

## **An Evaluation of Detriments and Ramifications Associated with Substance Abuse among Out-of-school Youths of Rural Areas in South Africa**

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**ABSTRACT** Globally, substance abuse by youths in rural areas appears to hinder all efforts to reduce the prevalence of this social ill. The objective of this paper is to raise debates and discourses on the underpinnings of drug abuse among the out-of-school youths and suggest solutions or newer perspectives to tackle the quagmire. The experimental design of this paper is of a quantitative approach. Principal observation from the findings show that out-of-school youths in rural areas seem to end up resorting to drug abuse for solace and comfort due to factors such as lack of resources and employment opportunities, ignorance on the detriments of drug abuse and lack of recreation. In a nutshell countries should bolster health and well-being of rural communities through investments in rural drug prevention programmes in rural schools, extracurricular and recreational activities in rural areas and monitoring and evaluation of the programmes.

### **INTRODUCTION**

Historically, rurality has been seen as a protective factor against problems associated with substance abuse and most of past researches focused on the urban substance-abusing population (Webster 2009). This seemingly has changed as this phenomenon of substance abuse has risen with alarming rates in rural areas. Globally, substance abuse has been identified as a huge bottleneck to socio-economic development (United Nations Office on Drugs and Crime (UNODC) 2015). Substance abuse in rural areas among the youths who are out-of-school seem to be aggregating horrendously. This yields grave repercussions with dreadful consequences on both the society and the youths who use. Irrefutably, drug use among out-of-school youth is like the modus operandi, however the fuelling factors to this abuse seem to differ between the youths who stay in urban areas and those who reside in rural areas. It also challenges the quality of citizenship of the youths, whether school going or out of school (Kang'ethe 2014). For rural youth external factors such as school, unsupervised parties, older relatives, parents were sources for alcohol and illegal substances they ended up abusing (Jennifer et al. 2016). This is why investigating and unearthing all the underpinnings of substance use in rural areas is critical and welcome. Timkos et al. (2013) appear to associate

poverty among the youths as some of the factors that could be derailing societies' state of economic development. Rural residents have been found unlikely to be safe drinkers, but prone to abuse drugs such as stimulants, methamphetamines and more likely to meet the DSM-III criteria for substance abuse or dependence (Lader 2015). At one time, rural adolescents were protected from drug use, but now rurality no longer serves as a protective factor against substance abuse problems, but rather the catalysing factor of severity of substance abuse.

The increased state of modernization and urbanization appears to fast erode traditional and cultural values that would have helped to contain the discipline of the out-of-school youths in countries such as South Africa. Due to that the consumption of alcohol and other drugs have increased and turned to abuse (UNODC 2015). The state of unemployment, underemployment, poverty, HIV/AIDS prevalence and other illicit social miseries could also be hugely contributing to increased consumption of illegal substances as people look for solace and comfort. Literature abounds that rural areas are increasingly being affected by the preponderance of substance abuse. This has had disastrous results in the lives of the youths. Some have left school, joined criminal groupings or gangs or have turned to other seriously illicit drugs that damage the mind and their social functioning

etc. These are symptoms of failed lives and they pose a huge potential to negatively compromise the socio-economic aspects of people's lives generally (Kang'ethe 2014). Thus, the researcher considered it worthwhile to explore the detriments associated with substance abuse on the out-of-school youths of poor rural areas to possibly come up with plausible recommendations that could possibly help in policy implementation in the attempt to address the quagmire.

### **Preliminary Literature Review**

#### ***Burgeoning Statistics of Substance Abuse in South Africa***

Drug consumption in South Africa is twice the world norm. According to the 2013 South African Police Services (SAPS) figures, 60 percent of crimes nationally were related to substance abuse. In the Western Cape, the figures were closer to 80 percent. The perpetrators of these crimes were either under the influence of substances, or trying to secure money for their next fix. Cost wise, drug abuse is costing South Africa R20-billion a year and could pose a bigger threat to the country's future than the HIV/AIDS pandemic. However, the United Nations World Drug Report of 2013 named South Africa as one of the drug capitals of the world.

