IMPLICATIONS OF SUBSTANCE ABUSE ON MANAGEMENT OF LEARNERS' ACADEMMIC PERFORMANCE AT LUVUVHU CIRCUIT IN VHEMBE EAST DISTRICT

By

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DECLARATION

I, Mathoma Ntshavheni Nndwayamato, hereby declare that the mini-dissertation for the Master of Public Management (MPM) degree at the University of Venda, entitled ''**Implications of substance abuse on management of learners' academic performance at Luvuvhu Circuit in Vhembe East District**'', hereby submitted by me, has not been previously submitted for a degree at this University, or any other University, that it is my own work in design and execution, and that all reference materials contained therein have been duly acknowledged.

28·04·2022

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DEDICATIONS

This project is dedicated to my daughter Uhone Mathoma. May you have the same urge to further your education to greater heights.

ACKNOWLEDGMENT

My foremost gratitude is to Almighty God that through His amazing grace I was able to undertake and complete this study. To Him I give honour and glory.

My sincere gratitude goes to my supervisors, Prof. Nghamula Nkuna and Dr. Lufuno Reginald Kone for the intellectual leadership and innovative ideas they shared with me throughout this study, The University of Venda for giving me the opportunity to advance my education to another level.

ABSTRACT

The study is based on implications of substance abuse on management of learners' academic performance at Luvuvhu Cicuit. It is of paramount importance to understand the best ways in which to manage the problem, and to obtain an effective ways to remedy the problem. This problem pose threats to the security of the teachers, learners, schools and the entire communities found at Luvuvhu Circuit at large. Local and international articles and other sources were used in the literature review to form the basis of the study. The literature review

It is highlited that teachers or School Management Teams are experiencing a hell of challenges as they are the ones that are managing in this environment. The study elaborated about the difficulties which educators or SMTs are facing when working on the management of academic performance of learners who abuse substances. The study considered qualitative and quantitative research methodologies. The study considered the qualitative research method. Qualitative research is typically used to answer question about the complex nature of phenomena, often with the purpose of describing and understanding the phenomenon. This approach is also referred as the interpretative, constructivist or postpostivist approach. The data in the form of interview notes, observations records, documents, and field notes are the basis for analysis and interpretation.

Key words: Learners, adolescence, academic performance, educators, substance abuse and management.

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LIST OF ABBREVIATIONS

AIDS: Acquired Immune Deficiency Syndrome

BEM: Boys Education Movement

CAPS: Curriculum Assessment Policy Statement

CDA: Central Drug Authority

DBE: Department of Basic Education

GEM: Girls Education Movement

HIV: Human immunodeficiency virus

LDE: Limpopo Department of Education

LDSD: Limpopo Department of Social Development

NAIDA: National Institute on Drug Abuse

NDMP: National Drug Master Plan

RCL: Representative Council for Learners

SASA: South African Schools Act

SGB: School Governing Body

SMT: School Management Team

STDs: Sexually Transmitted Diseases

UNESCO: United Nations Educational, Scientific and Cultural Organisation

UNODC: United Nation Office on Drugs and Crime

UN: United Nations

WHO: World Health Organisation

CHAPTER ONE
INTRODUCTION AND THE BACKGROUND OF THE STUDY

1.1   INTRODUCTION

This study seeks to investigate the implications of substance abuse on the management of learner's academic performance of learners at Luvuvhu Circuit. Therefore, the focus of the chapter presents the background to the study, problem statement, and rationale of the study, purpose, and objectives of the study, research questions, and significance of the study as well as the definitions of key concepts. Moreover, the layout of the study will also be described.

According to Dube (2007), majority of adolescents are experimenting with drugs and experimentation normally results in abuse. The abuse of substances is not only concern to individuals, groups, and families, but a serious concern to the entire nation. Substance abuse goes together with poverty, crime, reduced productivity, unemployment, dysfunctional family life, escalation of chronic diseases and premature deaths. Substance abuse does not respect an individual on the basis of economic status, class, race, colour, gender or the professional status of an individual (National Drug Master Plan NDP, 2006-2011).

The use of illicit drugs among secondary school learners is a grave threat to public health, both internationally and in South Africa, and has attracted growing international recognition. Illicit drug use is now characterised by a concentration among youth, notably young males living in urban environments (United Nations Office on Drugs and Crime (UNODC), 2012). European countries such as Britain and Holland were known to exchange opium growth in their colonies for tea and silk with China (United Nations, 1995). Unfortunately, certain drugs that initially produce enticing effects, such as sense of feeling good, elation, serenity and power have evolved into a problem of dependence and abuse.

1.2   THE STATE OF DRUG AND SUBSTANCE ABUSE: GLOBAL PERSPECTIVE

United Nations (1998), drug abuse is a global problem that poses danger to the lives of individuals, society and political stability and security in many countries. The use of illicit drugs has increased throughout the world and the major world trend is the increasing availability of many kinds of drugs among ever widening spectrum of consumers. According to the (United Nations (UN) statistics (2018), 57 000 people in Africa die annually from diseases associated with drug abuse. In America, with 4.6% of the world's population, the

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prevalence of major depressive episodes among the youth aged 12-17 years in 2006, showed that 3.2 million young people reported at least one major depressive episode (MDE) in their lifetime, and 2.0 million youth had a MDE in the year preceding this study (Manchikanti and Singh, 2008). Also, 34.6% of the same age group had used illicit drugs. This makes substance-use disorders a major concern. According to the Windhoek Mental Health Care Centre's annual report (2012), substance use disorders were ranked third on the list of the highest number of admissions to Windhoek Mental Health Care, after schizophrenia and mood disorders

1.3 STATE OF DRUG AND SUBSTANCE ABUSE IN SOUTH AFRICA

Sutherland and Shepherd (2001) substance abuse amongst learners is of concern, as it has a negative impact on learners' academic performance, academic aspirations and retention in schooling. Research has demonstrated that alcohol and other drug use has been associated with academic difficulties, absenteeism and school drop-out, while those learners with better academic performance are less likely to use drugs (Reddy, Resnicow, Omardien and Kambaran, 2007). In Cape Town, past month cigarette use significantly predicted high school dropout (Flisher, Townsend, Chikobvu, Lombard, and King, 2010), while another study found strong associations between binge drinking, school dropout and low academic aspirations (Morojele, Parry and Brook 2009).

According to the National survey on the magnitude of alcohol and drug abuse conducted by National Campaign against Drug Abuse (NACADA) (2012), the abuse of alcohol in the country is worrying. The facts and figures from this report indicate that 13 per cent of teenagers in 10 to 11 years age bracket have used intoxicating substance mostly alcohol followed by the cigarettes. In the 15 to 24 year bracket, a worrying 11.7 per cent are currently hooked into alcohol, while 6.2 per cent are regular users of tobacco products, of this group, 4, 7 percent chew mirra (khat) while 1.5 per cent smokes bhang. Regrettably this age bracket constitutes secondary school going-age in South Africa.

The sad reality presented by the figures and in NACADA's 2012 survey on drugs that is 14.8 per cent of the respondents aged between 10 to 14 years old are completely obvious of the risks associated with substance abuse. These statistics underline the need to educate our young people on dangers alcohol and drug abuse.

1.4   BACKGROUND OF THE STUDY

The prevalence and gravity of indiscipline in schools is a universal problem (Van Wyk and Lemmer, 2009). According to Maphosa (2011), the incidence of disruptive behaviour in South African schools is increasingly becoming a serious challenge for educators in managing their academic performance. Globally the academic performance of learners has become a yardstick for measuring the creativity of our education system; these academic performances are also used as a yardstick to measure the capability of learners to further their studies at tertiary institutions (Rees, 2019).

There are many health problems that may be linked to illicit drug use. Not the least of these is the risk of contracting infections, which is high in drug users who share infected needles (Onyeka, *et al.* 2013:2). According to Dogra, Lunn and Cooper (2011:110), injecting drug users risk contracting blood-borne viruses such as HIV, hepatitis B and Hepatitis C as a result of contamination from blood or body fluids of infected users. This can lead to septicaemia, localised infection or an abscess formation.

Involvement in illicit drug use can increase the risks of being both a victim and/or a perpetrator of violence, while experiencing violence can increase the risks of initiating illicit drug use (WHO, 2009:1). Drug-related violent crime has been classified both as violence arising from the effects of substances and violence associated with the interaction of a psychiatric illness and drug use. Violence can also be linked to the acquisition of drugs and violence connected to disputes between drug users, drug dealers and drug gangs (Dogra, *et al.* 2011:110). According to Peltzer., Ramlagan, Johnson, and Phaswana-Mafuya (2010:2230), drug users whose rationale is inspiration and creativity, use drugs to overcome social inhibition when performing publicly while others' rationale is to escape from social misery like unemployment, long working hours and poverty. They also pointed out that others use illicit drugs to confront social dangers involving transgressions of taboos like sex workers, criminals and street children.

A study carried out by the London School of Economics in 2016 on students learning behaviour revealed a relationship between drug abuse and poor academic results and Africa has not been spared from the abuse of drugs by the youth (Nwosu, 2017). Nwosu (2017) attested that this constitutes 56% of the population aged between 14-19 years, which constitutes secondary school students. According to World Drug Report (2019), 35 million people worldwide suffer

from substance use disorders while only one in seven people receive treatment and for school going population it implicates particularly on their academic performance and health in general.

Throughout the studies social workers, in particular, have been working relentlessly to provide solutions to problems posed by substance abuse, to this end, several causal explanations cause-effect as recommendations through substance abuse could at least be reduced in South African society, particularly among the young populations group (Tshitangano and Oni, 2016).

Substance abuse has far-reaching effects on the management of academic progress and aspiration of the youth in secondary schools. According to Adeyemo, Beatrice, Okpala, and Oghale (2016), the most unfortunate victims of these substances are learners (youth), these acts or activities are never in conformity to general accept modes of behaviour in society. Okari (2018) further emphasized that some learners who experience dissatisfaction with life due to anger, frustration, academic failure, and boredom, consume alcohol to fit in and serve as a consolation.

This invariably affects their academic performance hence hours that should be used for the study are diverted to rest and sleep after its consumption. Substance abuse is responsible for lost wages, destruction of property in schools, soaring health care costs and broken families. One of the problems which influence leaners non-completion of school tasks is absenteeism/truancy, gangsterism, and ill-disciplined which constitutes an increasing problem in different countries (Khalid and Mehmood, 2017).

There is evidence indicating the causes, effects and implications of student absenteeism, which is understood as the voluntary or involuntary absence from the physical environment of the classroom, class, or learning session, and which is determined by academic and extra academic factors (Chilca, 2017). Furthermore, studies found that having drug-using friends was by far the strongest indicator for substance use, while attitudes toward education, though not completely unrelated to drug use, demonstrated a much lower correlation. In general, the pattern of substance related problems was as would be expected, with the severity of problems decreasing as GPA increased (Bunch, 2002).

The level of problems caused by substance use was determined through a series of eight questions concerning the frequency of detrimental substance-related effects on different aspects of academic performance, ranging from attendance to schoolwork and tests. The South

African government used corporal punishment to maintain discipline at schools but after 1994 the South African government abolished corporal punishment as this was violation of human rights (Maphosa and Shumba, 2010).

Corporal punishment was banned through the South African School Act (Act 84 of 1996). Section 12 of the Bill of Rights in the Constitution states that everyone has the right not to be treated or punished in a cruel, inhuman, or degrading way. Simuforosa and Rosemary (2014), identifies various forms of indiscipline among secondary school learners who abuses substance, and this includes truancy, lateness to school, cultism, drug abuse, insulting/assaulting, stealing, rioting and many other antisocial vices.

The impact of substance abuse does not only disturb educators, since many community members as well as different stakeholders and political structures express different views, including religious beliefs, on this matter. As result many educators are frustrated because they have to teach under conditions that are unbearable. Thus, the present study must seek to investigate the implication of substance abuse on the management of learners' academic performance in Luvuvhu Circuit.

Abuse of alcohol and drugs has been linked with crime and violence risky sexual behaviour (Kalichman, Simbayi, Kagee, Toefy, Jooste, Cain, and Cherry, 2006). Ultimately this impacts negatively on the economic and social health of the country, as these individuals are likely to become unproductive members of the society. According to the United Nations Office on Drugs and Crime (UNODC) report (2012), 35 million people worldwide suffer from substance use disorders while only one in seven people receive treatment. Drug use statistics in South Africa as reported by the United Nations Office on Drugs and Crimes report. United Nations Office on Drugs and Crime (2014), indicated that the substance abuse remains the growing problem in South Africa with 7.06% of population abusing narcotics. Substance abuse is a social problem of great concern in South African society like other social problems.

Substance abuse has been attracting the attention of sociologists, political scientists, psychologists, criminologists. Substance abuse in developing countries is estimated that globally between 3.5% and 5.7% of the population aged 15-64 years of age used illicit substances at least once during 2008 (UNODC, 2010). Similar rates of use were reported for this age group in 2000 and 2004 (4.2% and 4.7%, respectively) (UNODC, 2000, UNODC, 2004b). Drug abuse has negative effects on many aspects of lives of individuals and

communities, namely health, security and the economy related issues. It has serious implications in schools as it contributes to instable disciplinary behaviour of the learners and leads to poor safety of learners and teachers. However, it has been recognised as a public health problem due to the impact increase in consumption or dependence.

Furthermore, Druck and Kaplowitz (2005: 48) state that violence affects one in every five teenagers. Many youngsters feel threatened, in fact every day 160 000 students miss school, because they fear attack, intimidation or bullying.

According to Lindle (2008: 89), indicates that, all classroom problems are well managed, if parents are always involved. It would mean that effective management of learners' performance would occur much better if both teachers and parents are working and supporting each other. Although the first contact with drugs can occur at any stage of life, national and international, studies indicate the onset of consumption occurs mainly at adolescent stage. Schools are the main place that adolescents learn to replicate patterns of behaviour amongst peer and gain entry to group affiliations.

Globally, 0.4% of deaths and 0.9% of Disability Adjusted Life Years were attributed to drugs and substance abuse in 2004, World Health Organisation (WHO), (2009: 22). Section 13 of the National Education Policy Act, NEPA (Act 27 of 1996), states that, possession, use or distribution of illegal drugs, and the inappropriate possession, use or distribution is prohibited in South African schools and such message should be clearly and consistently within our school communities.

1.5 PROBLEM STATEMENT

There are variety of policies and legislative frameworks which are applicable in public schools, it includes, the Constitution, South African Schools Act (SASA), Employment of Educator's Act, Child Justice Act, Prevention of and Treatment for Substance Abuse Act, Liquor Act. Despite the provision of these policies, there are the following challenges facing Luvuvhu Circuit with regard to implication of substance abuse on management of learners' academic performance, which are dropout, absenteeism, truancy and learners' ill-discipline. This study is conducted with a view to come up with the mechanism to minimise the problem. In South Africa (SA), substance abuse in general is reported twice more than the world norm

(Tshitangano and Tosin, 2016). The authors further argue that over 15% of the SA population is challenged by the phenomenon.

Masombuka (2013), the infiltrative borders has become an attractive market for drug traffickers with the local drug market, which is purposefully flooded, targeting schools to grow a market of young substance users. Masombuka (2013) further suggests that in Gauteng, children as young as 9 years old are engaged in substance use. It is confirmed by UNODC (2013) that one in two school children in SA have already experimented with drugs. The most widely used substances on or off school premises are alcohol, tobacco, cannabis and nyaope (Moodley, Tshitangano and Tosin, 2016). Some learners also come to school under the influence of substances.

Moreover, the alarming evidence in the prevalence of drug abuse, the effects, and consequences of substance abuse among learners has called for concern and challenge to all helping professions to mount strategies of equipping youths with skills of living devoid of substance abuse (Mushtaq and Khan, 2012). Indiscipline at schools affects the performance of learners.

The researcher is an experienced teacher at a school in Vhembe, through experience, the research has observed that many learners are indulging and abusing drugs and alcohol at home and this, in turn, affects their performance at school as it disturbs them from seriously committing themselves in their schoolwork. He further observed that it makes it difficult for them to cope with their schooling, as they do not arrive in time at school and also leave earlier accompanied with arrogance and ill-disciplined

Besides, some literature has shown contradictory views regarding the implication of substance abuse on the management of academic performance of learners as other studies found a negative effect of drug abuse on academic performance while other studies found no effect of drug abuse on the academic performance of learners (Mortada, Bolbol and Kadry, 2018). It is therefore due to the lack of current research regarding the management of academic performance of learners who abuse substances, as well as the contradictory view regarding the findings that the present research seeks to explore more on the subject.

Substance use is a worldwide phenomenon, and substance use occurs in almost every country. The specific substance or substances used varies from country to country and from region to region. Worldwide, the three main substances of use are alcohol, cannabis (such as marijuana),

tobacco, heroin and cocaine. Unfortunately, laws are not always equally enforced in countries around the world. Substance use, (especially among the youth and young adults) is responsible for lost wages, destruction of property in schools. Despite eradication efforts in countries in Africa, the region still remains a major supplier of some drugs such as cannabis, which is one of the most widely abused drugs. Since the early nineteen eighties, Africa has been experiencing an escalating problem with drug abuse and trafficking.

