



Effect of Parental Behavioral Control on Drug Abuse among Learners in Selected Secondary Schools in Soweto, South Africa

Nzukiso Mnyamana^{*}
Peter JO Aloka[†]

Abstract

This study examined the effect of parental behavioural control on learner drug abuse in selected high schools in Soweto, South Africa. The study adopted a correlational survey research design. A correlational survey research design was used for the investigation. 80 learners from a census sample made up the study's sample size. The learner drug abuse and family drug abuse scales were used to collect information from participants. Regression analysis, Analysis of Variance (ANOVA), and Pearson correlation were used to analyze the data. Parental behavioral control is a significant predictor of the degree of drug abuse according to the results of the regression ANOVA, $F(1, 76) = 9.757, p.003$. This finding demonstrates how well the regression model can forecast the extent of drug abuse among high school learners. The study recommends that school counselors should provide parents with the essential educational assistance and guidance on the effect of parental behavioural control, from the school administration.

Keywords: *Parental Behavioural Control, Learner Drug Abuse, High Schools, Soweto, South Africa.*

Introduction

According to the World Health Organization (2021), alcohol and drug abuse result in around 3,000,000 and 500,000 fatalities annually, respectively. Adolescence, which is considered to be a crucial time for brain development, including heightened reward area activity and more flexibility compared to maturity, is when drug abuse typically begins (Poudel & Gautam, 2017). Therefore, it has been suggested that drug abuse throughout adolescence is even more dangerous than it is at any other time in life (Sun et al., 2022). According to scientific studies, drug abuse throughout adolescence increases the risk of early

^{*}Wits School of Education, University of the Witwatersrand. Email: mnyamananzukiso@gmail.com

[†]Wits School of Education, University of the Witwatersrand.

pregnancy, drug dependence, and criminal activity as well as problematic substance use, physical aggression, and lower wellbeing in adulthood (Shanahan et al., 2021). In 2016, around 5.5% of people worldwide between the ages of 15 and 64 used drugs, according to United Nations (UN), (2019). The number of drug users has grown by 30% since 2009, despite the fact that this estimate is identical to that from 2016. Two examples of psychoactive compounds that are harmful or dangerous to consume include alcohol and illicit drugs (WHO, 2010). According to a study by the Hong Kong Security Bureau's Narcotics Division (Narcotics Division), 2.5%, 7.0%, and 56.7% of all participating students have used drugs, cigarettes, or alcohol at some point in their lives. According to research, junior secondary school years in Hong Kong are when drug use first began (Tam et al., 2018), underscoring the need of prevention for adolescent substance use at this time (Shek et. al, 2020). According to current data, drug abuse is now more common than it was in 2009 across Africa, Asia, Europe, and North America, and marijuana usage is also more common in North America, South America, and Asia, of which this is because the world's population of people aged 15 to 64 increased by 10%, which was largely responsible for the growth (UN, 2019).

Young people are using more alcohol and other drugs globally (Mamabolo, 2020). A wide range of drug abusers, as opposed to only a small subset of drug users like teenagers and learners, are increasingly using more harmful substances across Africa (UN, 2012). For the sake of public health worldwide, student drug and alcohol usage is a significant problem (Khoza & Shulubane, 2021). Another key impact of using illicit drugs on society is the negative health consequences experienced by its members. Drug use also puts a heavy financial burden on individuals, families and society. In 2017, estimated global illegal cocaine production increased by 25% over the previous year to an all-time high of 1,976 tons (UN, 2019). In 2017, more than 47,000 deaths from synthetic opioid overdoses were reported in the US, an increase of 13% from the years prior, while 4,000 of those passed on from opioid overdoses were reported in Canada, an increase of 33% from 2016 (UN, 2019). With regards to drug use in Africa, the report by the United Nations revealed that cannabis continues to be the drug that is most frequently used in Africa, followed by stimulants similar to Amphetamines (UN, 2012). Africa, especially West and Central Africa, has a substantially greater yearly incidence of cannabis usage than the rest of the world (UN, 2012). Drug use appears to spread to countries along trafficking routes, such as West and Central Africa, where cocaine users have increased (UN, 2012). Increased use of heroin and injectable drugs is also a worrying trend, particularly in East Africa (UN, 2012). Drug abuse among students and adolescents is a growing problem in Nigeria (Nkereuwem, 2012)

Although there has been an upsurge in interest in this subject over the past 20 years, little is known about the rates and trends of alcohol consumption in African nations (Room et al., 2002). Additionally, a study from Rwanda indicated that youth use of alcohol, marijuana, cigarettes, and other psychoactive substances has become a part of daily life (Kanyoni et al., 2015), aggravating socioeconomic issues already present in the most vulnerable populations. People, families, and communities appeared to be being destroyed. While tramadol, another synthetic opioid, is facing a crisis in West, Central, and North Africa, fentanyl and its analogs

continue to be the main cause of the synthetic opioid issue in North America. The amount of tramadol that was seized globally increased dramatically from 110 kg in 2010 to almost 9 tons in 2013 and almost 125 tons in 2017 (UN, 2019). Indefinite use of psychoactive substances, according to Adewumi (2017), can harm adolescents' physical and mental development seriously and sometimes permanently. 20.2% of primary school children in Kenya reported using at least one drug or substance at some time in their lives, according to the June 2018 National Survey of Drugs and Substance Abuse Status among Primary School children in Kenya (NACADA, 2021).

