Stress, Peer Pressure and Substance Abuse among Adolescents in Luzira

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A research dissertation submitted to the School of Psychology in partial fulfilment of requirements for the award of a Bachelor of Community Psychology Degree of Makerere University

July, 2018
Declaration

I Bwire Timothy Wandera do hereby declare that the work presented is my own except where acknowledged and has not been submitted in the past for the award of Bachelor of community psychology. The errors that might appear in this work are entirely my own.

Signature: ........................................ Date: 11th SEPTEMBER 2018

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Approval

This dissertation has been approved for submission for the partial fulfilment for the award of a Bachelor of Community Psychology Degree.

Signature: .................................................. Date: 11th 9 2018

Mr. Mwase Patrick
Supervisor
Dedication

I dedicate this research to Luzira Secondary school and Mr. Kalema Yusuf in particular, with whose help I was able to get respondents from the school population. I was once a student there, I therefore believe that the results of this research if handled appropriately would be helpful in addressing some of the problems/challenges faced by the students therein.
Acknowledgements

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List of Acronyms

MOH – Ministry Of Health
NGO – Non Government Organisation
PTSD – Post Traumatic Stress Disorder
RAHU – Reach a Hand Uganda
SPSS – Statistical Package for Social Sciences
UNICEF – United Nations International Children’s Emergency Fund
WHO – World Health Organisation
Abstract

The study aimed at examining the relationship between stress, peer pressure and substance abuse among adolescents. The study was conducted in Luzira secondary school located in the south east of Kampala district. A correlational study design was used and 412 school going adolescents participated in this study. Semi-structured questionnaires were the main tools in data collection and data was analysed using the Statistical Package for Social Sciences (SPSS). Pearson’s Correlation Coefficient (r) was used to determine the level of significance of the hypotheses. Results indicated that that there is a significant relationship between stress and peer pressure, stress and substance abuse, and peer pressure and substance abuse among adolescents.
CHAPTER ONE: INTRODUCTION

Background

Substance abuse has become a global phenomenon affecting almost every country. Adolescence is a period of physical, psychological and social transition from childhood and may fall within the age range of 10-19 years (WHO, 2010). Uganda has a predominantly young population with 47.3% being under the age of 15 years and one in every four Ugandans (23.3%) is an adolescent.

According to the WHO(2010), 3.04% of the substance abusers were males between 15-64 years and 0.36% was females aged 15-64 years. These actively involve themselves in substance abusive activities like drinking alcohol, smoking cigarettes, marijuana, and local brew among others. The World Health Report indicated that Uganda was ranked as one of the leading alcohol consumers in Africa with an average consumption rate of 17.54 litres per annum. Adolescents are reported to be more exposed to substance abuse due to factors like stress and peer pressure. This poses substance abuse among adolescents as an increasing social problem. (Namaganda, 2009) reported alcohol to be the most abused substance by 80% of the adolescents aged 18-23 years, and some of these usually end up in rehabilitation centres or in slums as drug dealers.

Substance abuse among adolescents is attributed to stress. Exposure to stressful situations like death of a loved one and academic lures adolescents into abusing substances as a way of coping with the stress. Stress is one of the major factors in predicting the physical health and well-being of everyone, ranging from childhood through older adults (Gallo, Bogart, Vranceanu & Matthews, 2005). Therefore, adolescents who are overwhelmed by stress turn to substance abuse as a coping mechanism.

Additionally, most victims of negative peer pressure are the adolescents of low-self-esteem with feelings of unworthiness which makes them vulnerable to substance abuse because they seek conformity, approval and acceptance to their peers. Negative peer pressure may make the adolescents to engage into substance abuse by encouraging peers to change their attitudes, values or behaviours in order to conform to groups. The desire to feel accepted and to fit in peer groups is one of the strongest forces in adolescents which makes them do things that they know are wrong, dangerous and risky but on the positive side of peer relationship, the pressure to keep up with their peer group can also inspire adolescents to achieve goals that they might never aim for on their own.
Peer pressure can influence substance abuse by actively shaping drinking behaviour (offering the first free drink), offering free information about several substances of abuse and how to easily access those (Borsar & Carey, 2001).

In conclusion, although several efforts have been taken by the Government and some NGOs like RAHU, UNICEF and World Vision to sensitize the adolescents about their ability to manage stress and negative peer pressure, many adolescents have failed and they have actively involved themselves in substance abuse. Consequently, it has resulted into deterioration of their physical body health, truancy, dropping out of school, poor academic performance, engagement into a wide arrange of delinquent behaviours, poor emotional functioning and mental health among the adolescent. The initial misuse and abuse of substances is also a determining factor in successfully bringing in life stressors (Gallo, 2005).

**Statement of the problem**

The level of substance abuse among adolescents in Uganda has increased. There are more adolescents consuming abusive substances around hostels and slums like drinking alcohol, smoking cigarettes, marijuana, cocaine and Cuba among others. This may be attributed to the high levels of stress that comes with factors such as unemployment, failed relationships and poor education which have increased the adolescents’ dependency on drugs. This problem has also been caused by the adolescents’ participation and negative influence by their peer groups which have encouraged them to take part in abusing the substances. Consequently, it has led to poor academic achievement, school drop outs, rape, defilement, and drug trafficking, robbery and high mortality rate.

**Purpose of the study**

The study sought to establish the relationship between stress, peer pressure and substance abuse among the adolescents.

**Objectives of the study**

These are the following objectives put forward:

1. To establish the relationship between stress and peer pressure among adolescents
2. To establish the relationship between peer pressure and substance abuse among adolescents
3. To establish the relationship between stress and substance abuse among adolescents
Scope of the study

The study was carried out among adolescents in Luzira which is a suburb located in Kampala District. This is because there are several schools in this area with adolescents who are likely to be engaging in substance abuse. The study will mainly focus on examining the relationship between stress, peer pressure and substance abuse among adolescents.

Stress refers to the harmful physical and emotional response that occurs when there is a poor match between environmental demands and the capacities, resources, or needs of an individual (LeBlanc, 2009).

Peer pressure is the direct influence on people by peers or an individual who get encouraged to follow their peers by changing attitude, values or behaviours to conform to those of the influencing group or individual.