According to Muyoki (2008), substance abuse results to lack of morals and deteriorating learning standards. Key risk periods for substance abuse occur during major transitions in children's life. The first major transition for children occurs when they leave home and enter elementary school. As they move on to join middle or junior high school, they experience new academic and social situations such as learning to get along with a wider group of peers and having greater expectation for academic performance (Sussman, Dent and Stacy, 2002). Substance abuse is associated with very many problems which include health related problems, violence, truancy, family break ups. Alcohol abuse is associated with poor health, reduced productivity, violence, spread of STD's and HIV/AIDS, domestic violence, road accidents, child abuse and neglect among other vices (Munyoki, 2008).

1.6   THE AIM OF THE STUDY

The aim of the study is to investigate the implications of substance abuse on management of learners' academic performance at Luvuvhu Circuit of Vhembe District in order to come up with strategies which will minimize learners' substance abuse.

1.7   OBJECTIVES OF THE STUDY

- To establish the impact of substance abuse on management of academic performance of leaners at Luvuvhu Circuit, of Vhembe East District.

- To evaluate the effect of absenteeism or truancy on the management of academic performance of leaners who abuse substances at Luvuvhu Circuit, of Vhembe East.

- To establish the effects of ill-discipline on the management of academic performance of leaners who abuse substances in Luvuvhu Circuit, of Vhembe East District.

- To recommend the development of strategies to limit learners from abusing substances and to improve the management of academic performance of learners who abuse substances at Luvuvhu Circuit, of Vhembe East District.

1.8   RESEARCH QUESTIONS

The research questions of the study are:

- What is the impact of substance abuse on the management of academic performance of leaners who abuse substances at Luvuvhu Circuit, of Vhembe East District?
- What is the effect of absenteeism or truancy on the management of academic performance of leaners who abuse substances at Luvuvhu Circuit, of Vhembe East District?
- What are the effects of ill-discipline on the management of academic performance of leaners who abuse substances at Luvuvhu Circuit, of Vhembe East District?
- What are the strategies to limit learners from abusing substances and to improve the management of academic performance of learners who abuse substances at Luvuvhu Circuit, of Vhembe East District?

1.9   THE SIGNIFICANCE OF THE STUDY

The results of this present research may be helpful to identify students' basic necessities, difficulties and hurdles in their learning. It was also noted that implications of substance abuse were directly linked with the management of learners' academic achievement of secondary school students. Therefore, these results may be helpful for teachers, head teachers and parents to control these behaviours for the better results of these students in their future life and academic achievement.

Moreover, the study may also be helpful for educational program managers to enhance their knowledge about the management of learners' performance, especially those who abuse substances, and their influences on their educational success. Additionally, the current study may be valuable for those teachers who are facing difficulties with respect to their management styles regarding working with implications of substance abuse on learners' performance, in their professional career. The present study findings are envisaged to be of crucial value to the policy, practice, and knowledge generation and the following should be noted as well:

The findings are expected to yield significant empirical data and information on the effect of substance abuse on the management of academic performance. They are expected to help the Ministry of Education officials in understanding the causes of substance abuse amongst secondary school learners, hence help them develop intervention strategies. The study is likely to add to the body of knowledge in the area of drug and substance abuse South African secondary schools that may be utilized by other researchers.

1.10   DELIMITATION OF THE STUDY

The study is based on the implications of substance abuse on management learners' performance and its impact thereof, Vhembe, Limpopo Province. This study is going to be conducted in four selected secondary schools at Luvuvhu Circuit, which is one of the four circuits in the Thohoyandou cluster of Vhembe East District. For this study, the researcher will consider only four schools in Luvuvhu Circuit, which are: Azwifarwi Secondary School, Gole Secondary School, Thivhileli Secondary School, and Sam Mavhina Secondary School. The study will only consider these schools, as most educators with challenges of managing learners who abuse substances are found there.

1.11   DEFINITION OF OPERATIONAL CONCEPTS

According to Morena (2004) a definition of concept is provided in order to clarify and simplify the words and phrases with which the reader might not be familiar. This section defines the key concepts of the study.

Learner(s): According to SASA, (South African Schools Act, no 84 of 1996), a learner means any person receiving education or obliged to receive education in terms of this Act. It is a minor who is still under the guardianship of the parent, or guardian. A learner is a person who is under the control of the parent, or guardian. In this study, a learner refers to any person from a family engaged in learning activity under the age of 21. Secondary school learners' are learners between the ages of 14 and 18 attending an intermediate school between elementary school and college/university (Merriam-Webster, 2013). In this study, 'secondary school learners' refer to learners enrolled in grade 8 up to grade 12 at secondary schools.

Adolescence: Adolescence is the transitional stage of development that occurs between childhood and adulthood. This means adolescence is between the ages of eleven and nineteen years (Mohasoa, 2010). Adolescence is the transitional stage of development that occurs

between childhood and adulthood. This means adolescence is between the ages of eleven and nineteen years (Mohasoa, 2010).

Academic Performance: According to Kember, Jamieson, Pomfret and Wong (1995), academic performance is the outcome of education, the extent to which the student, teacher, or institution has achieved their goal. In this discourse, academic performance will be referred to how well one does in school and the achievement he/she gets, and poor academic performance entails bad grades while the desired academic performance is good in grades.

Educator: According to SASA (1996). An educator is any person, excluding a person who is appointed to exclusively perform extracurricular duties, but who teaches, educates or train other persons or who provides professional educational services, including professional therapy and psychological services, at a school. Gassner, Kerger, and Schratz (2007) defines a European teacher as someone who has an education and approach to subject areas which enable him or her to teach and links up cross-curricular themes from European perspective. In this study, the educator is someone who can lead and guides the child (learner) towards responsible adulthood.

Substance abuse: Maithya (2009) defined substance abuse as the taking of drugs or deliberate use of drugs for purposes other than its intended purpose without the supervision of a physician or a medical practitioner. It also refers to the misuse or wrong use of drugs which have adverse effects on the central nervous system, mind, mood, behaviour, and personality of the individual. In this study, it is referred to the use of any substance or drug to the point where it interferes with a learner's academic performance and social adjustment as well as cognitive performance. Substance abuse is defined as systematic use of substances that ruins daily activities (American Psychiatric Association, 2013).

Management: According to Magretta (2012), management is essential for an organised life and necessary to run all types of management and good management is the backbone of successful organisations. In this study, management is referred to all activities for learning in the classroom and school management aiming at improving learners' academic performance.

1.12   THE ORGANISATION OF THE STUDY

The study consists of five chapters which are as follows:

Chapter 1:   Introduction and background of the study.

The chapter presented introduction and background, problem statement, the aim of the study, specific objectives, critical research questions, significance of the study, delimitation of the study, limitations of the study and definitions of operational concepts.

Chapter 2: Literature review

The chapter focused on the literature review, the theoretical framework about substance abuse, the implications of substance abuse on management of learners' academic performance, factors contributing to learners' substance abuse, the most abused substances in South Africa, consequences of learners' substance abuse, impact of substance abuse on learning as well as the strategies to curb the substance abuse by learners. Legislations relevant to substance abuse, and recommendations to schools in the fight against substance abuse and the conclusion.

Chapter 3:   Research methodology

The chapter of the study discussed research design and research methods selected for the study. The context in which the research will take place is described. This is followed by the population of the study, sampling, sampling method, sample size, data collection, pilot study and data analysis. Finally, the ethical considerations that will be applied in this study are discussed.

Chapter 4:   Data presentation, data analysis and interpretation.

This section gathered data, analyse and interpret it. The information collected through questionnaires has been analysed using the Statistical Product and Service Solutions (SPSS) Version 22.0 and was presented in a graphical table form, frequencies and percentages. The information collected through interviews has been analysed by thematic analysis and the information has been presented in a narrative form.

Chapter 5:   Findings, conclusions and recommendation

This chapter will present the major findings of the study which arose from the specific objectives of the study. This chapter will also present conclusion of the study. Recommendations of the study will be presented and also the recommendations of future research will be discussed.

1.13   CONCLUSION

In this chapter the introduction, background to the study, problem statement, the aim of the study, objectives of the study, and research questions, the significance of the study, delimitation of the study and definition of the operational terms is discussed. In addition, the researcher also gave an outline or organisation of the structure of the dissertation.

CHAPTER TWO
LITERATURE REVIEW

2.1   INTRODUCTION

Substance abuse is a global phenomenon affecting people throughout the World (United Nations Office on Drugs and Crime, 2017). It can be argued that the state and other relevant stakeholders are indeed involved in continuous education in order to reduce the desire and demand for substance abuse (Kuo, 2012). However, substance abuse challenges every school manager, teachers and the entire teaching and learning process as a whole (Motibi, 2014). In this chapter, theoretical framework underpinning the study and factors that influence learners to abuse substances were discussed. Effects of substance abuse, factors influencing learners to abuse substances, substances that are mostly abused, consequences of substance abuse, strategies to curb substance abuse by learners and legislative framework were discussed.

2.2   THEORETICAL FRAMEWORK

There are several theoretical models which explain drug and substance abuse. In this study the researcher used the theoretical framework of development theory, social learning theory, psychological theory, social control theory, availability theory, and ecological perspective theory.

2.2.1   Developmental theory

Several famous psychologists, including Sigmud Freud, Erikson, Jean Piaget and Lawrence Kohlberg, describe development as a series of stages (Schlozman, 2016). According to these authors, a stage is a period in development during which people exhibit typical behaviour patterns and establish particular capacities. Developmental theorists established that substance abuse was one of the high-risk behaviours during adolescence and young adulthood (Mudavanhu and Schenck, 2014; Royal College of Psychiatrists, 2016). In addition, data from around the world suggested that substance abuse occurred between the ages of 11 and 14 (United Nations Office on Drugs and Crime, 2015). Furthermore, Osman, Victor, Abdulmoneim, Mohammed, Abdalla, Ali and Mohammed (2016) established that adolescents used substances to be happy, for entertainment, and to feel "high".

2.2.2 Social learning theory

According to Bandura (1977) the theory is based on the ideal that adolescence form their beliefs about anti-social from their role models in the environment who are significant owners in life especially relatives, teachers, parents, close friends among others. It asserts that adolescent involvement with the substance using role models is likely to have three consequential effects, beginning with an observation and introduction of substance specific behaviours followed by social reinforcement for early substance use. This culminates into an adolescent's positive social and psychological consequence for future use.

Bandura believes that a person learns by observing what others do. Through this one cognitively represents the behaviour of others and then possibly adopts this behaviour (Bandura, 1977). This theory is relevant to this study because through observation and internalization students learn to abuse or not to abuse drugs. If on the other hand the behaviour is negatively reinforced like falling sick, losing friends, suspended from school, then the behaviour may altogether become extinct. Parents may influence their children's drinking through both direct modelling of alcohol use and the transmission of parental values about drinking (Bandura 1977).

Social learning theorists argued that people learn from one another, via observation, imitation, and modelling (David, 2015). Other learning theorists hold the view that substance abuse is a learned behaviour (Burger, 2008). Social learning theories focus on the interaction between the individual and the environment in shaping patterns of substance use. According to these theorists, adolescents abuse substances, because they have seen their parents, peers, and other people abuse substances (Department of Education, 2013).

2.2.3 Psychological theory

Those who subscribe to the psychological theory argue that the underlying psychological problems within an individual cause substance abuse (Mothibi, 2014). Risk behaviour such as substance abuse was related to individual psychological factors such as self-esteem, the locus of control, need for acceptance, anxiety levels, sensation seeking, and eagerness to act like adults (Rice and Dolgin, 2008). The abovementioned theorists believe that individuals who use substances receive some form of psychological reward from drug or alcohol abuse (Schafer, 2011). Substance use was therefore reinforcing; either by enhancing positive mood states or by

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diminishing negative ones. That was evident from some adolescents who reported that they used substances because they wanted to be sociable, to feel good or to relax because they like the taste of alcohol or enjoy drinking (Mohasoa, 2010).

2.2.4 Social control theory

According to the social control theory, adolescents abuse substances because there were insufficient social controls to restrict them from using drugs (Kingston, Rose, Cohen-Serrins, and Knight, 2017). Most of the adolescents in one study reported that most of the time they were left alone at home since their parents were always busy or away because of their demanding jobs (Rice and Dolgin), 2008). Thus, these adolescents had more freedom to use. Previous studies established that lack of parental monitoring led to an increased association with drug-abusing peers and subsequently to higher drug abuse (Kingston *et al.,* 2017). In addition to that, adolescents who were not well nurtured and had a poor relationship with their parents were more likely to use drugs. The lack of emotional support by parents was also linked to an increase in the use of tobacco, alcohol, and marijuana (Leedy and Ormrod, 2005).

2.2.5 Availability theory

According to the availability theorists, adolescents used drugs because all kinds of drugs were readily available (Mokwena, 2015). Furthermore, availability theorists pointed out that the degree to which alcoholic beverages were accessible to people affected the amount and pattern of alcohol use. Alcohol was reported to be available in many social settings such as cultural ceremonies and parties (Croff, Leavens, and Olson, 2017). There are currently almost 23 000 licensed liquor outlets with an estimated 150 000 to 200 000 unlicensed outlets, yielding approximately one liquor outlet for every 190 persons in South Africa (Parry, 1998). Mahosoa (2010), indicated that adolescents tend to buy alcohol, tobacco, and other drugs if they are available in stores. Research has shown that school-going youth find it easy to buy alcohol from bottle stores, supermarkets, bars and shebeens (Mothibi, 2014).

2.2.6 Ecological perspective

The ecological perspective was chosen as a viewpoint in this study because it provides a way to view substance use by learners from multiple dimensions and does not rely solely on one aspect of an individual to explain or predict behaviour or problems. Rungani (2012) explains

that Bronfenbrenner's ecological model provides a suitable framework in which to understand the dynamic relationship between the individual behaviour and social contexts. Pardeck (2015) emphasizes that the behaviour of individuals is influenced by their connections to their environment. This theory is vital to understand substance use challenges beyond their being a personal problem but looking at the influence of the environment. Rungani (2012) indicates that Bronfenbrenner's ecological model associates four types of systems in which individuals are involved. That will be the microsystem which is the immediate social setting such as family.

2.3 THE EFFECTS OF SUBSTANCE ABUSE

The use of substances has dangerous health and socioeconomic consequences, and the negative consequences of substance use affect not only individuals who use substances, but also their social environment (Gray, 2009). Substance use and dependence have grave consequences for existing social systems, affecting crime rates, hospitalisations, child abuse and neglect, and are rapidly consuming public funds (Hoffman and Goldfrank, 1990). The exact effect of a substance will depend on the substance used, how much is taken, in what way, and on each individual's reaction. Substances can be extremely harmful, and it is relatively easy to become dependent on them.

2.3.1 Health effects of substance abuse

Substance use has been confirmed as a medical condition and classified in the field of medicine because it brings about health issues (Rice and Dolgin, 2008). Thus, unless treated, it is a fatal progressive illness. Individuals dependent on substances often cannot stop by themselves, but require treatment to assist them (Gray, 2009). There is an increase in the number of young people dying due to substance-use related issues, whereas 40% of adolescents end up suffering from mental illness (Rice and Dolgin, 2008).

The United Nations Acquired Immune Deficiency Syndrome (2009:01) contends that in 2007, the youth aged 15 to 24 years accounted for an estimation of 45% of the new HIV infections worldwide. An estimated 22.4 million people are living with HIV in Sub-Saharan Africa (UNAIDS, 2009:21). In 2008, it was estimated that 5.2 million people were living with HIV in South Africa (Shisana, Rehle, Simbayi, Zuma, Jooste, Pillay, Van-Wyk, Mbelle, Van Zyl, Parker, Zungu and Pezi, 2009). Rice and Farquhar (2000:186) assert that about 50% of new infections affect young people between the age of 10 and 24.

The prevalence of the HIV pandemic is high and alarming in South Africa as well as in Sub-Saharan Africa. Teenagers who are using substance are mostly infected by HIV while they are under the influence of substances (Lebese, Ramakuela, and Maputle, 2014). There is a very strong link between substance abuse and HIV infection, which affects young school learners even in rural areas (Lebese *et al.,* 2014:340). Most young school learners who are using substances are irresponsible as they sleep around through unprotected sex. This poses a high risk of HIV transmission as they are usually out of their minds because of substance influence (Lebese *et al.,* 2014:340). Lebese *et al.,* (2014:340) assert that school learners who abuse substances are more likely to engage in delinquent behaviours such as sleeping with different partners. Lebese *et al.,* (2014:340) assert that young school learners who use substances are five times more likely to have sex than teens who do not use substances, and more likely to have unprotected sex with a stranger.

Substance abuse has become a stumbling block to the students learning behaviour which is an essential element in education practice (Mzolo, 2015). Substance abuse had considerable impacts on learners' education. Similarly, Kuo (2012) have described about the influences of substance abuse on classroom achievement of high school students. He described that motivation and social control considerably affected specifically female school students.

Sexually transmitted infections (STIs) and HIV/AIDS are a major problem in South Africa, coupled with a high incidence of teenage pregnancy, alcohol and drug abuse. It is of grave concern, especially its impact among the young (15-24 years) and in economically poor, rural populations (Bana, Bhat, Godlwana, Libazi, Maholwana, Marafungana, Mona, Mbonisweni, Mbulawa, Mofuka, Mohlajoa, Nondula, Qubekile, Ramnaran, 2010). Sexual promiscuity and teenage pregnancy amongst young school learners are a cause for concern due to substance abuse (Bana *et al.,* 2010).

