and prostitution in order to raise money to buy drugs. For instance, girls who are involved in drug abuse have resorted to prostitution in order to raise some money to purchase the drugs. In one case, a female pupil from a neighbouring school was given some money and beer was bought for her by a certain Indian who owns a mine near the school where the girl goes to in exchange for sex. Apart from that, these learners steal things from their colleagues at school and from their parents at home in order to buy drugs.

Learner A explained that;

As if that were not enough, these learners resort to stealing in order to raise money to buy these drugs especially when they become addicted to them. They can steal money from their colleagues at school as well as their parents at home. Not only do they steal money but also other things from the community such as goats and chickens which they go sell just to raise money to buy drugs.

Learner B stated that;

Lastly, they resort to stealing from their fellow learners at school and at home from their parents so as to raise money to buy these drugs. They can steal money or anything from the community in order to raise money to buy the drugs. At school they can steal money or even books just to go and buy drugs. For example, there is one pupil who stole some text books from me so that he could go and buy drugs.

Learner C explained that;

They also resort to stealing in order to raise money to buy those drugs. In case, there was a pupil who stole money from a fellow pupil in our class just to go and buy some drugs. Another pupil stole some books from a fellow pupil from the other class just to raise some money to go and buy some drugs.

Parent A stated that;

Not only that but they also steal money from us the parents in order for them to buy the drugs. For example, there was one child from the community who came to steal a goat from our home at night just to raise money for the drugs. This is a boy who cannot do without smoking dagga and drinking beer. Even when you just look at him you can tell that he is into smoking and drinking too much.

Parent B said that;

Apart from that, they [drug-abusing learners] resort to stealing in order to raise some money to buy the drugs. They can steal from their colleagues at school and from their parents in the community where they come from so as to raise money to go and buy drugs.

Parent E stated that;

There are several effects of drug abuse on our children at our school. First and foremost, these children who abuse drugs stop going to school and resort to stealing in order to raise money to buy these drugs. These children become so desperate that they can do anything to raise money to go and purchase drugs.

(g) Illicit sex (prostitution)

Illicit sex or prostitution was also cited as an effect of drug abuse among the learners, where girls took insunko-a drug which enhances their sexual appetite and ended up having sex with their fellow learners as well as adults in the communities where they hailed from.

Head teacher B explained that;

Apart from that, some learners like girls take insunko a drug which is taken through the nose by way of sniffing, boosts their sexual appetite and leads them to having illicit and unprotected sex with fellow learners and even adults from the community in some cases.

Head teacher D stated that;

Not only that but also these learners have resorted to stealing and prostitution in order to raise money to buy drugs. The girls are forced to sleep around with some men from the nearby bars just in order to buy drugs. The boys also resort to stealing from their colleagues at school and at home from their parents just to raise money for the drugs.

Learner B said that;

Not only that but these learners also lose self-control and start sleeping around with fellow learners and in some cases even adults from the community leading to early pregnancies and early marriages. Those who are unfortunate enough end up with some Sexually Transmitted Infections (STIs) and HIV/AIDS as a result of having unprotected sex.

Parent B also said that;

There are many effects of drug abuse among our school-going children here at our School. First and foremost, drug abuse leads these girls into prostitution because when they do not have money to purchase these drugs, they begin to sleep around with anyone provided that person has money to give them.

(h) Early pregnancies

Early pregnancies were also cited as the effect of drug abuse among learners, where girls who took insunko, a sexual booster ended up having unprotected sex and got pregnant and were later forced into early marriages.

Head teacher B stated that;

This sad development leads these children to early pregnancies and early marriages. When these girls get pregnant, they are forced into early marriages by their parents. Most of the times these are the children who are involved in taking a sexual booster called insunko which makes them sexually active.

Guidance and counselling teacher A explained that;

Apart from that, drug abuse among these school-going children has led to early teen pregnancies, early marriages and contraction of Sexually Transmitted Infections (STIs), Human Immuno-Deficiency Virus (HIV) and Acquired Immune Deficiency Syndrome (AIDS). Not only that but also these children who abuse drugs bully other learners in school and in their classes.

Guidance and counselling teacher D stated that;

Apart from that, drug abuse among these school-going children leads to the transmission of sexually transmitted diseases as well as early marriages. This is so because these children become careless and resort to unprotected sex which leads them to contracting STIs and STDs. Apart from that, these learners are pushed into early marriages once they get pregnant as a result of unprotected sex.

Parent G said that;

Apart from that, drug abuse leads to early pregnancies and early marriages. These children usually get into early marriages as a result of getting pregnant because of having unprotected sex. They stop going to school at a tender age because of having unprotected sex which leads them to early marriages after falling pregnant.

(i) Early (teenage) marriages

Early teenage marriages were also cited as the effect of drug abuse among learners, where when girls took insunko, they ended up having unprotected sex and were later forced into early marriages.

Head teacher B explained that;

This sad development leads these children to early pregnancies and early marriages. Most of these children are victims of insunko a sexual booster which makes them sexually active and leads them to having unprotected sex. The moment they get pregnant, they are forced into early marriages by their parents.

Guidance and counselling teacher A stated that;

Apart from that, drug abuse among these school-going children has led to early teen pregnancies, early marriages and contraction of Sexually Transmitted Infections (STIs), Human Immuno-Deficiency Virus (HIV) and Acquired Immune Deficiency Syndrome (AIDS). Not only that but also these children who abuse drugs bully other learners in school and in their classes.

Parent G said that;

Apart from that, drug abuse leads to early pregnancies and early marriages. This is a situation which has led to most of the learners dropping out of school at a tender age as a result of having unprotected sex which leads them to early marriages. There is a substance called insunko which is a sexual booster that makes these learners sexually active and leads them to sleeping with their fellow learners and some adults in the community. This is a very sad development which has led most of these learners into early pregnancies and consequently early marriages.

(j) Dropping out of school

Dropping out of school was also found to be the effect of drug abuse among learners, where those who indulged themselves in drug abuse lost concentration on school work and ended up failing the final examinations thereby dropping out of school.

Guidance and counselling teacher A confirmed that;

Drug abuse in our school among school-going children has quite a number of effects on them. For example, most learners do not make it to grades 8 and 10 due to drug abuse. To make matters worse, these children do not have interest in GCE and end up stopping school because they are academically lazy and have little or no time for books.

Guidance and counselling teacher D stated that;

There are many effects of drug abuse among our school-going children at our school. Firstly, these children do not go very far in education. In most cases they end up in grade 8 or 9. Apart from that, drug abuse among these learners leads to teenage pregnancies. For example, a girl went up the mountains with 7 boys who took turns in raping her after taking some alcohol and Manhattan, a pill which learners put in alcohol, a sexual enhancer and it was later discovered that the girl in question was pregnant after the incident.

Guidance and counselling teacher D stated that;

Not only that but also drug abuse among school-going children acts as an impediment for the girl child education. For example, the girl in question who was gang-raped by the 7 boys does not want to report back to school despite the counselling for fear of being mocked by her friends at school.

Parent C also observed that;

Drug abuse among school-going children at our school has several effects on them. For example, learners stop going to school because they do not attach any value to education as a result of drug abuse. They do absent themselves from school and report late for lessons at will. Eventually, they stop coming to school because they know they cannot pass an examination.

Parent D said that;

Apart from that, these children become dull in class. They cannot perform well academically and end up dropping out of school. Drugs make them so lazy and dull that they cannot concentrate on school work. The only thing they can think of is where to get money to purchase these drugs.

Consequently, they end up stealing from us their parents and their fellow learners at school in order to raise money for the drugs.

Parent F stated that;

Drug abuse has several effects on our school-going children at our school. For example, they lose concentration on school and start failing examinations thereby dropping out of school. All they think about is how to raise money to buy drugs and that is how they end up stealing anything they can lay their hands on from our community and from their fellow learners at school.

(k) Non-productive in communities (lazy)

Laziness or being non-productive was also cited as an effect of drug abuse among learners, where those who were involved in drug abuse became so lazy that they could not do any work at school and the communities where they came from.

Parent C stated that;

These children are also a burden to their parents when they become lazy and unproductive as a result of drug abuse. They cannot help us their parents with any kind of work at home other than just lazing around. Apart from that, these children resort to stealing money and other items so that they can buy the drugs because they are addicted and cannot do without taking these drugs. Furthermore, these drugs they take sometimes affects their health and when they are sick, we are forced to spend money on medicine for them us parents. This is something which has become a burden to us their parents.

Parent E also explained that;

Drug abuse among school-going children has several effects on our children who abuse them here at our school. To begin with it brings about laziness to learners who abuse them such that they do not concentrate on school work. They become unproductive at home and even lose respect for us parents as well as their teachers at school. When these children are high on drugs, they have no regard for their own teachers who give them knowledge at school. At home they cannot do any work to help us their

parents. They become so arrogant that they even lose respect for us their parents.

Parent H said that;

Lastly, they become too lazy and unproductive in the community. They cannot help with any community work. All they can think about is how to raise money to buy the drugs. Consequently, they end up stealing from the community instead of contributing by being productive. This sad situation has adversely affected development in the community.

(I) Health (Diseases, such as STDs, and respiratory and mental)

Health was also cited as an effect of drug abuse among learners. For instance, those learners who were involved in drug abuse and resorted to having unprotected sex, ended up contracting Sexually Transmitted Diseases (STDs). Not only that but also those who are involved in drug abuse such as dagger or marijuana smoking, developed some respiratory and mental problems.

Guidance and counselling teacher A also explained that;

Apart from that, drug abuse among these school-going children has led to early teen pregnancies, early marriages and contraction of Sexually Transmitted Infections (STIs), Human Immuno-Deficiency Virus (HIV) and Acquired Immune Deficiency Syndrome (AIDS). They also developed respiratory as well as mental problems. Not only that but also these children who abuse drugs bully other learners in school and in their classes.

Guidance and counselling teacher B stated that;

As if that were not enough, drug abuse affects these children's health. For example, due to excess intake of alcohol, they end up damaging important organs of the body such as the liver and the brain leading to the former's contraction of a disease called cirrhosis which is the inflammation of the liver where it begins to swell.