South Africa in the past two decades underwent a period of economic crisis which led to a radical fall on the peoples living standards amongst other social ills as use of illegal substances, for reasons of coping and making income. This makes it very vital to investigate the impact of drug abuse among the young in rural areas of South Africa as most of the attention has always gone to those who reside in urban areas.

#### ***Underpinnings behind Increase in Substance Abuse***

The causes and justifications of substance abuse among the blacks in South Africa seem to be associated with coping mechanisms. This is mainly due to challenges such as unemployment, underemployment and their concomitant ramifications such as poverty, social strife in the families especially female headed ones (UNODC 2015). The other challenges were probably fa-

cilitated by modernization which brought facilities everyone can easily access. The epoch of apartheid cannot escape the blame for increased preponderance of substance abuse in South Africa. Among the black population, for example, social injustice and the weakened family bonds which resulted from decades of apartheid policies have created an environment in which temporary escape from the harsh realities of everyday life is often sought through the consumption of psychoactive substances (Kazembe 2009). Also among the white population, evidence also supports a connection between increased substance abuse and both increased availability of drugs and the psychological consequences of adjusting to life in the "new" South Africa (Kazembe 2009). Those wishing to escape conditions of social or personal miseries would resort to substance abuse to provide a form of release or escape from the undesirable realities. Unemployment, retirement or old age trigger feelings of irrelevance and also lead to substance abuse in such of comfort by people of other ages (Kazembe 2009). Results of the drug abuse are not pleasing as the youths that get involved end up leaving school, some getting pregnant, becoming violent, and adopting suicide tendencies amongst other innumerable social vices (Kang'ethe and Khayundi 2014).

Information provided by the South African Revenue Service (SARS 2005) show that the known direct cost of substance use was roughly R101 000 million. Furthermore, the social and economic cost of illicit drug use and alcohol has been calculated using international data available and approximates at 6.4 percent of the GDP or about R136 380 million per year. In addition, up to 17.2 million persons or roughly 1/3 of the population in the families of users are affected negatively, both emotionally and financially by the presence of the user in their midst, in the same way 1.78 million are affected by problem users.

#### ***An Inventory of Drugs Abused in South Africa***

Drug treatment data provide information to show that the primary substance(s) of abuse at admission to most government-funded treatment centres in South Africa was alcohol with 51.3 percent, followed by cannabis with 19.9 percent, methamphetamine (Tik) 5.2 percent, crack/cocaine 7.8 percent, cannabis and mandrax 2.6 per-

cent heroin/opiates 5.5 percent, and prescription and OTC percent. Treatment admissions also showed the following province based statistics: Gauteng (37.9 percent), Western Cape (32.3 percent), Eastern Cape (9.4 percent), Mpumalanga (6.1 percent); and KwaZulu-Natal (5.9 percent) (National Drug Master Plan 2013).

### ***Impact of Substance Abuse to Social Economic Development***

Consumption of drugs or substances tends to be transient and quickly superseded by a considerable health and financial burden on society. Substance abuse often attacks people during their most productive years and thereby converting a vibrant source of productivity into a burden on socio-economic development. Substance abuse has been a major factor in the spread of HIV in developing countries as South Africa. Most of the heroin users always share needles were most of them infect each other with HIV, thereby lowering life expectancy, which indirectly and negatively affects the countries' social economic development by robbing them the resourceful sect of the population (UNODC 2015). Overall, the effects of substance abuse on national productivity are significant, as productivity gains are crucial for a nation's competitive position in the volatile world marketplace. Employment is also affected in other ways. The existence of illegal drug money, the need to filter it militates against rational and best resource allocation in the market system. Mostly, drug money is invested in areas where the origin of funds can be disguised best, often favouring precisely those sectors of an economy that are characterized by low productivity, and thus creating new, unproductive jobs or preventing such jobs from disappearing (Lloyd 2012).