Alcohol consumption has increased in South Africa because of decreased control over the production, sale and ready availability of alcohol and other local cultural factors affecting both males and females. It is probable that this may lead to an increase in episodes of unprotected sex, which in turn may contribute to an increase in STIs and unwanted pregnancies. Thus, teenage pregnancy makes the young mother susceptible to social ostracism, interrupted education, lack of social security, poverty and repeat

2.3.2 Social effects of substance abuse

Substance use does not only affect the individual, but it also affects the families, friends, teachers and other members of the community (Berk, 2007). It is suggested that persons using substances may become withdrawn, moody, irritable or aggressive, academic performance drops and absenteeism increases (Burger, 2008). This results in school drop-out or being expelled from school. This contributes to instability in an individual's sense of identity which, in turn, is likely to contribute to further substance consumption, thus creating a vicious circle (Lakhanpal and Agnihotri, 2007). Substance abuse often results in social problems such as crime, explorative sex, and commercial sex work, drug trafficking and human trafficking (Flicher, Townsend, Chikobvu, Lombard and King, 2010). Burger (2008) argued that figures published by the South African Police Service show that drug abuse accounts for 60% of all crimes committed in the country. When teenagers depend on substances to deal with daily stresses and living conditions, they are unable to make responsible decisions (Flicher *et al.,* 2010).

They suffer from adjustment problems and antisocial behaviour that are both the cause and consequences of taking drugs. The effects of substance use go beyond social effects, but have economic effects as well (Flicher *et al.,* 2010). Research suggests a strong link between crime and substance use (Parry *et al.,* 2004). Alcohol and drug misuse has been linked to homicide, intimate partner violence, rape and abuse of children (Seedat *et al.,* 2009).

2.3.3 Economic effects of substance use

The use of substances has negative economic effects (Mohasoa, 2010). When substance-related illnesses increase, this creates pressure on the healthcare system which in turn exhausts the scarce resources available to improve lives (Mohasoa, 2010). The state ends up challenged with an increased need for the establishment of rehabilitation and treatment centres, halfway houses and more professionals to be employed in order to fight the use of substances (Mohasoa, 2010). Moreover, Tshitangano and Tosin (2016) indicate that substance use contributes to the high school dropout rate, unemployment, high levels of crime as well as poverty, which in return affect the economic growth of a country.

2.3.4 Scholastic effects of substance abuse

Substance abuse amongst learners is of concern, as it has a negative impact on learners' academic performance, academic aspirations and retention in schooling (Sutherland and Shepherd, 2001). Research has demonstrated that alcohol and other drug use has been associated with academic difficulties, absenteeism and school drop-out (Sutherland and Shepherd, 2001). In South Africa, significant associations have been made between substance abuse and academic failure among adolescents (Flisher, Townsend, Chikobvu, Lombard and King, 2010), while those learners with better academic performance are less likely to use drugs (Reddy, Resnicow, Omardien and Kambaran, 2007).

In Cape Town, substance use significantly predicted high school dropout (Flisher *et al.,* 2010), while another study found strong associations between binge drinking, school dropout and low academic aspirations (Morojele, Parry, and Brook, 2009). According to Munyoki (2008), substance abuse results to lack of morals and deteriorating learning standards. This has led to strikes in secondary schools characterised by violence, destruction of property and in some cases loss of lives. Substance abuse association with interpersonal conflicts, learners' unrest and destruction of property, may be an indicator of a larger pattern of deviant behaviour.

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

Teenagers who are abusing substances such as dagga and alcohol are at high risk of failing, and show poor educational progress (Lebese *et al.,* 2014). Some school learners who are using substances are always in groups of three or four and spend most of their time smoking and drinking alcohol and they do not have time to focus on their studies. (Lebese *et al.,* 2014). Young school learners who abuse substances particularly alcohol, are more likely to experience academic problems such as poor class attendance and inability to focus, and thus earn lower grades (Lebese *et al.,* 2014).

School learners who use dagga are now not attending school and the only thing that they do is to go to illegal spaza shops that sell dagga and alcohol and do not even want to talk about school (Lebese *et al.,* 2014:339). The more a student uses tobacco, alcohol, cannabis, cocaine and other substances, the more likely he or she will perform poorly in school, drop out, or not continue to higher education (Lebese *et al.,* 2014:339).

More than twenty years since the dawn of democracy in the Republic of South Africa (RSA), the country continues to face seemingly insurmountable challenges relating to violent crime (Statistics South Africa, 2016:01). Although violence is a global concern that knows no boundaries, it is important to acknowledge that the dynamics surrounding violent crime in South Africa are complex and distinctive (Statistics South Africa, 2016:01). Aggressiveness towards teachers and elders, which sometimes leads to conflict and scuffles between teachers and learners also appear to be associated with substance abuse (Mothibi, 2014:181). There are four major causes of violent crimes at the individual level such as individual motives or attitudes, aggression and hostility, impulsivity, and the loss of problem-solving abilities (Mothibi, 2014:186).

Alcohol used alone or in combination dramatically increases the risk of violent behaviour, and contributes expressively to the prevalence of adolescent suicide, fighting and robbery (Mothibi, 2014:186). There is a consistent and positive relationship between the use of alcohol and violent crime involving aggressive behaviour amongst school learners in rural areas (Mothibi, 2014:186). Learners abusing drugs and alcohol also become aggressive towards teachers and other learners (Lebese *et al.,* 2014:339).

Finally, psychologists argue that heavy drinking may lower individuals' expectations about their academic performance (Maithya, 2009). Social norms are adolescents' expectations of people's reactions to specific behaviour and the support that they experience from others in carrying out a certain type of behaviour (Maithya, 2009).

2.4   FACTORS INFLUENCING LEARNERS TO ABUSE SUBSTANCES

There are various factors influencing learners to abuse substances, and for the purpose of this study, individual factors, family factors, school factors, school factors, community factors, societal factors and the influence of the media were discussed in the next section.

2.4.1   Individual factors

Individual factors refer to underlying individual characteristics such as personality, attitudes and physical and mental health, (Morojele, *et al.,* 2009: 49). Personality factors, such as psychosocial unconventionality (tolerance of deviant behaviours, rebelliousness, and rejecting parental authority), sensation or novelty seeking, impulsiveness, aggression, low harm avoidance and other inhibition traits, have been identified as risk factors for adolescent drug use (Brook, Morojele, Pahl, Brook, 2006). In fact, a household study of adolescents in Cape Town and Durban demonstrated that personal attributes, such as delinquency, unconventionality and deviant attitudes, together with peer influence were the most important factors predictive of adolescent drug use (Brook *et al.,* 2006).

Adolescence is a crucial transitional stage where youngsters transform into adults, and they are prone to experimenting with substances. It is also known to be a time of trying new things (Maithya, 2009). Adolescents use drugs for many reasons including curiosity, because it feels good to reduce stress, to feel grown up or to fit it. It is difficult to know which adolescent will experiment and stop using drugs, and which will develop serious problems by continuing using drugs (Masombuka, 2013; Mhlongo, 2005). Some high school learners are often dragged into using drugs due to the misconception based on the belief that people who use substances, are enhanced with boldness, confidence or courageousness. This is not true, but learners due to curiosity, use substances to seek that transformation which does not exist (Maithya, 2009). Although the study by Maithya was conducted in Kenya, the findings are also relevant in the South African context. The local studies conducted by Masombuka (2013) indicate that curiosity is one of the risk factors of substance.

Interpersonal distress, such as depressive mood and a poor sense of well-being, has also been linked to drug use, (Brook *et al.,* 2006). Greater social maturity and social competence, measured by indicators such as being self-confident, taking responsibility, participating in discussions, have been found to be protective against developing substance dependence (Arteaga, Chen and Renolds, 2010). Religious involvement has also been associated with less alcohol use (Parry, Pluddemann, and Bhana, 2009). Research amongst South African adolescents has also indicated that individuals may use drugs to forget or solve problems, to relieve stress, to be accepted, for curiosity's sake, and for enjoyment and excitement (UNODC, 2004a). Identity formation is a crucial aspect of an adolescent's developmental stage, and some

individuals may start using drugs as they perceive it as setting them apart, and as it provides an outlet for rebellion (UNODC, 2004a).

Reviews also demonstrate that adolescents who initiate substance use at a younger age are more likely to become regular users, experience difficulty in quitting and suffer health and socially-related outcomes later in life (Agarwal, Nischal, Agarwal, Verma, and Dhanasekaran, 2013). For example, in the United States, it was found that individuals who used alcohol at age 14 or younger were more than 6 times as likely to be classified with alcohol dependence or abuse than those who had their first drink at age 21 or older (SAMHSA, 2010).

According to Liddle, Dakof, Parker, Diamond, Barrett and Tejeda (2001: 654) indicated that, although family variables have demonstrated their centrality in the causes and potential solutions for adolescent drug problems, other factors also contribute to the development and maintenance of adolescent substance abuse. Several longitudinal studies found personality variables, such as shyness, and aggressiveness, predict the development of drug problems.

Other personality traits, such as high novelty seeking and low harm avoidance, significantly predict early onset of substance use. Impulsivity and poor emotion regulation in childhood and adolescence are also correlates of adolescent drug use and abuse. An adolescent's attitudes and beliefs, such as perceived harmfulness and perceptions about the extensiveness of drug use by same age cohort, have also been found to be related to the onset and continuation of adolescence use.

2.4.2 Family factors

The family setting, especially the parent, can contribute to play an essential nurturing role in the socialisation of children and shaping the attitudes, values and behaviour of children (Maithya, 2009). The family setting can play a nurturing role, contributing to the socialisation, shaping the attitudes and behaviours of children (Maithya, 2009). The family is often viewed as the basic source of strength, nurturing and supporting its members, as well as ensuring stability and generational continuity for the community and its culture (Maithya, 2009). The influence of family environment can either be positive (protection against risk factors) or negative (become a stressful environment) for young people (O'Hara, 2008; Maithya, 2009).

Families are often challenged with multiple problems that have considerable stress resulting in marital problems, family strain and financial strain. Traditionally, families have the

responsibility to protect and nurture the members (Mokoena, 2002). Families sometimes undergo many structural and role changes. Rapid social, economic and technological changes may, under certain circumstances, weaken family relationships and reduce the sense of belonging in various social spheres (Maithya, 2009).

However, in a case where families are challenged with family disruptions that may lead to financial strain and marital problems, the family can often not provide care, support and nurturing for the members. When family disruptions are experienced, it may lead to financial strain, marital problems, and the inability to provide care, support and nurturing for the members. Consequently, members of the family may seek support and advice from friends. The NDMP (2006-2011) indicates that individuals with poor parental guidance may seek advice from friends and often use drugs as their coping mechanisms to cope with and escape from their situations. Maithya (2009) confirms that a parent with a drug problem increases the chances of the same problem developing in the offspring. Disrupted family life appears to be a major risk factor for drug abuse among some young people (Maithya, 2009).

The environment in which children grow up plays a great role in shaping their character (Maithya, 2009). For instance, adolescents from drug-using homes often copy the inappropriate substance use as modelled from their homes. However, the decisions of the individual whether or not to copy bad habits that are there in the environment still lie with the person him/herself. From time to time, most families are challenged by and confronted with problems. Parental drug places the adolescent at risk for alcohol and other drugs use (Arteaga, Chen and Renolds, 2010). In South Africa, parental drinking and marijuana use has been found to be related to adolescents' use of illegal drugs (Brook, Morojele, Pahl, and Brook, 2006).

According to Reddy *et al.,* 2010), the prevalence of smoking among learners whose parents or guardians smoked was higher (43%) than amongst those parents or guardians did not smoke (23%). Frequent family conflict and involvement in child protective services by age 9 also increased the probability of future substance dependency (Arteaga *et al.,* 2010). On the other hand, positive parenting practices can offer protection against alcohol and other drug use (Flisher, Townsend, Chikobvu, Lombard, and King, 2010). Specifically, parental warmth, communication, a good attachment relationship between parent and child, parental monitoring, disapproval for trying drugs, and parent's expectations of their child's expectations of their progress act as protective factors (Arteaga *et al.,* 2010).

According to Liddle, Dakof, Parker, Diamond, Barrett, and Tejeda (2001), family factors are influential in the genesis and exacerbation as well as in the protection against adolescent drug abuse and behavioural problems. Parent and sibling substance abuse, parental attitudes that minimise the dangers of drug use, poor relationships with parents and inadequate child-rearing practices are closely linked to adolescent drug problems. Several studies have demonstrated the direct effect of parental monitoring on levels of adolescent substance abuse (Liddle *et al,* 2001). Parental monitoring and practices prevent or delay drug involvement and are related to decrease in adolescent drug use after a pattern has been established, (Liddle *et al.,* 2001).

According to Sempe (2007: 34), adolescents do not just start abusing substances from nowhere; they emulate it from their peers because they either want to keep up with the standard or fit in or as such seek enforcement from their friends. The interest and expectation of their friends have a huge impact on whether the person will try drugs or alcohol. Peer groups are the source of information for the availability of drugs within the vicinity and they have much influence on their peers because they know the taste of different drugs. World Health Organisation (2003: 54), stress that drug users like other people seek approval for their behaviour amongst their peers by attempting to convince others to join their habit. When a person associates himself or herself with wrong people who consume substances, the chances are higher for that person to be easily lured into engaging in substance abuse.

2.4.3   Parental modelling

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structural and role changes. Rapid social, economic and technological changes may, under certain circumstances, weaken family relationships and reduce the sense of belonging in various social spheres (Maithya, 2009).

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Disrupted family life appears to be a major risk factor for drug abuse among some young people (Maithya, 2009). The environment in which children grow up plays a great role in shaping their character (Maithya, 2009). For instance, adolescents from drug-using homes often copy the inappropriate substance use as modelled from their homes. However, the decisions of the individual whether or not to copy bad habits that are there in the environment still lie with the person him/herself. From time to time, most families are challenged by and confronted with problems. Mungani and Midigo (2019), indicated that the parent's attitude towards tobacco, alcohol and other substances play a major role in child's life. Children learn what they see by imitating what their parents and other elders in the community are doing. Learners who are from families where their parents use drugs or smoke cigarette, dagga and other, are more likely to imitate what their parents are doing, starting by experimenting or tasting until the desire grows and become uncontrollable.

Disruptions of family functions due to death, divorce, separation and imprisonment creates instabilities in families. These are stressful life events in the adolescents' life, which can contribute to or aggravate their substance use (Mokoena, 2002). But this is not always the case. At times, adolescents may be challenged by heavy family problems and instead, that may teach them to be responsible citizens rather than finding comfort in drugs. Increased strains are seen as deriving from poor family management skills such as few rules, inconsistent discipline,

disorganised households and lack of child supervision. Families need to make provision for a consistent, suitable environment in order to groom children to be well behaved individuals. The environment in which learners go to school can also contribute to their involvement in drug use (Masilo, 2012).

2.4.4   Peer factors (Peer pressure)

Relatively few people start using drugs by themselves (Masese, Joseph and Ngesu, 2012). A friend or peer group is likely to be the source of information for drug users about the availability of drugs and their allegeable effects (Masese *et al.,* 2012). Hence, there is broad agreement that substance use is associated with peer pressure and group influence (Mokoena, 2002). A peer group is an intimate and select group, and admission and status to a peer group is determined by mutual choice (Thwala, 2003). When children move towards adolescence, fitting in becomes a dominant influence in their lives (Mokoena, 2002). Learners strive to be accepted by group members and are often challenged to conform to peer pressure that may exist within the group (Jeram, 2009).

Strong evidence exists for the direct and indirect influence of peer relationships on the development and deepening of adolescent substance use and abuse. The most robust finding in this area concerns how drug-using teenagers associate with teenagers who also use illicit substances (Liddle *et al.,* 2001:655). Thwala (2003: 34), states that youth do not just start abusing substances from nowhere, they emulate it from their peers because they either want to keep up with the standard or fit in or as such seek enforcement from their friends. According to the World Drug Report (2014), drug users like other people, seek approval for their behaviour from their peers whom they attempt to convince to join their habit as a way of seeking acceptance. The interest and expectations of their friends have a huge impact on whether the person will try drugs or alcohol.

Peer groupings are the source of information for the availability of drugs within the vicinity and they have much influence on their peers, because they know the taste of different drugs. World Health Organisation (2003: 54), stress that drug users like other people seek approval for their behaviour amongst their peers by attempting to convince others to join their habit. When a person associates himself or herself with strong people who consume substances, the chances are high for that person to easily lure into substance abuse.

2.4.5   School factors

One of the most consistent findings in research studies on substance use is the relationship between peer and adolescent alcohol and other drug use. Deviant peer affiliation, indicated by behaviours such as skipping school, drinking alcohol, or experimenting with drugs, increases the likelihood that an adolescent will use alcohol and other drugs (Arteaga *et al.,* 2010). However, it is unclear whether peer influence results in drug use, or if adolescents who use drugs select other drug-using peer as friends. Availability of substances in and around the school, as well as the lax attitude of schools towards alcohol and other drug use by their learners, is likely to result in greater use of substances (Morojele *et al.,* 2009). It is of concern that 9% of South African learners have been offered, sold or given an illegal drug on school property (Reddy *et al*., 2010). Low academic aspirations and poor school performance have also been linked to adolescents' use of alcohol (Morojele *et al.,* 2001).