Guidance and counselling teacher D also said that;

Apart from that, drug abuse among these school-going children leads to the transmission of sexually transmitted diseases as well as early marriages. There is actually a sexual booster which they take known as insunko which makes them sexually active and leads them to having unprotected sex with their fellow learners and some adults within their community.

Furthermore, drug abuse among these children also affects their brains. For example, there was a boy whose speech became slurred because of the brain which was affected as a result of drug abuse.

Learner B stated that;

[When pupils sleep around], those who are unfortunate even end up contracting Sexually Transmitted Infections (STIs) and HIV/AIDS. They actually become so excited and careless that they cannot use any protection. This has led to most of them having early pregnancies and contracting Sexually Transmitted Diseases including HIV/AIDS.

Learner C also explained that;

Apart from that, drug abuse also affects their health. For example, the smoking of marijuana affects the lungs and the whole respiratory system. Not only that but also drug abuse affects their brain. For example, marijuana, cocaine and beer. This leads to poor health and eventually death.

Learner D said that;

Additionally, drug abuse among these learners leads to their poor health and loss of appetite. For example, the taking of tujilijili can lead to cirrhosis which is the inflammation of the liver where the latter swells and stops functioning in a normal way. The ultimate result is death.

Parent A stated that;

Learners who are involved in drug abuse have poor health. For example, drugs like marijuana and beer affect their respiratory system because of the lungs, brain as well as the liver. The latter usually contracts a disease known as cirrhosis where it becomes swollen and disrupts the normal functions.

Parent E said that;

Apart from that, some drugs like dagga cause them to eat too much. Not only that but also drug abuse affects our children's health. For example, too much intake of alcohol leads to a disease called cirrhosis which is the inflammation of the liver where the latter begins to swell and cannot function properly.

Parent G mentioned that;

There are several effects of drug abuse among school-going children at our school. Firstly, drug abuse makes the health of these children poor. For example, drug abuse causes cancer and HIV because when one gets drunk, they lose control and can do anything.

(m) Involvement selling drugs

Involvement selling drugs was also cited as an effect of drug abuse among learners, where those who were involved in drug abuse resorted to selling marijuana and stealing money in order to buy drugs and other items.

Learner D also stated that;

Others start selling marijuana and even resort to stealing money in order to buy drugs and other items. When these learners become addicts, they cannot do without drugs and whenever they run out of them, they resort to stealing money from our parents and even us their fellow learners here at school in order to buy drugs.

Parent C said that;

Apart from that, they become addictive to drugs implying that they cannot do without the drugs. Consequently, they resort to stealing money and other items from their parents in order to buy these drugs. These children become a burden to us their parents because they cease to be productive and cannot contribute anything at home other than stealing from us their parents.

(n) Death

Death was also cited as an effect of drug abuse among learners. It was found that those who indulged themselves in drug abuse, had poor health which could even lead to death if the situation was not taken care of before it was actually too late.

Parent D stated that;

Furthermore, drug abuse leads to poor health of these children who abuse them. For example, lung cancer, going mad and even death in some cases. There is a deadly disease which affects the liver called cirrhosis that makes the former swell and cannot perform its functions normally. Consequently, this leads to eventual death.

(o) Lack of personal hygiene

Lack of personal hygiene was also cited as an effect of drug abuse among learners, where those who were involved in drug abuse stopped observing personal hygiene. They stopped bathing, combing their hair, brushing their teeth among others.

Parent D said that;

These children also become irresponsible by losing touch with their own personal hygiene. They stop bathing, washing their clothes, brushing their teeth and just look as though they are mad.

Parent E stated that;

Furthermore, these children stop observing personal hygiene such as washing their clothes and bathing. They actually begin to look as if they were mad because of the dirty and shabbiness.

Table 3 presents a summary of the main themes that emerged and how frequently they were cited by the participants.

Table 3; The effects of drug abuse among primary school-going children in Shibuyunji district.

s/n	Effect	Frequency
1	Disrupts learning (teachers have to attend to disciplinary cases)	5
2	Low concentration and poor academic performance	18
3	Abscondment (absenteeism)	7
4	Violence, misconduct, vandalism, bullying and being vulgar	18
5	Loss of respect and being rude	12
6	Stealing /theft	11
7	Illicit sex (prostitution)	5
8	Early pregnancies	5
9	Early (teenage) marriages	4
10	Dropping out of school	10
11	Non-productive in communities (lazy)	4
12	Diseases (STDs, respiratory and mental)	15
13	Involvement selling drugs	1
14	Death	1
15	Lack of personal hygiene	2

Table 3 shows that the commonly cited effects were low concentration at school which resulted in poor academic performance and violence. The least cited effects were involvement in illicit activities, such as selling drugs, and death.

4.3 The Strategies for Developing Effective Drug Abuse Interventions for Primary Schools

The participants were asked to suggest interventions that would be effective in reducing substance use in the primary schools and several interventions were suggested. Prominent among the interventions suggested was sensitisation about the evils of drug abuse. This was the most recurring suggestion. Others were guidance and counselling involving both teachers and parents, asking the learners to monitor one another's behaviour and reporting bad behaviour, instituting strict rules and punishment, forming clubs which would take away

boredom and also teach learners about the bad effects of drug abuse, and providing learners with recreational facilities to keep them busy.

4.3.1 Sensitisation

Sensitisation was cited as a strategy for developing effective drug abuse interventions among primary school learners. The latter were sensitised on the dangers of drug abuse through various platforms that were initiated by different stakeholders in the district.

Head teacher A stated that;

The main strategy for developing effective drug abuse intervention for our school and the district at large is sensitisation. For example, recently as a district we had an organisation working with Eden University which came to sensitise learners on the dangers of drug abuse. Sensitisation is very cardinal in the fight against drug abuse among school-going children because it makes them aware of the repercussions of drug abuse on their health and academic life.

Head teacher B said that;

The most effective drug abuse strategy at our school and even the district as a whole is sensitisation. For example, talking about the evils of drug abuse to our learners so that they become aware of the dangers of drug abuse and desist from the habit.

Head teacher C stated that;

As a school, we have put in a number of measures as interventions for effective drug abuse strategies among our learners. First and foremost, we work hand in hand with the health personnel from Shibuyunji clinic, who come to meet our learners to talk to them about the dangers of drug abuse to their health. Apart from that, the Drug Enforcement Commission (DEC) do come once in a while to sensitise our learners on the dangers of drug abuse.

Head teacher D also explained that;

Apart from that, forming drama clubs where learners can be talking about the dangers of drug abuse through sketches. Not only that but also involving other stakeholders like government departments such as Drug Enforcement

Commission (DEC) and social welfare to go round the schools sensitising learners on the dangers of drug abuse.

Guidance and counselling teacher A stated that;

The most effective drug abuse strategy intervention among our school-going children at our school is sensitisation, where we tell our learners of drug abuse consequences because it is of paramount importance that they know the dangers of abusing drugs. Apart from that, creating a club that talks about the dangers of drug abuse through poems, drama and songs. Besides that, teachers should be introducing their lessons with educating words concerning the dangers on drug abuse just as a reminder to the learners on how dangerous it is to abuse drugs so that they are aware all the time. Further, if as teachers you are very busy, it is important to invite other stakeholders like the Drug Enforcement Commission (DEC) officers to come and talk to the learners about the dangers of drug abuse.

Guidance and counselling teacher B said that;

As a strategy for effective drug abuse invention for our learners at our school, we have been inviting organisations to come and talk to the learners on the dangers of drug abuse. For example, we have been partnering with workers from the Ministry of Health who normally come to meet our learners from grade 4 to 9 because we have had cases of early pregnancies from as early as grade 4. Apart from that, we have also been working hand in hand with the police who come to sensitise the learners on the dangers of drug abuse and the consequences of the law for those found to be abusing drugs.

Guidance and counselling teacher C also commented that;

At our school, the most effective strategy we use as an intervention for drug abuse among our learners is sensitisation on the dangers of drug abuse. We normally do this through drama and poems.

Guidance and counselling teacher D stated that;

Not only that but there is also need to raise awareness in schools and communities on the dangers of drugs on the school-going children and the population at large.

Learner A explained that;

There are many effective strategies that can be put in place for drug abuse interventions among school-going children at our school. First and foremost, there is need to educate us on the dangers of drug abuse. Not only that but also forming school clubs to keep us away from drug abuse. For example, anti-drugs, drama, through sketches talking about the drug abuse poetry, all centred on the drug abuse. Further, there is need to make some publications of booklets on the dangers of drug abuse where we learners can easily access them.

Learner C explained that;

Not only that but also sensitising those who are involved in drug abuse about the dangers of drug abuse on their health which can lead to their death and how best this can be done in order to save their lives.

Learner D stated that;

There are several strategies for drug abuse intervention among school-going children here at our school and the rest of the primary schools in the district. Firstly, there is need to avoid group influence by being assertive and saying no to whatever negative behaviour that may arise from those involved in drug abuse to push those who are not involved to join them. Not only that but also teaching them about the dangers of drug abuse. For example, teaching them that drug abuse can lead to damaging important organs of the body such as the brain and the liver.

Parent A said that;

The best strategy for drug abuse intervention among school-going children in our community is sensitisation to those who sell drugs to learners that they shouldn't be selling drugs anyhow to underage children. Apart from that, there is also need to sensitise the learners themselves on the dangers of drug abuse. For example, telling them that drug abuse can ruin their health by damaging the liver and the brain as well as affecting their academic performance. The liver contracts a disease called cirrhosis where the former swells and disrupts its normal functions in the process. Consequently, this leads to death.

Parent B responded that;

The best strategy of drug abuse intervention among school-going children is to involve all the parents in telling the children about the danger of drug abuse in the community.

Parent C stated that;

There are several strategies of drug abuse intervention among school-going children in our community in Nkomba and the rest of the communities in Shibuyunji district. Firstly, there is need to sensitise these learners on the dangers of drug abuse. Not only that but also Christian values should be inculcated in the learners to help them refrain from drug abuse.