### **RESEARCH METHODOLOGY**

This research used a quantitative paradigm and therefore a quantitative research design. The researcher used surveys to gather the required information since they allow information to be gathered from large groups of people with the aim of seeking the generalization of the effects of substance abuse on national economic growth and societal bliss. Survey may take different forms such as face interviews, telephone interviews, and pencil and paper questionnaires. In this research, the researcher used questionnaires and distributed them to the research respon-

ents. In this research, the researcher used questionnaires and distributed them to the research respondents. The researcher chose this method because she believed that research respondents would more truthful while responding to the questionnaires due to the fact that their responses are anonymous (Babbie 2008). The research was conducted in Ntselamanzi village of Alice townships, in the Eastern Cape Province of South Africa.

## **RESULTS**

### **Qualitative Presentation of Data and Explanations of Findings on Alcohol**

The findings indicated that 61.3 percent of the out-of-school youths take alcohol (Table 1). This could mean that majority of the youths are familiar with alcohol maybe because of its abundance and the limited recreational activities since Ntselamanzi is a rural area with no much exciting activities for the youths to indulge in. It could be that these youths end up resorting to drinking alcohol every time because most of them have dropped out of school and are unemployed, so they will not be having any meaningful tasks to tackle. Perhaps alcohol is easily accessible in this area and also affordable since alcohol is also brewed in this village locally, so they can even get the alcohol at low or no cost at all.

**Table 1: The quantitative presentation of the data run on SPSS software**

<i>Name of the drugs</i>	<i>Responses</i>		
	<i>N</i>	<i>Per-cent</i>	<i>Percent of cases</i>
<i>Name of Drug</i> d1.whoonga	10	6.1	11.5
d2.alcohol	49	29.9	61.3
d3.tobacco	36	22.0	45.0
d4.cannabis	41	25.0	51.3
d5.methamphetamine	3	1.8	3.8
d7.crackcocaine	10	6.1	11.5
d10.tranquillisers	4	2.4	5.0
d11.otc	11	6.7	13.8
Total	164	100.0	203.2

### **Qualitative Presentation of Data and Explanations of Findings on Cannabis**

From the findings, Cannabis use is also popular with the youth population of Ntselamanzi village. 51.3 percent of the out-of-school youths

use cannabis. This shows that more than half the out-of-school youths are taking high quantities of cannabis mostly daily, indicating that there has been a great degree of dependence on the drug. Perhaps this could be one of the reasons contributing to a greater number of school drop outs amongst the youths. This is because of the detrimental impact cannabis has on the human concentration and focus capacity. Also as mentioned earlier on the findings pertaining to alcohol, limited recreational activities could also be the reasons why most of the youths would resort to drug use for recreation.

#### **Qualitative Presentation of Data and Explanations of Findings on Tobacco**

It is indicated that 45 percent of the population take tobacco. This shows that a great reasonable number of the youths are addicted to tobacco, perhaps because of many traditional ceremonies held in the village which always require either sniffing or smoking unfiltered tobacco. The use of tobacco can also be high because of the low cost of the unfiltered tobacco which is mostly used in rural areas, compared to the filtered one usually sold in urban areas. The state of unemployment of the youths could be also the reason for using tobacco in pursuit of solace from much pressure caused by stress.

#### **Qualitative Presentation of Data and Explanations of Findings on Whoonga**

The findings show that 11.5 percent of the youths use Whoonga/Nyaope. This shows that this drug Whoonga/Nyaope is not yet popular with the out-of-school youths of Ntselamanzi, probably because it is a new drug in the South African market, and/ or it is not accessible since it is a drug made from ARV's which are only given to HIV infected individuals. This is worrying because this drug is made from the ARVs. With cases being waylaid by criminals to take their ARVs in order to sell it or make whoonga, this presents a very pathetic state of affairs. With ARVs being very expensive and a daring of the public coffers, the country could lose a lot under the abuse of this drug.