2.4.6   Community factors

The attitude of the community and the neighbourhood towards the use of alcohol and other drugs, impacts on adolescents' rates of use. For example, community affirmation of smoking is associated with greater rates of smoking among adolescents, (King *et al,* 2003), while exposure to public drunkenness on a daily or weekly basis is also associated with the risk of being drunk, (Parry *et al.,* 2004b). In addition, environmental stressors such as low socio-economic status, victimisations are also somewhat predictive of adolescent drug use, (Brook *et al.,* 2006). Having few or no job opportunities, and an abundance of free unstructured time, are also associated with a higher risk of drug abuse, (UNODC, 2004a). Ease of access to alcohol and other drugs also increases the likelihood of use (Brook, 2005). The majority of youth who use illegal drugs, such as cannabis, will have first used so-called gateway substances, such as alcohol and tobacco (Flisher *et al,* 2002). Exposure to environmental tobacco smoke was also higher among learners who (75%) than those who did not (44%) (Reddy *et al.,* 2010).

2.4.7   Societal factors

According to Morojele *et al*., (2009) studies shown that tobacco advertising and promotion makes adolescents vulnerable to begin smoking and progress onto regular smoking. Tobacco and alcohol taxation together with restrictions on physical availability are some of the most powerful policy tools for controlling tobacco and alcohol use amongst young people (Maithya,

2009). There is ample evidence that shows that when the price of alcohol and tobacco is increased, consumption decreases, especially among young people, because of their limited disposable income (Morojele *et al.,* 2009).

Studies in the US have shown that increasing the legal age of alcohol consumption to 21, had a significant impact on reducing drinking and alcohol-related crashes amongst young people (Maithya, 2009). According to Parry (1998) the review of alcohol-related policies in South Africa, also recommended increasing the minimum age of drinking, graduated licensing for novice driver, increasing the taxation on all tobacco products and increased restrictions on alcohol marketing. Substance abuse and criminality are critical problems in South Africa as a result of childhood difficulties, ineffective parenting, delinquent peers, and a lack of commitment to school amongst the youth (Maithya, 2009).

2.4.8   The influence of media

Media advertising links smoking with being "cool" (Maithya, 2009). Media is a universal risk factor for substance use among adolescents. Media in the form of social media is seen to have massive negative effects on the thoughts and behaviours of adolescents as it speeds up the transmission of substance use images among adolescents. Consequently, adolescents interpret it as a socially acceptable behaviour (Maithya, 2009). This is more particularly common in urban areas where there is widespread exposure to advertising on radio, television and billboards. In urban areas adolescents are more exposed to images and messages promoting tobacco and alcohol than their counterparts in rural areas.

It is through media that adolescents watch their "heroes" smoking on television and movies, and that motivates them to copy the habit without realising the dangers and addictive power of tobacco. External pressures, especially the media, have an influence on substance abuse among the youth (Maithya, 2009). According to the author, the amount of time adolescents spend watching television has a negative influence on their behaviour. In a study conducted by the National Institute on Drug Abuse (NIH) (2014), it is reported that only ten per cent of the media messages mentioned risky behaviours associated with marijuana use. Adolescents who become dependent on illegal drugs often experience the disruption of relationships with family, teachers and peers, as well as a heightened deterioration of school and work performance. Road traffic accidents, suicide, violence and high-risk sexual behaviour are often attributed to adolescent substance use (Letamo *et al.,* 2016).

2.5   SUBSTANCES THAT ARE MOSTLY ABUSED IN SOUTH AFRICA

According to Ghulam, Verma, Sharma, Razdan, and Razdan (2016) in India, tobacco was the most substance abused in 53.9 percent population followed by man tobacco pan, masala, (panparaj, rajshree, and pan bahar) that contains catechu, cardamom, fine cut coconut shells, and betel nuts (41.4 percent). Other drugs in order of frequency were alcohol 46.5 percent, cannabis 8.9 percent, opiates 4.9 percent sedative and hypnotic 2,0 percent, solvents 1.0 percent, and cocaine in 0.1 percent. Several factors contribute to the abuse of non-prescription medications: they are easily accessible, often perceived as safe, legal, and effective in producing central nervous system effects (Crouch, Carafati and Booth, 2004: 1256). But the following are the most abused substances in South Africa, alcohol, tobacco, dagga/marijuana, cocaine, and nyaope which the researcher likes to discuss about as follows:

2.5.1   Alcohol

Alcohol seems to be one of the major substances that people abuse easily as a source of occasional pleasure and a usual habit (Lawal and Ogunsakin, 2012:37). Lawal and Ogunsakin (2012:38) contend that exceeding two drinks per day is linked to increase in blood pressure, and heavy drinking raises the risk of stroke. It can also cause swelling of the heart as well as irregular heartbeat. Many researchers consider alcohol to be a "gateway" to illegal drugs (Letamo, Bowelo and Majelantle, 2016; Masilo 2012). It remains the most used drug in South Africa (Mothibi, 2014; National Drug Master Plan, 2013). Chesang (2013) and Masilo (2012) argued that alcohol is an extremely intoxicating drug and the most readily available on the market with an estimated 230 000 liquor outlets in South Africa with one liquor store outlet for every 190 persons in the country.

Drinking alcohol has been rooted in many cultural practices in a way that those who do not drink, are sometimes viewed as "strange" or "stuck-up" (Zastrow, 2000). Thus, there is a great challenge to deal with alcohol consumption because it has been socially acceptable in communities due to religious and cultural practices. In the past, alcohol was used as part-payment for labour supplied by farm workers (Chesang 2013).

Alcohol problems such as binge drinking among school going children, are high in urban populations such as informal settlements. Consequently, alcohol creates major health issues and socio-economic consequences (Masilo, 2012). In South Africa, there is no doubt that

alcohol still causes harm in terms of secondary risks which include injury, unnatural deaths, foetal alcohol syndrome, sexual risk behaviour and hence HIV transmission (Pluddeman *et al.,* 2009). Zastrow (2000) and Masilo (2012) elaborate that alcohol slows mental activity, reasoning, speech ability as well as muscle reactions. It distorts perceptions, slurs speech, lessens coordination, and slows memory functioning and respiration.

Both Zastrow (2000) and Masilo (2012) concur that increasing quantities of alcohol leads to blankness, sleep, coma, and finally death. A hangover (or the aftereffects of too much alcohol) includes a headache, thirstiness, muscle aches, stomach discomfort and nausea. It acts on the body primarily as a depressant and lowers brain activity. However, in low doses it can be a stimulant (Chesang, 2013). The author further notes that if used in excess, it will damage internal organs. The consumption causes a number of behaviour changes such as a violent behaviour.

According to Masilo (2012: 30) alcohol is easily accessible in most townships and rural communities. Alcohol is the most readily available drug and it's not illegal to use or to possess as long as one has reached restricted age. According to the National Drug Master Plan (2013 to 2017), provides that alcohol is the most abused drug in South Africa by youth and adults. Statistics shows that 7.5% of South Africans have alcohol problems. Chesang (2013) state that alcohol is found in drinks such as beer, brandy, spirit and whisky which are extremely potent drug. Although penetrates through the body and primarily depresses the brain activity, however in small dose, it can be stimulant. Chesang (2013: 40), further emphasis that it it's used excessively, it damages or kills the tissues including muscles and brain cells.

Alcohol causes a number of change in behaviour in some instances, the consumer may act in violently under the influence. Hamdulay and Mash (2011) listed the number of alcohol street names which are booze, brew, pints and joy juice. Alcohol is the primary drug of abuse in South Africa. It's responsible for nearly half of all motor accidents. Over 30% of our population have an alcohol problem or are at risk of having one, and alcohol affects 17,5 million South Africans. During the CDA study 20% of 14-year-old boys and nearly half of 17 years old boys drank in the previous month. Girls was bit lower with 18% of 14 years old boys of 17-year-olds in the same period, NDMP (2013 to 2017: 35). Few studies have been done on the consumption of alcohol among young people. However, available data suggests that substantial proportions consume alcohol. For example, the 2002 and 2008 South African youth risk

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behaviour survey among learners in Grade 8 to 11 recorded the following data (Hamdulay and Mash 2011).

49% (56% among males and 44% among females) in 2002 survey, and 50% (54% among males and 45% among females) in the 2008 survey admitted that they had 1 or more "drinks" of alcohol at some time in their life; 32% (39% among males and 26% among females) in the 2002 survey, and 35% (41% among males and 30% among females) admitted that they had a "drink" of alcohol or; and 23% ((29% among males and 18% among females) in the 2002 survey and 29% (34% among males and 24% among females) in the 2008 survey admitted past month "binge" drinking (i.e. imbibed 5 "drinks" or more within few hours on one or more days in the month before the respective surveys), NDMP (2013 to 2017: 35).

2.5.2 Tobacco

Tobacco is not only harmful to those using it, but to those exposed to it as well (Masilo, 2012). Cigarettes continue to be attractable to children of any age and later they become addicted to cigarettes (Masombuka, 2013). It is safe to note that cigarette smoking is socially acceptable but remains harmful as it delivers the drug nicotine that is associated with dependence because it is the component that is psychoactive. Cigarette smoking causes a significant number of diseases, such as cancer, brain damage, disabilities, inability to make decisions, and later causes addiction, premature death, bronchial diseases and cardiovascular, respiratory and bronchial diseases. (Letamo *et al.,* 2016; Mhlongo, 2005). The control of tobacco use is an important public health issue for both adults and children, particularly because 80% to 90% of smokers start smoking during childhood (Letamo *et al.,* 2016). The tobacco use problem should be viewed and addressed as an individual, family, community, regionally and nationally

According to the World Health Organization (2017), South African drug statistics about drug consumption is twice the world norm, as 15% of South African population has a drug problem, and drug abuse is costing South Africa R20-billion a year and could pose a bigger threat to the country's future than the Aids pandemic. According to SAPS figures, 60 percent of crimes normally were related to substance abuse. In the Western Cape alone, the figure was closer to 80 percent.

Drug arrests leapt from 300 in 2006 to 1500 in 2012 in Cape Town, (Times Live), and drug statistics show that 25000 people die annually of smoking-related illness in South Africa,

according to the Cancer Association of South Africa. 2,5 million workdays are lost in South Africa due to absenteeism from tobacco-related illnesses, and worldwide, between 80 000 and 100 000 kids start smoking every day. Among young teens (aged 13 to 15), about one in five smokes worldwide.

According to Dube (2007) smoking can cause diseases, death and disability as stated at the back of every pack of cigarette. Mhlogo (2005: 35) is of the view that tobacco is not only harmful to the smokers, but also individuals who are exposed to the tobacco smoke. Tobacco contains quite a number of substances and nicotine is one of the substances and is frequently associated with dependence, because of its components that is psychoactive. Tobacco has some substances which are observable, for instance, mood changes, stress, and reduction on productivity. Dube (2007) emphasis that the problem of tobacco use be viewed and addressed as an individuals, families, community, the national and global level.

2.5.3   Dagga or Marijuana

Dagga is an addictive hallucinogenic drug also known as Marijuana, dope, pot, grass, ganja, weed, zol, boom and bush, to name a few (Chiduara, 2013). Excessive use of dagga causes the following: disorientation and distorted vision, "an unnatural thirst or hunger, uncontrolled mood swings, talkativeness, impairs perception, disturbs judgement, mind disorders, euphoria and it alleviates anxiety, as well as causes a temporal decrease in the production of the male sex hormone testosterone, potentially affecting sexual activity and sperm count, as well as the loss of interest in hobbies like sport (Masombuka, 2013).

Regardless of the dangers of using dagga, adolescents refuse to see dagga as a drug. They often argue that other people have used dagga for years and they have never been affected, hence the continuous use of dagga. Dagga is often used by adolescents to experience something extraordinary (Van Zyl, 2011). South Africa is one of the top four suppliers of dagga in the world because it is a traditional crop that grows in many areas, especially in the Eastern Cape and Kwazulu-Natal (Van Zyl, 2011).

Amadi and Onyinyechi (2017) indicated that, marijuana is an addictive hallucinogen drug which tends to be smoked by rural youth. Marijuana causes unnatural thirst, hunger, uncontrollable mood swings, talkativeness, impaired perception, disturbed judgement, mind

disorder, a feeling of well-being and euphoria which is pleasant feeling of excitement and of escaping from reality (Masombuka, 2013).

According to Ondieki and Mokua (2012: 38) contend that because of sensory distortion young people resort to substance use to experience something extraordinary. The use of dagga has increase by 20%, and in 2006 2,52 million people used dagga and this increased to 3,2 million in 2008, (NDMP 2013 to 2017). South Africans use double the amount of Dagga, than the average world-wide figure. Over R3.5 billion is spent annually by South Africans to purchase dagga, and1500 metric tons of dagga is used annually, South Africans spend an estimated R3560 million on dada per year, NDMP (2013 to 2017).

2.5.4 Cocaine

Masombuka, (2013) state that street name for cocaine is coke, snowbirds, flakes, blow and nose candy. It is normally in the form of white sparkling powder often diluted with other ingredients. According to Dube (2007) cocaine has therapeutic effects such as relieving pain, euphoria effects and it reduces fatigue. Cocaine provokes excitement with an increase in activity, talkativeness, euphoria and increase in muscular strength. When the intake continue it increase shivers, nervousness and convulsion.

2.5.5 Nyaope

Nyaope is destroying the future of adolescents and the youth. This is a common, cheaper and easily accessible drug from all socioeconomic backgrounds and is becoming more popular among the adolescents and primary school children, especially in townships (Mzolo, 2015). According to Mzolo (2015) and Mahlangu (2016), Nyaope is a street drug made from a combination of rat poison, heroin and antiretroviral drugs sold in a tiny packet for R25 or R30 a packet. It is also known as Whoonga in some parts of the country like KwaZulu-Natal, known to be a white powder that is believed to have originated in Pretoria (Mahlangu, 2016). Effects of smaller doses include euphoria, rush, a sense of warmth and well-being. On the other hand, the effects of larger doses include drowsiness, feelings of contentment, safety and relaxation (Masombuka, 2013).

According to Biennial Ant-Substance Summit (2016: 20), cited in Department of Social Development (2013: 32) state that nyaope also known as ''whoonga'' is made from quite a number of ingredients such as rat poison, heroin, smashed glasses and antiretroviral drugs. This

drug is the most dangerous drug which destroys the future of young people in majority. Nyaope is described as the white powder that sometimes look creamy and in colour and it is sold for R30, per portion. According to the Department of Social Development (2013: 33), emphasise that the suppliers of this kind of drug are mostly Nigerians.

2.6   CONSEQUENCES OF SUBSTANCE ABUSE ON LEARNERS' HEALTH

Masombuka, (2013) state that substance abuse has quite a number of consequences, starting with health problems, poor academic performance, risk of being raped, increase crime rate, teenage pregnancy, loss of identity and increase HIV and ADIS pandemic. Only few will be discussed below:

2.6.1   Health problem

According to United Nations Office on Drugs and Crime (2013) the hazardous and harmful use of alcohol is a major global contributing factor to death, disease and injury. The victims of this substance are exposed to serious health problems such as alcohol dependence, liver cirrhosis, cancers, and to others through dangerous actions of intoxication they drink and drive, became violent and drinking pregnant girls' impact development of their unborn babies. United Nations Office on Drugs and Crime (2013) also indicate that the abuse of alcohol is one of the leading health risks in the world, and it is a casual factor of sixty major types of diseases and injuries.

According to World Health Organisation (2012: 108) reported that many youths who abuse substances are at high risk of death through suicide, accident and illness. Substances are not good for human consumption, legalised substances like cigarettes have a warning message at the back of the package that specifies that "cigarette is dangerous it cause lung cancer and it kills", but people do not take that serious because they continue to abuse substances though they are warned.

2.6.2   Increase Human Immune Virus (HIV) and Acquired Immune Deficiency Syndrome (AIDS) pandemic

According to the study conducted by the Department of Social Development (2012: 28), the rate of HIV and AIDS has decreased amongst teenagers compared to other age groups. However, because the disease has a long tendency period before symptoms appear, it becomes clear that most young adults who are infected with HIV and AIDS became infected when they

are at the adolescent age. Reddy (2004: 59) points out that the above examples illustrate the catastrophic health related consequences of youth substance abuse. Thus, apart from personal health problems, the families of the victims also from distress as they have to take care of the healthcare cost, transportation and special diet for the victims. Hence, it also affects the economy of the country in a bad way, because the country loses a lot of money on ARV treatment and future productive which place a burden on the community.

In terms of biennial Anti-Substance Summit (2003: 3) substantiate on the study conducted by the Central Drug Authority, it stipulates that the consequences of substance abuse impact badly on an individual's health and society at large, it hinders individual's progress in life, contributes to debilitating mood disorder, teenage pregnancy, spread of HIV and AIDS pandemic, and increase risk of academic injuries and death.

