Social Support, Self-Esteem and Substance Abuse among Adolescents

Martina Amito

19/U/6279/PS

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Declaration

I, Martina Amito, hereby declare that this dissertation titled "Social Support, Self-Esteem and Substance Abuse among Adolescents is my original work and that it has never been submitted to any University, college or institution of higher learning for any academic award.

Signature: ....   Date: ..24ᵗʰ..|.NOV.|.22...

Martina Amito

19/U/6279/PS

Approval

This dissertation titled "Social Support, Self-Esteem and Substance Abuse among Adolescents" has been under my supervision and is ready for submission with my approval as the University Supervisor.

Signature: .... Date: 24|11|2022

Mr Mwase Patrick

Supervisor

Dedication

I   dedicate this dissertation to my parents, auntie Olivia and family, It is their continuous encouragement and support that kept me focused. Thus, this research project is dedicated to them with much love. May the Almighty reward you all abundantly.

Acknowledgement

I would like to extend my appreciation and gratitude to the Almighty God for giving me courage and hope to carry on and finish this dissertation. In addition, I would like to also acknowledge the following people who played their different individual parts in this study;

My supervisor, for guidance, time, support and patience, my family who gave me motivation and financial support to continue with this study,my best friend (Merisha) and colleagues for their support, encouragement and perseverance,my editor, for editing and proofreading my work.

 I thank you all.

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Abstract

The study aimed at establishing the relationship between social support, self-esteem and substance abuse among adolescents. The study targeted 92 adolescents, 53 males and 39 females aged aged 12-19years from Katanga slums and a qualitative research design; correlational method was adopted to establish the relationship between the variables. A constructed self-administered questionnaire was used to collect data from the 92 respondents. Collected data was analyzed using Statistical package for social sciences (SPSS Version, 24) and Pearson Correlation Coefficient (r) was used to test the level of significance of the hypotheses. Results showed that there is no significant relationship between social support and self-esteem ($r = -.204$ and $p > 0.05$), self-esteem and substance abuse are also no significantly related ($r = .013$, $p > 0.05$), Results also revealed that Substance abuse is significantly related to social support among adolescents.

Chapter One

Introduction

Background

Adolescence is a period of development from the onset of puberty to the attainment of adulthood. An adolescent is an individual 11 and 19 years of age Takano,Fukasawa, Watanabe, Nishi, & Kawakami, 2021). It is at this age when a maltitude of people get involved in permisive behavior, substance abuse being an example of this behavior.

Adolescent drug use has grown to be a serious global public health and social issue (Peres, Macpherson , Weyant, Daly, Venturelli & Mathur, 2019). The World Drug Report indicates that there is an increase in youth use of both legal and illegal substances worldwide. For youth aged 10 to 24 worldwide, illicit drug use accounts for 2% of cause-specific disability adjusted life years (Peacock, Leung, Larney, Colledge, Hickman, Rehm, Giovino, West, Hall & Griffiths 2018) According United Nations report(2013), around 37 million people in Africa were suspected to use illegal substances (Gobbi, Atkin, Zytynski, Wang, Askari, Boruff, Ware, Marmorstein, Cipriani & Dendukuri 2019). According to a study on the Rapid Situation Assessment of Drug and Substance Abuse in Kenya, 11.7 percent of youth aged 15 to 24years in East Africa used drugs, with alcohol accounting for 6.2 percent of those users, tobacco for 4.7 percent, "miraa" for 4.7 percent, and cannabis for 1.5 percent The increased cases of substance abuse can be attributed to the lack of social support to the adolescents (Turner, Shattuck, Finkelhor, & Hamby, 2017).

Social support is a broad construct that can be from family members, peers, or even the community members (Kim, 2017). Some of the people considered social support for example the peers are some of the reasons that adolescents are involved in substance abuse in the first place (Cole, Nick, Zelkowitz, Roeder & Spinelli, 2017) On the other hand, adolescents without adequate social support may not have this guidance while growing up; they may not have any

one to tell them about the dangers of engaging in substance abuse and are therefore prone to engage in the act unlike those with adequate social support (Camara, Bacigalupe, & Padilla, 2017). Adequate social support can protect an adolescent from stressful life Essen and Gundogdu (2010). Further research reveals that often times, adolescents with little or no appropriate social support get trapped and hooked into substance abuse (Karaer & Akdemir, 2019). Another factor that substance abuse is attributed to is self-esteem.