#### **Qualitative Presentation of Data and Explanations of Findings on Crack-Cocaine Use**

According to the findings of this study, 11.5 percent of the out-of-school youths take crack/

cocaine. Perhaps the out-of-school youths are not very familiar with this drug because of its cost, since Ntselamanzi is in a rural setting where the accessibility of the drug may be a challenge since much of the crack/ cocaine is imported from outside South Africa. A great percentage of those who take this drug take it monthly. This could be because some youths have links with some in urban areas who supply them monthly with this drug, with them getting one of two lines because it is quite expensive. Having a huge chunk of the population not employed without a source of income perhaps leaves the youths with no option of not using the drug even if they desired to, and are forced just to use other affordable ones.

#### **Qualitative Presentation of Data and Explanations of Findings on Over the Counter Medicines (OTCs)**

The findings indicated that 13.8 percent of the out-of-school youth use OTCs. Findings indicate that OTCs are not used by a greater percentage of the population, but the ones that take them are defiantly abusing them. They all take as much as possible, maybe because the more the dosage, the higher the chances of getting intoxicated.

#### **Qualitative Presentation of Data and Explanations of Findings on Tranquillisers and Methamphetamine**

A small percentage of the study respondents indicated the use of tranquillisers and methamphetamine. From the findings, 5 percent of the out-of-school youths highlighted the use of tranquillisers. Possibly this is so because these need prescriptions from the doctor and in rural areas clinics and pharmacies are scarce making it difficult to access tranquillisers and methamphetamine especially in the absence of a prescription if located.

#### **Qualitative Presentation of Data and Explanations of Findings on Heroin and Cocaine**

The findings indicated that there is 0 percent use of Heroin and Cocaine among the youths of Ntselamanzi Village. Perhaps this is so because of the high cost of the drug which the youths of Ntselamanzi could not afford as most

of the youths are not employed. This could be due to lack of exposure of the youths in rural areas or ignorance of such kind of high calibre drugs.

## DISCUSSION

### Drug Use Kismets the Future of Out-of-School Youths Residing in Rural Areas

Indubitably, substance abuse has negative effects on those who use, whether adults or young people across the globe. Substance abuse among the youths has predictable psychosocial repercussions. Drugs highly alters brain cells in the long run damages them, causing loss of memory, schizophrenia amongst other illnesses caused by abuse of drugs (Abadinsky 2011). For the out-of-school youths, drug use it is detrimental as it is likely to doom their future when their brain are affected and most end up insensitive to social issues and disconnected from the real world (Funmilola and Onyekachi 2015). The youths in rural areas are challenged by the temptation of drug abuse due to the burgeoning percentages of suffering, lack of opportunities and recreation as compared to the youths in urban areas.

The rural location of these youths catalyses the quandary as there is little or no exposure or education on the ramifications of abusing drugs. Individuals residing in rural areas have been found to lack accessibility, availability, acceptability, and affordability when it comes to alcohol/substance related treatment (Webster et al. 2009). This shows that youths residing in rural areas result swamped in drug abuse due to limited resources to charge their lives in the right course. In addition to the perceived lack of privacy related to seeking access to primary care provision. Monnat and Khary (2015) notes that 'This is also there has been a shortage of primary care practitioners in rural areas for a long time', this resulting to the increase of problems as substance abuse which could be treated at early stages.

### The Role of Observational Learning in Drug Use

In explanation to the results in Table 2, modelling or observational learning plays an important role in determining risk of substance

