

Teenage Substance Abuse: Impact on The Family System and Parents' Coping Strategies

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ABSTRACT

Substance abuse by teenagers is a disease that burdens the whole family. This study aimed at exploring how teenage substance abuse affected the family of the user, parents' efforts to curb the use; their coping strategies in relation to their children's substance abuse problem. The current study was carried out with nine parents whose teenage children abused substances and were receiving treatment for such a problem in an outpatient treatment centre in Soweto. These children were conveniently selected using non-probability sampling. Data were collected using semi-structured interviews and analysed thematically. The whole family becomes disarrayed by the discovery of substance abuse by one of their own. The spousal relationship is also adversely affected. In an attempt to contain the problem, most parents usually respond by attempting to solve the problem with their own resources such as giving parental guidance and hoping that the child would stop using drugs. Most parents do not receive the support that they require. The whole family system is negatively affected, therefore substance abuse and dependency intervention efforts should include the whole family and not just the addicted person.

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INTRODUCTION

The use of alcohol and other drugs is typically initiated during the adolescence period and escalate over this developmental phase (Hernandez et al., 2015). Recent research established that young people, irrespective of their sex, initiated the use of substances as early as the age of 10 years old (Mafa et al., 2019). Ananias et al. (2019)

indicated that substance abuse had dire consequences in the lives of users, ranging from being expelled from school, lying to parents and being in conflict with the law. Due to the stigma that surrounds substance or drug use and fear of social isolation, parents and families are often reluctant to share their problems (Paylor et al., 2012).

Parents do not always promptly react to teenagers' substance use and therefore find it difficult to acknowledge it when the substance use has escalated to abuse or dependence. Choate (2015) revealed that upon the discovery of substance use, parents did not see the problem for what it was and thus sought other ways of explaining it. They sought explanations that were not substance abuse-related. Most parents dismissed the signs of substance use as being normal adolescent behaviour. These findings correlate with what Masombuka (2013) found in their study where some parents said they even resorted to taking their children to church thinking that they were possessed by evil spirits.

Substance abuse disrupts the life of the user both at personal and interpersonal levels. The family life of the person with the substance abuse problem revolves around them and their addictive behaviour. Makhubele (2012) concurred by pointing out that the impact of substance abuse surpassed the personal effects to affect healthy social relationships as well. All areas of family life adapt to addiction. It is common for family members to deny that addiction is the problem and to feel shame about it. Substance abuse is not discussed among

family members or with anyone outside the family. It is this secretive behaviour that is the source of much emotional pain for all family members (Collins et al., 2010).

Studies that solely focus on the teenager as far as causes of substance use are concerned tend to view the parents of the user negatively by placing the blame on them. Research by scholars (Benchaya et al., 2011; Matlakala et al., 2019; Njeri & Ngesu, 2014) on causes of adolescent substance use focuses on parents' inadequacies of performing their role as parents such as communication problems between adolescents and parents, non-authoritative parenting styles, as well as parents' own drug consumption. Parents are seen as playing a major role, directly or otherwise, in influencing their teenagers to start abusing licit and illicit drugs.

These kinds of studies do not take into account the experiences and feelings of parents of the substance user. Choate (2015) posited that there was little research on the impact of teenage substance abuse on family functioning. The whole family system and its dynamics are adversely affected by substance abuse by one family member. This can take its toll on everyone involved particularly the parents of the substance user. One of the greatest challenges faced by parents in today's society is learning and understanding how to manage their children's substance abuse problem (Cohen, 2014).

Addiction within the family can create an unstable family environment characterized by disharmony, disequilibrium

and conflicts (Cohen, 2014; Masombuka, 2013). Emotional intimacy and trust among family members may be lost, and parenting strategies can become less effective (Craig, 2010). Parents feel particularly frustrated if the addict is a minor as they feel solely responsible for the child's deviant behaviour (Smith & Estefan, 2014).

Teenage substance abuse affects the whole family system. Parents' increased attention on the addicted adolescent and their behaviour leaves other family relationships vulnerable. Parents would argue with each other, while other children feel neglected. This effectively results in the breakdown of communication in the family, leaving them in disarray. Parents live in constant fear of what might happen to the addicted child. They are consumed by fear that their children may die from self-harm, deteriorating physical and mental health or overdoses (Choate, 2011).