In addition, adolescents with a low self-esteem are highly likely to fall victim of substance abuse since they look at themselves as inadequate and they to use the effects of substances to feel adequate enough among other people (Baikiliza, 2019). In addition to that, many adolescents with low self-esteem are not allowed into peer groups and engage in substance abuse as a way of coping (Lee, Seo, Torabi, Lohrmann, & Song, 2018) However, contrary to the above, even adolescents with sufficient self-esteem may get involved in substance abuse. This is because they may feel overly confident and even go against parent's rules and feel independent enough hence permissiveness.

Many adolescents who have adequate social support have a high self-esteem because they are encouraged by parents, peers and others and are rewarded for their behavior. For some adolescents however, even with adequate social support, their self-esteem levels still remain low. Social support from family and peers can be a great way to help an adolescent to overcome vices such as substance abuse. Take for example peers can be a great influence on whether an adolescent engages in substance abuse or not.

Overall, despite the various interventions to cub substance abuse for example guidance and counselling, many adolescents have continued to engage in the behavior. Consequently, it has resulted into high rates of school drop outs, increased juvenile delinquency, and also an increased number of suicide and suicide attempts among adolescents, poor academic

performance, (Gomez-Gil, Simulionyte, Balcells-Olivero, Valdes, Salamero, Guillamon & Esteva, 2019),increased insecurity in the communities since many of these adolescents resort to theft for money to purchase these drugs and other crimes like rape (Sadeh et al., 2021), among others being influenced by the dugs they use hence this research study sought to examine the relationship; between social support, self-esteem and substance abuse among adolescents.

Statement of Problem

 A large number of adolescents have been reported to engage in the use of different substances (Bachman et al., 2018). Kasirye's (2020) research in Uganda showed that about 70.1% of adolescents have been reported to use elicit substances like cocaine, marijuana, heroin nicotine among others (Gomez-Gil et al., 2019). Some of the factors that the growing substance abuse can be attributed to include; the lack of social support to these adolescents by peers (Sadeh, Miglin, Bounoua, Beckford, Estrada & Baskin-Sommers, 2021), family members as well as other members of the community since many times they are condemned instead of being talked to about the cons of substance abuse and the low self-esteem among adolescents is also one of the causes of substance abuse (Guillén et al., 2020). Many precautions and policies have been tried to put in place by school authorities as well as the Government but all these have been of no great help. This big and still growing problem has led to school drop outs (Valkov, 2018), increased crime rate in the society, early pregnancies, poor academic performance and worst of all the number of adolescents dying and committing suicide as a result of substance abuse is on a great rise (Takano et al., 2021).

Purpose of the Study

The study sought to examine the relationship between social support, self-esteem and substance abuse among adolescents.

Objectives of the Study

The study was guided by the following objectives;

1. To examine the relationship between social support and self-esteem among adolescents.

2. To establish the relationship between self-esteem and substance abuse among adolescents.

3. To examine the relationship between social support and substance abuse among adolescents.

Scope of Study

Geographical Scope

The study was conducted in a secondary school in Katanga slums,kawempe division, Kampala district targeting adolescents who are victims of substance abuse. The area is located between Mulago and Makerere University and it was be chosen because it has a large number of both in-school and out-school adolescents, several studies indicate that adolescents in the area prone to the three vices of stress, depression and substance abuse.

Contextual Scope

The study mainly focused on social support, self-esteem and substance abuse among adolescents. In this context, social support can be defined as a multidimensional construct of the psychological, and material resources available to an individual through their interpersonal relationship (Cole et al., 2017). Social support can be organized in three major categories: social embeddedness, perceived social support, and enacted support (Camara et al., 2017). Self-esteem can be described as a collection of thoughts, Feelings, emotions and experiences

which are shaped through social life process (Bartsch et al., 2017). Substance abuse is defined as a pattern of harmful use of any substance for mood altering purposes (Valkov, 2018).

Significance of the Study

The research findings of this study can be used by the Government and policy makers in the development of appropriate policies, plans and intervention programs for the management and treatment of psychological disorders and illnesses in clinical settings like substance abuse.