2.6.3 Increase crime rate

Parry, Pluddemann and Bhana (2009) indicated that learners who abuse drugs can act in a violent way as a result of that little push that comes from within that makes to act on impulses that would otherwise ignore. Drugs and substances have been used for years to provide both the excuse and the recklessness to perform acts most people in their right minds would not do, like killing. Census 2011 statistics shows that seven thousand (7000) deaths occur annually due to drink and driving. The Medical Research (2014: 23) states that some drugs are highly associated with Drug dependency or addiction. This means that some users become quite convinced that they cannot live without the drug.

Masombuka, (2013) indicated that the stress which continues intake requires money and being dependent on drugs makes it difficult for one to hold down a job, which makes victim to resort on crime to get money. The fact that they are illegal exacerbates this dilemma, as it pushes up the price and ensures that drugs can be purchased from criminals. Mhlogo (2005) indicated that the need for large amounts of instant cash without having to work a regular job tends lead women into prostitution and fraud, while it tends to lead men into direct forms of acquisitive crime. The urgency of addiction increases and often become violent.

2.6.4 Loss of identity or stigma

Goodman (2013) stated that when children reach adolescent stage, they start to experience many changes in their life and that gives them perception that they are old and can make

decisions without informing their parents and that open door for peer pressure to rule their life because they start to rely to their friends for guidance and comfort.

According to NAIDA (2018: 17), several studies suggest that marijuana use can cause functional impairment in cognitive abilities but that the degree and/or duration of the impairment depends on the age when the person began using and how much and how long he or she used. Some research suggests that marijuana use is likely to precede use of other licit and illicit substances and the development of addiction to other substances, (NAIDA, 2018:21).

2.7   STRATEGIES TO PREVENT SUBSTANCE ABUSE BY LEARNERS

According to (Maithya (2009) the following is recommended to schools in the fight against substance abuse:

- A development of parental skills workshops for parents with children who are challenged with substance use.
- A constant community education programme to educate learners, parents and caregivers about the early warning signs of substance use.
- Continuous education of communities about the dangers of substance use and consequences.
- A compulsory adherence and attendance of aftercare services in a form of a community based support groups.
- Incorporation of drug education into Life Orientation subject in schools.
- Establishment of debates regarding substance use to enhance the knowledge of substance use amongst learners.
- Invitation of medical practitioners or other experts as guest speakers in schools to raise awareness.
- Reinforcing school rules and regulations to avoid substance use challenges in schools.
- Establishment of a drug policy for the school.
- Training and empowering parents with skills to address drug use among their children.
- Consistent monitoring of learners by teachers, parents and the community at large.
- Establishment of peer counselling strategies for learners to support each other.
- Involvement of parents in counselling sessions or any other strategy used to fight substance use amongst learners.

- Establishment of parental forums to serve as a support structure.

- Excellent teamwork between parents and the school.

2.8   LEGISLATIVE FRAMEWORK ON SUBSTANCE ABUSE

Legislative framework related to substance abuse, consists of The Constitution of the Republic of South Africa, 1996, South African Schools Act, 1996. Employment of Educators Act, 1998. Child Justice Act, 2008, Children's Act, 2005, Prevention of and Treatment for Substance Abuse Act, 2008, The National Drug Master Plan (2013 – 2017), Drug and Drug Trafficking Act, 1992, Tobacco Products Control Amendment Act, 2008, Liquor Act, 2003 (Act No. 59 of 2003), Drug Dependency Act, are discussed as follows:

2.8.1   The Constitution of the Republic of South Africa Act, 1996

The Constitution is the supreme law of the country. Section 10 to 20(1) of the Bill of Rights, Chapter two of the constitution of the Republic of South Africa 1996, provides that everyone has the right to have their dignity respected and protected, the right to life and the right to freedom of security.

The Constitution of the Republic of South Africa, 1996, also makes provision to redirect offenders between the years 10 to 18 years into various programmes such as substance abuse treatment. Section 28(d) of the Constitution, 1996 stipulates that children have the right to be protected from maltreatment, neglect, abuse or deration. The government is entitled to realise the above right by committing itself to reduce both the demand and supply of illegal and legal substances through wide range of programmes and actions. Hence it adopts policies to protect the right of the citizens. Substance abuse endangers citizen's rights collectively and the individual's right to use substances is limited in terms of section 36 of the Constitution of the Republic of South Africa.

2.8.2   South African Schools Act, 1996

The South African Schools Act, or SASA, section 8A (1-14), stipulates random search and seizure and drug testing at schools, that no person may bring a dangerous object or illegal drug onto school premises or have such object or drug in his or her possession on school premises or during any school activity. Section (2 to 3), of the South African Schools Act, 1996, (Act No. 84 of 1996), describes the possible conditions that lead to random searching, by instructing

the principal or his or her delegate may, at random, search any group of learners or the property of group of learners, for any dangerous object or illegal drug, if a fair and reasonable suspicion has been established, (a) that a dangerous object or an illegal drug may be found on school premises or during a school activity, or (b) that one or more learners on school premises or during a school activity are in possession of dangerous objects or illegal drugs.

The South African Schools Act, 1996, outlines that the search may only be conducted after taking into account all relevant factors, including, the best interest of the learners in question or any other learner at the school; the safety and the health of the learners in question or any other learner at the school; reasonable evidence of illegal activity and all relevant evidence is received. The Act also provides the actions that the principal of the school may do if such illegal drugs are found that he or she must hand them to the police.

2.8.3 Employment of Educators Act, 1998

This Act regulates the conditions service, discipline, retirement and discharge of educators. It calls for the mandatory dismissal of an educator found in possession of any intoxicating, illegal or stupefying substance while at work. An educator found to be under the influence of alcohol or drugs whilst at work will be subject to a disciplinary hearing and appropriate sanctions. An educator suffering from ill health as a result of alcohol or drug abuse may be sent for counselling or rehabilitation. However, the employment may be terminated if the behaviour is repetitive.

2.8.4 Child Justice Act, 2008

The Child Justice Act, 2008, aims to keep young offenders out of formal prison as enshrine in Chapter 2, The Bill of Rights, of the Constitution of the Republic of South Africa, section 28(1)(g), section 10 of the Child Justice Act, 2008, makes provision to direct the children between the age of 10 to 18 years into diversion programmes that attempt to reintegrate young offenders into the family care and to limit the stigma attached to.

2.8.5 Children's Act, 2005

The Children's Act, 2005, enshrines children's rights to care and protection as stipulated in the Bill of rights, Chapter 2 of the Constitution of the Republic of South Africa, 1996. The Children's Act 2005 outlines that children must be protected from being subjected or exposed

to behaviours that may harm or endanger the child psychologically and emotionally. Section 150(1) (d) makes provision that school must first take the necessary steps to ensure that a child continues studying while the school can decide to remove a learner.

2.8.6   Prevention of and Treatment for Substance Abuse Act, 2008

The Prevention of and Treatment for Substance Abuse Act, 2008, provides for the establishment of programmes aimed at preventing and treatment of drugs dependency. The Prevention of and Treatment for Substance Abuse, 2008, focuses on prevention, early intervention, treatment and integration programmes. However, it has been assented to; it has not yet been promulgated.

Despite its positive focuses on assisting victims of substance dependency. It remains largely silent on protection against stigmatisation, except for stating in Chapter 3 that abuser must occur in an environment that prevents stigmatisation to the client. A section 16 of the Act, outlines the protection of all substance abusers against stigmatisation, and promotes it as a principle enshrined in the Global Commission Report.

2.8.7   The National Drug Master Plan (2013-2017)

According to CDA, The National Drug Master Plan (NDMP) 2013-2017 of South Africa was formulated by the Central Drug Authority in terms of the Prevention and Treatment of Drug Dependency Act, 1992 (Act No. 20 of 1992), as amended, and approved by the Parliament to meet the requirements of the international bodies concerned and at the same time the specific needs of South African communities, which sometimes differ from those of other countries. The National Drug Master Plan was motivated by the concern that substance abuse pose danger to society, and as a results, it exerted internal pressure to develop implementable strategies that will address the prevalence of drugs and alcohol abuse in South Africa.

 Another pressure was external from the UN in 1995, which issued influential document titled Format and Guidelines for the Preparation of National Drug Control Master Plan. The purpose of this plan was to formulate treatment programmes for first time offenders. So, the South African government adopted National Drug Master Plan for 2013 to 2017, as the government strategy to fight against substance abuse in the country. Substance abuse is a global problem, South Africa included, Medical Research Report, (2003: 121).The National Master Plan is aimed at helping the government to realise its vision of free substance abuse society by 2017,

guided by the Millennium Goals so that the focus can only be on raising the quality of life for the poor and vulnerable rural communities.

The National Drug Master Plan was formulated by the Central Drug Authority in terms of the Prevention and Treatment of Drugs Dependence Act, 1992 (Act No. 70 of 2008).

2.8.8   Drug and Drug Trafficking Act, 1992

The Drugs and Drug Trafficking Act, 1992 provides that any person who deals or consume dangerous drugs or any substance which are harmful is guilty of criminal offence for which penalty may be imprisonment for 15 years or a fine. Section 3 of the Drugs and Drug Trafficking Act, 1992, indicates that no person shall manufacture any scheduled substance or supply it to any person, knowing or suspecting that such substance is to be used in or for the unlawful manufacturing of any drug.

Section 4(a) of the Act, provides that no person shall use or be in his or her possession any dependence producing substance; or any dangerous dependence produced substance or any undesirable dependence producing substance, unless he or she is a patient who acquired or bought such substance from a medical practitioner acting in his professional capacity and in accordance with the requirements of the medicines practices or any regulation.

Section 4(bb) of the act shows that if the offence involved the use or possession of drugs penalty must be fine or up to 15 years imprisonment or both charges. The Drugs and Drug Trafficking Act, 1992 further provides that a person may possess potentially dangerous or dangerous potentially dependence producing drug and use it legally only if the drug has been obtained in terms of a written prescription from the medical practitioner, like for instance, dentist or veterinarian.

2.8.9   Tobacco Products Control Amendment Act, 2008

This Act prohibits the advertising and promotion of tobacco products, the free distribution of tobacco products, the sale of tobacco products to and by persons under the age of 18 years and allow for increase of fines for non-compliance. It also prohibits the sale of tobacco products in any place where a person under the age of 18 years receives education or training. Alongside sustained increases in excise taxes, the original Tobacco Products Control Amendment Act No.

12 of 1999 has been credited with declines in both adolescent and adult smoking rates (Swart *et al.,* 2004).

2.8.10 Liquor Act, 2003

The Liquor Act, 2003 (Act No. 59 of 2003), provides that manufacturing and distribution of liquor must be regulated at the national level while Micro manufacturing and retail should be regulated at the provincial level. Section 9(1) of the Constitution Act, 1996 substantiate the Liquor Act, 2003 (Act No. 59 of 2003) stipulates that liquor companies are not allowed to advertise any alcohol related drinks in a false or misleading manner which may attract or influence minors to start drinking at a very young age. Liquor Act, 2003 (Act, No. 59 of 2003), outlines the Norms and Standards for the liquor industry. Section 2 and 39 of the Liquor Act, 2003 (Act, No. 59 of 2003) also effects mandate to develop Norms and Standards from. Such Norms and Standards were adopted by the National Liquor Policy Council on 05 September 2014 for implementation throughout the Republic. The Norms and Standards issued within the current legislative framework, and such Standards are aimed for harmonising legislation, age verification, licencing conditions and structural requirements.

The purpose of Norms and Standards are to ensure that liquor regulation and practices in Republic are harmonised; facilitated effectively and uniform enforcement authorities to ensure consistency in the application of liquor laws throughout the country; and to reduce the socio-economic and other costs of alcohol abuse by reducing access to and the availability of liquor. These Norms and Standards ensure consistency and certainty in how liquor laws are implemented by various liquor authorities. Further, ensure that all manufacturers, distributors and retailers in all provinces operate within clear and coherent parameters. Section 39 of the Liquor Act, 2003 (Act, No. 59 of 2003) state that failure by the licensee to observe the mandatory licensing conditions prescribed by the liquor authority will lead to the suspension or termination of the liquor license.

2.8.11 Drug Dependency Act

The Drug Dependency Act, 1992 established the Central Drug Authority in 1999, and makes provision for the development of programmes to regulate the establishment and treatment of facilities**.**

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2.8.12 South African Institute for Drug-Free Sport Amendment Act, 2006

This Act makes provisions for the testing of athletes for doping by sports administration bodies and for punitive measures to be taken against national sports federations not complying with the regulations. The original South African Institute for Drug-Free Sport Act, 1997, promoted the participation in sport, which is free from the use of drugs and other substances, which are intended to artificially enhance performance. The Act also allowed for the establishment of the South African Institute for Drug-Free Sport. Objectives of the Institute include the development of educational programmes for the general and sporting community with regard to the dangers of doping in sport.

2.9 Regulations which are relevant to substance abuse are, Regulation for Safety

Measures at Public Schools, Policy Framework for the Management of Drug Abuse by Leaners in Schools and in   Public Further Education and Training Institutions, National Guidelines for the Management and Prevention of Drug Use and Abuse in all Public Schools and Further Education and Training Institutions and are discussed below:

2.9.1 Regulation for Safety Measures at Public Schools

These regulations declare that all public schools are drug free zones. No person may possess illegal drugs on public school premises or enter the school premises while under the influence of an illegal drug or alcohol. The regulations also make provision for the searching of school premises, or persons present on the school premises, by a police officer, principal or delegate, if there is reasonable suspicion for possession of substances (DOE, 2001).

2.9.2 Policy Framework for the Management of Drug Abuse by Leaners in Schools and in   Public Further Education and Training Institutions

This policy intends to support learners who abuse substances, as well as staff and learners who are affected by substance abuse, and contribute to the effective prevention, management and treatment of drug use. It states that all South African Schools should become tobacco, alcohol and drug-free zones. It also states that random drug testing is prohibited, and that drug testing should only be used where there is reasonable suspicion that a child is using drugs. It makes provision for preventive education via the Life Orientation curriculum (DOE, 2002).

2.9.3 National Guidelines for the Management and Prevention of Drug Use and Abuse in all Public Schools and Further Education and Training Institutions

These guidelines provide a framework for the way in which to operationalize the policy framework mentioned in 2.2.4.5 above. It provides direction as to the systems that should be put in place to address substance abuse in the schooling system. These include, amongst others, developing a policy with regard to the management of substance by learners for each school, establishing Learner Support Teams (LST), creating links with community resources, and implementing procedures for incident management (DOE, 2002). The guidelines further recognise the inclusion of drug education in the Learning Area of Life Orientation which is currently implemented in schools. A healthy, drug-free life is further encouraged through learner's participation in sport and cultural activities.

2.10 CONCLUSION

In this section, the researcher reviewed literature and identified some of the substances abused in South Africa. These range from peer, social occasions among other related causes. The school environment plays a major role in enhancing or curbing the vice of the substance abuse. In urban centres students are likely to engage themselves in substance abuse more than those in the rural areas. The implications of substance abuse on management of academic performance of learners can lead to high failure rate amongst learners and makes learners to give up their studies and can lead to dropout. And such instances of giving up or dropout lead to poverty and high crime rate. It also leads to truancy, indiscipline, and cancer of the liver, lung and throat. Learning standards also go down because most substance abusers, who are learners, need to be assisted right from home and school. Religious societies should also play a role in substance abuse control. However, the following chapter discussed the research methodology and the research design.

CHAPTER THREE
RESEARCH METHODOLOGY AND RESEARCH DESIGN

3.1   INTRODUCTION

This chapter discusses about the research methodology that has been used in the study. This chapter also provides explanations of research methods and design used. The research design includes selection of participants which is the population, the study area, sampling method and sampling size, data collection, pilot study, data analysis and ethical considerations.

3.2   RESEARCH DESIGN

According to Kumar (2014: 122), research design is a plan, structure and strategy of investigation so conceived as to obtain answers to research questions or problems. A research design is the overall plan for obtaining answers to the research questions, Polit and Beck (2012: 58). This is an exploratory, descriptive and contextual study that was conducted using qualitative research design because of the nature of the problem that was being researched. According to Creswell (2012: 20) research design are the specific procedures involved in the research process: data collection, data analysis and report writing. Field study research design has been because it is suitable to investigate the impact of substance abuse on learners' academic performance.

3.3   RESEARCH METHODOLODY

According to Somekh and Lewis (2005: 346), research methodology is the collection of methods or rules by which a particular piece of research of research is taken, however, it is generally used in a broader sense to mean the whole system of principles, theories and values that underpin a particular approach. Whereas Gray (2009: 581), describes research methodology as approaches to systematic enquiry developed within a particular paradigm with associated epistemological assumptions. There are two main classes of paradigms, viz, quantitative and qualitative approaches.

According to Davies and Huges (2014: 159), qualitative research refers to inductive, holistic, subjective and process-oriented methods used to understand, interpret, describe and develop theory on a phenomenon or a setting and a systematic, subjective approach used to describe life experiences and give them meaning, whereas, Punch and Oancea (2004: 49) describes

qualitative research as empirical research where the data are not in the form of numbers, and it is more than uses non-numerical data. Creswell (2009: 4) defined quantitative research as a means for testing objective theories by examining the relationship among the variables. Quantitative research is an inquiry into an identified problem, based on testing a theory, measured with numbers, and analyzed using statistical techniques, (Creswell, 1994: 95). Quantitative research is useful to quantify options, attitudes and behaviours and find out how the whole population feels about a certain issue. For the purpose of this study, the researcher employed both qualitative and quantitative research approaches.