Smith and Estefan (2014) concluded that when trying to cope with one member's addiction, families developed a system that was conducive to problematic behaviour. This system enables the problem to escalate and compromises family functioning. The tendency to focus more on the person with the problem can lead to divisions or confrontations in the family. Other siblings might feel ignored and direct their feelings of resentment towards the parents. The overall quality of life and family relationships is compromised. The parent-parent and parent-child relationships are, to a certain extent, neglected, leaving the whole family in a crisis. Parents are constantly concerned

about possible violent attacks on them by their addicted adolescent and are highly concerned about other children in the family repeating the addict's behaviour (Barnard, 2005; Orford et al., 2013).

Parents' inability to cope is increased when their child's substance abuse problem escalates. They often experience heightened stress which makes it difficult to manage their lives, which in turn compounds the weakening of the relationship with the other parent (Choate, 2015). Scholars such as Usher et al. (2007) indicate that parents and family members who live with and take care of substance abusers are isolated and hidden groups, predominantly because of guilt and shame. Many services that are available focus on the needs of the substance abuser, and not on the needs of the affected parents and/or family members. The guidance, wisdom and support they need are not easily found.

This paper sought to identify and describe parents' effects in curbing their teenage children's substance abuse, the impacts that teenage substance abuse has on the family system, and their coping mechanisms

METHOD

Research Approach and Design

This study followed the qualitative research approach. Denzin and Lincoln (2003) argued that the qualitative approach sought to study things in their natural settings, and attempted to make sense of, or to interpret, phenomena in terms of the meanings people bring to them. The qualitative research

design was most appropriate as the research involved studying human behaviour in its own unique setting, which included experiences of parents of teenagers who received substance abuse treatment in an outpatient facility.

An exploratory design was used because the area of the proposed investigation is not well researched in South Africa. According to Bless et al. (2013), exploratory designs are largely qualitative and often use small, non-probability samples. This design helped the researchers to explore the impacts of teenage substance abuse on the family system.

Sampling

Data was collected from nine participants from Soweto Township, South Africa. A sample size of nine was sufficient in order for saturation to be reached. The selection criteria of this study included the following: the participants should have an adolescent child who has been abusing substances and receiving substance abuse treatment in an outpatient facility; they needed to reside in Soweto; they had to be willing to participate in the study. Convenient sampling was used to select the participants. Furthermore, this sampling technique was appropriate as the researchers believed that it would yield a comprehensive understanding of the impact of teenage substance abuse on the family system (Maree, 2007). Parents were asked to participate in the study when they accompanied their children to the centre.

Permission to Carry Out the Study

Ethical clearance to conduct the study was granted by the Turfloop Research Ethics Committee of the University of Limpopo, South Africa. Permission to conduct the study was granted by the Director of the treatment facility at which the study was carried out.

Interview Process

The research was conducted at an outpatient alcohol and drug treatment centre in Soweto, Gauteng Province, South Africa where the participants' teenage children were receiving treatment for substance abuse problems. The profile was given in terms of the participants' gender, age and their relationship to the patient. The study was conducted with nine (9) participants. Three of them were male and six were female. The ages of the participants ranged from 33 to 71. The three male participants were the biological fathers of teenage children with a substance abuse problem. Out of the six females, five were the biological mothers of the teenage substance abusers. Only one female was a guardian of the person with the problem.

Information about the study's aim was verbally communicated to the participants in their language of choice. Once the potential participants fully understood the nature of the study, and agreed to participate voluntarily, they were then issued with a consent form which clearly clarified the issue of confidentiality and the voluntary nature of their participation.

Participants were assured that they might withdraw their consent to participate in the study at any point without consequences. The researchers assured the participants that their participation in the study was confidential and that their identities would remain anonymous. The interviews were conducted in a quiet and comfortable office at the treatment centre. A semi-structured interview schedule guided the interviews which lasted for a duration of 55 minutes to two hours. These were the main questions asked by the researchers:

- What do parents do to help rid their children of substance abuse?
- What impact does substance abuse have on the family as a whole?
- How do parents cope with their teenagers' substance abuse?

Data Analysis

Thematic analysis grounded in the literature regarding phenomenological methods was used in this study. A thematic data analysis method is “a process of looking at data from different angles with a view to identifying keys in the text that will help the researcher to understand and interpret the raw data” (Maree, 2007). By using thematic analysis, the researchers were “seeking to achieve three aims: examining commonality, examining differences and examining relationships” (Harding, 2013).

Data was analysed following these steps as outlined by Blanche et al. (2006):

- Step 1: The data were transcribed, carefully read through while making

notes of and attempting to make sense of the data.