The study can be relevant for the Ministry Of Health in Uganda to plan for its people and employ community health workers to sensitize people about the various ways of preventing issues with low self-esteem and intervention with adolescent substance abuse.

The research findings can also be used by counsellors to provide therapy to adolescents and also to families. With this information, the therapist with have a stable ground to understand the adolescent or family problems and have the ability to offer appropriate help.

Parents can use the research findings inorder to understand substance abuse, early signs of adolescents that may be using substances and the different interventions that they may use to stop the adolescents from using the different substances. For example by giving the adolescents counselling and educationg them early about the dangers of substance abuse.

Schools may use the research findings to incorporate different counselling sessions for the adolescents in the everyday school schedule and also encourage adolescents to engage in co-curricular activities. This way they use their free time for more productive activities instead of engaging in substance abuse.

NGOs may use the research findings to create different projects that can target adolescents and prevent the use of substance abuse. For example equipping adolescents that have dropped out of school with technical skills that can keep them busy and occupied.

Students of Makerere university and other institutions may use the research study as a reference when doing research and making dissertations. Research on substance abuse is still limited especially focusing on adolescents.

The study may benefit the future researchers to provide baseline information and add to the limited body of knowledge on the recent status of social suppport and substance abuse among adolescents. These findings can be incoporated into future research to establish further the relationship between the variables

Conceptual framework

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┌─────────────────┐      ┌─────────────────┐      ┌─────────────────┐
│ Social Support  │ ───► │  Self-Esteem    │ ───► │ Substance Abuse.│
└─────────────────┘      └─────────────────┘      └─────────────────┘
        │                                                   ▲
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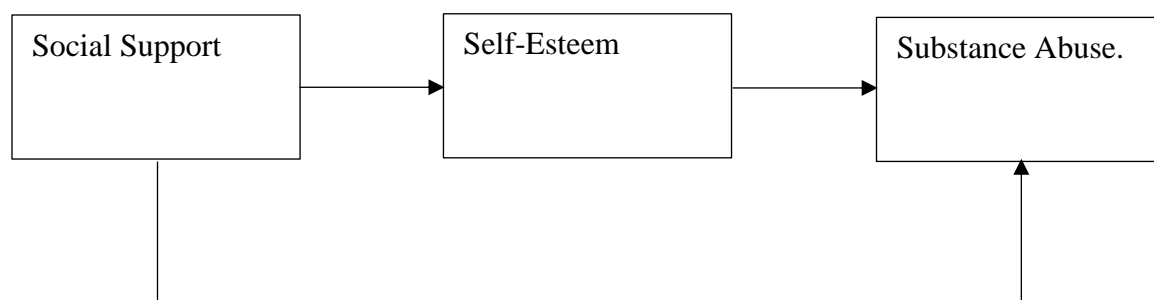
Figure 1: *A conecptual framework showing the relationship between social support, self-esteem and substance abuse among adolescents.*

The conceptual frame work illustrates that adolescents who receive inadequate social support from either parents, community members or even peers are likely to have a low self-esteem which may in-turn leads them to engage intto substance abuse.

Chapter Two

Literature Review

Introduction

The literature review is a chapter that gives a brief but detailed review of some of the literature on substance abuse used in the study. It also focuses on the variables that are looked at in the study. That is to say social support and self esteem and hoe each of these is related to substance abuse among adolescents.

Social Support among Adolescents

Social support is a significant factor that influences individuals self esteem. According to Petit (2010), social support is the perception and actuality that one is cared for, has assistance available from other people and most popularly, that one is part of a supportive socila network. These people may include parents, relatives, peers, teachers among others, social support can be measured as the perception that one has assistance available, the actual received assistance, or degree to which a person is intergrated in the social network.

Self-Esteem among Adolescents

Self-esteem is an individuals subjective evaluation of their own worth. It encompasses beliefs abouts oneself as well as emotional states,despair, pride, shame and others (Smith and Mackie, 2007). Self-esteem is a factor that can greatly determine whether an adolescent engages in substance abuse or not. Adolescens with a low self-esteem may engage in substance abuse because of a number of reasons, for example, they may involve in the act because of their inability bto say no to it which may be a result of their low self-concept. However, the reverse can also be true and adolescents with a low self-esteem may not engage in substance abuse because of their inability to engage with their peers who may be the ones leading them into substance abuse.