Parent D said that;

The best strategy of drug abuse intervention here in Sala community and other communities in Shibuyunji district among learners is to include topics of drug abuse in the lessons when teaching in class so that they know the dangers of drug abuse.

Parent H stated that;

The best way of drug abuse interventions among school-going children is sensitisation. Telling them on the dangers of drug abuse and how it can eventually lead to their death especially if they become addicted to these drugs.

4.3.2 Monitoring

Monitoring was cited as a strategy for drug abuse intervention among learners, where it was suggested that learners could be monitoring each other where they came from and reporting cases of those found abusing drugs to the school authority.

Head Teacher A explained that;

Apart from that, the other strategy would be talking about self-monitoring where learners can be monitoring each other where they come from and reporting such cases of those found abusing drugs to the school authority to deal with them accordingly.

Guidance and counselling teacher D said that;

There are several effective strategies for drug abuse interventions that can be put in place for drug abuse among school-going children at our school and other primary schools in the district. First and foremost, there is need to strengthen the bond between the school guidance and counselling departments with the Parental Teachers Association (PTA) in monitoring pupil behaviour so as to put in place required interventions where necessary.

Parent E stated that;

The best strategy for drug abuse interventions among learners in Nampundwe community is getting a one-on-one talk with the learners on the effects of drug abuse in order to help them refrain from the vice.

4.3.3 Guidance and counselling

All the head teachers cited sensitisation as an important intervention in mitigating the causes and effects of drug abuse among primary school learners in the district.

Head teacher A explained that;

Not only that but also taking guidance and counselling in schools in order to help these learners who indulge themselves in drug abuse. Counselling these learners would actually help them refrain from drug abuse and save their lives in the long run.

Head teacher B stated that;

Apart from that, another strategy would be conducting survey whereby when you look at certain change in behaviour among learners, as a school you try to find out why the change and seek to find help to such learners so that they can refrain from the habit of abusing drugs.

Head teacher C explained that;

Lastly, we have taken guidance and counselling seriously where we have the guidance and counselling teacher with his committee who counsel these learners on the dangers of drug abuse. Sometimes we even educate the

parents on how they are supposed to keep the drugs away from their children at home.

Head teacher D said that;

The most prominent strategy our School has put in place, which is also working for other schools in Shibuyunji district, is sensitisation of learners on how dangerous it is for them to abuse drugs. We tell them that drug abuse can lead to their poor health and eventual death if they do not refrain.

Learner B stated that;

Apart from that, there is need to render advice to our friends who indulge themselves in drug abuse about the effects of the latter. Lastly, there is also need to emphasise Christian values so as to help the learners refrain from drug abuse.

Parent C explained that;

It can actually be of much help to tell the children that drug abuse affects their healthy by damaging important organs of their bodies such as the liver and the brain. It can also be important to tell the children that drug abuse can affect their academic performance which can lead to them dropping out of school.

Parent F stated that;

The most effective way of drug abuse interventions among learners in Nampundwe community is by discouraging them from mingling with those involved in drug abuse. Telling them that if they are found with those who abuse drugs they can also fall into the same trap.

4.3.4 Strict rules and punishment

Strict rules and punishment were also cited as a strategy for drug abuse intervention among learners, where it was suggested that the school could come up with policy where learners who abused drugs could be given stiff punishment in order to deter would be offenders.

Head teacher B also said that;

Not only that but also coming up with school policy where learners who abuse drugs are given stiff punishment to deter those who would wish to abuse drugs in future. The punishment can be done at the school assembly in full view of the other learners so as to teach them a lesson and deter would be offenders.

Guidance and counselling teacher C attested that;

Apart from that, we have been punishing those learners who are involved in drug abuse in order to deter would be offenders. We have also been emphasising on the importance of our learners being law abiding citizens by refraining from drug abuse. These strategies have worked well for us as a school.

Learner A stated that;

Apart from that, another strategy is to report learners who indulge themselves in drug abuse to the school authorities so that they are dealt with accordingly through stiff punishment in order to deter the would be offenders from committing the same or similar offence.

Learner B explained that;

As a school and the rest of the primary schools in the district, the most effective strategy of intervention for drug abuse among school-going children is by reporting those learners who are involved in drug abuse to the police. For example, we learners can be reporting each other to the police and the school authorities as well as the parents.

Learner D eluded that;

Apart from that, there is need to give punishment to the offenders so as to deter would be offenders from committing the same or similar offence in future.

Parent A stated that;

Not only that but also punishing those who indulge themselves in drug abuse in order to deter would be offenders from committing a similar or same offence in future.

Parent G explained that;

Not only that but also giving them punishment to deter would-be offenders so that they also do not commit the same or similar offence in future. This can help many learners realise how serious an offence it is to be involved in drug abuse.

Parent H stated that;

... also reporting those who abuse drugs to the school authorities so that they can be dealt with accordingly to deter would be offenders from committing the same or similar offence in future.

4.3.5 Recreation

Recreation was also cited as a strategy for drug abuse intervention among learners, where it was suggested that schools provided adequate social amenities such as entertainment, sporting activities among other things to keep the learners busy all the time and distract them from drug abuse.

Guidance and counselling teacher D mentioned that;

Apart from that, there is need to provide adequate social amenities. For example, entertainment, sporting activities as well as anti-drug abuse clubs so as to prevent children from engaging in drugs in their spare time as they will be kept busy all the time.

Learner A stated that;

Lastly, there is need to provide recreational activities such as sports, church activities and scripture union to keep the learners busy all the time because it is said that an idle mind is the devil's workshop and that boredom can lead to drug abuse among school-going children.

Parent A said that;

Further, creating recreational facilities so as to keep these children busy all the time. Sports activities such as football which is a common sport can be taken seriously as well as cultural dances just to help the learners refrain from drug abuse.

Parent C stated that;

Apart from that, there is also need to give them recreational activities such as sports and entertainment facilities to keep them busy all the time and help them refrain from drug abuse.

Parent D also explained that;

Apart from that, there is need to get them involved in sports activities. For example, telling the learners to come for sports activities in the afternoon in the community. Not only that but also creating recreational activities to keep them busy all the time. For example, cultural dances.

Parent H stated that;

Also providing recreational facilities to keep them busy such as sports activities like football and cultural dances to help them refrain from drug abuse and become responsible citizens.

4.3.6 Good role models

Having good role models was also cited as a strategy for drug abuse interventions among learners, where it was emphasised that parents, guardians and all adults in the communities where the learners came from, led by example to their children.

Parent B said that;

Not only that but also putting God first in matters of drug abuse and leading by example as parents to the children in the community. All the parents and adults in the community should lead by example to the children or learners by not indulging themselves in drug abuse.

4.3.7 Making pupils busy

Making pupils busy all the time was also cited as a strategy for drug abuse intervention among learners, where it was suggested that learners should be kept busy all the time with activities such as sports, homework among other things to deter them from drug abuse.

Learner C eluded that;

The best way of intervening in the issue of drug abuse among school-going children here at our School and the rest of the primary schools in Shibuyunji district is by keeping us learners busy all the time with different activities such as sports, entertainment as well as school work like homework.

Parent D explained that;

Apart from that, there is need to keep them busy with school work, house chores, games and sports activities so that they can refrain completely from drug abuse and become responsible citizens.

Parent F stated that;

Apart from that, the children should be kept busy all the time. For example, taking them to church and keeping them busy with God's work. Also keeping them busy with school work and house chores because it gives them less time to play. Not only that but also giving them sports activities to keep them busy all the time to help them refrain from drug abuse completely.

Parent G said that;

The best strategy of drug abuse interventions among learners is to keep them busy all the time with recreational activities. Apart from that, involving learners in a lot of projects to keep them busy all the time.

4.3.8 Multi-sectoral approach

Multi-sectoral approach was also cited as a strategy for drug abuse intervention among learners, where it was suggested that a multi-sectoral response team with key stakeholders to prevent drug abuse among learners be formulated.

Guidance and counselling teacher D stated that;

Further there is also need for the formulation of multi- sectoral response team with key stakeholders to prevent drug abuse among our school children.

Parent B eluded that;

Apart from that, there is need to work hand in hand with the healthy workers to sensitise the learners on the dangers of drug abuse. The schools can be inviting health personnel from the nearby clinics to come and talk to the learners on the dangers of drug abuse.

The perceived interventions are summarised in Figure 3.



Figure 2; The interventions required to prevent drug abuse among primary school-going children in Shibuyunji district.

Figure 3 shows that the most frequently given intervention was sensitization (for learners, parents and those who sell drugs), followed by provision of recreation (e.g., sports, clubs, church, and cultural dances) and guidance and counselling (for both pupils and parents).

This section of the chapter shows that the participants had different views about the interventions that should be taken to mediate the effects of drug abuse among school-going children in the study area. There seems to be consensus however that sensitisation is key to intervening in the use of drugs among learners in the district. This would be supported by providing learners with recreational facilities to take away boredom.

4.4 Summary

In this chapter, the researcher presented the results of the study. The results were presented using three main themes, namely; the causes of drug abuse in Shibuyunji district, the effects and the interventions that can be taken to stop the scourge. In the next chapter, the researcher discussed the findings of the study.

CHAPTER FIVE: DISCUSSION OF FINDINGS

5.0 Overview

In this chapter, the researcher discussed the findings of the study based on the main issues coming out of the study. The researcher discussed the findings in relation to the themes that emerged from the research findings, literature that was reviewed in chapter two and the theoretical framework that guided the study. The research objectives were as follows; to establish participants' views on drug abuse by primary school pupils in Shibuyunji district; to determine the causes and effects of drug abuse on primary school pupils in Shibuyunji district; and to determine the strategies for developing effective drug abuse interventions for primary schools in Shibuyunji district.

5.1 Awareness and Understanding of the Meaning of Drug Abuse

Communities, such as Shibuyunji, need increased awareness on important issues relevant to them. Lack of basic knowledge and understanding may result in many unnecessary issues for families that can easily be remedied. In this section, therefore, the researcher discusses the findings about how well participants understood drug abuse and its prevalence among primary school children in Shibuyunji district.