- Step 2: The transcribed data was read through while looking for the underlying meaning in the storylines.
- Step 3: Similar topics were grouped together while discarding irrelevant data.
- Step 4: A code was assigned to each identified topic.
- Step 5: Themes were generated from the topic identified with each theme given a heading instead of a code.
- Step 6: Similar themes were grouped together in order to reduce the list of identified themes.
- Step 7: Sub-themes were further generated from the major themes and preliminary analysis was conducted.
- Step 8: The data analysed was then recorded according to the themes and subthemes identified.

RESULTS

The themes that emerged from the process of data analysis are presented in this section. The results are presented based on the study objectives and the main questions asked. The major themes identified are: (i) parents' efforts to curb their teenage children's substance use; (ii) the impact of substance abuse on family relationships; (iii) coping strategies; and (iv) lack of support.

Parents' Efforts to Curb the Use

This theme outlines the parents' efforts in assisting their children to stop abusing substances. The subthemes identified are parental intervention, spiritual intervention, and seeking professional help.

Parental Intervention. When parents realised that the problem with their children was escalating, they did what they could within their means to assist them. They did so as a means to gain some sense of control over their children's substance abuse problem. However, they failed to identify the user as a problem that needed the intervention of professionals. The experiences of five participants were reported as follows. According to a father, aged 52, "I set stricter rules like having curfew, I even agreed with his mother that he should not be given money, instead we would buy whatever items he needed".

This is how another participant, a mother aged 44, shared their experience, "I took him from the Free State (province) to come and stay with me so that I can keep an eye on him".

Another parent, a 49-year-old mother, shared their experience in these words:

Like any mother would, I tried to talk to him when he was still using dagga (marijuana) and tobacco only. He promised that he would stop as he is not addicted. He also said that he was just experimenting and it was not serious. When he began with nyaope (a mixture of

marijuana and heroin), I pleaded with him to come here (treatment centre) but that did not work.

This narrative represents another parent's reaction, 38-year-old mother, to their child's substance use, "We stopped giving him money but he still smokes, in fact he is worse than before."

These responses by parents are supported by findings in Barnard (2005), where it was revealed that parents' initial impulse was to attempt to solve the problem by themselves prior to seeking outside intervention. Parents are the children's primary caregivers and are responsible for disciplining the children when they display deviant behaviours, thus they will try to deal with the problem themselves.

Spiritual Intervention. Given their spiritual convictions, it was easy for the parents to seek spiritual intervention over professional intervention. In addition to parental guidance, this is how six parents expressed their experience with regard to spiritual intervention. A mother aged 71 said, "I prayed for her and also took her to church, the church people continue to pray for our daughter. We sometimes hold prayer sessions for addicted people at our church."

A 46-year old father's response was recorded as:

The pastor said he is possessed by evil spirit which makes him do things such as smoking dagga and being disrespectful towards

his parents and teachers. The evil spirits are jealous of his bright future and do not want him to prosper.

These utterances resonate with earlier studies. Masombuka (2013) and Swartbooi (2013) argued that when parents realised that their initial efforts of trying to contain the problem themselves were failing, they sought religious counsel and prayer.

Seeking Professional Help. The substance abuse persisted despite the parents' efforts to help their children. The parents sought professional help only when external forces such as school authorities or courts of law were involved. Only two participants sought professional help without the involvement of external forces. A 33-year-old mother mentioned that:

I was advised by school authorities to bring them (twin brothers) here. The problem is, I did not know much about their use of marijuana. I would not have brought them here had it not been for their school authorities as I had no idea about their behaviour.

This is how another parent's child, a mother (71 years old), got to receive professional for their child help, "The Court ruled that she must be brought here. She was arrested after they found them (she and her friends) smoking on the street."

According to Craig (2010), the sense of shame brought about by the family

member's substance abuse problem impedes the family's willingness to seek help from external resources, cornering families into isolation and distress.

Impact of Substance Abuse on Family Relationships

Addiction not only affects the individual with the problem, but it also has negative effects on the family system as a whole. This theme exposes teenage substance abuse in the family system.

Parental Relationship. Parents reported that their children's addiction had a profound effect on their marriages. It was found that parents of the children were in disagreement about how to deal with their children. The participants expressed this as follows. A 46-year-old father stated that,

My wife and I do not agree when it comes to this issue. I believe that our son will benefit more from professional help. His mother believes and tells him that only God can cure him. I am not against her taking him to church, I just want her to also consider the professional route. She is not interested in coming here, she never came here even when he was attending (therapy) sessions here last year. She still refuses to come here even after our son was suspended from school. It seems coming here is my sole responsibility.

According to Smith and Estefan (2014), conflicts arise in marriage. Swartbooi (2013) indicated that parents were faced with the challenge of providing support for the child with a substance abuse problem, and at the same time provided a stable family environment for the other children. This leaves parents feeling overwhelmed as they have to cater to all of their children's needs.