Substance abuse refers to over indulgence in or dependence on an addictive substance such as alcohol or drugs. These may be both licit and illicit drugs such as marijuana, prescription medicines among others. Therefore, it is a patterned use of a substance in which the user consumes the substance in amounts or with methods which are harmful themselves or others (Nutt, King, Saulsbury & Blakemore, 2007)

Significance of the Study

The study may benefit the students of community psychology and other disciplines as well as the university at large since a copy of the final dissertations will be put in the university library thus increasing on their stock of resources. It will also act as a reference manual for other research students, thus contributing knowledge to the academic field.

The study will help the community of Luzira understand the impact of substance abuse, peer pressure and social support on the life of adolescent. This will help motivate them to improve on the social support, reduce on negative impact of peer pressure and reduce on rate of substance abuse and its’ associated impacts.

The study may also be very profitable to the government and other researchers who are interested in the topic to use this information in understanding the nature of stress, levels of peer pressure and the rate of substance abuse and hence this helps them in making the necessary intervention for adolescents.
Conceptual framework

Figure 1: A conceptual framework showing the relationship between stress, peer pressure and substance abuse among adolescents.

The conceptual framework shows that adolescents who experience stress exhibit low resistance to negative peer pressure which in turn may lead them to engage into substance abuse. Additionally, adolescents who experience high levels of stress are vulnerable to engage into substance abuse.
CHAPTER TWO: LITERATURE REVIEW

Introduction

The literature focuses on the relationships between stress, peer pressure and substance abuse. It presents literature on the relationships between stress and substance abuse, stress and peer pressure, and peer pressure and substance abuse.

A Theory Explaining Adolescent substance abuse

Different theories have been advanced to explain adolescent substance abuse. This study will explore the problem that is to say Behavior Theory was developed by Richard (1988). The theory is a social-psychological framework focused on the explanation of variation in adolescents' involvement in behaviors that are socially defined as a problem and as undesirable by the norms of conventional society and that elicit some form of social sanctions. Problem behaviors of interest have included underage drinking, problem drinking, marijuana use, other illicit drug use, delinquent behavior, and precocious sexual behavior. Research conducted in the 1970s demonstrated that the theory could account for approximately 50% of the variance in marijuana use in both local and national sample studies. The present analyses sought to determine whether the theory continues to be relevant for the explanation of illicit drug use among contemporary American youth. Both cross-sectional and longitudinal analyses of multiple datasets collected over a 20-year period confirm its enduring validity.

Stress and Substance Abuse among adolescents

Stress may affect health by producing changes in behaviour and there is evidence that under high levels of stress, health-enhancing behaviour declines and health-threatening behaviour such as consumption of nicotine, alcohol, and other drugs may increase (Milgrom, & Burrow, 2001). Research on the mechanisms underlying drug disorders has shown that stress is one of the strongest predictors of drug use and coping mechanisms is an important factor in mediating the effects of stress on substance use (Arevalo, Prado & Amaro, 2008). Stress refers to the problems or strains that people encounter throughout life, and coping refers to the behavioural or cognitive responses that people use to manage stress (Wagner, Myers & McIninch, 1999). In simple terms, Stress also refers to the tension between the adolescent’s reaction to difficulties or challenges and his or her ability to handle and resolve the stressful situation (Russell & Mehrabian, 1975). How adolescents cope with
stress depends on the resources that are available to them and whether they have the skills to utilize these resources. According to the control theory of stress, stress is the result of the subjective evaluation of events adolescents perceives a situation as stressful and uncontrollable, and that his response capabilities do not make it possible to him to meet the demands of the situation (Atkinson, 1994).

Several studies have also shown a significant association between prevalence of mood and anxiety disorders, including post-traumatic stress disorder (PTSD), behavioural conduct problems and increased risk of substance use disorders among adolescents (Reed, 2007). As stress is significantly associated with prevalence of mood and anxiety disorders and chronic psychiatric distress. (Kessler, 2005), these associations raise the issue of whether psychiatric disorders conceptualized as chronic distress states may largely account for the significant association between stress and substance use disorders.

The types of adverse events significantly associated with addiction vulnerability among the adolescents are parental divorce or conflict, abandonment, forced to live apart from parents, loss of parent by death or removal, loss of home to natural disaster, death of a close one, emotional abuse or neglect, sexual abuse, rape, physical abuse by parent or caretaker, other violent acts, and observing violent victimization. These represent highly stressful and emotionally distressing events, which are typically uncontrollable and unpredictable in nature that may lead to substance abuse by the adolescent.

Conclusively, stress contributes to substance abuse in various ways because adolescents are compelled to find quick ways of coping with stress. Maladaptive coping is used by most adolescents who lack information on healthy ways of managing stress; they thus resort to quick yet short lived relief from stress by altering their moods by abusing substances.

**Stress and Peer Pressure among Adolescents**

Stress is a common experience that adolescents face in this stage of development. During adolescence they are faced with both positive and negative things from their parents and environment. The choices that the adolescents make in this phase are very much dependent upon the upbringing they get and expectations from family, society, and more importantly their peers. When the adolescents are unable to cope with stressful situations, they end-up themselves in the distressed state of mind. In this distressed situation, they indulge themselves in anti-social and
self-destructive activities just as their peers (Angela, 2010). (Cassey, Rebecca & Jones 2010), indicated that the adolescence is the time of storm and stress. In spite of intense and frequent negative affect, this period has been hypothesized to explain increased rates of affective disorders, suicide and accidental death.

Peer group membership assumes more importance during adolescence than at any other time of life. A peer group can provide a refuge and a source of support for youngsters in conflict with their families (Clifford, 2011). Adolescents spend great deal of time with other adolescents more than they would with their parents.

In the absence of family support adolescents seek refuge in peer groups. They feel that peer group satisfy their needs. According to (Morgan, 2011), adolescents move from small unisex groups to larger groups and then towards opposite sex. These may be trying times because an adolescent is trying to establish his identity within the group and the same time hierarchy practiced in the groups would lead to developing leadership skills (Daniel, 2007).

Apart from positive and supportive functions, relationships with peers and friends also harbour a potential source of stress. One major concern of adolescents is being rejected by their peers, which is reported by over half of adolescents as the major stressor related to the peer context (Reich, 2012). The function and significance of relationships with friends also change, and the peer group assumes an important role in the lives of adolescents. Furthermore, the emergence of more intimate friendships alongside commonly shared activities spark conflicts in exclusive, dyadic friendships (Doyle, 2009) which have been linked to issues such as similarity, intimacy, and self-disclosure (Reich & Thomas, 2012).