16.9% of primary school children acknowledged using at least one drug or substance, according to the study (Nabofa, 2021). Additionally, it was discovered that 2.6% of primary school learners currently consume alcohol, 3.2% currently smoke, and 2.3% currently use "mira/muguka" (NACADA, 2021). Nigeria's student drug culture is expanding, which might be calamitous and have detrimental effects on the nation as a whole (Nabofa, 2021). Additionally, industrial beer is the preferred beverage, and traditional beverages no longer play the cultural role that they once did (WHO, 2004). Fermented drinks like burukutu and phyto, or (sometimes illegal) drinks like gin or like kachasu in Zambia, ogoro in Nigeria, and "gonggo" in Tanzania, are frequently drank in rural areas and among the urban poor (WHO, 2004). In a South African schools context, a recent study by the National Institute on Drug Abuse has documented an increase in substance abuse among students and an increase in cannabis use in the classroom (Daily Maverick, 2022). South African youth use drugs extensively both inside and outside of school. Adolescents are often exposed to peers and this social context is often a major factor in substance abuse (Mokwena & Setshego, 2021). Additionally, Mokwena and Setshego (2021) revealed that alcohol drinking, cigarette smoking, and dagga smoking are the most frequently utilized substances among learners in secondary schools, South Africa. The study by Mokwena and Setshego (2021) also revealed that substance abuse was significantly correlated with behavioral variables such as physical fights, significant issues with parents and friends, poor academic performance, problems with the police, having sex without a condom, and having sex that one regretted the following day. Substance use throughout youth can persist until adulthood, increasing the risk of drug dependence, particularly with economically disadvantaged kids, methamphetamine usage among gang members is used to generate income (Trucco, 2020).

Theoretical Framework

The Bowen's Family Systems Theory was adopted to inform this study. The Family Systems Theory (FST) considers the family as an emotional unit derived from Bowen's study of the family (Devlin, 2021). Family systems theory indicates that individuals cannot be understood in isolation from one another, but rather as a part of their family system (Genopro, 2011). According to Bowen's family system theory, each family may be viewed as a unique social system (Joseph, 2010), and the different members of a family are emotionally connected, whereby affecting one another's thoughts, feelings and actions. Family members also seek one another's attention, approval and support, and react to each one's needs and expectations, but also distress. Bowen (1978) argues that the family is an emotional interconnected unit that uses systems thinking to unpack the complex interactions and

networks between members of the family. According to Bowen (1978), a degree of interdependence is always evident in all interpersonal relationships. In other words, those Individuals possessing greater levels of differentiation will to a certain extent maintain a degree of autonomy within their relationships and the relatively low development in a person's self, then the more that individual remain vulnerable from being influenced by others in functioning. Hohashi (2019) further explains that in the family Systems theory, Individual member's opinions of what they believe to be true, can be placed into core family belief system of members with a high degree of applicability to other family members and intermediary member's opinions/beliefs with a low degree of applicability to other family members. Core family member's opinions/beliefs of what they believe to be true can affect the change of many intermediary family member's opinions, and these intermediary member's opinions/beliefs can affect the change of other intermediary family member's opinions/beliefs about what they believe to be true (Hohashi, 2019). Apart from this, many unrelated family member's opinions of what they believe to be true exist that are not linked to any event involving a family member.

Literature review

The term "behavioral control" refers to the limitations and guidelines that parents establish to regulate their children's conduct (Shek et al, 2020)."Behavioral control" and "psychological control" are the two types of parental control (Bean et al., 2006). Smetana and Daddis (2002) add that these measures include parental monitoring, expectation setting, and knowing of their offspring. According to Bean et al. (2006), parental psychological control refers to parental involvement with or manipulation of children's emotions, sentiments, and thinking through guilt induction, love withdrawal, shame, manipulation of emotional security, and/or ignoring children's viewpoint. Psychological control "communicates those the adolescent's thoughts, emotions, feelings, and/or even the adolescent are unacceptable (Rogers et al., 2003), as opposed to controlling an adolescent's behavior. According to Kincaid et al. (2011), parental behavioral control has been regarded as a protective element in teenagers' good development and problem prevention because it teaches adolescents behavioral standards. In further detail, it lessens learner exposure to unsafe surroundings, helps "curb" their impulsive bad habits, and thus prevents learner drug abuse behaviors (Ennett et al., 2008). Shek et al, (2020) revealed that the initial degree of learner drug abuse in early adolescence was found to be negatively predicted by both parents' behavioral control and their connections with teenagers, as was expected. To add to this, Morojele and Ramsoomar, (2016) argues that adolescence's transitional era is when learner drug abuse typically begins, when a young person is going through puberty, growing physically, and trying to find their independence. Ennett et al., (2008) reiterates that learners whose parents had good behavioral control over them were less likely to use alcohol, cigarettes, or illegal substances. In addition, Banzer et al. (2017) add that adolescents who use drugs, alcohol, or cigarettes develop negative behaviors and health problems.