The fact that the respondents understood the meaning of the terms 'drug' and 'drug abuse' and were also able to define both terms reasonably well showed that stakeholders may have had a basic understanding of the problem at hand. This knowledge may be crucial to the beginning of solving the problem of drug abuse among primary school children in the district. Similarly, the finding that the participants were aware that the problem of drug abuse existed in primary schools in their district was significant. This is because awareness is an essential ingredient to solving a problem and is a key indicator of success in a range of performance environments (Yeager-Walrath, 2017). By being aware, the participants have an insight into their actions and whether those actions are positive or negative. Harrison et al. (1993;22) explained that, "If you are aware then this will give you knowledge and if you have knowledge then you know what you need to do and the direction you need to go to make changes to improve and be successful."

It can be argued concerning the current study that, because the participants had both knowledge and awareness, they were able to state the causes, effects and solutions to the problem of drug abuse among primary school children in the district.

5.2 Causes of Drug Abuse

The researcher in the study found that there were many causes of drug abuse among primary school learners in Shibuyunji district. These included peer pressure, lack of recreational facilities, curiosity and amusement, lack of parental guidance, availability of drugs in the area, and poverty among the main reasons. In this section, the researcher discussed these results.

5.2.1 Peer pressure

Peer pressure was the most cited cause of drug abuse among primary school-going learners in Shibuyunji district. Strictly speaking, peer pressure plays a vital role in influencing young people to take to drugs. All respondents indicated that people who indulged in drug abuse were usually influenced by friends when they started abusing drugs. In fact, it is common practice for growing children to be influenced by friends when they assume certain types of behaviour, be it good or bad. Funderstanding (2011) asserted that, along with being a beneficial influence, there are moments when peer pressure can overwhelm a child and lead him down a challenging path. The current study revealed that some young people were being influenced by friends whenever they took drugs. This finding resonates with Mwamwenda (1995, p. 489) who opines that “People like to conform as a way of getting approval from others. This is especially true for adolescents who may yield to peer pressure in an attempt to conform.” Peer relationships are crucially important for school learners because they are a primary group from where behaviour is learnt. More often than not, young people have the desire to be appreciated by friends and have a sense of belonging to a peer group. If they do not conform to the requirements of the group young people might have a sense of rejection. Peer pressure is, therefore, associated with the desire to gain total acceptance into the peer group. Young people are required to conform and satisfy the demand of peer groups. Some of the demands of such peer groups may entail using drugs. In one case, a head teacher indicated that some children who had left school still had friends in school and were trying to

entice these friends to join them. Clearly, peers tend to exert the most robust influence on their friends, especially at the imitation stage, which leads to addiction. The finding is in line with Albert Bandura's social cognitive theory (Bandura, 1986) which guided the study and alluded to the fact that among the causes of drug abuse among learners was peer pressure. This was evident from the responses that respondents gave. It can, therefore, be concluded that social learning processes play a vital role in modeling individual attitude and behaviours in drug abuse. The quality of the peer group a child joins will determine whether he/she gets positive or negative reinforcement from the social group (Gatonye, 2006).

5.2.2 Lack of recreational activities

Lack of recreation in the area was the second most cited cause of drug abuse among primary school learners in Shibuyunji district. According to Agbai (2018), outdoor recreation for children is important both for fun (and boredom-relief) and (mental and physical) development. This study, however, showed that there was lack of recreational activities for most youngsters to pass time in the area. The participants indicated that due to boredom, most young people resorted to using drugs in order to while away time. This is in line with findings from previous studies which have stated that children encounter different stressors in life and require recreation to 'shake off' some of the stress (Mwamwenda, 1995; Agbai, 2018). Mohasoa's (2010) study noted that there were no recreational facilities in the rural areas, and, as a result, adolescents tended to engage in risky behaviours, including use of drugs. The social cognitive theory by Albert Bandura (1986) which guided this study also identified social and environmental factors as having an impact on learner motivation. Therefore, according to the findings of this study the environment in which learners in Shibuyunji district found themselves exposed them to activities such as abusing drugs of which they fell prey. Ngesu et al. (2008) and Maundu (2013) also submitted that pupils like taking drugs owing to boredom and idleness. This problem may be exacerbated if schools do not give their learners enough home work to keep them engaged most of the time.

This finding may, however, be countered by those scholars who have observed that some learners take drugs to enhance their performance in recreational activities such as sports and games. According to the United Nations Office for Drug Control and Crime Prevention

(United Nations, 2002), studies of young men and women who play for US college teams have consistently found that these players are more likely to drink frequently, more likely to binge drink, and more likely to report harms from their drinking.

5.2.3 Lack of parental supervision

Parents (whether biological or adoptive) are among the most important people in the lives of young children because children depend on them for learning, guidance, protection, care, and overall well-being (Jacob & Seshadri, 2013). In the current study, lack of parental guidance was the third most mentioned cause of drug abuse among primary school learners in Shibuyunji district. The participants indicated that young people in the community indulged in drug abuse owing to lack of parental supervision. This was especially so for those children who were orphaned. Such children were often looked after by their grandparents who did not even bother to pay attention to what they did. This vulnerability left many school learners at risk of using drugs. The finding is similar to that of Shoemaker (2004), who contends that laxity in parental discipline of their children gives birth to delinquency which is invariably associated with drug abuse. Pengpid and Peltzer (2013) explained that lack of parental supervision was often associated with drug abuse.

Two scenarios related to parental guidance and protection can be explained here. The first scenario is where parents display general tendencies for being more or less involved in the supervision of their children but lack the specific skills and knowledge required for discharging parental responsibilities. Parenting knowledge is necessary for the development of children. According to the National Academies Press et al. (2016), parents need to develop both depth and breadth of knowledge to respond to the varied needs of their children. This knowledge includes being aware of developmental milestones and norms that help in keeping children safe and healthy and understanding the role of professionals (such as teachers, health workers, and social workers) and social systems (such as schools) that interact with families and support parenting. In the absence of this parental knowledge, children may develop a general propensity for drug abuse and other forms of bad behaviour. *Parenting self-efficacy* is the level of parents' self-belief about their ability to succeed in the parenting role (Jones & Prinz, 2005).

Another scenario is where parents out rightly lack responsiveness to their children's needs (parenting attitude). Such parents pay little or no attention to monitoring the children's activities or their whereabouts. Previous studies have shown that some parents may have no time to supervise or interact with their children because they may be busy at work and their children may be left in the hands of other people who might not be concerned. Higuera (2019) calls this “*uninvolved*” or “*neglectful*” parenting. Other parents put pressure on their children to pass examinations or perform better in their studies. All these can initialise and increase drug abuse. Some of the respondents in the current study indicated that a lack of parental supervision or monitoring contributed to drug abuse in the study area. Therefore, it can safely be concluded that parental supervision is a vital method of preventing drug abuse by school children.

5.2.4 Curiosity and amusement

Kilonzo (1996) explained that drug abuse can also be a result of curiosity. In the current study, respondents revealed that one of the causes of drug abuse in their area was curiosity accompanied by amusement. Respondents indicated that many young people tried using drugs when they sought to satisfy their curiosity. Respondents revealed that some children may have wanted to overcome boredom by taking a stroll and when they found their friends taking drugs, they may have joined in the smoking out of sheer curiosity and amusement. Some learners ventured into beer drinking because of their inability to cope with the problems they faced, with the mistaken notion that the problem would end after taking the drug. The finding connects well with Albert Bandura's Theory (1986) because it relates to school children's behaviour in schools whose curiosity led them to do risky activities which made them vulnerable to drug abuse. Again, there are those who were so inquisitive that they wanted to taste the stuff in order to derive pleasure from the drug. Chibaya (2016) explained that people who took drugs for the first-time experienced initial enjoyment. This may spur a craving for more drugs. This finding resonates well with Otieno's (2009) assertion that the major causal factors leading to drug abuse in most communities are curiosity, seeking recognition or acceptance by friends as well as the ignorance of its dangers.

5.2.5 Poverty

The respondents revealed that some children abused drugs because of the frustrations of poverty. It was learnt that the increasing deprivation of necessities in some homes forced some parents to send their children out to sell some merchandise in order to make ends meet. Previous studies have indicated that when children were engaged in activities such as hawking, they became prone to taking drugs so as to gain more energy to endure the hardship that came with such activities. For example, a study by Adjei, Aboagye, and Yeboah (2012) in Kumasi, Ghana found that sending children into the streets for vending exposed them to delinquent behaviour which included drug abuse. Further, the study indicated that deprivation led to absenteeism from school and eventual school dropout. Essentially, extreme poverty may predispose pupils to drug abuse because of the mistaken belief that drug use may either make them forget their problems or make them strong. It has been found by scholars such as Adelekan et al. (1998) that poverty is the breeding ground of drug abuse among pupils owing to absenteeism and idleness.

Apart from drug abuse, poverty can also drive young people into vices such as underage sex. Many of them may be hungry owing to a lack of food at home. In this study, a female pupil confessed that she and her friends were given some beer to drink by some Indian mine owners in the areas who later had sex with them. The finding relates well with Bandura (1986) who also contended that behaviour change was influenced by mainly three things; environment, people and behaviour. Learners from poverty-stricken homes were forced to find ways of looking for other means of survival. Therefore, by observing other people engage in behaviours that seemed attractive lead to their desire to engage in the same behaviour and consequently finding themselves in drug related abuses. The head teacher at the school where these girls were lamented that the girls were forced to do that because they wanted to make some money for survival. Therefore, it is factual that poverty-stricken homes can push some learners into abusing drugs and other vices. It can be concluded then that addressing poverty effectively is one way of dealing with the problem of drug abuse among primary school children.

5.2.6 Home background

The study found that, at family level, some parents were so irresponsible that they were unconcerned about whether their children used drugs or not. This was seen in the lack of support from parents who sided with their children when challenged by school authorities. The learners themselves did not agree that they abused drugs while their parents hid information on their children's abuse of drugs. If parents reported their drug-abusing children to school authorities (like they did for the re-entry policy which allowed pregnant girls readmission into schools), it would have been easier to curb drug abuse among school-going children in the area. However, parents hid drug abuse cases because they feared the law on drugs and, possibly, societal stigmatisation, exclusion and discrimination, and maltreatment (Bah, 2018). This finding on parental denial resonates with the explanation by the Center for Substance Abuse Treatment (2004) that the parental stance is; (1) "What drug/alcohol problem? We don't see any drug problem!" or (2) after authorities intervene; "You are wrong! My child does not have a drug problem!" This lack of support for school authorities extended beyond the parents to siblings and community members. Sometimes drugs were supplied by members of the community to the school children.