abuse problems (Mauring and Braun 2005). Parents who model inappropriate or excessive drinking or use of illicit drugs may set the stage for maladaptive drug use in their children. Realistically, socially unwanted behaviours such as drug abuse results from inappropriate conditioning, poor socialization and a lack of adult figures that follows to correct the behaviour at the bud stage (Abadinsky 2011). This shows that the youths who reside in the rural areas are likely to adopt the behaviours of their parents, guardians or relatives, and if most of them are drug abusers these youths will follow suit. Some literature suggests that in some cases, family members motivate their youths into drug taking whether directly or indirectly (Coomber et al. 2013). Evidence shows that adolescents who have a parent who smokes face a substantially higher risk of smoking than do their peers in families where neither parent smokes. Families can have a direct influence on substance use, particularly the substances legal for adult use. Family has admittedly extensive impact on an adolescent's belief systems and values and hence on their subsequent behaviour. Operant conditioning according to B.F. Skinner involves repeated presentation or removal of stimulus following behaviour to increase the probability of the behaviour (Mosher and Akins 2014). Having parents and siblings who condone drug use or are dependent drug users themselves have all been suggested as to why people take drugs (Coomber et al. 2013).

**Table 2: Youths who agreed that observational learning lead to their drug use**

<i>Responses</i>	<i>Percentages</i>
Agreed	21.3
Strongly agree	36.3
Disagree	16.3
Strongly disagree	5
Not sure	21.3

Research done by New York College of Medicine revealed that children who grew in homes where drugs were taken often had deficiencies in the areas of the brain associated with emotion and memory that will give them a tendency to take drugs as well (Abadinsky 2011). One of every four of those who grew up with parents or closer family members using drugs end up using them as well (Goode 1993). Studies by different researchers with those commissi-

oned by organizations like the World Bank have also pointed out that the high incidence of drug abuse may be attributed to ones upbringing. However Monnat and Khary (2015) tends to see it in another angle saying rural youths have less access to illicit drugs as receive more positive forms of peer pressure and seem to have stronger religious are more disapproving of substance abuse.

### **The Aetiology and Underpinnings of Drug Abuse by Youths Who Reside in Rural Areas**

By definition, rural towns are small and the people within rural towns are likely to be more homogeneous in attitudes, values, and behaviours than those living in urban settings. Hence community characteristics can influence any kind of behaviours, positive or negative. Identifying the contributing proxies of behaviour is fundamental in search of potential, credible elucidations to the quagmire. Drug abuse amongst the youths in rural areas may come as a result of lack of exposure, lack of recreation, inaccessibility to fundamental facilities, lack of adequate societal guidance, peer pressure (Lader 2015). Consequences of drug abuse have negative impact on health status, education performance, economic bliss and social position. Educational consequences include inter alia, school dropout and school absenteeism, poor academic performance, low education attainment, poor cognitive development of children, and poor education outcome for children (Kang'ethe 2014).

Drug abuse may negatively impact economic status leading increased unemployment, to low family income; increased dependence ratio; increased informal illegal, forming of gangs who usually commit anti-social activities. It was thought that rural youth were not involved in gangs, but this assumption may no longer hold true (State 2015). Street gang members have moved into rural areas to produce and market drugs (Monnat and Khary 2015).

### **Role of Peers in Influencing Drug Abuse**

The findings show that 47.5 percent of the youths strongly agreed that peers influenced them to take drugs, 31.3 percent agreed, 15 percent indicated that they were not sure, 6.3 percent disagreed (Table 3). Apparently, it is possible that majority of the youths resort to advice

from friends may be because they spend so much time together and end up adopting one another's habits even unconsciously. Unfortunately, this happens to adopt the bad habit of drug use which traps them in addiction for life. The findings show that drug taking was motivated by peer pressure. Masese et al. (2012) notes that relatively few people start using drugs on their own. The interest and expectations of their peer groups have an important bearing on whether or not a person will try to use drugs (Table 3).

**Table 3: The youth influenced by peers to abuse drugs**

<i>Reponses</i>	<i>Percentages</i>
Agreed	31.3
Strongly agree	47.5
Disagree	6.3
Strongly disagree	0
Not sure	15

During the period of adolescence when peer influence is usually very strong, adolescents typically spend less and less time with their families, but with their peers, which is generally a risk factor for substance use (Monnat and Khary 2015). A friend or peer group is likely to be a motivator or the source of information about the availability of drugs and their allegeable effects. Taking drugs may seem a way to fit in with peers ones' peers who use drugs (Jennifer et al. 2016). One finds the phenomenon as a facilitation of acceptance and recognition by the peers (Goodman 2013). This might be the case with the youths of Ntselamanzi since a greater percentage attributes their drug use to peer influence. According to the UNODC (2015), drug users, like other people seek approval for their behaviour from their peers by attempting to convince them to join them in their habit. It is unfortunate that in countries of the developing world such as South Africa, intoxication and binge drinking seems to be on the rise among adolescents and young adults (WHO 2007; Lancet 2008).