Muchiri and Dos Santos (2018) posit that prevention science, which involves lowering risk and improving promotive or protective factors in people and the environment surrounding them during their growth and development, is widely used in South Africa to address

negative health outcomes. According to Muchiri and Dos Santos (2018), the likelihood of using alcohol was linked to parents' use of behavioural control through guilt being less effective. Lower levels of sharing, guilt-based self-control, parental strictness, love, emotional support, positive assessment, and negative evaluation were among the risk variables affecting drug use and are risk factors were connected to discipline and behavioral control (Muchiri & Dos Santos, 2018). Roche et al., (2008) add that parental decision-making, setting boundaries and norms, as well as monitoring and defining behavioral control—a socialisation feature linked to decreased adolescent drug use, deviance, and participation in early sexual activity—are also emphasised as major risk factors. Muchiri and Dos Santos (2018) add that affection shows an interactive effect with sharing and behavioral control through guilt, and that nurturance/warmth demands for responsible behavior have also been found to be important determinants of the effect of parenting. Thus, lower affection received from parents was linked to increased alcohol use (Muchiri & Dos Santos, 2018). Parental expectations and high levels of nurturing result in parental authority, which is a predictor of improved child development (Loxley et al., 2004). The incidence of delinquent behavior may be much more affected by indirect control, which involves tight parent-child relationships, than by direct control, which involves parental engagement and supervision (Centre for Suicide Research and Prevention Unit of HK, 2011). Moreover, less teen drinking was linked to higher levels of behavioral control through guilt and strictness, when compared to other important protective factors against youth antisocial behavior, such as healthy peer relationships and behavioral control, parental strictness is most strongly connected with diminished adolescent antisocial behavior (Roche et al., 2008). Among other beneficial parenting techniques having an impact on reducing teenage drinking, the clear condemnation of underage drinking has been noted (Arria et al., 2008).

Loxley et al. (2004) contends that nurturance and demands for responsible behaviour have been found to be important determinants of effect of parenting; high nurturance and more demands by parents lead to more authority, which is a predictor of better developmental outcomes in children. Lower affection received from parents was associated with increased alcohol use, and affection showed an interactive effect with sharing and behavioural control through guilt (Loxley et al., 2004). In comparison to direct control, which involves parental involvement and monitoring, close parent-child relationships may have a significantly greater impact on the prevalence of delinquent behavior (Centre for Suicide Research and Prevention Unit of HK (CSRP, 2011). Engels et al. (2004) argue that teenagers are less likely to use cannabis when their parents provided less positive support; on the other hand, teens are more likely to use cannabis when their parents provided more negative support; and there is a decrease in the frequency of illicit substance use with increased negative evaluation. Moreover, Van der Eecken et al. (2018) asserts that parents typically have a significant impact on adolescents' leisure activities and experiences because they are one of the most significant socialising agents for adolescents. For instance, parents may restrict how their children use their free time or they may participate in their children's leisure pursuits. Therefore, by actively participating in their children's leisure activities, parents may play a significant role in fostering positive teenage development (Van der Eecken et al., 2018).

A sample of homeless juveniles enrolled in high school education showed a protective effect of adult assistance, against substance use (Ferguson & Xie, 2012). Baggio et al. (2016), add that more drug abuse was predicted by parents' permissive attitudes toward drug use. In a study by Yang et al. (2021), emerging adults (ages 18 to 25) who reported more parental behavioural control and had poorer perceptions of their social capital also had higher rates of substance use. Additionally, authoritative and indulgent parenting approaches have been shown to be protective factors against alcohol consumption and the use of other illicit drugs (Garcia et al., 2020). On the other hand, increased substance use was linked to authoritarian and careless parenting approaches (Tur-Porcar et al., 2019). According to Cablova et al. (2016), there are substantial correlations between frequent alcohol consumption and a lack of strict norms, open communication within the family, parental control, warmth, and affection. According to Haugland et al. (2019), learners who experienced problems with their parents and who received less emotional and monitoring support from their parents had greater levels of cannabis usage. Additionally, marijuana use was associated with inadequate parental control, involvement, rules, and positive parenting in adolescence (Merianos et al., 2020). Rodríguez-Ruiz et al., also add that the majority of earlier studies discovered that parental warmth, monitoring, engagement, and positive parenting are protective factors against substance use, while a lack of rules and disagreements between parents and kids raise the chance of adolescent substance use.