The situation is usually worsened by lack of good role models in families and communities. The finding is in line with Bandura model (1986) which guided this study by postulating that role modeling affected behaviour acquisition and shaping of the behaviours in the society. Learners who engaged in drug abuse, most likely learnt the behaviour from the role models who could be their parents, other adults, teachers, peers, and celebrities in the community. In a situation that these role models got involved in drug abuse, learners may desire to engage in such behaviour too. The findings of this study showed that the only role models that learners in the district had, engaged in drug abuse which made learners believe that it was a way of living. Like Ronoh (2014) explained, use of drugs by family and community members may result in children emulating the users, and, therefore, indulging in drug abuse. Because this issue is a community-wide problem, it needs the concerted efforts of all community members, including traditional, civic and political leaders in the community.

5.2.7 Ignorance

It was also learnt that ignorance among pupils of the dangers of drug abuse compounded the problem. For example, some young people may be influenced to think that if they took drugs their performance may be enhanced in one way or another. The finding that some learners think when they smoke dagga, they would become intelligent and pass all the subjects is a big deception which, unfortunately, a lot of boys and girls have fallen for it and started to take drugs. This finding agrees well with the writings of Kiiru (2004) that the young are influenced to use drugs under the misguided view that they cannot only stimulate appetite for eating but also increase strength as well as get wisdom and courage for them to face life with its challenges. The finding was in line with Albert Bandura's social cognitive theory (Bandura, 1986) who also noted that behaviour depended on the environment. The situation of learners abusing drugs in Shibuyunji district was exacerbated by the environment that they found themselves in which had wrong informing or expressed ignorance about drugs which made them fall into the ditch of drug abuse. The deception of what drugs can do is also clear from the following statement by a learner;

It's not that it [drug] makes you more intelligent ... It's just that it helps you work. You can study for longer. You don't get distracted. You're actually happy to go to the library and you don't even want to stop for lunch. And then it's like 7pm [19:00 hours], and you're still, 'Actually, you know what? I could do another hour.' (Cadwalladr, 2015, para. 4)

As stated later, school-based education is required for drug abuse prevention among primary school-going learners. This is because, according to the Victoria State Government (2009), one of the counterbalancing roles that education can play in relation to drug abuse is inculcating informed decision making in the learners.

5.2.8 Availability of drugs in the area

Respondents in this study observed that easy availability of drugs and other related substances in the community made pupils vulnerable to the allure of the vice of drug abuse. It has been noted by Kaguthi (2004) and Kilonzo (1996) that availability of drugs and substances, both licit (such as cigarettes and alcohol) and illicit (such as heroin, cocaine and mandrax), has the

potential to lead to drug abuse among young people. The current study revealed several problems concerning availability of drugs in the study area. One of the problems was that there were teachers and community members who provided drugs to pupils. United Nations Office on Drugs and Crime (UNODC, 2004) states that individual teachers should care, as human beings, when learners use drugs. Therefore, rather than supply learners with drugs, teachers (and community members) should help learners to cultivate positive attitudes towards their school work, well-being and good discipline. The availability of alcohol at school events should also be avoided because it may interfere with drug education and prevention efforts.

Another problem revealed in this study was that some schools were located near bars or that bars were located along the routes the learners used to move from home to school. The finding agreed with Bandura (1986) who concluded that behaviour change is influenced by mainly three things; environment, people and behaviour. The environment in which learners in Shibuyunji found themselves and the behaviour that was exhibited by people in the community exposed them to bad vices such as using drugs. Teachers pointed out that learners sometimes became inquisitive to find out what elders felt like after taking beer and drugs. In the long run, they ended up becoming drug users themselves. It was also noted that the prices of the drugs in the area had dropped tremendously; the drugs were so cheap that they were easily accessible by the young people. Alongside the dropping prices, the supply of drugs in the area had increased. It was further revealed that pupils were in direct contact with drug peddlers on a daily basis whenever they were on break or lunch. This finding is in consonance with Gitau (2007) who claimed that ease of availability of drugs was one of the reasons behind the trend of drug abuse in many schools in Nairobi County in Kenya.

5.2.9 Other causes

Mwamwenda (1995) revealed that there were other reasons why people abused and depended on drugs. The findings of this study were that these causes included ‘modern’ life, frustration, lack of proper guidance and counselling structures at school and in communities, and loneliness and stress. Concerning ‘modern’ life, some learners thought they were being up-to-date by indulging in drug abuse. Some thought that drugs were “cool” or harmless while

others believed that an adolescent used drugs for fun (Sussman, Skara & Ames, 2008). The American Addiction Centre explained that some teenagers felt like it was a “now or never”.

As for lack of proper guidance and counselling, it was learnt that, although stakeholders had a basic understanding of what drugs were and their consequences, there was inadequate knowledge among teachers on how to deal with drug abuse and even how to detect drug abusers. This problem was compounded by the fact that there was no deliberate policy on drugs in the schools. Concerning loneliness and stress, a lack of coping skills could lead learners to seek out an artificial method of coping with stress. Therefore, schools needed to impart coping skills to the learners. This was in agreement with the American Addiction Centre who asserted that a lack of coping skills could make teenagers turn to drugs in order to relax.

5.3 Effects of Drug Abuse

The study found that drug abuse had many effects on the primary school-going children in Shibuyunji district. The effects were either direct or indirect. The major effects found were lower concentration on school work and poor academic performance; violence, misconduct, vandalism, bullying and being vulgar; diseases (STDs, respiratory and mental); loss of respect for and being rude to elders, teachers and friends; stealing; dropping out of school; and abscondment (absenteeism). Other effects included disrupted teaching and learning; illicit sex (prostitution); early marriages and teenage pregnancies; not being productive in the community; lack of personal hygiene; involvement in drug dealing; and death. This section discusses these findings.

5.3.1 Lower concentration on school work and poor academic performance

Participants explained that learners who abused drugs were non-performers at school because their presence in class did not mean anything since most of them could not even read and write despite being in grades 7 or 8. The participants indicated that some pupils had decreased or lower academic performance because of their failure to attend school regularly or they may have dropped out of school owing to the influence of drug abuse. In one case, a parent from one of the school communities lamented that his son had decided to stop going to school after

qualifying to grade 10 due to the influence of drugs. It was revealed that the use of drugs was often associated with emotional problems such as stress which did not resonate well with academic performance resulting from absenteeism. These findings were in tandem with results of studies done elsewhere. Karechio (1996) indicated that low performance by pupils in class may lead to misuse of drugs which they believe can improve their understanding and insight. According to Macleod et al. (2004), drug abuse is consistently associated with reduced educational achievement.

5.3.2 Violence, misconduct, vandalism, bullying and being vulgar

Most of the participants also indicated that when young people who indulged in drugs were confronted, they sometimes resorted to aggressive behaviour or violence. They also became involved in acts of vandalism and bullied their friends. These young people were fond of using vulgar language and made the teachers' work difficult because they did not concentrate on school work other than disturbing classes. Some of these learners even engaged in quarrels and fights with their school mates. A study by Bezinović and Malatestinić (2009) indicated that exposure to drug abuse often leads to the adoption of criminal and delinquent behaviour. Furlong et al. (1997) also argued that there was an association between drug use and school violence.

Due to their unruly behaviour and lack of desire to learn, drug abusing learners sometimes got suspended or expelled from school. This finding is in line with the findings of a study by Johnston, O'Malley, Bachman & Schulenberg (2009) which established that more teens were either being expelled from school or were voluntarily leaving school owing to drug abuse. It can, hence, be tentatively concluded that drug-free schools are safe schools (Furlong et al., 1997). Nieri et al. (2015) suggested using life skills which aim to improve communication competence, risk assessment, and decision-making to provide learners with positive alternatives for resolving conflicts without resorting to violence.

5.3.3 Diseases

The participants indicated that they were aware that, when taken in excess or abused, drugs could harm or damage the liver and cause cirrhosis, a condition where scar tissue gradually

replaced healthy liver cells (Felman, 2017). When someone suffers from cirrhosis, the liver gets inflamed and swells, and its normal functions are disrupted. Apart from that, some learners who abused drugs ended up contracting Sexually Transmitted Infections (STIs) and may even have been exposed to Human Immuno-Deficiency Virus (HIV) and Acquired Immune Deficiency Syndrome (AIDS) if they engaged in unprotected sex which they indulged themselves in when they were under the influence of drugs. This finding is in agreement with a study by Smite (2015) which found that drug abuse often led to health problems, social problems, injuries, unprotected sex, violence, deaths, car accidents, homicides, and suicides as well as physical dependence or psychological addiction.

One crucial effect of drug abuse is addiction, that is, the inability of an individual to control his or her use of a drug (Kobiowu (2006). Although drug addiction is not a disease *per se*, it constitutes a habit because of the addict's desire to have the drug which revolves around physical dependence. Where an individual who is an addict decides to stop taking the drug, he/she may suffer painful withdrawal illness.

5.3.4 Loss of respect for other people and being rude

The study established that some learners who abused drugs became rebellious towards school authorities, their parents and other community members. This finding is in agreement with a study by Hamdulay and Mash (2011) which indicated that learners who had problems of alcohol use experienced occurrence of rebelliousness. While adolescent rebellion is a poster characteristic of the teenage years, it can be exacerbated by drug use among children. Pickhardt (2009) distinguished between two types of rebellion; against socially fitting in (*rebellion of non-conformity*) and against adult authority (*rebellion of non-compliance*). According to Pickhardt, both types of rebellion attract adult attention by offending it. It is, therefore, important for parents and other adults to understand the connection between drug abuse and troubled teens. This may help them to safely guide the teenagers through this stage of life.