The significance of friends and the peer groups may also vary across cultures. In Western cultures, among the main functions of interaction in peer groups are to fulfil individual needs such as identity development and experiencing companionship, mutuality, and intimacy in close friendships and to serve as a training ground for the initiation of romantic affairs (Hafen, 2010)

Research overall and across regions reveals that adolescents perceive problems with parents to be more stressful than problems with peers (Georgas, 2006). In addition, adolescents from countries assigned to one region share high similarity in this basic pattern as based on regional grouping, adolescents perceived problems with parents to be more stressful than problems with peers (Wong, 2006).
It is concluded that there is a strong relationship between stress and peer pressure among adolescents. It is evident that most adolescents who face stressful situations in their lives seek out peer groups for support and likewise, the adolescents who are submissive to the frustration that comes with peer pressure end up being stressed and this can result into substance abuse as a coping mechanism (Kabuka & Ochola, 2010).

Peer Pressure and Substance Abuse among adolescents

The prevalence of alcohol-based social opportunities on campus contributes to the potency of peer influence on the adolescent’s attitudes and behaviours. Alcohol is a prominent part of the college culture, present at most social functions and part of many peer interactions (Thomas, 2009). Most students begin drinking alcohol by the time they arrive at college and many view college as a place to drink excessively, in a time limited fashion, before assuming the responsibilities of adulthood. Therefore because peers are the most salient social referents in the college environment and they are a potent influence on alcohol use, most new acquaintances at college will be drinkers (Johnston, 2000). Peers play a considerable role in the development and maintenance of alcohol use in college adolescent students through the development of a peer network on campus and as a result they immerse themselves in the social environment and therefore exposure to such drinking often leads to increased alcohol use putting students residing in places where heavy drinking is approved and alcoholic beverages are readily available to drink heavily (Wechsler, Lee, Kuo, & Lee, 2000).

Research disentangles peer pressure into three dimensions: active offers of alcohol, modelling of others’ drinking and perceived drinking norms (Borsari & Carey, 2001; Crawford & Novak, 2007). Active offers of alcohol may be the most obvious and direct form of peer pressure. These offers range from a simple gesture to highly encouraging a peer to drink (Borsari & Carey, 2001). Some examples include being offered a drink, being bought a drink, or having your drink refilled without asking (Wood, Read, Mitchell & Brand, 2004). Explicit offers are more prominent for those students who attend parties and decide not to drink and are seen as “abnormal” that is they considered the unit group from the rest of the college community.

The second dimension is the modelling of others drinking, and is defined as a temporary imitation of peer’s behaviours (Borsari & Carey, 2001). College students often imitate the level of drinking of the peer within their immediate environment that is drinking of the heaviest and is the most sociable.
Thirdly, perceived drinking norms influence a college student’s level of drinking through the observation and comparison of their peers drinking levels. Peers through their own actions, may provide information about what behaviours are accepted and admired, what is considered appropriate in a given social context, and therefore what behaviours are likely to lead to social acceptance and reinforcement (Schall, Kemeny, & Maltzman, 2007).

Adolescent peers can exert their influence on alcohol use by actively shaping drinking behaviour and a more cognitively based social influence processes, therefore peer influence is clearest in overt drinking offers, drinking modelling, and local drinking norms among the adolescents (Borsari & Carey, 2001). Peer pressure also varies by adolescent’s characteristics including genetics, which could influence exposure to substance-using friends and personal attributes such as competency skills and perceptions of personal harm due to smoking (Epstein et al., 2007). Therefore, peer influences on smoking may be moderated by strong social bonds to school and family (Ellickson, Perlman, Klein, 2003).

In conclusion, peer pressure contributes to substance abuse among adolescents by providing an environment that influences peers into substance abuse. For example; adolescents are offered a free drug, providing information about the variety of the substances of abuse and also introducing them to several substances of abuse.

*Hypotheses*

The following hypotheses are put forward;

1. There is a significant relationship between stress and peer pressure among adolescents.
2. There is a significant relationship between stress and substance abuse among adolescents.
3. There is a significant relationship between peer pressure and substance abuse among adolescents.
CHAPTER THREE: METHODOLOGY

Introduction

Methodology refers an umbrella term used to describe any system of methods, collection of principles and rules of a procedure which are used within a specific discipline (Babbie, 2010). This chapter describes the study design, sample design, data collection instruments, procedures that were followed, data management and data analysis.

Study design

A quantitative correlation research is a type of non-experimental method, in which a researcher measures two variables, understands and assesses the statistical relationship between them with no influence from any extraneous variable. It was used to examine the relationship between, stress and peer pressure, stress and substance abuse, peer pressure and substance abuse among the adolescents.

Population

The population included both males and female adolescents from Luzira parish located in Nakawa Division, south east of Kampala district. The area is densely populated it has many adolescents from all walks of life who are prone to substance abuse.

Sample design

The study focused on adolescents at risk of substance abuse, vulnerable to peer pressure which is brought about by stress. Adolescents aged between 13-20 years were targeted. With an estimated population of over 10,000 schooling adolescents a sample size of 412 respondents was selected. A simple random sample was used. It is the most popular method for choosing a sample among population for a wide range of purposes. In simple random sampling each member of population is equally likely to be chosen as part of the sample (Saunder&Thornhill, 2012). It has been stated that “the logic behind simple random sampling is that it removes bias from the selection procedure and should result in representative sample. It is also of a merit because the large sample frame is available, and this makes it easy in forming the sample group that is to say selecting samples is one
of the main advantages of simple random sampling. It is also of an advantage because Research findings resulting from the application of simple random sampling can be generalized due to representativeness of this sampling technique and a little relevance of bias. (Gravette & Forzano, 2011)

Though it has also its disadvantages such as its application requires a list of all potential respondents (sampling frame) to be available beforehand and this can be costly and time-consuming for large studies. Therefore, this technique was used to counter the changes in the phenomena being studied it was also convenient and gave equal chances of participation to the population. Therefore only those respondents who were willing to participated were considered, selected and included in the study.

Research Instrument

A purpose constructed self- administered questionnaire with four sections was used to collect data. Section A contained the bio data of respondents, Section B measured stress of the respondents, Section C measured the influence of peer pressure on the respondents and Section D measured the influence of substance abuse on respondents. Data be coded to classify responses into meaningful categories in order to bring about essential patterns. Responses were coded as follows;

For Stress: Strongly agree = 4, Agree = 3, Disagree = 2 and strongly disagree = 1
For Peer pressure: Strongly agree = 4, Agree = 3, Disagree = 2 and strongly disagree = 1
For Substance abuse: Strongly agree = 4, Agree = 3, Disagree = 2 and strongly disagree = 1

The information acquired from respondents was entirely used for academic purposes.