The Present Study

This study examined the effect of parental behavioural control on learner drug abuse in selected high schools in Soweto, South Africa.

Research Hypothesis

The following null hypothesis was tested:

Ho: There is no significant effect of parental behavioural control on learner drug abuse

Methods

Research Design

Within the positivist paradigm, correlational research design was adopted. According to Asamoah (2014), it involves describing phenomena by gathering quantitative data and analysing it using mathematical techniques, particularly statistics. It also entails acquiring quantitative (numerical) data and employing mathematical methods, notably statistics, to analyse it to describe phenomena.

Research Participants

The aim of quantitative research is to measure variables and generalise results acquired from a representative sample from the total population (Yin, 2018). From a study population of 2500 high school learners in the four high schools, a census sample size of 80 learners was obtained by the researcher for as the quantitative sample of the study. In the Census Method, each item in the universe is selected for the data collection, or whenever the entire population is studied to collect the detailed data about every unit (Olorumfemi, 2020). Thus, all participants in the study population, meeting the requirement of having abused

drugs or abusing them, will give us the sample for this study. In this study, 80 participants shall form part of this census sample because all available participants and who meet the criteria of drug abuse will be included in the study, of which 20 learners from each of the four schools will form part of this census sampling.

Research Tools

The Drug Use Questionnaire was used to collect data from learners. The questionnaire had 15 items on a 5 point Likert-scale of *Strongly Agree* (SA) = 5, *Agree* (A) = 4, *Undecided* (U) = 3, *Disagree* (D) = 2 and *Strongly Disagree* (SD) = 1. Moreover, the Parental control scale with a 5-point Likert scale was also used to collect data. The internal validity results of the Kaiser-Meyer-Olkin measure of sampling adequacy (KMO Index) and the Bartlett's Test for Sphericity reveals that the questionnaire had sufficient sampling adequacy. This is in line with the recommendation by Kaiser (1974) who holds that the Kaiser-Meyer-Olkin measure of sampling adequacy index > 0.5 is of acceptable internal validity. On the other hand, Tabachnick & Fidell (2001) hold that Bartlett's Sphericity test statistic should be less than 0.05 for an adequate internal validity. The Bartlett's test for Sphericity are all significant ($p \leq 0.001$.) and Kaiser-Meyer-Olkin index was > 0.5 . Cronbach's alpha coefficient analysis was conducted to investigate the measure of internal consistency. The Cronbach's alpha values for drug use questionnaire is reported as 0.702.

Procedure

The researcher obtained ethical clearance from University of the Witwatersrand Human Research Ethics Committee, then permission from Gauteng Department of Education. From there, the researcher sought permission from the Department of Education and from the school principals. Consent letters were issued to all participants which were the selected learners for the study and consent letters were sent to parents to sign them, then questionnaires were issued to participants. In the present study, since some of high school learner participants were below 18 years, then assent form were given to their parents/guardians who could provide consent so that they could participate in the study. In the present study, consent forms were issued to parents/guardians, grade 10 learners and class teachers to ensure voluntary participation. In the present study, confidentiality was ensured by keeping the quantitative and qualitative data in a safely locked cupboard. Moreover, the electronic transcribed data was stored in a computer whose password is kept by the researcher only, and available to the research supervisor upon request.

Data Analysis

Inferential statistics, including the Pearson's product moment correlation coefficient, Analysis of Variance (ANOVA), simple and multiple regression analysis was used to test the research hypothesis. All hypotheses testing was done at $\alpha = .05$. All these analyses were aided by use of the computer analysis programme, the Statistical Package for Social Sciences (SPSS) version 25.0. In this study, the Pearson correlation was used to ascertain the relationship between independent family-based factors and the drug abuse among learners. The Analysis of Variance will be used to ascertain the differences in means in drug abuse from three or more groups of certain independent variables with more groupings.