5.3.5 Stealing/theft

Another important finding of this study was that young people usually stole money and other items in order to finance their habits. The respondents further indicated that drug-abusing learners stole to reinforce their habits. Sometimes these learners also got involved in selling drugs for the same reason. This finding resonates with the findings by Peltzer et al. (2010) that an upsurge in crime and violence by young stars in South Africa was associated with drug use and illicit drug trafficking. As stated already, Nieri et al. (2015) have proposed promoting positive development via life skills training as a way of preventing stealing and other vices among learners. These scholars report that learners may have benefited from the strategies they had learned from the keep it REAL programme, a substance use prevention programme, to navigate peer pressure.

5.3.6 Other effects

Other effects of drug abuse reported by the participants included disrupted teaching and learning. This occurred in two main ways; when the learners became violent in class and when the teachers had to attend to the disciplinary cases caused by the disruptive learners. According to the Oregon Education Association (2018), disrupted learning takes time away from learning and affects all of the learners. In addition, in the case of violent outbursts, both teachers and learners do not feel safe and secure while at school. Disruptive learners may need counselling services to correctly identify their problem and develop the skills necessary to cope with it.

Participants indicated that, under the influence of drugs, learners could have illicit sex, either with fellow learners or with adults in the communities. They could also engage in prostitution to raise money for the drugs (and sometimes for food). This finding agrees with Onyeka, et al. (2013) and Bah (2018), who stated that victims, particularly young girls, get involved in all types of risky and antisocial behaviours, such as sex for drugs or money, exposing them to a range of diseases including STIs and HIV/AIDS. However, female learners who become sexually active and indulge themselves in sexual behaviour may also become victims of early pregnancies as well as early marriages. Apart from temporarily stopping school (there is

readmission into school due to the re-entry policy), the attendant problems of early pregnancy include mental changes, stress from sleeplessness, caring for the child, and physical health.

Participants also stated that learners who were involved in drug abuse became too lazy to study and work at home. Therefore, they were not being productive in their communities. They also lacked personal hygiene hence began to look as though they were mad. A study by Bah (2018) in the Gambia showed that these children were described as lazy and unproductive, aimless and good for nothing, cursed and a societal burden. Just as Bah puts it, describing the children in this way denies them community support, pushes them into hiding, makes them reluctant or even afraid to seek treatments, and makes their situations worse. Similarly, Bryan et al. (2000) cited in Kelleher (2007) explain that societal negative attitudes serve to exacerbate the plight of the drug abusers by increasing their sense of alienation, thus discouraging them from seeking help for their problems.

Participants also indicated that drug abuse could lead to death. This is the ultimate consequence of engaging in drug abuse. Although no death of a learner as a result of drug abuse was reported, the participants were well aware that the vice could lead to death.

5.4 The views on the Strategies

This section discusses the views of the participants concerning the strategies for developing effective drug abuse interventions for primary schools in Shibuyunji district. The strategies proposed by the participants were sensitisation, provision of recreation activities, enacting and enforcing strict disciplinary rules, ensuring the learners are busy, and guidance and counselling. Additionally, the participants proposed monitoring of the behaviour of learners and having good parent role models.

5.4.1 Sensitisation

The most frequently proposed strategy by the participants was sensitisation. That stakeholders put education first resonates well with the statement that “Education is the most powerful weapon which you can use to change the world” attributed to Nelson Mandela (Duncan, 2013). The possibility is using school-based drug education strategies to curb involvement

and the effects of drug abuse among primary school-going children in the study area. Drug education enables children, youths and adults to develop the knowledge, skills, and attitudes to appreciate the benefits of living healthily and responsibly. Participants, therefore, suggested that community leaders, such as headmen and women, politicians, parents and school authorities, must find ways and means of curbing drug abuse through sensitisation of community members on the dangers associated with drug abuse. This means that it is not the sole responsibility of schools to reduce or stop drug abuse. Similarly, education for drug abuse prevention should be seen to include both formal and informal aspects, not just formal. In this regard, the United Nations Office on Drugs and Crime (UNODC, 2004) explained that school-based education for drug abuse prevention was the total set of experiences to which learners were exposed over their time at school [and at home] that contributed to preventing drug use and mitigating the consequences of drug use.

What should drug education involve? The content obviously would be what drugs are and the dangers of using them. The teaching strategies suggested are interactive teaching and the life skills approach. The United Nations Office on Drugs and Crime (UNODC, 2004, p. 31) puts it that “education for drug abuse prevention is more successful when it is student-focused and uses interactive methods, with experiential learning and small group work as its basis.” Young people require sophisticated skills such as critical thinking, communication and problem solving. Here, some of these skills were discussed in detail.

Experiential learning involves active and interactive participation in structured learning experiences or activities employing a combination of learning styles. It is learner-centred, promotes cooperative learning, and the inquiry method. Transformative learning utilises disorienting dilemmas to challenge the thinking learners. Learners are then encouraged to use critical thinking and questioning to consider if their underlying assumptions and beliefs about the world are accurate (Christie, Carey, Robertson, & Grainger, 2015). In turn, youth gain the knowledge, skills, attitudes, behaviours and values they need to engage positively with society that is, making healthy choices. In this way, youths get both relevant and quality education. In their study of how sustainability education could be incorporated in the syllabus of a secondary school in western Zambia, Namafe and Chileshe (2013) found that connection, quality and relevance could be brought about by developing the capabilities of learners,

teachers and community members to attend to a social problem. This point of view concurs with Njagi (2014; xvii) who stated that “Sensitizing parents on abuse of drugs and their functions as role model-parents and other stakeholders of education need knowledge about drugs since young people learn from them and they go beyond.”

Another skill that young children needed was decision-making. This skill is relevant to education for drug abuse prevention because it promotes and supports learner decisions in relation to positive healthy behaviour and acceptable social activity (UNODC, 2004; UNESCO, 2017). This should go alongside the skills for assertion, that is, the specific way of communicating that enables people to express their thoughts, feelings and values about a situation openly and directly. Assertion is an important skill in social situations that involve pressure to use drugs, as well as in many other real-life situations.

The participant further suggested that the schools could also publish booklets on the danger of drug abuse where learners could easily access such information.

5.4.2 Provision of recreation activities

Provision of recreation activities was the second most prevalent strategy suggested by the participants. The study shows that, apart from sensitization, learners should also be encouraged to participate in recreational activities so that they cannot come near areas where drug abuse is prevalent. It has been established that some school-going children take drugs simply because they have nothing to do to while away time. Therefore, participants suggested that learners should be engaged in recreational activities so that they do not feel bored and resort to drugs.

The importance of recreational activities has been documented by a number of scholars. According to Kagwiria (2016; 4), “Participating in recreational activities helps one to relieve pressure, therefore, promoting health, joy and healthy social relationships and attain a sense of well-being.” Reitzes (2009) observes that there is a need for recreational facilities in rural areas in order to curb the high rate of substance abuse among adolescents. Therefore, the statement by one of the participants in this study, that there was need to involve the learners in recreational activities such as playing football, netball and other sporting activities to divert

the learners' minds from abusing drugs, is not far-fetched. The strategy resonates well with Albert Bandura's social cognitive theory (Bandura, 1986) who advocated for proper environment in order to deter learners from engaging in drug abuse. In this case once learners are provided with enough and attractive recreational facilities then the fight against drug abuse by all stakeholders may be won. The participant further observed that there was also need to take cultural activities such as traditional dances seriously as they could also deter the learners from abusing drugs.

Another participant observed that to keep away learners from drug abuse it was of paramount importance that schools formed anti-drugs clubs where drama and poetry could be used to disseminate information on the dangers of drug abuse through sketches. He also suggested that schools could be providing recreational activities such as sports as well as church activities like scripture union to keep the learners busy all the time because it was boredom in most cases which led learners to drug abuse.

Various scholars have explained the benefits of availing recreational facilities to learners, particularly in rural areas (Nelson, 2000; Riggs, 2003; Mohasoa, 2010; Mthethwa, 2017; Hoe, 2007, and Peter et al., 2014). Apart from taking the children away from drugs, recreation could also help to keep adolescents active in constructive ways. The benefits include enjoyment, skills development, friendships, competition, fitness, health, achievement, status, fun, energy and stress release. According to Kagwiri (2016; 4), "Participating in recreational activities helps one to relieve pressure, therefore, promoting health, joy and healthy social relationships and attain a sense of well-being."

5.4.3 Enacting and enforcing strict rules

Participants also felt that there was need for strict rules concerning the use of drugs by primary school learners in Shibuyunji district. There are two dimensions to rules and regulations; they have to be enacted and then enforced (World Bank Group, 2002; Chileshe, 2018). Those learners who do not abide by the rules need to be punished. For example, the head teacher could administer corporal punishment to learners who warrant such. Social cognitive theory addresses how reinforcement and punishment work to attain social goals. The Organisation

for Economic Co-operation and Development (OECD, 2013, p. 3) explains that “Ensuring effective compliance with rules and regulations is an important factor in creating a well-functioning society and trust in government.” In our context, it is a well-functioning school and school administration. According to Albert Bandura’s Theory (1986) environment plays an important role in curbing drug abuse among learners. Therefore, strengthening rules in schools of Shibuyunji district would create an environment that learners would be guided on the right behaviour and aim higher in life thereby distancing themselves from drug use.

The challenge with rule-enforced behaviour, however, is that it does not allow critical thinking and may, therefore, be deemed to be against the tenets of democratic living. In addition, rule-enforced behaviour does not influence *voluntary behaviour* of target audiences to improve their personal welfare and that of the societies of which they are a part (Andreasen, 1994; 110; Chileshe, 2018). In addition, people despise coercion because it belittles them and leaves them powerless (Handy, 1993). In this regard, rules and regulations are only helpful when the target audience takes part in coming up with them. Therefore, there is need to establish partnership between home, school and community by encouraging active participation in the formulation and implementation of the Code of Conduct and Disciplinary Policy of a school (Loria, 2018; Guyana Ministry of Education, 2019).