The Questionnaires are well kept so as to maintain confidentiality of the information

Quality control

Validity

Validity of research can be explained as an extent at which requirements of scientific research method have been followed during the process of generating research findings. Oliver (2010) considers validity to be a compulsory requirement for all types of studies. There are different forms of research validity and main ones are specified by (Cohen, 2007) as content validity, criterion-related validity, construct validity, internal validity, external validity, concurrent validity
and face validity. The content validity of the instruments was used to obtain the validity of the instruments it helped in conforming with the study conceptual framework.

Reliability is a concern every time a single observer is the source of data, because we have no certain guard against the impact of that observer’s subjectivity (Babbie, 2010). According to Wilson (2010) reliability issues are most of the time closely associated with subjectivity and once a researcher adopts a subjective approach towards the study, then the level of reliability of the work is going to be compromised. The accepted reliability of the questionnaire for cronbach alpha value/score should not be less than 0.70 (Amin, 2007). In this regard, reliability analysis was undertaken for each scale. the following is the cronbach alpha scores namely .76 for stress, .79 for peer pressure and .82 substance abuse were obtained, since the scores are above .70, they are considered to be unreliable.

Procedure

A letter of introduction obtained from Makerere University School of Psychology was presented to the administrator of Luzira secondary school seeking permission to carry out the survey in the school. Purposive sampling and non-random sampling was used to identify respondents and data collected using a purposive constructed questionnaire with confidentiality assured to the respondents.

Data Analysis

Data was edited coded then put entered into the computer. It was analysed using a Statistical Package for Social Sciences (SPSS Version 21) used to analysed data was summarized into frequencies and percentages. Pearson Correlation Coefficient (r) was used to determine the significance of the hypothesis 1, 2 and 3.

Ethical consideration

Before engaging the respondents in the study, their consent was sought. Then this was followed by explaining to the respondents the purpose of the study and how they would benefit from it. Confidentiality was assured and questionnaires were issued to only those who were willing to respond to them. No one was forced to participate in the study. Verbal consent was sought before collecting data. Respondents were free to exit without any restrictions at their own free will.
CHAPTER FOUR: RESULTS

Introduction

This chapter presents and interprets the results from data analysis. The data presented includes both the descriptive information about the respondents’ demographic characteristics in frequencies and percentages, and inferential statistics of Pearson’s correlation between stress, peer pressure and substance abuse among adolescents.

Bio-data

Respondents were required to indicate their gender, age, class and religion. The results were obtained and computed into frequencies and percentages as shown in Table 1.

Table 1: Bio-data of Respondents

<table>
<thead>
<tr>
<th>Variables</th>
<th>Levels</th>
<th>Frequency (N)</th>
<th>Valid Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gender</td>
<td>Male</td>
<td>196</td>
<td>47.6</td>
</tr>
<tr>
<td></td>
<td>Female</td>
<td>216</td>
<td>52.4</td>
</tr>
<tr>
<td>Age</td>
<td>13-15 years</td>
<td>186</td>
<td>45.1</td>
</tr>
<tr>
<td></td>
<td>16-20 years</td>
<td>226</td>
<td>54.9</td>
</tr>
<tr>
<td>Class</td>
<td>O-Level</td>
<td>354</td>
<td>85.9</td>
</tr>
<tr>
<td></td>
<td>A-Level</td>
<td>58</td>
<td>14.1</td>
</tr>
<tr>
<td>Religion</td>
<td>Moslems</td>
<td>56</td>
<td>13.5</td>
</tr>
<tr>
<td></td>
<td>Catholics</td>
<td>144</td>
<td>35.0</td>
</tr>
<tr>
<td></td>
<td>Protestants</td>
<td>142</td>
<td>34.5</td>
</tr>
<tr>
<td></td>
<td>Others</td>
<td>70</td>
<td>17.0</td>
</tr>
</tbody>
</table>

Table 1 shows that majority of respondents were female (52.4%). The findings imply that most of the adolescents who were willing to participate in the study were female. With regard to age, most respondents were between 16-20 years (54.9%), followed by 13-15 years respondents at 45.1%. Findings on religion show that majority of respondents were Catholics (35.0%), followed by Anglicans (34.5%), and while others took on (17%), Moslems respondents contributed (13.5%) each.
The following are the results for respondents who measured for stress in table 2 below

Table 2: Frequencies of respondents’ stress

<table>
<thead>
<tr>
<th>Items</th>
<th>Strongly Agree N(%)</th>
<th>Agree N (%)</th>
<th>Disagree N (%)</th>
<th>Strongly Disagree N (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>In the last one month, I have been upset because of something</td>
<td>99 (24.0)</td>
<td>106 (25.7)</td>
<td>120 (29.1)</td>
<td>87 (21.1)</td>
</tr>
<tr>
<td>that happened unexpectedly</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>In the last one month, I often felt nervous and stressed</td>
<td>106 (25.7)</td>
<td>124 (30.1)</td>
<td>101 (24.5)</td>
<td>81 (19.7)</td>
</tr>
<tr>
<td>In the past one month, I have not felt confident about my ability to</td>
<td>86 (20.9)</td>
<td>123 (29.9)</td>
<td>99 (24.0)</td>
<td>104 (25.2)</td>
</tr>
<tr>
<td>handle my personal problems</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I have often felt that things are not going my way</td>
<td>110 (26.7)</td>
<td>144 (35.0)</td>
<td>90 (21.8)</td>
<td>68 (16.5)</td>
</tr>
<tr>
<td>I often feel I could not cope with all the things I have to do</td>
<td>81 (19.7)</td>
<td>115 (27.9)</td>
<td>110 (26.7)</td>
<td>106 (25.7)</td>
</tr>
<tr>
<td>In the last month, I have felt unable to control important things in</td>
<td>70 (17.0)</td>
<td>106 (25.7)</td>
<td>118 (28.6)</td>
<td>118 (28.6)</td>
</tr>
<tr>
<td>my life</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I have been unable to control irritations in my life</td>
<td>58 (14.1)</td>
<td>82 (19.9)</td>
<td>143 (34.7)</td>
<td>129 (31.3)</td>
</tr>
<tr>
<td>In the last one month, I have often felt that I’m on top of things</td>
<td>56 (13.6)</td>
<td>86 (20.9)</td>
<td>128 (31.1)</td>
<td>142 (34.5)</td>
</tr>
<tr>
<td>I have often been angered by things that are outside my control</td>
<td>111 (26.9)</td>
<td>108 (26.2)</td>
<td>94 (22.8)</td>
<td>99 (24.0)</td>
</tr>
<tr>
<td>In the last one month, I have often felt difficulties piling up so</td>
<td>108 (26.2)</td>
<td>101 (24.5)</td>
<td>110 (26.7)</td>
<td></td>
</tr>
<tr>
<td>high that I could not overcome them</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Results in Table 2, (24.0%) of the respondents strongly agree that they have been upset because of something that happened unexpectedly in the past one month while (21.1%) strongly
disagreed. (25.7%) agreed while (29.1%) disagreed. (29.9%) agree to not having the ability to cope with their personal problems in the past one month while (24.0%) disagree to the same.