Substance Abuse among Adolescents

Substance abuse is the excessive use of psychoactive drugs. These include marijuana, cocaine, "waragi" and others to mention but a few. Substance abuse among adolescents can be categorised under deliquency and can be explained by quite a number of theories one of which the Anomie theory by Robert Merton in the 1940's. The theory explains that deliquency occurs because juveniles do not have the means to make themselves happy. Their goals are unattainable by legal means and so they find unlawful means by which they attain their goals. The dliquent act in this case being substance abuse, the adolescent may have a goal that seems to only be attainable by involving in drugs, for example being part of a social circle that is involved in drug use. If the adolescents sees him or herself unable to be part of this group in the right way, he may decide to engage in the substance abuse acts inorder to get approval from the group and be accepted into it. However, sometimes its not only because the adolescent cant attain the goal in a legal way, but sometimes choose the easier way which is the illegal way, in this particular case, substance abuse.

Social Support and Self-Esteem among Adolescents

The negative image of adolescence which prevailed in the field of education throughout the last century resulted in greater interest being shown in problematic behaviors and limitations than in research into and the fostering of adaptive, healthy behaviors (Wilkerson et al., 2017). Nevertheless, over recent years, those working in the field of educational psychology have increasingly preferred to study the positive qualities of adolescent students, rather than focus on their deficits (Çakar & Tagay, 2017).

In addition, school engagement is of vital importance for understanding positive development during adolescence, and has been identified as an index of adaptation in the school context (Chen et al., 2017). It is also considered a key element for psychosocial development and academic success (Zhou et al., 2018). School engagement has been defined

as the degree to which students are committed to school and are motivated to learn (McDonald, 2018). The majority consensus within the scientific community acknowledges the multifaceted nature of the concept, which is often divided into three dimensions: cognitive, emotional and behavioral (Zhou et al., 2019). School engagement is therefore considered to involve the feelings, thoughts and behaviors manifested by students regarding their experiences in the school context (Watson et al., 2019).

Recent research has provided empirical evidence indicating that psychological and environmental factors may influence school engagement (Wilkerson et al., 2017). The psychological variables involved include self-esteem, understood as the set of perceptions that an individual has about him or herself, based on their own personal assessment and that of significant others (Sadeh et al., 2021). Self-esteem is vital to adolescent adjustment.

Numerous studies have shown that self-esteem is directly related to academic achievement (Zhou et al., 2018). Some authors posit that self-esteem is linked to educational variables such as students' involvement in the learning process (Lipari et al., 2018), while others go one step further to claim that school engagement may mediate between Self-esteem and academic achievement.. This concept is a complex one which encompasses a series of elements that interact and evolve throughout the course of adolescence. In this sense, a close correlation has been found between family support and self-esteem. It has also been observed that acceptance by one's peers has a global protective effect (Wilkerson, Schick, Romijnders, Bauldry, Butame & Center, 2017).

Teachers' support and appraisal have been related to academic self-esteem, which in turn is associated with academic achievement (Karaer & Akdemir, 2019). Similarly, it has been found that adolescents who perceive a greater degree of support from their family, peers and school environment have a better self-esteem (Costa & Gomes, 2018), research evidence shows a direct influence of student-teacher relations on school adjustment, as well as the impact of

the most personal environmental systems (family, peers, school) on students' engagement (Birtel et al., 2017).

In addition to the information reported regarding each of the study variables and their interrelations, empirical evidence also exists of the effect of social support on school engagement, with self-esteem as a mediating variable of said effect (Bartsch et al., 2017). Perhaps the most direct antecedents are those studies which demonstrate that self-esteem mediates the relationship between context (support from teachers, peers and family) and school adaptation (Oshri et al., 2017). Specifically, Rodríguez. (2012) measured family support and peer support, finding that only family support had a direct and indirect effect mediated by self-esteem on school adjustment (Baikiliza, 2019).

The relationship between social support and self-esteem is essential for the adolescent and it is represented in Maslow's hierarchy of needs that one needs to reach and achieve certain needs in order to fully achieve individual potential (Lee et al., 2018). It shows on the hierarchy of needs that love and belonging are important aspects of social support taking up the third level leading to esteem on the forth level where the aspect of self-esteem is needed to satisfy it (Alaei et al., 2017). Therefore, adolescents who receive inadequate social support are likely to experience low levels of self esteem (Riquelme et al., 2018).