5.4.3 Keeping the learners busy

Participants suggested that, instead of the learners remaining idle in school, schools should ensure that they are given enough work to occupy their time. One of the participants cited the old adage, “*An idle mind is the devil’s workshop*,” as the case in point. In this regard, schools needed to draft and implement a plan of co-curricular activities to keep learners constructively occupied. This may call for the creation of an environment that would encourage learners taking part in activities that help them grow as responsible citizens. This is in line with Albert Bandura’s social cognitive theory (Bandura, 1986) who concluded that the environment played an important role in shaping the behaviour of a person. Keeping learners busy may deter them from engaging in activities such as using drugs among learners in the district. The activities could include religious clubs/societies, debating clubs, and organised games (both indoor and outdoor). In class, Lathram (2016) suggests telling stories, creating opportunities

for learners to be active, providing choices for the learners, allowing for learners to move at their own pace, playing (use of games), and doing more projects. Fortunately, there are studies which have reported that learners want more work rather than more drugs.

5.4.4 Guidance and counselling

Respondents also mentioned guidance and counselling as one of the interventions to stop primary school-going children from abusing drugs. The view of the respondents was that guidance and counselling activities must be conducted in schools so that learners may be enlightened about the dangers which are associated with drug abuse. At home, respondents indicated that parents should try by all means to inculcate Christian values in their children so that they could stop indulging in drug abuse. This perspective has been confirmed by studies conducted by Bjarnason, Thorlindsson, Sigfusdottir and Welc (2005) who pointed out that religious participation by children can act as an inhibition to alcohol use, and Wallace and Muroff (2002) who underscored the same point that there is a strong negative relationship between church attendance and drug use. Similarly, it has been suggested by Peltzer, et al. (2010) that religious values and perspectives play an important influence on attitudes of people to drug use. To properly guide the learners, teachers need to be competent in their responsibilities towards their learners inside and outside the classroom (Lai-Yeung, 2014).

5.4.5 Monitoring of the behaviour of learners

There was also a suggestion that learners could monitor their friends' behaviour and report behaviours which bordered on drug abuse. Report promptly any serious case of unacceptable behaviour to the relevant authorities. Many studies attest to the fact that parenting through control and monitoring have an effect on young people's behaviour. For example, the Centres for Disease Control and Prevention (CDC, 2012) explain that.

When parents make a habit of knowing about their teens—what they are doing, who they are with, and where they are and setting clear expectations for behavior with regular check-ins to be sure these expectations are being met—they can reduce their teens' risks for injury, pregnancy, and drug, alcohol, and cigarette use.

Guilamo-Ramos, Jaccard, & Dittus. (2010; xiii) are of the view that a lack of parental monitoring is linked to a wide range of adolescent risk behaviors, including drug use, risky sexual behaviours, alcohol use, and cigarette smoking. Wamoyi et al. (2011) study found that parents' efforts to control and monitor their young people's behaviour faced several challenges, particularly that parents spent little time with their children.

Teachers can also monitor the learners' behaviour; they have the advantage that learners spend more awake time (or waking hours) at school than they do at home (Schuh, 2017), that is, discounting school closures and teacher absenteeism. Gabriel and Goldstein (2020, para. 2) assert that this is time to learn, not only the timetabled subjects, but also “a remarkable variety of enrichment activities, as well as a range of programmes in social and emotional learning. All these activities contribute mightily to helping children receive a truly well-rounded education.”

5.4.6 Having good parents as role models

Participants felt that children come from homes. And since *charity begins at home*, it is the responsibility of parents to model desirable/acceptable social behaviours. According to Guyana Ministry of Education (2019), parents could do several things to help their children. Among these, parents could control and correct the behaviour of their children; they could keep the school informed of the needs, peculiarities and health status of their children and they could request information on their children's performance and behaviour at least once each term. The finding captures the social cognitive theory of Bandura (1986) who postulated that role modeling affects behaviour acquisition and shaping of the behaviours in the society. Pupils who engage in drug abuse, most likely learnt the behaviour from the role models who could be their parents, other adults, teachers, peers and celebrities in the community. Therefore, by having good role models in homes and responsible communities, learners in Shibuyunji district may avoid bad vices such as drug abuse. Additionally, parents could encourage their children to adhere to the Class Rules, School Rules, and Code of Conduct, and they could visit the school to discuss their children's performance and behaviour with their teachers.

5.5 Summary

In this chapter, the researcher has discussed the findings of the study. The findings were divided into the participants' views on the causes and effects of drug abuse among primary school-going learners in Shibuyunji district, and the views on the interventions that can be taken to stop the vice. The chapter that follows presents a summary of findings, the conclusions, and recommendations of the study, and a recommendation for further research.

CHAPTER SIX: CONCLUSIONS AND RECOMMENDATIONS

6.0 Overview

In this chapter, the researcher summarises the findings of the study, and makes conclusions about the findings. Further, the researcher makes recommendations for action and further research. In giving a summary of the entire study, particular focus will be put on research objectives, research methodology, results, recommendations and need for future research.

6.1 Summary

This study was premised on the views of stakeholders on the causes and effects of drug abuse among primary school learners in Shibuyunji district of Zambia. It sought to obtain an understanding of stakeholders' views on drug abuse by primary school-going children; determine stakeholders' views and opinions about the causes and effects of drug abuse on primary school-going children; and determine stakeholders' views on the strategies for developing effective drug abuse interventions for primary schools in Shibuyunji district. The study was guided by Albert Bandura's social cognitive theory (Bandura, 1986) which states that observing other people engage in behaviours that seem attractive lead to the desire to engage in the same behaviour. Being qualitative in nature, the study relied on verbal narrative or description. Four primary schools in the district were purposively selected for the study. The target population comprised all the learners, teachers and parents in the four selected primary schools. Semi-structured interviews and focus group discussions were used to collect data while thematic analysis was used to the purpose of this study was to find out something about people's views, opinions, knowledge, experiences or values.

6.2 Conclusions

6.2.1 An understanding of participants' views on drug abuse by primary school-going children

The study revealed that respondents have a basic understanding of drug abuse by primary school-going children because they were able to define drug abuse with appreciable level of

acceptance by the researcher. Respondents were also able to give the challenges which come with drug abuse at school. Thus, it was concluded that drug abuse affected the learners negatively as it posed a challenge of indiscipline among learners and lack of concentration on school work. The researcher also concluded that since respondents had correct views and understanding about drug abuse, therefore, it would be easier to find solutions to the problem if they were to be consulted and would be willing to take part in activities that would help learners and society free from drug abuse.

6.2.2 Causes and effects of drug abuse on primary school-going children

The study established that the causes of drug abuse in Shibuyunji district were peer pressure, lack of recreational activities, curiosity and amusement, lack of parental supervision, prevalence of drugs in locality and low-income levels of family or poverty.

Besides, the study established the effects of drug abuse as deviant behaviour predisposing children to crime, drug addiction, rebellious behaviour towards authority, lower academic performance and expulsion or suspension from school. The researcher concluded that lack of recreation facilities was one of the reasons for rampant drug abuse among learners in the district which led to learners being disturbed in learning due to expulsions and suspensions. It can also be concluded that drug abuse had a lot of behavioral effects on learners which negatively affected their learning of which if no measures are put in place it may have long lasting impact not only on the individuals but society at large.

6.2.3 Strategies for developing effective drug abuse interventions for primary schools

Among the strategies and interventions which the respondents suggested included sensitisation, participation in recreational activities, guidance and counselling as well as spiritual guidance. Therefore, the researcher concluded that there is need to have learners participate in recreational and spiritual activities to deter them from indulging in drug abuse. The battle of drug abuse among learners may not be won by schools alone, there is need for other stakeholders such as NGOs, the church to help put up more recreational facilities and have continued talks with learners about the effects of such behaviours. Other authorities can also come in such as the council and Drug Enforcement Commission (DEC) to regulate on

drug related businesses in the area so that learners are less exposed to such elicited behaviours. Schools can also come up with a strategy of calling successful people who passed through those schools to talk to learners from time to time so that they act as good role models to the learners in the district. That may help learners in becoming responsible and in the end inspires others in doing the right thing thereby creating a free drug zone.

6.3 Recommendations

The following recommendations are proposed;

- 6.3.1 Sensitisation; There is need for drug education in the primary schools. This should go alongside guidance and counselling to give the learners confidence and make informed decisions.
- 6.3.2 Monitoring; There is need for learners to monitor their friend's behaviour and report behaviours which bordered on drug abuse to the relevant authorities.
- 6.3.3 Guidance and counselling; There is need for schools to enlighten the learners on the dangers which are associated with drug abuse. Apart from that, at home parents should also try by all means to inculcate Christian values in their children so that they could stop indulging in drug abuse.
- 6.3.4 Strict rules and punishment; There is need to tighten and enforce school rules and regulations in order to curb the vice.
- 6.3.5 Recreation; There is great need to introduce recreational activities in primary schools of Shibuyunji district to keep the learners busy all the time.
- 6.3.6 Good role models; There is need to have good role models for these learners such as the parents at the homes where they come from as it is said that charity begins at home.
- 6.3.7 Making pupils busy by giving them more work to do such as homework. Apart from that, schools also need to draft and implement a plan of co-curricular activities to keep learners constructively occupied. This may call for the creation of an environment that would encourage learners taking part in activities that help them grow as responsible citizens

6.3.8 Multi-sectoral approach; There is also need for the formulation of multi-sectoral response team with key stakeholders to prevent drug abuse among school-children in Shibuyunji district.

6.4 Suggestions for further Research

More studies should be conducted to investigate the association of drugs with factors such as socioeconomic conditions, gender, ethnicity and culture in primary schools.

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APPENDICES

Appendix 1; Ethical Clearance Letter



THE UNIVERSITY OF ZAMBIA
DIRECTORATE OF RESEARCH AND GRADUATE STUDIES

RESEARCH DEPARTMENT

APPROVAL OF STUDY

1st September, 2020

REF NO.HSSREC-2020-MAR-024

Misheck Shibalika
LUSAKA.

Dear Misheck Shibalika,

**RE: "PERCEPTIONS OF STAKEHOLDERS ON DRUG ABUSE AMONG
PRIMARY SCHOOL LEAVERS IN SHIBUYUNJI DISTRICT"**

Reference is made to your protocol dated 1st March, 2020. HSSREC resolved to approve this study and your participation as Principal Investigator for a period of one year.