3.4   STUDY AREA

The study was conducted at Luvuvhu Circuit, in Vhembe District, Limpopo Province. This area includes schools at Mangondi, Muledane, Lufule, Maniini (Ha-Tshikovha), and Muledane villages.

3.5   POPULATION OF THE STUDY

According to Davies and Hughes (2014: 156), provides that population refers to all the members of a defined group which a study is interested, whereas Creswell (2014: 142), describes population as a group of individuals who have the same characteristics, for example all nurses would make a population of nurses. For the purpose of this study, the population was comprised of respondents of Luvuvhu circuit which includes four principals, three HODs, four educators, ten learners, two SGB chairpersons of secondary schools.

3.6   SAMPLING

Kumar (2014: 382) refers sampling as a process of selecting a few respondents from a bigger group to become the basis for estimating the prevalence of information of interest to the researcher. Sampling is referred to as choosing a smaller, more manageable number of people to take part in research (Dawson, 2006: 48). In this study, the sampled group where the data was collected from included teachers, SMT members, principals, deputy principals.

3.6.1   Sampling method

According to Creswell (2012: 206), define sampling method as the standard used in choosing participants in purposive sampling, is whether they are "information rich". According to

Babbie (2010: 193), indicated that it is appropriate to select a sample on the basis of knowledge of a population, its elements, and the purpose of the study. This type of sampling is purposive or judgmental sampling. The study undertook the purposive probability sampling that utilizes some of the random selection. The sampling method used for this study was the cluster sampling. Cluster sampling method allows for the subdivision of the population into subgroups or cluster for the researcher to randomly select members of the cluster sample to serve as population sample.

3.6.2   Sampling size

The sampling size of the study consisted of forty respondents, which are, two principals, three deputy principals, five SMT members, eight HODs, ten CS1 educators. The sample size was categorized as follows:

Table 3.1   Sample size

Respondents	Population	Sampled
Principals	4	2
Deputy principals	5	3
HODs	17	8
SMT Members	29	10
CS1 Educators	82	17
Total	137	40

3.7   DATA COLLECTION METHOD

According to Schneider, *et al.,* (2004: 442) define data as information systematically collected in the course of a study. In this study, two data collection instruments will be employed, and they are questionnaire and open-ended interview.

Creswell (2012: 626), indicated that questionnaire refers to forms used in a survey design that participants in a study, complete and return to the researcher, and participants mark answers to questions and supply basic, personal, or demographic information about themselves, and are hand delivered to the respondents with a view to complete and provide information in writing. Interview is defined to as data collection encounter in which one person (an interviewer) ask questions to another who is a respondent (Babbie and Mouton, 2001: 643). Maree (2010: 87), defines interview as a two-way conversation in which the interviewer asks the participant questions to collect data and to learn about the ideas, beliefs, views, opinions and behaviours of the participants.

The aim of qualitative interviews is to see the world through the eyes of the participant, and they can be a valuable source of information, provided they are used correctly, (Maree, 2001: 87). Interviews occur when the researchers ask one or more participants, general, open-ended questions and record the answer, (Creswell, 2012: 622). According to Kumar (2014: 178), a questionnaire is a written list of questions, hence easy tabulated and analyzed. It also minimizes the risks of misinterpretation. The researcher also made appointments with the selected respondents for the fulfillment of the study or research. In this study, structured interview will be used. The research interviewed respondents individually in order to obtain in-depth information.

3.8   PILOT STUDY

When the purpose of the study is to determine its feasibility is called a pilot study (Kumar, 2014: 13). According to Williman, 2011: 175), pilot study referred to as a pre-test of a questionnaire or other type of survey to refine research hypothesis. Three participants will be selected from for pretest, and these participants will not form part of the participants in the study or research. Pilot study will be conducted to organize instruments for the research.

3.9   DATA ANALYSIS

Data analysis is defined as the process of creating structure and meaning to the mass collected data (De Vos, Strydom, Fouche, and Delport, 2005). Qualitative data analysis is usually based on an interpretative philosophy that is aimed at examining meaningful and symbolic content of qualitative data. Phrased differently, it tries to establish how participants make meaning of a specific phenomenon by analyzing their perceptions, attitudes, understanding, knowledge,

values, feelings and experiences in an attempt to approximate their construction of the phenomenon, (Maree, 2010: 99). This data analysis tends to be an ongoing and iterative (no-linear) process, implying that data collection, processing, analysis and reporting are intertwined, and not merely a number of successive steps.

According to Bless, Higson Smith and Kagee, (2006: 163), data analysis process allow the researcher to generalize the findings from the sample used in the research conducted. The study used two data analysis methods. Data collected through questionnaire has been analyzed by a statistical analysis. Statistical Package for Social Science (SPSS) has been used and it is a powerful statistical software which manipulates large amount of data, and it helps the researcher to summarize data, compiled in appropriate tables and graphs, examine relationships among variables, perform tests of the statistical significance and develop fairly sophisticated models.

The data collected though questionnaires has been presented in a graphical tabular form, , frequencies and percentages. Information has been presented in a narrative form. Data collected through interviews has been analyzed using thematic analysis method. The researcher has adopted the following steps by Creswell (1994: 142).

- **Planning for recording of data**

The researcher showed awareness techniques for recording, observing, interacting and interviews should not intrude excessively into the on-going of daily events.

- **Data collection and preliminary analysis**

The researcher was able to analyze data and made sure that the information being collected was rich information that would generate alternative hypothesis and provide basics for shared construction of reality.

- **Managing or organizing the data**

The researcher has put all copies of compiled information during data collection for further advice to someone secure for safe keeping. The data gathered from interviews was in the form of field notes which was organized to see the trends from respondents and patterns of the data gathered from the respondents.

- **Reading and writing memos**

The researcher is expected to read the transcripts in their entirely, often several times to get unversed in the details, and try to get sense of the interview as a whole before breaking it into parts. The data was read several times and the purpose was to give the researcher an understanding of the data.

- **Generating categories, themes and patterns**

The researcher classified information into categories in order to reduce it to a small manageable set of themes to write into a final narrative. The data was then given names A, B, and C each representing a respondent in order to give a detailed description of the respondent and to maintain confidentiality.

- **Coding the data**

Coding data is the formal representation of analytic thinking. Coding is the process whereby data are broken down into their component parts and those parts are given labels. The analyst then searches for recurrences of these sequences of coded text within and across cases and also for links between different codes. Codes may take several forms: abbreviations of key words, colored dots or numbers depending on the choice of the researcher.

- **Testing emerging understanding**

As categories and themes are developed and coding is well underway, the researcher begins the process of evaluating the plausibility of his/her developing understandings and exploring them through the data. This phase involves evaluation the data for their usefulness and centrality.

- **Searching for alternative explanations**

As the researcher discovers categories and patterns in the data, he/she should critically challenge the very patterns that seem so apparent. The researcher should search for other explanations for these data and the linkages among them. Alternative explanations always exist, the researcher must search for, identity and describe them and then demonstrate why the explanation offered is the most plausible of all, (Marshal and Rossman, (1999: 157).

- **Writing the report**

This is the final phase of the data analysis wherein the researcher presents the data through packaging of what was found in the text, tabular or figure form. According to Marshal and Rossman (1999: 157) writing about qualitative data cannot be separated from the analytic

process. It is central to the process, for in the choice of particular words to summarise and reflect the complexity of the data, the researcher is engaging in the interpretive act, lending shape and form meaning to massive amounts of raw data. The research report remains the primary mode for reporting the results of the research.

3.10 ETHICAL CONSIDERATIONS

According to Polit and Beck (2012: 150), when humans are used as study participants, care must be exercised to ensure that their rights are protected. This was done by seeking permission from the research ethics committee, the relevant institution, caregivers, and the participants. The researcher obtained permission from the caregivers through written consent letter, which they signed. Furthermore, consent was obtained from participants through signing a simple written assent letter. The researcher explained the benefits and/or effects of the research to the participants and the community.

3.10.1 The right to self determination

People have the legal right to decide and control their own destiny. The researcher informed the potential participants about the proposed study and allow them to voluntarily choose whether to participate. The participants were not pressured to take part in the study. They were informed that they can withdraw any time without any penalty. It is important to note that there was no covert data collection.

3.10.2 The right to privacy

Participants have the right to decide on the extent of information to share. The learners' confidentiality was assured. No names were used during the research and information gathered was protected. Pseudonyms were used to represent individual's ideas, opinions or beliefs. Interviews also took place in a private and quite room.

3.10.3 Right to protection from harm

The right to protection from harm is based on the principle of beneficence. This study constitutes a non-experimental research, hence no physical harm or discomfort was inflicted on the participants. However, the information that needed to be collected could trigger emotional discomfort such as anxiety, since the use of substance abuse is sensitive in nature.

The researcher made every effort to minimize the risk of discomfort by protecting participants' privacy and ensuring anonymity.

The researcher avoided deceptive practices in research designing. In addition, informed consent was obtained from participants, and they had the rights to withdraw from participating in the research at any time. In the event of psychological discomfort during and after the research, the researcher had organised specialists (a social worker and an occupational therapist) to provide psychological support to participants at no cost. The participants received contact details of the researcher and the specialists.

3.10.4 Right to confidentiality

The duty of the researcher is to safeguard information shared by the participants. Data was collected in such a way that no individual responses could be recognised. No names were used. The researcher was the only person to transcribe the data. All data gathered was kept in a lockable cabinet and office. Information entered into the computer hard drive will be deleted using software designed to remove data in storage devices.

3.10.5 Right to fair treatment

Selection of the participants was fair and was carried out according to the eligibility criteria based on the research design. No financial rewards were given for taking for taking part in this study, and no penalty or fine was charged for declining to participate.

3.11   CONLUSION

In conclusion, this section gave a detailed discussion of methods and instruments used for data collection. It highlighted the study area, population of the study, sampling, data collection method, pilot study, data analysis and ethical considerations. It also highlighted the steps used in data analysis. The next chapter will embark on a detailed presentation and analysis and interpretation of the data

CHAPTER FOUR

DATA PRESENTATION, ANALYSIS AND INTERPRETATION

4.1 INTRODUCTION

This chapter focuses on reporting the perceptions and understanding on the implications of substance abuse on management of learners' academic performance at Luvuvhu Circuit in Thohoyandou Cluster, Vhembe East District in Limpopo province. The data regarding the implications of substance abuse on management of learners' academic performance was collected using quantitative and qualitative research methods which involved the application of questionnaire and interview. The responses to the questionnaire items are presented graphically in tabular form and are followed by a brief synthesis of the findings for the items and the responses to the interview schedule are presented in a narrative form and are followed by brief interpretation of the findings.

4.2 ANALYSIS OF DATA COLLECTED THROUGH QUESTIONNAIRE

This section presented the data collected through questionnaire and forty respondents answered questionnaire. The information has been presented in tabular format, percentages and frequencies.

4.2.1 SECTION A: Bibliographical information of respondents

This section provides the personal particulars of the respondents in the study. The information is presented in a graphical and tabular form and followed by the synthesis of the findings.

Table 4.1   Gender of respondents

	Respondents	Frequency	Percentage
1	Male	25	62.5%
2	Female	15	37.5%
	Total	**40**	**100%**

Table 4.1 presents the personal particulars of the respondents in terms of gender. Twenty-five, (62.5%) of the respondents were males, while fifteen, (37.5%) of respondents were females. The majority of the respondents who took part were males and females did not take part in numbers.

Table 4.2   Age of the respondents

	Respondents	Frequencies	Percentages
1	21 to 30 years	4	10%
2	31 to 40 years	6	15%
3	41 to 50 years	10	25%
4	51 years and above	21 to 30 years	50%
	Total	**40**	**100%**

Four responses' category of which the first category of 21 to 30 years, has four respondents, which makes 10% of the sampled respondents, the second category of 31 to 40 years, has six respondents, which makes 15%, the third category of respondents has 41 to 50 years, has 10 responses which makes 25% and the last one has twenty respondents, which makes 50% of the forty respondents.

Table 4.3   Position of Respondents

	Respondents	Frequencies	Percentages
1	Principal	2	5%
2	Deputy Principal	3	7.5%
3	HOD	8	20%
4	SMT	10	25%
5	CS1	17	42.5%

		Total	40	100

The table above indicate the positions of the respondents, where (5%) of the respondents are principals. Three, (7.5%) of the respondents were deputy principals. Eight, (20%) of the respondent were the HOD. 25% of the respondents were the SMT. Seventeen, (42.5%) of the respondents were the CS1 educators.

Table 4.4   Working years' experience

	Respondents	Frequencies	Percentage
1	Less than 5 years	1	2.5%
2	6 to 10 years	7	17.5%
3	11 to 20 years	10	25%
4	More than 20 years	22	55%
	Total	**40**	**100%**

Table 4.4 represents the years of experience of some respondents. One, (2.5%) of the respondents has worked between 01 to 5 years and four, seven, (17.5) of the respondents worked between 06 to 10 years. Ten, 10 (25%) of the respondents worked between 11 to 20 years and twenty-two, (55%) of the respondents have worked for more than twenty years.

4.2.2 SECTION B: Implications of substance abuse on management of learners' academic performance

This section focuses only on four aspects which are, the impact of substance abuse on management of academic performance of learners who abuse substances, the effects of absenteeism or truancy on the management of academic performance of learners who abuse substances, the effects of ill-discipline on management of academic performance of learners who abuse substances, and the strategies to improve the management of academic performance of learners who abuse substances.

4.2.2.1 The impact of substance abuse on the management of academic performance of learners who abuse substances

Table 4.5 Substance abuse increases bullying and disobedience of learners' code of conduct

	Respondents	Frequencies	Percentages
1	Strongly agree	35	87.5%
2	Agree	5	12.5%
3	Not sure	0	0%
4	Disagree	0	0%
5	Strongly disagree	0	0%
	Total	**40**	**100%**

Table 4.5 having thirty-five, (87.5%) respondents having strongly agreed to the statement, and five, (12.5%) respondents agreed to the statement that substance abuse increases bullying and disobedience of learners' code of conduct. There is zero respondent on the category of not sure, disagree and strongly disagreed respectively. That shows that indeed bullying and disobedience of learners' code of conduct always come into being due to learners' substance abuse.

Table 4.6   Substance abuse increases high failure rate

	Respondents	Frequency	Percentages
1	Strongly agree	25	65.5%
2	Agree	15	37.5%
3	Not sure	0	0
4	Disagree	0	0
5	Strongly disagree	0	0

		Total	40	100%

From Table 4.6 (65.5%) respondents having strongly agreed to the statement, and fifteen, (37.5%) respondents agreed to the statement that learners, who abuse substances are more likely to fail tests and are at risk of repeating the grade. It is also difficult for the educators to teach them as they always seem to be tired.

There is zero respondent on the category of not sure, disagree and strongly disagreed respectively. That shows that indeed learners who abuse substances are most likely to fail tests or examinations and may appear to repeat a grade.

Table 4.7   Substance abuse leads to violent behaviour amongst learners

	Respondents	**Frequencies**	**Percentages**
1	Strongly agree	20	50%
2	Agree	15	37.5%
3	Not sure	5	12.5%
4	Disagree	0	0%
5	Strongly disagree	0	0%
	Total	**40**	**100%**

The majority of respondents twenty, (50%) strongly agreed to the statement that substance abuse can cause absentness and violent behaviour amongst learners, ten (37.5%) respondents agreed to the statement, while five (12.5%) respondents were not sure, and there is no respondent in either disagreed nor strongly disagreed, and on the two rows from the table respondents are showing their feeling that indeed, learners who abuse substances, are violent. If there might be anyone showing that learners who abuse substances are not violent, we would have heard it in this question. Out of forty respondents, no one had answered in favour of disagreeing or strongly disagreeing.

Table 4.8   **The behaviour of learners who abuse substances leads to disrupt academic progress, resulting into poor performance**

	Respondents	Frequencies	Percentages
1	Strongly agree	27	67.5%
2	Agree	13	32.5%
3	Not sure	0	0%
4	Disagree	0	0%
5	Strongly disagree	0	0%
	Total	**40**	**100%**

Table 4.8 provides that twenty-seven, (70%) respondents have strongly agreed to the above-mentioned statement, while the remaining respondents thirteen, (32.5%) respondents agreed to the statement that the behaviour of learners who abuse substance influence learners to disrupt academic progress and leads to poor performance and truancy. There is no respondent answering not sure, disagree or strongly disagreeing section.

Table 4.9   **Lack of morals, conflicts and fights are common to learners who abuse substance**

	Respondents	Frequencies	Percentages
1	Strongly agree	19	47.5%
2	Agree	11	27.5%
3	Not sure	4	10%
4	Disagree	4	10%
5	Strongly disagree	2	5%

		40	100%
	Total	**40**	**100%**

The majority of respondents, nine-teen (47.5%) strongly agreed to the statement, eleven (27.5%) agreed to the statement about the fact that lack of morals, conflicts and fights in schools are common to learners who abuse substance. Four, (10%) respondents showed not sure and disagreeing, whereas only two, (5%) respondents have strongly agreed to the above-mentioned statement. The majority of the respondents are showing their experiences when they manage these learners, that most learners who are found in cases of violent behaviour in schools usually in most cases are the ones that abuse substances.