Results

The study sought to investigate the effect of parental behavioral control on learner drug abuse in selected Soweto high schools, the null hypothesis that “*Parental behavioural control has no statistically significant effect on learner drug abuse in selected Soweto high schools*” was tested. The null hypothesis was tested using simple linear regression analysis with the investigated null hypothesis being, $H_0: \beta_5 = 0$ and the corresponding alternative hypothesis, $H_1: \beta_5 \neq 0$. If the null hypothesis is true, then from $E(Y) = \beta_0 + \beta_5 X$ the population mean of Y is β_0 for every X value, which indicates that X (Parental Behavioral Control) has no effect on Y (learner drug abuse) and the alternative being that parental behavioral control has statistically significant effect on learner drug abuse. The mean response across a set of items of Likert-type scale responses in the measures of both variables were computed to create an approximately continuous variables to make them suitable for the use of parametric data, as suggested by Johnson and Creech (1983) and Sullivan and Artino (2013). High scale ratings implied high perceived parental behavioral control and high learner drug abuse. The significance level was set at 0.05, such that if the p -value was less than 0.05, then the null hypothesis would be rejected, and conclusion reached that there is significant effect of parental behavioral control on learner drug abuse in selected Soweto high schools. Table 1 shows the coefficients values of the regression model.

Table 1: Coefficients- Effect of Parental Behavioral Control on Learner Drug Abuse

Model	Unstandardized Coefficients		Standardized Coefficients	t	Sig.	95.0% Confidence Interval for B	
	B	Std. Error	Beta			Lower Bound	Upper Bound
1 (Constant)	4.835	.771		6.269	.000	3.299	6.372
Parent Behaviour Control	-1.080	.346	-.337	-3.124	.003	-1.768	-.391

a. Dependent Variable: Learners' Drug Abuse

$$Y = \alpha + \beta_5 X + \varepsilon$$

Table 1 show that the unstandardized coefficients for parental behavioral control was -1.080 units, suggesting that when learners’ parental behavioral control rises by one unit the level of learner drug abuse would reduce by 1.080 units, which is 95% within CI (-1.768 -.391).

Similarly, an improvement in parental behavioral control by one standard deviation would results into succeeding fall in the level of drug abuse among the secondary school learners by .337 standard deviations. Thus, the results show a significant p -value ($t = -3.124$; $p = .003$) of the independent variable, parental behavioral control, demonstrating that there is sufficient evidence to reject the null hypothesis that $\beta_5 = 0$. Consequently, the null hypothesis that “*parental behavioural control has no statistical significant effect on learner drug abuse in selected Soweto high schools*” was rejected. The null hypothesis was therefore supported, thus, it was concluded that there is statistically significant indirect effect of parental

behavioral control on learner drug abuse, with the fitted line regression model as: Learner drug abuse = 4.835 - 1.080 (score of parental behavioral control).

Further, regression Analysis of Variance was conducted to establish whether parental behavioral control was a significant predictor to the level of secondary school learner drug abuse. Table 5.24 shows the summary of regression ANOVA on effect of emotional breakdown on learner drug abuse.

Table 2: ANOVA- Effect of Parental Behavioral Control on Learner Drug Abuse

Model		Sum of Squares	Df	Mean Square	F	Sig.
1	Regression	3.718	1	3.718	9.757	.003 ^b
	Residual	28.961	76	.381		
	Total	32.679	77			
a. Dependent Variable: Learners' Drug Abuse						
b. Predictors: (Constant), Parent Behaviour Control						

From the regression ANOVA output shown in Table 2, it is clear that parental behavioral control is a significant predictor to the level of drug abuse, $F(1, 76) = 9.757, p = .003$. This result has shown that the regression model significantly predicts the level of drug abuse among secondary school students. Further, Table 3 shows a summary of regression model on the effect of parental behavioral control on learner drug abuse in secondary schools in Soweto.

Table 3: Model Summary on the Effect of Parental Behavioral Control on Learner Drug Abuse

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.337 ^a	.114	.102	.61731
a. Predictors: (Constant), Parent Behaviour Control				

It is shown in the model summary that parental behavioral control accounted for 10.2% (Adjusted $R^2 = .086$) of the variation in the level of drug abuse among high school students in Soweto. This finding implies that variation in the level of parental behavioral control accounted for about one tenth (10%) of the variability in the level of drug abuse among secondary schools students.

Discussion

The quantitative findings of the study indicated that there is significant effect of parental behavioral control on learner drug abuse in selected Soweto high schools, suggesting that when learners' parental behavioral control rises by one unit, then the level of learner drug abuse would reduce. Meaning that, an improvement in parental behavioral control by one standard deviation would result into succeeding fall in the level of drug abuse among the