Additionally, (27.9%) of the respondents agree to often feel like they could not cope with all the things that they have to do while (26.7%) of the respondents disagree. (26.9%) of the respondents strongly agree to have often been angered by things that are outside their control yet (24.0%) strongly disagree. (26.2%) strongly agree to have had difficulties piling so high in the past one month and they felt unable to overcome them while (22.6%) strongly disagree.

Furthermore, results in Table 2 show that many of the respondents agreed that they experience stress with (30.1%) of them reporting to have often felt nervous and stressed in the past one month. It should be noted that (35.0%) have often felt that things are not going their way.

The following are the results for respondents who were able to measure peer pressure scale in table 3

<table>
<thead>
<tr>
<th>Items</th>
<th>Strongly agree N (%)</th>
<th>Agree N (%)</th>
<th>Disagree N (%)</th>
<th>Strongly disagree N (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>My peers are my greatest role models</td>
<td>45 (10.9)</td>
<td>57</td>
<td>123 (29.9)</td>
<td>187 (45.4)</td>
</tr>
<tr>
<td>What my peers say always reflects my opinion</td>
<td>39 (9.5)</td>
<td>103</td>
<td>123 (29.9)</td>
<td>147 (35.7)</td>
</tr>
<tr>
<td>My peers are drug users and they encourage me to smoke and drink alcohol</td>
<td>15 (3.6)</td>
<td>16</td>
<td>66 (16.0)</td>
<td>315 (76.5)</td>
</tr>
<tr>
<td>They argue that using drugs is the best way to release stress</td>
<td>22 (5.3)</td>
<td>19</td>
<td>83 (20.1)</td>
<td>288 (69.9)</td>
</tr>
<tr>
<td>I sometimes say things I don’t really believe because I think it will make my friends respect me</td>
<td>53 (12.9)</td>
<td>82</td>
<td>116 (28.2)</td>
<td>161 (39.1)</td>
</tr>
<tr>
<td>I usually go out with my friends without my parents’ permission</td>
<td>47 (11.4)</td>
<td>38</td>
<td>102 (24.8)</td>
<td>225 (54.6)</td>
</tr>
<tr>
<td>I often do things that I know are wrong just to please my friends</td>
<td>41 (10.0)</td>
<td>48</td>
<td>97 (23.5)</td>
<td>225 (54.6)</td>
</tr>
</tbody>
</table>
I take more risks when I’m with my friends than I do when I’m alone

<table>
<thead>
<tr>
<th>Statement</th>
<th>Agree (%)</th>
<th>Strongly Agree (%)</th>
<th>Disagree (%)</th>
<th>Strongly Disagree (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>My peers encourage me to dodge classes and class work</td>
<td>24 (5.8)</td>
<td>27</td>
<td>68 (16.5)</td>
<td>293 (71.1)</td>
</tr>
<tr>
<td>My peers are the only ones who can convince me to change my mind about some things</td>
<td>49 (11.9)</td>
<td>76</td>
<td>100 (24.3)</td>
<td>187 (45.4)</td>
</tr>
<tr>
<td>My peers encourage me to fight, go to night clubs without informing my parents</td>
<td>21 (5.1)</td>
<td>20</td>
<td>55 (13.3)</td>
<td>316 (76.7)</td>
</tr>
<tr>
<td>I would break the law if my friends say they would</td>
<td>30 (7.3)</td>
<td>26</td>
<td>82 (19.9)</td>
<td>274 (66.5)</td>
</tr>
</tbody>
</table>

Results in Table 3 show that majority of the adolescents strongly deny having peer pressure. However, there is a small percentage of the respondents that strongly agrees to have frequently scammed to peer influence with (12.9%) doing things just to earn the respect and approval of their peers and (14.9%) strongly agree to take more risks when they are with friends than when they are alone.

Additionally, (45.4%) of the respondents strongly disagree to having their peers as their greatest role models, (29.9%) disagree while (13.8%) agree and (10.9%) strongly agree that their peers are their strongest role models. (54.6%) strongly disagree to going out with their peers without their parents’ permission, (24.8%) disagree (9.2%) agree and (11.4%) strongly agree.

The Table 3 also indicates that (66.5%) of the respondents strongly disagree to breaking laws if their friends said they would, (19.9%) disagree while (6.3%) agree and (7.3%) strongly agree that they can break laws if their peers say that they would do the same. (71.1%) of the respondents strongly disagree that their peers encourage them to dodge classes and class work while only (5.8%) of the respondents strongly agree.
The following are the results for the respondents who measured for substance abuse in table 4 below