### **Future of the Youth's Education in Rural Areas Hampered**

Family support does not stop with the home. Children are likely to do better in school when their families are supportive of and involved with the school, and encourage good school work. Most of the parents in rural communities are not

informed about detriments associated with drug abuse, hence there are likely not to discourage drug use by their children especially when themselves abuse drugs. Youths who are swamped in drug abuse find it difficult to focus, particularly on tasks that require mental effort, like school work. Therefore, a lack of focus generally led them to perform their schoolwork badly (Smith and Foxcroft 2009). The youths are more likely to have ditched school, to have failed a year, or to have been kicked out or suspended (Maring and Braun 2005). Hence resulting to failure to complete their education, and not being adequately educated comes out as a prodigious impediment in the future of these youth in rural areas.

The youths end up failing to pursue their education and fail to build strong careers, and if they do so, it would be those careers that do not attract good earnings (Bird 2010). Gravely, drugs are associated with children leaving school, teenage pregnancies, becoming violent, suicide tendencies and other innumerable social vices (Kang'ethe and Khayundi 2014). The UNODC (2009) mentions that when students' educational performance goes down, their self-esteem suffers. Also this may lead to a cycle of even poorer academic performance and low self-esteem that at many times often pushes the young people toward further drug use (Mosher and Akins 2014). Alcohol causes some people to become a bit aggressive and to commit crime, hence after consuming too much of it the youth who are the users in this case end up not interested in school work but anti-social activities. Perhaps this is probably the reason why alcohol and drugs are associated with a great deal of crime (Abadinsky 2011). Substance abuse has been associated with increased prostitution, mostly in search of money to buy more drugs (Funmilola and Onyekachi 2015).

### **Excruciating Elements towards Drug Abuse in Rural Areas**

#### *Lack of Accessibility to Vital Services*

The lower population density in rural areas makes it difficult to provide accessible services. Therefore, rural families often have to travel long distances to get mental health services including substance abuse prevention and treatment programs (Maring and Braun 2005). Public trans-

portation in rural areas is scarce and often undependable. For low-income families who may not own a reliable vehicle or have other means of transportation, this barrier can pose an insurmountable challenge (Abadinsky 2011). Rural communities also have difficulty attracting trained substance abuse professionals, school nurses, and counsellors (Maring and Braun 2005). Rural communities have difficulty attracting trained substance abuse professionals, school nurses, and counsellors. Those who do practice in rural areas are often trained for work with urban populations (Maring and Braun 2005).

According to Warner and Leukefeld (2002), norms and values in rural communities decrease the likelihood of formal treatment seeking and thereby impede the recognition of substance use or abuse as problematic. Recreation also has a huge contribution to maintaining bodily health. But the rural youth get swamped in boredom due to lack of resources for recreation, unlike urban areas which are so full of recreation areas. Boredom plays a key role in substance abuse among adolescents, with those who reported being 'frequently bored' 50 percent more likely to drunk and use illegal drugs (UNODC 2013). The rural environment to some youths might be seemingly frustrating due to its remote state and is likely lure the youths into drug taking as an alternative to reduce stress (Mosher and Akins 2014). Rural students who were not involved in any formal activities, in school or out, were somewhat more likely to use drugs. These young people who are not involved in recreation activities may be less successful generally and may find each other, forming peer clusters with a potential for deviance.