secondary school learners. High scale scores indicated high levels of learner drug abuse and high levels of perceived parental behavioral control. Therefore, thus, it was concluded that there is statistically significant indirect effect of parental behavioral control on learner drug abuse. To add to this, study findings suggested that a sizeable proportion of the respondents enjoy affectionate, warm relationship with their parents, indicative of positive parental behavioural control. Also, although majority of the respondents are disturbed when separated from their parents, an indication of secure child-parent attachment, many of them are not disturbed at all when separated from their parents, a sign of moderate level, of child-parent secure attachment and hence moderate behavioural control. Further, regression Analysis of Variance was conducted to establish whether parental behavioral control was a significant predictor to the level of secondary school learner drug abuse. The quantitative findings also indicated that parental behavioral control is a significant predictor of learner drug abuse. This agrees with Kincaid et al. (2011), in that parental behavioral management has been seen as a protective factor in teens' healthy development and drug abuse avoidance since it teaches teenagers behavioral standards. To be more specific, it helps "curb" learners' impulsive behavioral habits and reduces their exposure to risky environments, which in turn stops learners from abusing drugs (Ennett et al., 2008). As expected, Shek et al. (2020) observed that parents' behavioral control and relationships with teens negatively impacted the initial degree of learner drug usage in early adolescence. Also, (Bowen, 1978), agree that the different members of a family are emotionally connected, whereby affecting one another's thoughts, feelings and actions, and thus behaviour. To add to this, Vygotsky (1978) theoretical perspective asserts that other than zeroing in on social interactions with others who might be companions or people that are more developed than the child, Vygotsky's views are also relevant to the interactions that might happen among guardians and youngsters to give rise to a certain behaviour. In Vygotsky's theory, children's improvement is seen as the result of grown-up intervention through which grown-ups engage young ones in a specific action and, as a result, bring about advancement in the development of another skill, and show them new devices of reasoning, problem tackling, and self-regulation. Thus, young ones outgrow their ongoing driving action and continue on toward another one (Vygotsky, 1978). To add to this, parental behavioral control makes an effort to govern or control learners' conduct (Yan, et al., 2020). This is also consistent with Ran, et al., (2022) study which posited that, the adolescent addiction behaviors have escalated into public health issues, having detrimental effects on families and society. Furthermore, Morojele and Ramsoomar (2016) conceded that learner drug abuse usually starts around the transitional period of adolescence, when a young person is going through puberty, growing physically, and attempting to establish their independence. According to Ennett et al. (2008), a learner whose parents exercised effective behavioral discipline over them were less likely to use illicit drugs, alcohol, or cigarettes. The implication is that school management should develop educational programmes for parents about Parental Behavioural Control.

Conclusion & Recommendation

The quantitative study concluded that parental behavioral control is a significant predictor of learner drug abuse. The majority of parents, as demonstrated by the learners, are of the opinion that only their method of doing things is appropriate, suggesting that the

learners' parents share this opinion. Therefore, it can be concluded that parental behavioural control has a significant impact on student drug abuse in Soweto high schools. The realm of education benefits greatly from this study. It might also encourage students to pursue healthier lifestyles and discourage drug abuse among learners. This study recommends that there is need for school management to develop training programmes for parents to enlighten them about best parent behavioural control, and their effects on learner drug abuse. The training of parents on best parental behavioural control skills would help them to utilize appropriate parenting skills, to help manage the drug menace among learners. This is necessary because the findings of the study indicated that parental behavioural control significantly predicts the level of drug abuse among high school learners. Further, the study indicates the effect of parental behavioural control on learner drug abuse in high schools, in Soweto.

Limitations of the Study

A serious setback was when two of the envisaged schools for data collection kept refusing, resisting and coming up with all sorts of excuses whenever I come for data collection and this caused a delay both in the collection and analysis of the data, which further delayed the writing of the findings. However, the researcher addressed this by applying to do data collection in other schools, of which the data was finally collected in the four schools.

References

- Adewumi, B. O. (2017). *Psychosocial factors influencing substance abuse among undergraduates*. <https://www.preprints.org/manuscript/201711.0151/v1>
- Arria, A. M., Kuhn, V., Caldeira, K. M., O'Grady, K. E., Vincent, K. B., & Wish, E. D. (2008). High school drinking mediates the relationship between parental monitoring and college drinking: A longitudinal analysis. *Substance Abuse Treatment, Prevention, and Policy*, 3(1), 1-11.
- Baggio, S., Mohler-Kuo, M., Dupuis, M., Henchoz, Y., Studer, J., N'Goran, A. A., & Gmel, G. (2016). Substance use capital: Social resources enhancing youth substance use. *Revue d'Épidémiologie et de Santé Publique*, 64, 255–262. <https://doi.org/10.1016/j.respe.2016.01.101>
- Banzer, R., Haring, C., Buchheim, A., Oehler, S., Carli, V., Wasserman, C., & Wasserman, D. (2017). Factors associated with different smoking status in European adolescents: results of the SEYLE study. *European Child & Adolescent Psychiatry*, 26, 1319-1329.