4.2.2.2 Effects of absenteeism or truancy on the management of academic performance of learners who abuse substances

Table 4.10   Substance abuse leads to learners' poor commitment for learning

	Respondents	**Frequencies**	**Percentages**
1	Strongly agree	30	75%
2	Agree	10	25%
3	Not sure	0	0%
4	Disagree	0	0%
5	Strongly disagree	0	0%
	Total	**40**	**100%**

Table 4.10 provides that thirty, (75%) of the respondents strongly agreed to the statement poor commitment for learning is led by abusing substance. The majority of the respondents strongly agreed that substance abuse influence learners not to commit themselves in their schoolwork. Ten, (25%) respondents agreed to the statement, while there is no respondent on the 'not sure, disagree and strongly disagree'. This shows that indeed substance abuse leads to learners' poor commitment to learning.

Table 4.11   Substance abuse increases truancy, absenteeism and poor academic performance

	Respondents	Frequencies	Percentages
1	Strongly agree	20	50%
2	Agree	10	25%
3	Not sure	4	10%
4	Disagree	3	7.5%
5	Strongly disagree	3	7.5%
	Total	**40**	**100%**

Table 4.11 shows that there were twenty, (50%) respondents for strongly agreeing with the statement, ten, (25%) for agreeing with the statement about substance abuse as one of the factor which increases truancy and absenteeism, while four, (10%), three, (7.5%) and three, (7.5%) were responding on not sure, disagree and strongly disagreeing respectively that substance abuse decreases school attendance. By looking at the majority of the respondent who strongly agreed and those that agreed, it showed that substance abuse increase truancy, absenteeism and poor academic performance. Even though there were three (7,5%) each in disagreeing and strongly disagreeing consecutively, there is still a general feeling that substance abuse increases truancy, absenteeism and poor academic performance. The respondents that responded to 'not sure' were at the minority of four, (10%) did not convince the understanding of the majority that it is indeed the fact that substance abuse increases truancy, absenteeism and poor academic performance.

4.2.2.3 The effects of ill-discipline on the management of academic performance of leaners who abuse substances

Table 4.12 Substance abuse leads to learners' ill-discipline

	Respondents	Frequencies	Percentages

	Respondents	Frequencies	Percentages
1	Strongly agree	40	100%
2	Agree	0	0%
3	Not sure	0	0%
4	Disagree	0	0%
5	Strongly disagree	0	0%
	Total	**40**	**100%**

Table 4.12 provides results on the statement that substance abuse leads to learners' ill-discipline, and all of the respondents responded showing all of them, forty, (100%) respondents strongly agreed with the above mentioned statement. There is none of the respondents showing either not sure, disagree, or strongly disagreeing with the statement. All participants understand that substance abuse leads to learners' ill-discipline. This brings a unanimous feeling and understanding of the fact that substance abuse leads to learners' ill-discipline. This tells me that learners who abuse substances have certain behavioural problems of ill-discipline.

Table 4.13   Learners who abuse substances are at risk of increasing crime rate in society

	Respondents	Frequencies	Percentages
1	Strongly agree	30	75%
2	Agree	10	25%
3	Not sure	0	0%
4	Disagree	0	0%
5	Strongly disagree	0	0%
	Total	**40**	**100%**

Table 4.13 above shows that all of the respondents, twenty-three (75%), and seventeen (25%), responded on strongly agreed and agreed respectively on the statement which says, learners who abuse substances are at the risk increasing crime rate. There was no respondents on the not sure, disagree and strongly disagree respectively. This implies the fact that substance abuse can increase crime rate in the society, as there were no respondent who were not sure, or respondents were neither disagreeing nor strongly disagreeing.

4.2.2.4 The strategies to improve the management of academic performance of learners who abuse substances

Table 4.14   Lack of parental support or guidance results in making learners to abuse substances

	Respondents	Frequencies	Percentages
1	Strongly agree	9	22.5%
2	Agree	13	32.5%
3	Not sure	11	27.5%
4	Disagree	4	10%
5	Strongly disagree	3	7.5%
	Total	**40**	**40%**

Table 4.14 above shows that   the majority of respondents, (55%) have agreed to the statement that lack of parental support or guidance leads to learners to abuse substances. By the fact that thirteen, (32,5%), were agreeing to the question implied that they were in majority and were showing that lack of parental support or guidance results in making learners to abuse substances. There were only eleven, (27.5%) for the respondents that showed that they were not sure, and that did not take away the notion 'lack of parental support or guidance results in making learners to abuse substances.' There were four, (10%) and three, (7.5%) for 'disagree' and strongly 'disagree' respectively and that did not bring away the fact which the majority of participants have indicated that lack of parental support or guidance results in making learners to abuse substances.

Table 4.15   There are policies which also involve learners in the fight against substance abuse

	Respondents	Frequencies	Percentages
1	Strongly agree	8	20%
2	Agree	6	15%
3	Not sure	10	25%
4	Disagree	7	17.5%
5	Strongly disagree	9	22.5%
	Total	**40**	**100%**

Out of the total of forty respondents, (22.5%) of the respondents have strongly disagreed that there are policies which also involve learners in the fight against substance abuse in schools, and the majority of them have indicated they are not sure. Eight, (20%) respondents strongly agreed to the statement in question. Six, (15%) respondents have agreed to the statement that there are policies which also involve learners in the fight against substance abuse. That might indicate that participants are not aware of the policies in question and that made an understanding that, schools do not have these policies. The respondents that strongly agree might be indicating that such policies might be there, but when put into practice teachers do not involve learners actively.

Table 4.16   Learners receive guidance on the risks associated with substance abuse in schools

	Respondents	Frequencies	Percentages
1	Strongly agree	15	37.5%
2	Agree	11	27.5%
3	Not sure	7	17.5%

4	Disagree	3	7.5%
5	Strongly disagree	4	10%
	Total	**40**	**100%**

Fifteen, (37.5%) respondents have strongly agreed to the statement that learners indeed, receive guidance on the risks associated with substance abuse in schools, and eleven 11 (27.5%) respondents did agree with the above-mentioned statement. Seven (17.5%) respondents have responded not sure, and three (7.5%) and four (10%) respondents disagreed and strongly disagreed respectively. It implied that learners are not actively given guidance. If the guidance is given, it seemed as if it is not enough. But when looking at the majority of the participants, fifteen, (37.5%) for 'strongly agree' and eleven, (27.5%) for 'agree' showed that learners receive guidance on the risks associated with substance abuse in schools.

Table 4.17   Communities, parents and schools work together to motivate learners in their studies

	Respondents	**Frequencies**	**Percentages**
1	Strongly agree	8	20%
2	Agree	6	15%
3	Not sure	12	30%
4	Disagree	8	20%
5	Strongly disagree	6	15%
	Total	**40**	**100%**

Table 4.17 provides that only eight, (20%) respondents strongly agreed to the statement, which means a low is equivalent to the number of participants in the disagree section. This indicates that participants they are not aware that communities, parents and schools work together to motivate learners on their studies. There is high number of participants in 'not sure' item, about

twelve, (30%), that indicate the fact the majority of participants are not sure as to whether the communities, parents and schools work together to motivate learners in their studies. This group of participants do not know, but six, (15%) strongly disagree that communities, parents and schools do not work together to motivate the learners in their studies. In conclusion to this category of teamwork of communities, parents and schools towards motivating learners in their studies, the general feeling is that it does not occur that way.

Table 4.18   Parents give moral support to their children, even though they are actively involved in abusing substances

	Respondents	**Frequencies**	**Percentages**
1	Strongly agree	10	25%
2	Agree	10	25%
3	Not sure	4	10%
4	Disagree	5	12.5%
5	Strongly disagree	11	27.5%
	Total	**40**	**100%**

Table 4.18 above, shows the majority of the respondents, eleven (27.5%) have strongly disagreed to the fact that, when parents find that their children are abusing substances, they do not give them the necessary support. Five, (12.5%) of the respondents disagreed or showed negative feeling about the statement, that children (learners) who abuse substances are not given support by their parents. Ten, (25%) of the respondents each are strongly agreeing and agreeing respectively. If 'strongly agree' and 'agree' are considered to be giving the same meaning, it indicates that about twenty, (50%) agree that parents give support even if their children are also abusing substances.

Table 4.19 **Schools have offices of social workers where learners can get counselling about their life**

	Respondents	Frequencies	Percentages
1	Strongly agree	0	0%
2	Agree	4	10%
3	Not sure	8	20%
4	Disagree	16	40%
5	Strongly disagree	12	30%
	Total	**40**	**100%**

Table 4.19 indicates that the majority of the respondents sixteen, (40%) disagreed on the statement that schools have offices of social workers where learners can talk about challenges of substance abuse. This shows that schools do not have these offices and also do not have social workers who can attend to their problems regarding substance abuse. This can also show by twelve, (30%) respondents who strongly disagreed on the statement. It was also supported by eight, 8 (20%) of the respondents also indicated that they are not sure about the statement. Four, (10%) respondents are in minority, and that brings an understanding that, schools have neither offices of social workers nor social workers who will attend the learners' problems regarding substance abuse.

4.3 ANALYSIS OF DATA COLLECTED THROUGH INTERVIEW

This section provided the analysis of the data collected through interviews. It has four questions based on objectives and research questions of the study.

4.3.1 Question 1: What is the impact of substance abuse on the management of academic performance of learners who abuse substances?

Respondent A:

Respondent A provides that managing learners who are violent makes it difficult to teach them as they are always tired during lessons, and they do not show interest in learning. These learners threaten educators, and they are violent. They do not respect the rules of the school. They do not come to school in time, and sometimes they do not attend enrichment classes normally. They do not do their homework in time and most of them always be in the principal's offices mitigating their weakness.

Respondent B:

Respondent B showed that such learners are at risk of becoming alcoholic or drug addicts and cannot cope well with their studies. The respondent further indicated that such learners are at risk of becoming criminals, as it seemed simple for them to engage with criminal activities.

Respondent C:

Respondent C provides that the impact of substance abuse on management of learners' performance on learning includes increasing crime rate as some substances abused are illegal substances which result to them being arrested by police. If learners always think of whether they will be arrested or not, takes away their interest in learning which in turn demotivates them to perform poorly.

Respondent D:

Respondent D provides that, substance abuse pose threat to the school, as other learners always would fear their lives and would find it difficult to come to school. Their performance would be impacted negatively.

Respondent E:

Respondent E provides that, it is very simple for the learners who abuse substances to form a group, which in turn makes it difficult for the teachers and to control and that is why they start fight and protect each other, so they shift their focus from learning to fighting, and their performance will be low.

From the above, respondents mentioned that managing academic performance for learners who abuse substances is difficult as these learners can organise friends who are abusing substances to form gangs, and this pose threat to teachers and other learner. It was highlighted that they

can become alcoholic, drug addicts and criminals. The respondents indicated that these learners who abuse substances find it difficult to pass their tests.

4.3.2 What are the effects of absenteeism or truancy on the management of academic performance of leaners abusing substance?

Respondent: **A**

Respondent A provides that learners are expected to attend the lessons fully, but if there are disturbances, like absenteeism, or truancy which may take place, they cannot master the learning content of which it may cause them to fail the tests which will be written. The effect of absenteeism is failure.

Respondent: **B**

Respondent B responded that if learners are not coming as they might have abused the substances, they will not get high marks in tests. As they might have drunk, it is difficult to study and writing of homework, it will be so easy for them to absent themselves from school.

Respondent: **C**

The respondent indicated that learners who abuse substances do not have school interest and will avoid themselves from their lessons, because they are always tired. They do not write tests, they do not commit themselves deeply to their studies.

Respondent: **D**

Respondent D indicated that to manage learners who abuse substances is difficult, because it is easy for them to absent themselves from classes and that makes it difficult for them to pass tests, as they miss most of their written work while they were absent.

Respondent: **E**

Respondent E provides that learners who abuse substances find it easy for them to abscond classes for that matter, they perform very badly. They don't take the issue of attending classes regularly as a matter of importance.

From the above, respondents indicated that for the learners to succeed in their schooling, they are expected to attend every lesson every time and must be on time all the time. Respondents indicated that absentness or truancy impacted negatively to their studies.

4.3.3 What are the effects of ill-discipline on the management of academic performance of leaners who abuse substances?

Respondent A

Respondent A provides that ill-discipline is the main factor that determines whether learners' performance in a class will be good or not. Learner's discipline is the only indicator that they can perform better or not. Indicates good or bad performance, and learners' ill-discipline indicates that they will not going to pass tests, and examinations.

Respondent **B**

Respondent B provides that learners who abuse substances are always not discipline, as they do not observe school rules to the full, and they appear to be not able to do simple things, like writing the homework and exercises given, so they end up not succeeding in their tests and examinations.

Respondent **C**

Respondent C indicated that without discipline, there will be no progress and these learners turned to be the failure.

Respondent **D**

Respondent D provides that dealing with learners who abuse substances is a challenge and needs a lot of time to manage them so that they ended up succeeding with their studies, as it needs a lot of parental involvement, and by so doing, they turned to be behind of the other learners and that makes it difficult to achieve their studies.

Respondent **E**

Respondent E provides that discipline is the main source of all learning, and learners who abuse substances do not observe or respond to the rules of the schools, they are not dedicated in their learning and seem not fear anybody, and thus why they violate school rules and learners' code

of conduct, and their academic achievement is very low. From the above, ill-discipline has implications to their studies. Respondents further indicated that for the learners to succeed to their studies, they need to be discipline first, stay away from substance abuse and respect their teachers and must do their work all the time.

4.3.4 What are the strategies to improve the management of academic performance of learners who abuse substances?

Respondent A:

Respondent A provided that the effective strategy to manage learners' academic performance in schools is when all those who shows symptoms of substance abuse to be identified to be given counselling as early as possible. That would help those who are influenced or following friends to stop at an early stage. If they stop early, their performance may be positively impacted.

Respondent B

Respondent B indicated that involvement of law enforcement agencies is required to come to school to make awareness campaign about the law and the consequences of substance abuse.

The respondent further indicates that, learners' motivation and encouragement by the people who are holding certain career path, like doctors or nurses, lawyers to be invited to come and motivate, especially those who passed grade twelve in such schools.

Respondent C:

Respondent C sited about the establishment of the policy about the abuse of substances which must allow learners themselves to provide their views themselves about the policy. The respondent further indicated that the school must set an example by exposing those concerned to the police.

 Respondent D:

Respondent D responded by indicating that, when educators are teaching in their respective lessons, they must also talk about the challenges of substance abuse in class, even though it cannot be a matter of everyday lessons, but educators must be encouraged to give some kind of guidance about the challenges.

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Respondent E:

Respondent E provides that schools must be required to organise the drama by learners which talks about the consequences substance abuse and learning which must be played at least once per semester, or stage essay competitions about substance abuse and consequences, or organise debates that talks about substance abuse and its consequences.

The respondent further indicated that learners' academic performance will improve, and most learners may pass as a result of these activities.

From the above, respondents, early detection of learners who abuse substances is important for early counselling and motivation. It was also indicated that law enforcement agencies, social workers and parents should be invited to make an awareness campaigns about the implications of abusing substances to studies, health and in society at large. The respondents also indicated about the establishment of the policies about substance abuse and their implementations, so as to improve the management of learners' performance, especially for those who abuse substances.

4.4   CONCLUSION

This chapter has presented research results from data collected from respondents, analysed and interpreted. The data regarding the implications of substance abuse on management of learners' academic performance, was collected by using both qualitative and quantitative methods of research which involved the application of questionnaires and interviews. The responses to the questionnaire items were presented in tabular form and were followed by a brief synthesis of the findings. The interview schedule was presented in a narrative form and followed by a brief interpretation of the findings.

CHAPTER FIVE

FINDINGS, RECOMMENDATIONS AND CONCLUSION

5.1   INTRODUCTION

This chapter presented the major findings which arose from the objectives, recommendations, recommendations for future studies and conclusion.

5.2   MAJOR FINDINGS OF THE STUDY

Major findings of the study arose from the specific objectives of the study which are, to establish the impact of substance abuse on the management of academic performance from learners who abuse substances, to evaluate the effect of absenteeism or truancy on the management of academic performance from learners who abuse substances, to establish the effects of ill-discipline on the management of learners' academic performances of learners who abuse substances and to determine strategies to improve the management of academic performance of learners who abuse substances at Luvuvhu Circuit in Vhembe East District.

5.2.1   Major findings on the impact of substance abuse on management of academic performance of learners who abuse substances

The first objective of the study sought to establish the impact of substance abuse on management of academic performance of learners who abuse substances in secondary schools. The data is presented in tabular form followed by a brief presentation. The researcher found out that the majority of the respondents, Table 4.6 having thirty-five, 35 (87.5%) respondents having strongly agreed to the statement, and five, 5 (12.5%) respondents agreed to the statement that substance abuse increases bullying and disobedience of learners' code of conduct. There is zero respondent on the category of not sure, disagree and strongly disagreed respectively. That shows a researcher that indeed bullying and disobedience of learners' code of conduct always come into being due to learners' substance abuse.