#### *Lack of Recreation*

In any country, availability and access to a sound and free recreation is a factor that can drain people's stresses and sorrows. This is because people are able to pass free time productively and pleasurably (Bancroft 2009). Recreation also has a huge contribution to maintaining bodily health. This is central, especially to the out- of- school youths who find themselves idle on their spare time. Their age is a trying moment in that most are in the age of identity crisis (Erikson 1968). This is when the youths are keen and have energy to try most of the adult behaviours and also to try to try their tasks

and roles, if they can (Erikson 1968). The absence or lack of an infrastructure of recreation is detrimental because the out of youths might be wooed to alcoholism and abuse of various drugs (Bancroft 2009).

This is to find solace and comfort (Asimov in Vyse 2013). Recreation can be provided through youth clubs, peer clubs, free public recreation centres that offers gymnastics, swimming (Spooner and Heatherington 2005). Lack of recreation can be a possible cause of substance abuse, and this is also closely related to poverty as many youths may lack the resources to access various centres of recreation and can easily end up resorting to substance abuse which may be cheaper and easily accessible to them. Although most users are able to perceive they are doing something that will cause potential harm to themselves, the positive effects and feelings associated with the use leads users to continue (Shannon 2015).

### CONCLUSION

The problem of substance abuse in rural areas in South Africa appears to be on the rise unabatedly among the out of school youths. This is detrimental and perfidious and compromises as well as undermining the quality of youth. If not addressed, this social pathology of substance abuse has the potential of thwarting a country's socio-economic development, and of crippling families' capacity to develop their villages and the country at large. It is therefore critical that more research is undertaken with a hope of working on the recommendations which could be pivotal role in influencing interventions against the substance abuse in the rural areas of South Africa.

### RECOMMENDATIONS

To improve the health and well-being of rural families, practitioners need to understand the factors associated with substance use and abuse in rural areas. Policymakers need access to sound research and as they make decisions affecting rural families that takes into account their needs and challenges. Researchers, practitioners and policymakers must be aware that different populations have different needs. There is need to consider programmes in schools and com-

munities for drug prevention, school-supervised activities that occupy time during and outside of school hours. Conduction of formal activities which provide adult supervision to reduce peer clusters drug use related and offer youth the opportunity for talent and skills development to increase feelings of self-worth and achievement.

### Identification and Assessment of Families' Substance Abuse Related Needs

Most of the youths who result in drug abuse adopt the culture from their families. Therefore, there is a huge need to treat the ailment from the root by dealing with the families themselves. There is need for intensive assessments and treatments that will hopefully solve the need of the families located in rural areas.

### Rural Drug Prevention Programmes

The researcher recommends implementation of drug prevention programmes in rural areas. These programmes are recommended to be conducted in the native languages so that the message can reach as many people as possible even those who may not understand English. This is to strengthen ownership of such messages and to make those who listen to the message the conduit and disseminators of the messages.

### Increasing Substance Abuse Prevention and Awareness Programmes in Rural Schools

The researcher recommends serious education initiatives in prevention and elimination of substance abuse among the youths in rural areas. Importantly, strong emphasis should be placed in the rural areas whose youths are becoming easier targets to drugs, perhaps due to grave lack of recreation facilities and boredom.

### Increase of Extracurricular and Recreational Activities in Rural Areas

The researcher recommends NGO's and government sectors to provide more and various extracurricular activity resources in rural areas to facilitate message dissemination on the detriments of drug abuse. Importantly, instituting various recreational activities could possibly



divert the youths from drug taking so that they manage and maintain quality citizenship.

### Effective Monitoring and Evaluating of Substance Abuse Programmes

The researcher recommends conducting monitoring and evaluations of all substance abuse programmes implemented in the rural areas. All programs and initiatives taken in the rural areas should not be a once off, but rather should be measured and their continuity and sustainability sought. This is because drug use may easily ruin the lives of the youths with concomitant perfidious effects of poverty and weaker quality of citizenship. Evaluation and monitoring of implemented prevention programmes is vital, as it equips the relevant panel of policy-makers, the stakeholders or programme managers with the rightful information of any happenings and changes.

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