**Table 4: Frequencies of the respondents Substance Abuse**

<table>
<thead>
<tr>
<th>Items</th>
<th>Strongly Agree N (%/</th>
<th>Agree N (%)</th>
<th>Disagree N (%)</th>
<th>Strongly Disagree N (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>I have used drugs other than those prescribed for medical purposes</td>
<td>25 (6.1)</td>
<td>21 (5.1)</td>
<td>64 (15.5)</td>
<td>302 (73.3)</td>
</tr>
<tr>
<td>I used more than one drug at a time</td>
<td>28 (6.8)</td>
<td>17 (4.1)</td>
<td>80 (19.4)</td>
<td>287 (69.7)</td>
</tr>
<tr>
<td>I cannot get through the week without using drugs</td>
<td>17 (4.1)</td>
<td>13 (3.2)</td>
<td>65 (15.8)</td>
<td>317 (76.9)</td>
</tr>
<tr>
<td>I feel good when I abuse drugs like alcohol, Cuba</td>
<td>42 (10.2)</td>
<td>21 (5.1)</td>
<td>66 (16.0)</td>
<td>281 (68.2)</td>
</tr>
<tr>
<td>I have blackouts as a result of using drugs</td>
<td>16 (3.9)</td>
<td>19 (4.6)</td>
<td>82 (19.9)</td>
<td>295 (71.6)</td>
</tr>
<tr>
<td>I have lost friends as a result of using drugs</td>
<td>37 (9.0)</td>
<td>26 (6.3)</td>
<td>71 (17.2)</td>
<td>278 (67.5)</td>
</tr>
<tr>
<td>My family has ever neglected me because of drug use</td>
<td>25 (6.1)</td>
<td>27 (6.6)</td>
<td>64 (15.5)</td>
<td>296 (71.8)</td>
</tr>
<tr>
<td>I feel bad / guilty about my drug use</td>
<td>275 (66.7)</td>
<td>62 (15.0)</td>
<td>29 (7.0)</td>
<td>46 (11.2)</td>
</tr>
<tr>
<td>I have been punished for abusing drugs</td>
<td>25 (6.1)</td>
<td>32 (7.8)</td>
<td>58 (14.1)</td>
<td>297 (72.1)</td>
</tr>
<tr>
<td>I have ever involved myself in criminal acts in order to obtain drugs</td>
<td>29 (7.0)</td>
<td>21 (5.1)</td>
<td>58 (14.1)</td>
<td>304 (73.8)</td>
</tr>
<tr>
<td>I have experienced withdrawal symptoms/ side effects when I stopped taking drugs</td>
<td>29 (7.0)</td>
<td>20 (4.9)</td>
<td>59 (14.3)</td>
<td>304 (73.8)</td>
</tr>
<tr>
<td>In the last one month, I have used substances like alcohol</td>
<td>19 (4.6)</td>
<td>20 (4.9)</td>
<td>51 (12.4)</td>
<td>322 (78.2)</td>
</tr>
</tbody>
</table>
Table 4 shows that (10.2%) of the adolescents feel good when they abuse drugs like Cuba and (7.0%) of them have gone as far as indulging in criminal acts in order to attain these drugs. However, (66.7%) of the respondents strongly agree that they feel bad/ guilty about drug use while (11.2%) strongly disagree.

The table also indicates that (78.2%) of the respondents strongly disagree to having used substances like alcohol in the past one month, (12.4%) disagree while (4.9%) agree and (4.6%) strongly disagree.

**Hypotheses testing**

To determine the significance of the relationships, Pearson’s Correlation coefficient (r) was used. The findings are shown in Table 5.

**Table 5: Correlation results**

<table>
<thead>
<tr>
<th></th>
<th>Stress</th>
<th>Peer Pressure</th>
<th>Substance Abuse</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stress</td>
<td>r</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>N</td>
<td></td>
</tr>
<tr>
<td>Peer Pressure</td>
<td>r</td>
<td>.330**</td>
<td>X</td>
</tr>
<tr>
<td></td>
<td></td>
<td>N</td>
<td>412</td>
</tr>
<tr>
<td>Substance Abuse</td>
<td>r</td>
<td>.167**</td>
<td>.402**</td>
</tr>
<tr>
<td></td>
<td></td>
<td>N</td>
<td>412</td>
</tr>
</tbody>
</table>

** Correlation is significant at the 0.01 level (2-tailed).

Hypothesis One (H₁): The first hypothesis stated that there is a significant relationship between stress and peer pressure among the adolescents. Results in Table 5 indicate that there is a significant relationship between stress and peer pressure among adolescents (r= .330**, p=.000<0.01). Therefore, the alternative hypothesis is retained and it is concluded that there is a significant relationship between stress and peer pressure among adolescents.

Hypothesis Two (H₂): The second hypothesis stated that there is a significant relationship between stress and substance abuse among adolescents. Results in Table 5 show that there is a significant relationship between stress and substance abuse among adolescents. (r= .167**,
Therefore, the alternative hypothesis is retained and it is concluded that there is a significant positive relationship between stress and substance abuse among adolescents.

Hypothesis Three (H3): The third hypothesis stated that there is a significant relationship between peer pressure and substance abuse among adolescents. The results in Table 5 show that there is a significant relationship between peer pressure and substance abuse among adolescents. (r=.402**, p=.000<0.01). Therefore, the alternative hypothesis is retained and it is concluded that there is a significant relationship between peer pressure and substance abuse among adolescents.
CHAPTER FIVE: DISCUSSION, CONCLUSION AND RECOMMENDATIONS

Introduction

This chapter entails the discussion in relation to research findings and in accordance with the hypotheses. It also presents a conclusion and recommendations in line with the purpose and objectives of the study.

Discussion

Stress and Peer Pressure among Adolescents

The first alternative hypothesis (H₁) stated that there is a significant relationship between stress and peer pressure among adolescents. The findings of the study revealed that there is a significant relationship between stress and peer pressure among adolescents.

This could be attributed to the absence of social support especially the support of the significant others (family members) during transitional times like the adolescent stage. When adolescents feel neglected or not cared for by their family members or by the significant others, they tend to drift towards the peer groups. According to Clifford (2011), a peer group can provide a refuge and a source of support for youngsters in conflict with their families.

The lack of life skills like assertiveness, effective communication, decision making and stress management skills has also caused depression, isolation and low self-esteem among the adolescents which has increased frustration and thus causing the adolescents to seek out peer groups in order for them to have a sense of belonging and acceptance. Therefore a group of “losers” would stop at nothing but to match up to the self-fulfilling prophecy and they would thus indulge in all kinds of behaviours including substance abuse.

Additionally, the findings may be due to the view that when the adolescents are unable to cope with stressful situations, they end-up in a distressed state of mind. In this distressed situation they indulge themselves in anti-social and self-destructive activities just as their peers (Angela, 2010).

Furthermore, the findings are also in agreement with Drake, Fox, and Barlow et al, (2003), who found that social support provided by friends, relatives as well as family involvement are positive factors in reducing substance use and stress among adolescents since they feel that they are valued by the people they live or spend time with.
The findings also agree with a study conducted by (Clifford, 2011) who revealed that peer group membership assumes more importance during adolescence than at any other time of life. A peer group can provide a refuge and a source of support for youngsters in times of distress in their predicaments. The latter further noted that adolescents spend a great deal of time with other adolescents more than they would with their parents when they are stressed.

In conclusion therefore, there is a significant relationship between stress and peer pressure. The results indicated that adolescents who exhibit stress also exhibit low resistance to peer pressure and this usually leads them into substance abuse.