Table 4.7 Having twenty five, 25 (65.5%) respondents having strongly agreed to the statement, and fifteen, 15 (37.5%) respondents agreed to the statement that learners, who abuse substances are more likely to fail tests and are at risk of repeating the grade. It is also difficult for the educators to teach them as they always seem to be tired. There is zero respondent on the category of not sure, disagree and strongly disagreed respectively. That shows a researcher that

indeed learners who abuse substances are most likely to fail tests or examinations and may appear to repeat a grade. The majority of respondents twenty, 20 (50%) strongly agreed to the statement that substance abuse can cause absentness and violent behaviour amongst learners, ten 15 (37.5%) respondents agreed to the statement, while five 5 (12.5%) respondents were not sure, and there is no respondent in either disagreed or strongly disagreed.

Table 4.12 provides that twenty-seven, 27 (70%) respondents have strongly agreed to the above-mentioned statement, while the remaining respondents thirteen, 13 (32.5%) respondents agreed to the statement that the behaviour of learners who abuse substance influence learners to disrupt academic progress and leads to poor performance and truancy. There is no respondent answering not sure, disagree or strongly disagreeing section.

It was found that by disobeying the instructions from teachers, they ended up not studying well which ended them to fail such subjects. The study revealed that, lack of morals leads to criminal activities which resulted to be arrested by police. The study further revealed that substance abuse learners disrupt lessons, and they lead learners to boycott classes. It was found that these learners lack commitment to study.

5.2.2 Major findings on the effects of absenteeism or truancy on the management of academic performance of learners who abuse substances

.The second objective sought to evaluate the effects of absenteeism or truancy on management of academic performance of learners who abuse substances, and the researcher has found that that twenty, 20 (50%) of the respondents from the table above strongly agreed to the statement that missing of written tasks can be due to substance abuse. Ten, 10 (25%) respondents agreed to the statement, while four 4 (10%) respondents were not sure and six, 6 (15%) respondents disagreed on the statement.

Findings from the tables above, show that there were twenty, 20 (50%) respondents for strongly agreeing with the statement, ten, 10 (25%) for agreeing with the statement about substance abuse as one of the factor which increases truancy and absenteeism, while four, 4 (10%), three, 3 (7.5%) and three, 3 (7.5%) were responding on not sure, disagree and strongly disagreeing respectively that substance abuse decreases school attendance.

5.2.3 Major findings on effects of ill-discipline on management of academic performance of leaners who abuse substances

The third objective serves to outline the effects of ill-discipline on management of academic performance of learners who abuse substances, and the table above provides results on the statement that substance abuse leads to learners' ill-discipline, and all of the respondents responded showing all of them, forty, 40 (100%) respondents strongly agreed with the above mentioned statement. There is none of the respondents showing either not sure, disagree, or strongly disagreeing with the statement.

The above shows that all of the respondents, twenty-three 30 (75%), and seventeen 10 (25%), responded on strongly agreed and agreed respectively on the statement which says, learners who abuse substances are at the risk increasing crime rate. There was no respondents on the not sure, disagree and strongly disagree respectively. This implies the fact that substance abuse can increase crime rate in the society, as there were no respondent who were not sure, or respondents were neither disagreeing nor strongly disagreeing.

5.2.4 Major findings on strategies to improve the management of academic performance of learners who abuse substances in secondary schools

The table above shows that the majority of respondents, thirteen 13 (32.5%) have agreed to the statement that lack of parental support or guidance leads to learners to abuse substances. Out of the total of forty respondents, 9 (22.5%) of the respondents have strongly disagreed that there are policies which also involve learners in the fight against substance abuse in schools, and the majority of them have indicated they are not sure. Eight, 8 (20%) respondents strongly agreed to the statement in question. Six, 6 (15%) respondents have agreed to the statement that there are policies which also involve learners in the fight against substance abuse.

Fifteen, 15 (37.5%) respondents have strongly agreed to the statement that learners indeed, receive guidance on the risks associated with substance abuse in schools, and eleven 11 (27.5%) respondents did agree with the above-mentioned statement. Seven 7 (17.5%) respondents have responded not sure, and three 3 (7.5%) and four (10%) respondents disagreed and strongly disagreed respectively. The majority of the respondents, eleven 11 (27.5%) have strongly disagreed that parents continued to support their children, even though they are actively involved with abusing substances. Five, 5 (12.5%) respondents have disagreed, while

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four, 4 (10%) of the respondents responded that they were not sure about the statement, while ten, 10 (25%) respondents strongly agreed and agreed with the statement respectively.

The fourth objective of the study sought to recommend mechanisms that can be used to prevent learners to abuse substances and the researcher found that majority of the respondents twenty-two (55%) agreed that lack of parental support or guidance results in making learners to abuse substances. The researcher found out that it is very important for the parents to support and guide their children about the consequences of substance abuse. The majority of the respondent seventeen (40%) respondents disagreed to the fact that policies which involve learners in the fight against substance abuse are in place in schools. Which means that even though the policies are there, they are not easily accessible to everyone, or these must be talked to the learners by educators or must be placed in a way that learners can easily access them. The findings also suggest that learners receive guidance on the risks associated with substance abuse in schools. This was supported by twenty-six (65%) respondents.

It was found that communities, parents and schools are not working together enough in ensuring that learners are passionate about their studies, and this was shown by fourteen, (35%) of the respondents. Findings also showed that parents support their children even though they are involved with the activities of substance abuse, and such statement is supported by twenty (50%) respondents. The findings also shown that twenty-eight (70%) respondents disagreed that schools do not have offices of social workers where learners talk about their problems associated with substance abuse.

5.3   RECOMMENDATIONS OF THE STUDY

Recommendations will be presented based on the specific objectives of the study. In this section, the researcher will provide recommendations on the impact of substance abuse on the management of academic performance from learners who abuse substances, evaluation of the effect of absenteeism or truancy on the management of academic performance from learners who abuse substances, and to determine strategies to improve the management of academic performance of learners who abuse substances at Luvuvhu Circuit in Vhembe East District.

5.3.1 Recommendations on the impact of substance abuse on the management of academic performance from learners who abuse substances

The study sought to recommend on the impact of substance abuse on management of academic performance of learners who abuse substances, and the researcher found out that learners who abuse substances are more likely to form gangs or groups, which are not for learning, but for fighting and for protecting friends from the gang and are also at risk of committing crime. Thus, recommend that learners should refrain from the activities of abusing substances, and be encouraged to love themselves as well as loving their schoolwork.

Life Orientation educators must spend the fifteen minutes talking about the dangers encountered by learners who abuse substance. It is recommended that learners with substance use challenges visit drug rehabilitation centres in order to witness the hardship experienced by those undergoing treatment. Prevention programmes that are offered by all relevant stakeholders in the fight against substance abuse should prioritise abstinence of drugs, resistance to peer pressure, problem solving, and coping skills when encountered with life issues.

The programmes issued should ensure that they cater for the learners who often conform to the peer pressure and equip them with skills to resist peer from friends. The study also recommends that learners who are already challenged with substance abuse are afforded positive reinforcement through therapeutic counselling by school social workers and other relevant stakeholders in the fight against substance abuse. The study also recommends that life skills programmes should be offered to all secondary schools for all learners, especially for those with substance abuse, because such programmes could boost the self-esteem and self-worth of those learners. The study recommends that motivational speakers be invited to talk to learners about substance abuse as a tool for motivation and positive role modelling for the learners. It is recommended that such motivation should be conducted on regular basis where there is such a need.

5.3.2 Recommendations on effects of absenteeism or truancy on the management of academic performance of learners who abuse substances

While the study focuses on the on the implications of substance abuse on management of academic performance of learners who abuse substances, the study recommends further

parental support during the adolescent stage of learners. The study recommends that parents should attend workshops and programmes addressing the challenges of substance abuse. In addition, parents should be encouraged to establish support groups in their respective communities. This will provide platforms for parents to share their experiences in relation to their children and facilitate the supporting of each other regarding growing substance abuse among adolescents. Through such support structures, an opportunity is created to bring together parents, community organisations dealing with substance abuse, and health expects to address substance abuse issues in a locally and appropriate manner.

It is recommended that the strengthening Limpopo Department of Education (LDE) and other government entities such as Limpopo Department of Social Development (LDSD) in the fight against substance abuse among learners and availing a proper referral system of learners challenged with substance abuse from LDE to the LDSD. Such referral strategies should have monitoring tool to check on the progress of the intervention.

5.3.3 Recommendations on effects of ill-discipline on management of academic performance of learners who abuse substances

Parents are expected to make important contributions to successful intervention efforts to curb the use of substances or substance abuse by learners in secondary schools. Parents must not abuse substances like alcohol and smoke cigarettes in front of their children at home. They must also not send children to buy alcohol and cigarettes from shops for them. Parents should also talk about the effects or dangers of using substances to their children. They must guide and give advice to children who are already using substances.

Teachers must play an important role in health education and role modelling at school, by not drinking alcohol, or smoking cigarettes in front of learners. Teachers must also not abuse substances in front of learners during extra-curricular lessons or during the time where they are engaged with the field excursion programmes or in educational tours. After school hours, teachers should not abuse substances in public or abuse substances with the learners at home. Life Orientation teachers should always teach and talk to learners about the dangers of abusing substances.

5.3.4 Recommendations on the strategies to improve the management of academic performance of learners who abuse substances

Records should be kept and marked regularly for students who are reported for abusing substances during school hours. This must include the learners who come to school being under the influence of certain substances. Information programmes attempting to persuade learners from abusing substances should be established in schools. Schools must organise campaigns with the help of the Department of Health and South African Police Services about the substance abuse and its impact on health and learning. The Department of Basic Education in collaboration with teachers unions, must conduct workshops on procedures to follow when a learner is suspected of abusing certain substance like alcohol or marijuana, and give knowledge of treatment methods of such substance abuse, and also by providing names of organisation and contact persons that can help.

5.4 RECOMMENDATIONS FOR FUTURE STUDIES

With regards to the undertaken study and observation, the researcher recommends that future studies be held on the training of all stakeholders involved in education, i.e., the principals with their school management teams and SGBs. The training should enable all stakeholders concerned the effective ways that would reduce the learners from abusing substances. With respect to educators, they must be prepared in such a way that they are noble to an extent that they are teachers and also parents at school. The trainings should also involve pastors from churches as they influence life from the spiritual background.

5.5 CONCLUSION

The first chapter provides the background of the study, problem statement, aim of the study, specific objectives, research questions, and significance of the study, delimitation and limitation of the study, definitions of operational concepts and the layout of the chapters. The second chapter of the study provides the literature review on the implications of substance abuse on management of learners' academic performance. In this chapter, the theoretical framework was discussed, and factors which influence learners to abuse substances and relevant legislations were discussed in this study. The third chapter outlines the coordination of the study and the methods used are qualitative and quantitative approaches. The data collected through qualitative and quantitative research methods involved the application of

questionnaire and interviews respectively. The study area, the population of the study, sampling, sampling method and sampling size was outlined by the chapter. The study also followed the nine steps proposed by Creswell in analysing data. Ethics that have been considered have also been identified and how they practised. The fourth chapter focused on data presentation, analysis, and interpretation. The responses to the questionnaire items were presented graphically in tabular form and were followed by analysis and interpretation.

The items and responses to the interview schedule were presented in a narrative form and were followed by a brief presentation. The last chapter presented the findings, recommendations and conclusion of the study. The major findings on the implications of substance abuse on management of learners' academic performance, impact of substance abuse on management of academic performance, effects of absenteeism, effects of ill-discipline and the strategies to limit substance abuse by learners in order improve the management of learners' academic performance were presented in this chapter.

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LIST OF APPENDICES

APPENDIX A: LETTER TO RESPONDENT

Enq: Mr. NN Mathoma	P. O. Box 226
Cell: 072 262 2177	THOHOYANDOU
Email: ntshavheniu@gmail.com	0950
	20 October 2021

Dear Respondent

I, Mathoma Ntshavheni Ndwayamato, am a student at the University of Venda, registered for Master of Public Management (MPM). I am conducting a research project under the topic **"Implications of substance abuse on management of learners' academic performance at Luvuvhu Circuit, Vhembe East District, Limpopo Province".**

This is an opportunity for you to be part of the study on implications of substance abuse on management of learners' academic performance, where you can provide an understanding on the matter.

Kind regards.

Yours faithfully

Mathoma NN (Mr)   Date

APPENDIX B: QUESTIONNAIRE

This is a study on the impact of substance abuse on learners' performance in secondary schools. Please put a cross where you feel it is appropriate. There is no wrong or right answer.

SECTION A: BIBLIOGRAPHICAL DETAILS OF THE RESPONDENTS

1. Gender of the respondent

Male	
Female	

2. Age of the respondent

Less than 20 year	
21 to 30 years	
31 to 40 years	
41 to 50 years	
51 years and above	

3. Position of the respondent

Principal	
Deputy Principal	
HOD	
SMT	
CS1	

4. Working experience (in years)

Less than 5 years	
6 to 10 years	
11 to 20 years	
More than 20 years	

SECTION B: **IMPLICATIONS OF SUBSTANCE ABUSE ON MANAGEMENT OF LEARNERS' ACADEMIC PERFORMANCE**

Item	Impact of substance abuse on management of academic performance of learners who abuse substances.	Strongly Agree	Agree	Not Agree	Disagree	Strongly Disagree
5	Substance abuse increases bullying and disobedience of learners' code of conduct					
6	Substance abuse increases high failure rate.					
7	Substance abuse leads to violent behaviour amongst learners					
8	The behaviour of learners who abuse substance leads to disrupt academic progress, leading to poor performance.					

Item	Effects of absenteeism or truancy on management of learners' academic performance.	Strongly Agree	Agree	Not Agree	Disagree	Strongly Disagree
9	Lack of morals, conflicts and fights are common to learners who abuse substance.					
10	Substance abuse leads to poor commitment to learn.					
11	Substance abuse increases truancy, absenteeism and poor academic performance					

Item	Effects of ill-discipline on management of academic performance of learners who abuse substances.	Strongly Agree	Agree	Not Agree	Disagree	Strongly Disagree
12	Substance abuse leads to learners' ill-discipline.					
13	Learners who abuse substances are at risk of increasing crime rate in society.					
14	Lack of parental support or guidance results in making learners to abuse substance.					

| 15 | Learners receive guidance on the risks associated with substance abuse in schools. | | | | | |

Item	Strategies to limit learners from abusing substances.	Strongly Agree	Agree	Not Agree	Disagree	Strongly Disagree
16	Communities, parents and schools work together in ensuring that learners are passionate about their studies.					
17	Parents are continuing to support their children, even though they are actively involved with abusing substances.					
18	Schools have offices of social workers where learners can talk about their challenges about substance abuse					
19	There are policies which also involve learners in the fight against substance abuse					

APPENDIX C: INTERVIEW SCHEDULE

This is the study on implications of substance abuse on management of learners' academic performance. Please answer the following questions:

1 What is the impact of substance abuse on management of learners' academic performance?

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2 What are the effects of absenteeism on management of learners' academic performance?

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3 What are the effects of ill-discipline on the management of learners' academic performance?

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4 What are the strategies to limit learners from abusing substances?

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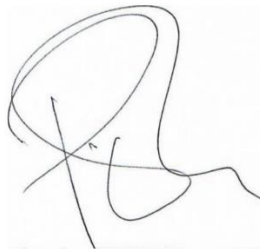…………………………………………………………………………………………

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APPENDIX D: LETTER FROM ENGLISH LANGUAGE EDITOR

PROOF OF EDITING

26 November, 2021

This is to certify that I, Dr P Kaburise, of the English Department, University of Venda, have proofread the research report titled - **IMPLICATIONS OF SUBSTANCE ABUSE ON MANAGEMENT OF LEARNERS' ACADEMMIC PERFORMANCE, AT LUVUVHU CIRCUIT, IN VHEMBE EAST DISTRICT -** by Ntshavheni Nndwayamato Mathoma (student number: 16012428). I have indicated some amendments which the student has undertaken to effect before the final report is submitted.

Dr P Kaburise (0794927451/ 0637348805; email: phyllis.kaburise@gmail.com)

Dr P Kaburise: BA (Hons) University of Ghana (Legon, Ghana); MEd University of East Anglia (Cambridge/East Anglia, United Kingdom); Cert. Teaching English as a Foreign Language (Cambridge University, United Kingdom); Cert. English Second Language Teaching, (Wellington, New Zealand); PhD University of Pretoria (South Africa)

APPENDIX E: LETTER FOR DATA COLLECTION PERMISSION

University of Venda

FACULTY OF MANAGEMENT, COMMERCE AND LAW (FMCL)

OR TAMBO INSTITUTE OF GOVERNANCE AND POLICY STUDIES

Private Bag x5050, Thohoyandou, 0950, Tel 015 962 8440, Office 12, School of Management Sciences Building

TO WHO IT MAY CONCERN   **19 October 2021**

COLLECTION OF DATA FOR MINI-DISSERTATION RESEARCH: MR MATHOMA NN: STUDENT NUMBER 16012428: MASTER OF PUBLIC MANAGEMENT (MPM)

Mr Mathoma is currently registered for a course work Master of Public Management (MPM) degree with the OR Tambo Institute of Governance and Policy Studies within the Faculty of Management, Commerce and Law, University of Venda. He is now at the stage to collect data to complete his mini-dissertation. The Institute is satisfied that the proposal and the area of his research meet the ethical standards for the research at the level of a mini-dissertation.

Kindly assist him where possible.

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Prof. Nghamula Nkuna (PhD)
OR Tambo Institute of Governance and Policy Studies

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