- Bean, R. A., Barber, B. K., & Crane, D. R. (2006). Parental support, behavioral control, and psychological control among African American youth: The relationships to academic grades, delinquency, and depression. *Journal of Family Issues*, 27(10), 1335-1355.
- Bowen, M. (1978). *Family therapy in clinical practice*. Jason Aronson
- Cablova, L., Csemy, L., Belacek, J., & Miovisky, M. (2016). Parenting styles and typology of drinking among children and adolescents. *Journal of Substance Use*, 21(4), 381–389. <https://doi.org/10.3109/14659891.2015.1040087>
- Centre for Suicide Research and Prevention U of HK (CSRP). (2011). *A study on drug abuse among youths and family relationship. LC Pap.* <http://www.legco.gov.hk/yr11-12/chinese/panels/ws/papers/ws0312cb2-1546-1-ec.pdf#page=1&zoom=auto>.
- Daily Maverick. (2022, May 22). *Rise in drug use at schools sparks call for united effort to end the scourge*. <https://www.dailymaverick.co.za/article/2022-05-24-rise-in-drug-use-at-schools-sparks-call-for-united-effort-to-end-the-scourge/>
- Engels, R. C., Vermulst, A. A., Dubas, J. S., Bot, S. M., & Gerris, J. (2004). Long-term effects of family functioning and child characteristics on problem drinking in young adulthood. *European Addiction Research*, 11(1), 32-37.
- Ennett, S. T., R. Faris, V. A. Foshee, K. E. Bauman, L. Cai, H. Luz, ... R. Durant. 2008. The social ecology of adolescent alcohol misuse. *Child Development*, 79(6), 1777–1791. doi: 10.0009-3920/2008/7906-0017.
- Ferguson, K. M., & Xie, B. (2012). Adult support and substance use among homeless youths who attend high school. *Child & Youth Care Forum*, 41(1), 427–445. <https://doi.org/10.1007/s10566-012-9175-9>
- Garcia, O. F., Serra, E., Zacaes, J. J., Calafat, A., & Garcia, F. (2020). Alcohol use and use and motivations for drinking and non-drinking among Spanish adolescents: Do we know enough when we know parenting style? *Psychology and Health*, 35(6), 645–664. <https://doi.org/10.1080/08870446.2019.1675660>
- Haugland, S. H., Coombes, L., & Stea, T. H. (2019). Associations between parenting and substance use, meal pattern and food choices: A cross-sectional survey of 13,269 Norwegian adolescents. *Preventive Medicine Reports*, 14, 100862.
- Kanyoni, M., Gishoma, D., & Ndahindwa, V. (2015). Prevalence of Psychoactive substance use among youth in Rwanda. *BMC Research Notes*, 8, 10-19. doi:10.1186/s13104-015-1148-2.

- Khoza, A., & Shilubane, H. N. (2021). Substance use and associated factors among in-school adolescents in South Africa. *The Open Public Health Journal*, 14(1), 1-10.
- Kincaid, C., D. J. Jones, J. Cuellar, and M. Gonzalez. 2011. Psychological control associated with youth adjustment and risky behavior in African American single mother families. *Journal of Child and Family Studies*, 20(1), 102–110. doi:10.1007/s10826-010-9383-6.
- Loxley, W., Toumbourou, J., Stockwell, T., Haines, B., Scott, K., Godfrey, C., & Williams, J. (2004). *The prevention of substance use, risk and harm in Australia: a review of the evidence*. <https://espace.curtin.edu.au/handle/20.500.11937/30403>
- Mamabolo, P. R. (2020). Prevalence of substance abuse among young school learners: a threat to social stability. *Gender & Behaviour*, 18(3), 16369-16376.
- Merianos, A. L., King, K. A., Vidourek, R. A., Becker, K. J., & Yockey, R. A. (2020). Authoritative parenting behaviors and marijuana use based on age among a national sample of Hispanic adolescents. *The Journal of Primary Prevention*, 41(1), 51–69. <https://doi.org/10.1007/s10935-019-00576-x>
- Mokwena, K. E., & Setshego, N. J. (2021). Substance abuse among high school learners in a rural education district in the Free State province, South Africa. *South African Family Practice*, 63(3), 1-6. <https://doi.org/10.4102/safp.v63i1.5302>
- Morojele, N., & Ramsoomar, L. (2016). Addressing adolescent alcohol use in South Africa. *South African Medical Journal*, 106(6), 540–551. <https://doi.org/10.7196/SAMJ.2016.v106i6.10944>
- Muchiri, B. W., & Dos Santos, M. M. (2018). Family management risk and protective factors for adolescent substance use in South Africa. *Substance Abuse Treatment, Prevention, and Policy*, 13, 1-10.
- Nabofa, O.E. (2021). New trend of drugs abused by secondary school students in Nigeria. *African Health Science*, 21(3), 1460-1466. <https://doi.org/10.4314/ahs.v21i3.57>.
- NACADA. (2021). *Statement on the status of alcohol and drug abuse in schools in Kenya*. <https://nacada.go.ke/statement-status-alcohol-and-drug-abuse-schools-kenya>
- Poudel, A., & Gautam, S. (2017). Age of onset of substance use and psychosocial problems among individuals with substance use disorders. *BMC Psychiatry*, 17(1), 1–7. <https://doi.org/10.1186/s12888-016-1191-0>