**Stress and Substance Abuse among Adolescents**

The second alternative hypothesis (H1) stated that there is a significant relationship between stress and substance abuse among adolescents. The results of the study indicated that there is a significant relationship between stress and substance abuse among adolescents.

The study findings indicate that adolescents who experience stress abuse substances in order to cope with stress. But it is also true that adolescents who abuse substances are stressed especially when they fail to acquire the substance in question. Therefore, stress is considered to be a major contributor to the initiation and continuation of substance use as well as to relapse. However, some adolescents have got a resilient personality which enables them to cope with stressful situations in better ways other than substance abuse.

Additionally, the results can also be attributed to the intense media publicity of the potential substances of abuse. The media presents substances like alcohol and cigarettes as fashionable and cool. Besides, the movies and the adverts made on some beers makes them appear like a must try and many of the adolescents pick interest in them just because of the way the media presents them. In the media, stressed characters are presented as feeling better after abusing certain substances. Therefore, the fact that adolescents have open access to media information, many of them has used this to increase their substance abuse.

Furthermore, the study findings can also be attributed to the absence of social support. Social support acts as a buffer and greatly determines coping. Adolescents who do not have enough social support from their parents, friends and relatives in most cases fail to positively handle stressful situations. This increases worries and loneliness and its then that adolescents turn to substance abuse to reduce their worries and loneliness.
More to that, the findings are in agreement with (Ann 2008) who revealed that negative life events such as loss of parent, parental divorce and conflict, low parental support, physical violence and abuse, emotional abuse and neglect, isolation and deviant affiliation, and single-parent family structure have all been associated with increased risk of substance abuse among the adolescents (Ann, 2008).

Several studies have also come to support the study findings; for example Reed. (2007) reported a significant association between prevalence of mood and anxiety disorders, including post-traumatic stress disorder (PTSD), behavioural conduct problems and increased risk of substance use disorders among adolescents.

The findings are also in agreement with Kessler (2005), who ascertained that stress is significantly associated with prevalence of mood and anxiety disorders and chronic psychiatric distress of which these associations raise the issue of psychiatric disorders conceptualized as chronic distress states largely accounting for the significant association between stress and substance use disorders.

This was also supported by (Kreek 2006), who revealed that individual adolescents respond differently to different stressors. An event that is perceived as extremely stressful by one adolescent may be perceived as harmless by another of which recent negative life events such as physical and sexual abuse each exert somewhat independent risk on addiction vulnerability.

In conclusion therefore, there is a significant relationship between stress and substance abuse among adolescents. Adolescents that have high stressing factors are most likely to abuse substances while those who also engage in substance abuse behaviours are likely to exhibit high levels of stress. When faced with stressful situations, adolescents who lack the ability to cope adaptively (resilient personality) usually escape into substance abuse. For example, in refugee camps most adolescents face adjustment challenges and adolescence in itself is a stressor which puts adolescents at risk of abusing substances most especially those who don’t have social support. The abused substances provide a temporal relief and therefore adolescents who abuse substances as a coping mechanism turn out to be addicts.
The third alternative hypothesis (H₃) stated that there is a significant relationship between peer pressure and substance abuse among adolescents. The results of the study indicated that there is a significant relationship between peer pressure and substance abuse among adolescents.

This may be attributed to the fact that some of the adolescents lack a sense of self-worth or self-esteem and they therefore seek acceptance and identification from among their peers which acceptance would require the adolescents to conform to all the behaviours and mannerism of their peers and these may include smoking and drinking. Failure to conform to these behaviours leads to rejection, thus because the adolescents fear being lonely they therefore succumb to peer pressure. This kind of peer influence is very common in schools more than anywhere else.

Additionally, with previous research findings which disclose how peers act as an influential models introducing, providing or pressuring risky activities such as alcohol use to other peers confirms the role of peer pressure in substance abuse. By modelling these behaviours to their peers, college students are viewing alcohol use as a positive and socially acceptable experience (Kinard & Webster, 2011).

Furthermore, the findings are in agreement with various researchers (Santor, Messervey, &Kusumakar, 2000) who revealed that peer pressure, or the direct or indirect encouragement from one’s own age group to engage in activities that they may or may not want to engage in is a major factor in the development of risk taking behaviours such as alcohol and drug use with in the peer group.

This research is also in convergence with researchers such as Webster and Kinard who found out that peers play a considerable role in the development and maintenance of alcohol use in college adolescent students. This is through the development of a peer network on campus and as a result they immerse themselves in the social environment and therefore exposure to such drinking often leads to increased alcohol use putting students residing in places where heavy drinking is approved and alcoholic beverages are readily available to drink heavily (Wechsler, Lee, Kuo, & Lee, 2000).

The findings are also in agreement Borsari and Carey et al., (2001) who found that active offers of alcohol may be the most obvious and direct form of peer pressure. These offers range from a simple gesture to highly encouraging a peer to drink including being offered a drink, being bought a drink, or having your drink refilled without asking.
In some instances, negative peer pressure may compel adolescents to engage in substance abuse and other risky behaviours. Peers through their own actions, may provide information about what behaviours are accepted and admired, what is considered appropriate in a given social context, and therefore what behaviours are likely to lead to social acceptance and reinforcement (Schall, Kemeny, & Maltzman, 2007).

It is therefore concluded that there is a significant relationship between peer pressure and substance abuse among the adolescents. Peer pressure significantly leads to substance abuse among adolescents, peers are involved in the personal lives of their colleagues and they influence their behaviour by providing persuasive information, free drugs and they act as models for their fellows who observe, imitate and retain the risky behaviours (substance abuse) and perceived drinking norms influence a college student’s level of drinking through the observation and comparison of their peers drinking levels.

**Conclusion**

The study findings indicate that there is a significant relationship between stress and peer pressure among adolescents. This is attributed to the lack of life skills, lack of a resilient personality and also the absence of social support that prompts the adolescents to seek the company of their peers which company requires conformity in order to be accepted. In addition, the study findings revealed that there is a significant relationship between stress and substance abuse among adolescents. This is because, when faced with stressful situations, adolescents who lack the ability to cope adaptively usually escape into substance abuse, but because the abused substances provide a temporal relief the adolescents who abuse substances as a coping mechanism turn out to be addicts. Furthermore, the study findings indicated that there was a significant relationship between peer pressure and substance abuse among adolescents. This is because adolescents who scam so much to peer pressure are most likely to engage themselves into risk taking behaviours like substance abuse.