Parent-child Relationship. One child's addiction affected the relationship between the parent and other children in the family. This is what a 49-year-old mother shared with regards to this point:

I think I spend more time with him now than I do with his younger brother. I do not know how to divide my attention between them. I don't want his brother to think I am neglecting him. But I still spend some time with him.

This is what another parent, a father aged 46, had to say, ".....his brother also accused me of paying too much attention to him than I did to him (brother) and their youngest brother."

This subtheme and narratives are confirmed by Barnard (2005), who stated that parents felt responsible for every member of the family, including the one with addiction problems. This means that parents find it challenging in this situation to keep all the children happy, and therefore often focus on the child with the problem.

Sibling Relationship. Another major subtheme revealed during the interviews was that the addiction of one child has negative outcomes on their relationship with other siblings. The majority of the parents narrated how substance abuse had an impact on the teenage user's siblings in the following way according to a 49-year-old mother:

The younger ones get scared when he starts shouting and demands money from me. One of them has told him that he hates him and wishes that he dies so that we can live in peace. His oldest sister no longer speaks with him, this puts a strain on me as a mother because I love all my children and I want them to get along.

This narrative is affirmed by Oreo and Ozgul (2007), who indicated that parents tended to spend most of their time, energy and resources attempting to assist the addicted family member, leaving siblings yearning for their parents' affection and attention.

Another aspect that puts a strain on the sibling relationship is theft by addicted adolescents. A father, aged 52, shared this in the following manner, "When she could no longer maintain her habit with her allowance, she began stealing from her older brother and younger sisters. She would take their money from their rooms."

Another parent, a 44-year-old mother, expressed the way in which she felt her

family was fractured through the addict's theft by uttering the following:

.....he also steals from our house, he takes anything he can get his hands on: money, cellphones, laptops, food, appliances, curtains, clothes, pegs. ...He has been inciting violence towards me, threatening to hurt me and his sisters if he was not given money to buy drugs.

Choate (2015) confirmed that theft caused a strain on family relationships as it was at times accompanied by assault. Parents and siblings are generally left feeling vulnerable as their possessions are at risk of being stolen (Barnard, 2005). Being a victim of theft leaves one feeling unsafe and vulnerable, moreover when the perpetrator is known to them.

Coping Strategies

The interviews revealed that parents find it difficult to deal with their children's addiction. This theme describes ways in which parents try to cope with their children's substance abuse. Almost all parents reported that they relied on their spirituality as a means of coping with their struggle of dealing with their substance abuse. The following extract from a mother aged 71, demonstrates this, "All I do now is pray. There is nothing more I can do than put everything in God's hands. It also helps to talk to the women from my church. They strengthen me by praying with me."

A 33-year-old mother pointed out, "I struggle to cope with the situation but my

mother says it will be best to pray about it. So my mother and I have been praying so that God can help the boys see the light and stop smoking."

These findings corroborate previous studies pertaining to the experiences of parents with their children's substance abuse (Masombuka, 2013; Swartbooi, 2013). The findings of these studies revealed that parents often relied on religion and spirituality to cope with their challenges. Religion plays a vital role in people's lives as it brings hope hence the parents turn to their religion as they seek to understand their children's substance abuse problem.

Lack of Support

It emerged during the interviews that most of the participants did not receive the support that they required with regard to the addiction. A father, aged 52, referred to this challenge as follows:

I would feel much better if community members can stop blaming us (parents) and accusing us of letting our children behave that way (stealing and using drugs). People who do not have children who do this thing (using drugs) do not understand. I think if there was a place where all parents with children who smoke nyaope (marijuana mixed with heroin) can come together and talk, and maybe give each other advice.

Some participants required support from community members as well as individual

personal support from social workers. A 49-year-old mother expressed this need as follows:

.....it would really help me and my family if we could get support from social workers and community members. Having a child who abuses drugs is not something that parents choose. The community should stop buying the things they (addicts) sell to them because in doing that they are supporting the addiction, but people just want a bargain, buying a phone worth R3500.00 with R200.00. Social workers should consider counselling us as parents and assist us in dealing with this issue.

Another need for support identified by the parents was support by co-parents as well as extended family members. This is how a 46-year-old father expressed this need:

I wish that my wife and her sisters could support me by changing their minds about professional treatment. My wife is the person whose views I value the most but I feel like I'm fighting this alone. My wife and I need to be in this together if we are to win this battle.