- Ran, G., Li, J., Zhang, Q., & Niu, X. (2022). The association between social anxiety and mobile phone addiction: A three-level meta-analysis. *Computers in Human Behavior*, 130(1), 107198.
- Roche, K. M., Ahmed, S., & Blum, R. W. (2008). Enduring consequences of parenting for risk behaviors from adolescence into early adulthood. *Social Science & Medicine*, 66(9), 2023-2034.
- Rodríguez-Ruiz, J., Zych, I., Ribeaud, D., Steinhoff, A., Eisner, M., Quednow, B. B., & Shanahan, L. (2023). The Influence of Different Dimensions of the Parent–Child Relationship in Childhood as Longitudinal Predictors of Substance Use in Late Adolescence. The Mediating Role of Self-Control. *International Journal of Mental Health and Addiction*, 1(1), 1-18. <https://doi.org/10.1007/s11469-023-01036-8>.
- Rogers, K. N., Buchanan, C. M., & Winchell, M. E. (2003). Psychological control during early adolescence: Links to adjustment in differing parent/adolescent dyads. *The Journal of Early Adolescence*, 23(4), 349-383.
- Room, R., Jernigan, D., Carlini-Mariat, B., & Gureje, O. (2002). *Alcohol in developing societies: a public health change and continuity in cultures of drinking 15 approach*. WHO.
- Shanahan, L., Steinhoff, A., Bechtiger, L., Copeland, W. E., Ribeaud, D., Eisner, M., & Quednow, B. B. (2021). Frequent teenage cannabis use: Prevalence across adolescence and associations with young adult psychopathology and functional well-being in an urban cohort. *Drug and alcohol dependence*, 228, 109063. Advance online publication. <https://doi.org/10.1016/j.drugalcdep.2021.109063>
- Shek, D. T., Zhu, X., Dou, D., & Chai, W. (2020). Influence of family factors on substance use in early adolescents: A longitudinal study in Hong Kong. *Journal of Psychoactive Drugs*, 52(1), 66-76.
- Smetana, J. G., and C. Daddis. 2002. Domain-specific antecedents of parental psychological control and monitoring: The role of parenting beliefs and practices. *Child Development*, 73(2), 563–580. doi:10.1111/1467-8624.00424.
- Sun, D., Adduru, V. R., Phillips, R. D., Bouchard, H. C., Sotiras, A., Michael, A. M., Baker, F. C., et al. (2022). Adolescent alcohol use is linked to disruptions in age-appropriate cortical thinning: An unsupervised machine learning approach. *Neuropsychopharmacology*, 48(2), 317-326. <https://doi.org/10.1038/s41386-022-01457-4>

- Tam, C. H., Kwok, S. I., Lo, T. W., Lam, S. H., & Lee, G. K. (2018). Hidden Drug Abuse in Hong Kong: From Social Acquaintance to Social Isolation. *Frontiers in Psychiatry*, 9(1), (457-458). <https://doi.org/10.3389/fpsyt.2018.00457>
- Trucco, E. (2020). A review of psychosocial factors linked to adolescent substance use. *Pharmacology Biochemistry and Behavior*, 196, 172969. doi: 10.1016/j.pbb.2020.172969.
- Tur-Porcar, A. M., Jiménez-Martínez, J., & Mestre-Escrivá, V. (2019). Substance use in early and middle adolescence. The role of academic efficacy and parenting. *Psychosocial Intervention*, 28(3), 139–145. <https://doi.org/10.5093/pi2019a11>
- United Nations. (2019). *World drug report. 35 million people worldwide suffer from drug use disorders while only 1 in 7 people receive treatment*. UNODC.
- Van der Eecken, A., Spruyt, B., & Bradt, L. (2018). Parental encouragement and autonomy granting and adolescents' use of organized and unorganized leisure time. *Young*, 26(4), 406–425. doi:10.1177/1103308817714919.
- Vygotsky, L. S. (1978). *Mind in society: The development of higher psychological processes*. Harvard University Press.
- World Health Organization (2004). *Global status report on alcohol 2004*. Geneva: WHO.
- World Health Organization (2021). *World Drug Report 2021*. <https://www.unodc.org/unodc/data-and-analysis/wdr2021.html>.
- World Health Organization (WHO). (2010). *Substance abuse*. WHO.
- Yan, F., Zhang, Q., Ran, G., Li, S., & Niu, X. (2020). Relationship between parental psychological control and problem behaviours in youths: A three-level meta-analysis. *Children and Youth Services Review*, 112, 104900. <https://doi.org/10.1016/j.chidyouth.2020.104900>.