REVIEW TYPE	ORDINARY REVIEW	APPROVAL NO. HSSREC-2020- MAR-024
Approval and Expiry Date	Approval Date: 2 nd September, 2020	Expiry Date: 1 st September, 2021
Protocol Version and Date	Version - Nil.	1 st September, 2021
Information Sheet, Consent Forms and Dates	• English.	To be provided
Consent form ID and Date	Version - Nil	To be provided
Recruitment Materials	Nil	Nil
Other Study Documents	Questionnaire.	
Number of Participants Approved for Study		

Specific conditions will apply to this approval. As Principal Investigator it is your responsibility to ensure that the contents of this letter are adhered to. If these are not adhered

to, the approval may be suspended. Should the study be suspended, study sponsors and other regulatory authorities will be informed.

Conditions of Approval

- No participant may be involved in any study procedure prior to the study approval or after the expiration date.
- All unanticipated or Serious Adverse Events (SAEs) must be reported to HSSREC within 5 days.
- All protocol modifications must be approved by HSSREC prior to implementation unless they are intended to reduce risk (but must still be reported for approval). Modifications will include any change of investigator/s or site address.
- All protocol deviations must be reported to HSSREC within 5 working days.
- All recruitment materials must be approved by HSSREC prior to being used.
- Principal investigators are responsible for initiating Continuing Review proceedings. HSSREC will only approve a study for a period of 12 months.
- It is the responsibility of the PI to renew his/her ethics approval through a renewal application to HSSREC.
- Where the PI desires to extend the study after expiry of the study period, documents for study extension must be received by HSSREC at least 30 days before the expiry date. This is for the purpose of facilitating the review process. Documents received within 30 days after expiry will be labelled "late submissions" and will incur a penalty fee of K500.00. No study shall be renewed whose documents are submitted for renewal 30 days after expiry of the certificate.
- Every 6 (six) months a progress report form supplied by The University of Zambia Humanities and Social Sciences Research Ethics Committee as an IRB must be filled in and submitted to us. There is a penalty of K500.00 for failure to submit the report.
- When closing a project, the PI is responsible for notifying, in writing or using the Research Ethics and Management Online (REMO), both HSSREC and the National Health Research Authority (NHRA) when ethics certification is no longer required for a project.
- In order to close an approved study, a Closing Report must be submitted in writing or through the REMO system. A Closing Report should be filed when data collection has ended and the study team will no longer be using human participants or animals or secondary data or have any direct or indirect contact with the research participants or animals for the study.
- Filing a closing report (rather than just letting your approval lapse) is important as it assists HSSREC in efficiently tracking and reporting on projects. Note that some

funding agencies and sponsors require a notice of closure from the IRB which had approved the study and can only be generated after the Closing Report has been filed.

- A reprint of this letter shall be done at a fee.
- All protocol modifications must be approved by HSSREC by way of an application for an amendment prior to implementation unless they are intended to reduce risk (but must still be reported for approval). Modifications will include any change of investigator/s or site address or methodology and methods. Many modifications entail minimal risk adjustments to a protocol and/or consent form and can be made on an Expedited basis (via the IRB Chair). Some examples are: format changes, correcting spelling errors, adding key personnel, minor changes to questionnaires, recruiting and changes, and so forth. Other, more substantive changes, especially those that may alter the risk-benefit ratio, may require Full Board review. In all cases, except where noted above regarding subject safety, any changes to any protocol document or procedure must first be approved by HSSREC before they can be implemented.

Should you have any questions regarding anything indicated in this letter, please do not hesitate to get in touch with us at the above indicated address.

On behalf of HSSREC, we would like to wish you all the success as you carry out your study.

Yours faithfully,



Dr. J. Mwanza

Dip. Clin. Med. Sc., BA.M.Soc., PhD

**CHAIRPERSON
THE UNIVERSITY OF ZAMBIA HUMANITIES AND
SOCIAL SCIENCES RESEARCH ETHICS COMMITTEE - IRB**

cc: Director, Directorate of Research and Graduate Studies
Assistant Director (Research), Directorate of Research and Graduate Studies
Assistant Registrar (Research), Directorate of Research and Graduate Studies

Appendix 2; Letter of permission for the DEBS

**THE UNIVERSITY OF ZAMBIA
DIRECTORATE OF RESEARCH AND GRADUATE STUDIES
DEPARTMENT OF SOCIAL SCIENCES**

The District Education Board Secretary,
P.O. Box.....
Shibuyunji.

Dear Sir/ Madam,

Re; Request for Permission to Conduct Research in your district

I am a student at the University of Zambia (UNZA) pursuing a Master of Education in Primary Education degree. As a requirement for my studies, I am expected to carry out some research and compile a report thereof. I intend to conduct a study on *Perceptions of Stakeholders on the Causes and Effects of Drug Abuse among Primary School Learners in Shibuyunji district*. This will entail getting perceptions on how stakeholders perceive drug abuse among school-going children. The study will involve conducting focus group discussions and interviews with participants, who include head teachers, guidance teachers, learners and parents. I, therefore, request for permission to conduct my study in your district. Please, be assured that the identities of the schools, teachers, learners and parents will be highly protected in order to comply with ethical requirements laid down by UNZA.

Thanks for your kind consideration.

Yours faithfully,

Shibalika Victor Misheck

For any enquiries, you may contact me on 0979829239/0975996754 or Email;
shibalikamisheck@gmail.com

Appendix 3; Letter of permission for Head teachers

**THE UNIVERSITY OF ZAMBIA
DIRECTORATE OF RESEARCH AND GRADUATE STUDIES
DEPARTMENT OF SOCIAL SCIENCES**

The Head teacher,
.....Primary school,
P.O. Box.....
Shibuyunji.

Dear Sir/ Madam,

Re; Request for Permission to Conduct Research in your School

I am a student at the University of Zambia (UNZA) pursuing a Master of Education in Primary Education degree. As a requirement for my studies, I am expected to carry out some research and compile a report thereof. I intend to conduct a study on *Perceptions of Stakeholders on the Causes and Effects of Drug Abuse Among Primary School Learners in Shibuyunji district*. This will entail getting information about how stakeholders perceive drug abuse among school-going children. The study will involve conducting focus group discussions and interviews with a selected sample of participants, who include the head teacher, guidance teacher and learners. I, therefore, request for permission to conduct my study in your school. Please, be assured that the identities of the school, teachers and learners will be highly protected in order to comply with ethical requirements laid down by UNZA.

Thanks for your kind consideration.

Yours faithfully,

Shibalika Victor Misheck

For any enquiries, you may contact me on 0979829239 or Email;
shibalikamisheck@gmail.com

Appendix 4; Consent Form

**THE UNIVERSITY OF ZAMBIA
DIRECTORATE OF RESEARCH AND GRADUATE STUDIES
DEPARTMENT OF SOCIAL SCIENCES**

Topic; *Perceptions of stakeholders on the causes and effects of drug abuse among primary school learners in Shibuyunji district.*

I am a postgraduate student at the University of Zambia pursuing a Master of Education degree in Primary Education. I am conducting a research to assess *Stakeholder Perceptions on drug Abuse Among Primary School Learners in Selected Primary Schools of Shibuyunji district in Zambia.* The research is meant for academic purposes only.

You are kindly requested to provide answers to these questions as honestly as possible.

You are free to withdraw from the study at any time.

Kindly read the consent of the agreement below and sign.

CONSENT OF AGREEMENT SIGNED BY RESEARCH PARTICIPANTS.

I have understood the instructions and conditions concerning the study and I agree to participate as requested. I also understand that I am free to withdraw from the study at any given time and that the information collected from the conversation will be confidential.

Signed..... Date;

Thank you for your participation.

Appendix 5; Interview Schedule for Head teachers

- a) What are your views on drug abuse by primary school-going children in Shibuyunji district?
- b) What are the causes of drug abuse among school-going children in Shibuyunji district?
- c) Are there any cases of drug abuse among learners in your school?
- d) If any, how many are males and how many are females?
- e) How has drug abuse among school-going children affected the community?
- f) How has drug abuse among school-going children affected their performance?
- g) How has drug abuse among learners in your school affected your work and that of your teachers?
- h) How have you handled cases of drug abuse as the Head teacher in your school?
- i) What strategies do you think can be used to develop effective drug abuse interventions in your school and district?
- j) What challenges are you facing as a school when it comes to drug abuse among school-going children?

Thank you for your time.

Appendix 6; Interview Schedule for Guidance and Counselling Teachers

- a) What are your views on drug abuse by primary school-going children in Shibuyunji district?
- b) Do you have any cases (recorded) of drug abuse among learners in your school?
- c) If any, how many are boys (males) and how many are girls (females)?
- d) What are the causes of drug abuse among school-going children in the district?
- e) How has drug abuse affected the performance of the learners?
- f) What are the other effects of drug abuse?
- g) How has drug abuse among the learners affected your work as teachers in your school?
- h) What do you think should be the strategies for developing effective drug abuse interventions for primary school learners in your school and district?
- i) What are the challenges of implementing the interventions?

Thank you for your time.

Appendix 7; Guide for Learners' Focus Group Discussion

- a) What is a drug?
- b) What do you understand by drug abuse?
- c) What are the causes of drug abuse?
- d) Are there any people/pupils you know who abuse drugs?
- e) How has drug abuse affected their academic performance and other effects?
- f) What is the best way of stopping drug abuse among such learners?
- g) What are the challenges?

Thank you for your time.

Appendix 8; Interview Schedule for Parents

- a) What are your views on drug abuse among primary school-going children in Shibuyunji district?
- b) Is there any drug abuse among school-going children in your community?
- c) Are there any school-going children in your house who abuse drugs?
- d) What are the causes of drug abuse?
- e) What are effects of drugs on learners who abuse them?
- f) What are you doing as a parent to make sure that your children are not abusing drugs?
- g) What strategies can be used to develop effective drug abuse interventions for learners in your community?

Thank you for your time