**Recommendations**

Adolescents should be mentored by their teachers and role models in society about the appropriate ways of behaving in society. This may equip adolescents with knowledge about the dangers of substance use and knowledge on how to ask for help and support from their neighbours.
It is important for academic institutions and communities where adolescents come from to devise intervention methods to reduce the negative impact of peer pressure upon substance use and abuse among school-going adolescents. Knowing that they are valued by others is an important psychological factor in helping them to forget the negative aspects of their lives, and thinking more positively about their environment.

Caretakers of adolescents should be encouraged to provide adequate support to their children while still young. This will make them feel loved and cared for and it will also reduce a feeling of judgment that they have thus this will be reducing any chances for them to get distressed thus making their way to a peer group. Social support not only helps improve adolescent's well-being, it improves their immune system as well (Stice, Ragan, & Randall, 2004).

Adolescents who have issues with their self-esteem should be helped by giving them inspirational talks from resourceful persons in the community like counsellors. This may be a source of encouragement to such adolescents and it may also help them to be resilient despite the violent difficulties that they go through.

Furthermore, counselling should be provided to children both at home and in schools. Thus, if this is done by counsellors it will improve the adolescents’ psychological well-being and they will be able to overcome any stressors in life and this would still help to empower adolescents to stay strong and withstand negative behaviours such as negative peer influence that happens in their lives that may drug them into abusing substances.

Areas of Further Research

This study focused on stress, peer pressure and substance abuse among Adolescents: Perceived social support, parental monitoring and substance abuse among adolescents, parental role in the adolescent’s school performance are areas worth being researched about. This is pointed out because while collecting data, I found out that the stress that leads adolescents to be easily taken by peer influence and abuse substances starts all the way from home.

Though a lot of research about the adolescents has been explored, special attention should be directed to the adolescents in refugee camps. Their challenges are evident and research about stress and substance abuse among refugee adolescents hasn’t been widely explored yet.
Limitations of the study

The study was carried out in Luzira community, at Luzira secondary school. This implies that the study findings cannot be generalised to the out–school adolescents let alone the adolescents from other communities. Respondents were randomly chosen and a sample of 412 respondents participated in the study. That population compared to the total population of adolescents in Uganda, generalisation of the study findings to this entire population would be very unrealistic. Other than stress and peer pressure, there are other factors that contribute to the increasing social problem of substance abuse like social learning, parenting styles among others which factors were not included in the study. This means that the increased abuse of substances cannot be attributed to stress and peer pressure alone.
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APPENDICES

Appendix 1: Questionnaire

RESEARCH QUESTIONNAIRE

Dear respondent:

I am Bwire Timothy Wandera a third year student of Makerere University Bachelor of Community Psychology carrying out a study on “stress, peer pressure and substance abuse among Adolescents in Luzira community”. The information you give will remain confidential and shall not be disclosed or used against you but strictly for research purposes.

INSTRUCTIONS:

1. Simply tick the appropriate box.
2. There is no wrong and correct answer.
3. Every response you give is very useful.
4. You are requested to be faithful by ticking what exactly applies to you.

The questionnaire has four sections, that is A, B, C and D.

Section A: Bio-data

1. Sex
   a) Male □  
b) Female □

2. Age group
   a) 11-14 years □  
b) 15-18 years □

3. Class
   a) O level □  
b) A. Level □

4. Religion
   a) Moslem □  
b) Catholic □  
c) Protestant □
   e) Others specify………………………………..
## Section B: Stress

<table>
<thead>
<tr>
<th>Items</th>
<th>Strongly agree</th>
<th>agree</th>
<th>Disagree</th>
<th>Strongly disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. In the last one month, I have been upset because of something that happened unexpectedly</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. In the last one month, I often felt nervous and stressed</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. In the past one month, I have not felt confident about my ability to handle my personal problems</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. I have often felt that things are not going my way</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. I often feel I could not cope with all the things I have to do</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. In the last month, I have felt unable to control important things in my life</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. I have been unable to control irritations in my life</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. In the last one month, I have often felt that I’m on top of things</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9. I have often been angered by things that are outside my control</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10. In the last one month, I have often felt difficulties piling up so high that I could not overcome them</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Section C: Peer Pressure

<table>
<thead>
<tr>
<th></th>
<th>Items</th>
<th>Strongly agree</th>
<th>Agree</th>
<th>Disagree</th>
<th>Strongly disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>My peers are my greatest role models</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>What my peers say always reflects my opinion</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>3</td>
<td>My peers are drug users and they encourage me to smoke and drink alcohol</td>
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<td>4</td>
<td>They argue that using drugs is the best way to release stress</td>
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<td>5</td>
<td>I sometimes say things I don’t really believe because I think it will make my friends respect me</td>
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<tr>
<td>6</td>
<td>I usually go out with my friends without my parents’ permission</td>
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<td>7</td>
<td>I often do things that I know are wrong just to please my friends</td>
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<tr>
<td>8</td>
<td>I take more risks when I’m with my friends than I do when I’m alone</td>
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<tr>
<td>9</td>
<td>My peers encourage me to dodge classes and class work</td>
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<tr>
<td>10</td>
<td>My peers are the only ones who can convince me to change my mind about something</td>
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<tr>
<td>11</td>
<td>My peers encourage me to fight, go to night clubs without informing my parents</td>
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<tr>
<td>12</td>
<td>I would break the law if my friends say they would</td>
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</tbody>
</table>
Section D: Substance Abuse

In the questionnaire below, I am interested in your opinion on certain issues regarding substance abuse. Please tick the statement that best describes you

<table>
<thead>
<tr>
<th>Items</th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 I have used drugs other than those prescribed for medical purposes</td>
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<td>2 I used more than one drug at a time</td>
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<td>3 I cannot get through the week without using drugs</td>
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<td>4 I feel good when I abuse drugs like alcohol, Cuba</td>
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<td>5 I have blackouts as a result of using drugs</td>
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<td>6 I have lost friends as a result of using drugs</td>
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<td>7 My family has ever neglected me because of drug use</td>
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<td>8 I feel bad / guilty about my drug use</td>
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<td>9 I have been punished for abusing drugs</td>
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<td>10 I have ever involved myself in criminal acts in order to obtain drugs</td>
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<td>11 I have experienced withdrawal symptoms/ side effects when I stopped taking drugs</td>
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<tr>
<td>12 In the last one month, I have used substances like alcohol</td>
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</tbody>
</table>

END