According to Choate (2015) and Masombuka (2013), in their respective studies about parental experiences with adolescent substance abuse, parents need community support, individual and family

counselling as well as support groups where they can share their experiences. This will assist them in coping with substance abuse.

DISCUSSIONS

Parents are driven by their inert desire to protect and help their children. Thus when their children are involved in substance use, they would do everything in their power to curb the use. Parents initially attempt to deal with the use by using their own resources such as reprimanding the user, taking away their privileges, and even relocating them. When their immediate resources are unsuccessful in curbing the use, they explore other avenues such as seeking spiritual intervention before they could consider professional intervention. These findings resonate with what was discovered by Mathibela and Skhosana (2019) who highlighted the plight of parents in dealing with their children's substance abuse. Professional help is often sought after the involvement of either school officials or the police.

The effects of substance abuse are not exclusively felt by the user. Teenage substance abuse also has negative impacts on the families of the users. Families find themselves out of depth when trying to deal with the use as they focus their energies on assisting the substance user. This, in turn, results in other family relationships being partially neglected. The parents interviewed reported family disarray as a result of substance abuse. This is due in part to the fact that parents and family members alike are not sure what to do as

they lack knowledge of substance abuse and its seriousness.

It was established in the study that the parental relationship is affected as parents tend to blame each other for the problem. The parent-child relationship also suffers as parents focus their attention on the child with the problem leaving non-using children feeling neglected. The non-using siblings are often victims of theft by their addicted siblings, making it difficult for them to have healthy relationships. Parents are often caught in the middle of the family chaos as they have to keep the family together despite the problem.

Consequently, parents find it difficult to cope with the substance abuse and family dynamics that come with it. They predominantly turn to prayer in order to deal with the substance abuse as they evidently did not receive the necessary support in order to effectively deal with the substance abuse and its negative effects. Parents yearn to be supported by the community and professionals such as social workers. Similar sentiments are shared by Somani and Meghani (2016), who recommended the involvement of community stakeholders in the fight against substance abuse.

This body of research has shown that the whole family system is negatively affected. Therefore, substance abuse intervention efforts should include the whole family and not just the addicted person. Parents of teenagers who have a substance abuse problem need support, skills and resources in order to effectively deal with the problem. They also need help in supporting the non-

using siblings to cope with the substance abuse by their siblings. This indicates that social workers or substance abuse therapists should recognise the need to include family members in their intervention, and not just work only with the person with the problem. The work by Mathibela and Skhosana (2019) affirms these foregoing findings.

CONCLUSIONS

The results of this study show that parents of teenage substance users are burdened with having to deal with the use. They usually attempt to contain the problem by talking to the user, moving them to a different location, or taking away their allowances. Parents highlighted that there was a change in the family dynamics once one member of the family was addicted to substances. Parents reported having disagreements with the co-parents on how best to deal with the problem. The relationship between siblings is also adversely affected as the non-using siblings argue with their substance-abusing siblings. The other children's relationship with their parents is impacted as non-using children argue with the parents on the treatment that their sibling with the problem receives from them.

The researchers have observed that there is a great need for the availability of formal and informal support networks for the affected parents and their families. Parents need to be made aware of the importance of support for themselves. They desperately need psychosocial support and information about teenage substance abuse to help them cope. These parents need

support to cope with, and work through, the fragmented parent-child relationship as well as other disrupted family relationships. Support groups should, therefore, also include family members affected by the problem, including parents and siblings. The support of the family unit will offer the teenager who abuses substances the best chance of recovery.

Other parents mentioned the need for support from community members and them to stop encouraging drug abuse by buying stolen items from potential abusers. Communities need to be sensitised about drugs so as to de-stigmatise families of people who are addicted to substances. Given that as seen in this study, parents have strong religious convictions, there is a need for social institutions such as churches to be involved in community drug interventions. Drug awareness campaigns should also be conducted in churches. Religious leaders should be educated and encouraged to get involved in the fight against substance abuse.

STUDY LIMITATIONS

The researchers used a convenience sample which means that all parents who took part in the study were from the same treatment centre. Therefore, the results of this research may not be generalisable to the larger population.

This study was limited to nine parents whose teenage children are abusing substances and receiving treatment at a township treatment centre. Therefore, the findings cannot be generalised to

other settlements as conditions may differ. The interview process was stopped after interviewing nine participants as data appeared to have reached saturation. The results of this study cannot, therefore, be generalised to all parents dealing with a similar problem.

All the parents involved in this research study were Africans. Therefore, they do not reflect the demography of the country as it excluded other racial groups. Future research can be conducted on the religious leaders' opinions on the causes of substance abuse.

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