Furthermore, Revy and Maslach (2001), reported that social support can be emotional,instrumental, financial and emiotional. Increasing support is associated with higher esteem only among adolescens suffering from high levels of stress (Fisher et al., 2017). According to Barrera (1986), social support can be organized in three major categories: social embeddedness, perceived social support, and enacted support (McDonald, 2018). Social embeddedness is the connections that individuals have to significant others in their social environment. Perceived social support refers to the cognitive appraisal of being reliably connected to others (Zhou et al., 2019). The latter category is enacted support which refers to

the individual's actions and interactions that the individual uses to overcome and adjust with resistance in his social relation- ships with significant others (Watson et al., 2019). Cohen (2000) reavealed that many people who have supportive social relationships experienece various benefits some of which include good health, morsle among others and the contrary is also true, in other words people with low or minimal social support and frequently are associated with poor physical and mental outcomes (Wilkerson et al., 2017).

With a high degree of social support which raises self esteem of adolescents, they feel adequate and appreciative of their bodies and looks (Zhou et al., 2018). According to Robin (2009), if a child has no friends, the effects on his or her mental and physical state can be devastating (Lipari et al., 2018). For an adolescent to be accepted by peers, greater effects of physical benefits have to be shown with the numbers of peers.This is a great indication that having peers (social supoort) can greatly improve the physical and mental health of adolescents (Gomez-Gil et al., 2019).

It should be noted that when adolescents have adequate social support, they have more chances of being able to solve problems without feeling guilty since they can get advice and support to back their decisions and to correct wrong ones (Sadeh, Miglin, Bounoua, Beckford, Estrada & Baskin-Sommers, 2021). This increases their courage to take on and solve more problems hence enhancing thire self-esteem. Adolecents seem to be very pre-occupied with bein liked and viewed positively bothers them while personal and moral values appear as a key theme in their self concepts (Guillén et al., 2020). Peers have time and again emerged as an important source of self worth and hence high levels of self esteem by conveying positive feedback and reinforcement (Hayley et al., 2017).

Weiss and Bedeck (1996), found ot that adolescents with less supportive peers are highly likely to have alow self esteem since they decise to rely on material ways to fit in and gain acceptance with their peers (Costa & Gomes, 2018). A child with no close friends can go

through adolescence with little negative raminifications, belonging to a peer group not only provides psychological benefits byt can also imrove on the physical health and adolescents perception of physical health greatly (Valkov, 2018).Listening non-Judgementally to an adolescent can raise their self esteem.

Adolescents with aadequate social support are taught by various peoplw on how to handel themselves and how to feel fulfilled with their lives therfore raising their self esteem (Cappelli et al., 2021). An adolesent without social support on the other hand does not have the ability to mauever through life tasks and if he or she happens to fail to vomplete or accomplish a task, he will feel like a failure and because of the inadequate social support, he may blame himself for the failure and inturn have a low self-esteem (Erol & Orth, 2017). Studies have found that adolescents friendship allow opportunities for emotional and self-esteem affirmation (Cameron & Granger, 2020).

On the other hand, despite social support having a positive effect on adolescents self-esteem, the reverse is also true, social support can also have a negative effect on adolescents self-esteem (Riquelme et al., 2018). When peers reject an adolescent it can seriously lower their self-esteem. Purnishment by parents and other peers can also lower an adolescents' social support (Fisher et al., 2017). Out of anger by a parent or an elder of an adolescent, they may utter out verbal expressions that may cause the adolescent to feel small hence lowering their eslf esteem (Birtel et al., 2017).

In conclusion studies have shown and still show that adolescents who have low social support are most likely to have low self-esteem (McDonald, 2018), and the reverse is as well true. Those with adequate social support have higher levels of self-esteem and this is seen in their problem solving skills since they are always sure of back up from either peers, family members or even members of the community to whom they are not related (Watson et al., 2019). Students with a high self esteem and adequate social support are usually less prone to

engaging in substance abuse because they are taught the dangers of substance abuse by oarents, teachers and at times even peers. However, adolescents who have inadequate social suppoet tend to have a low self esteem and may lack the ability to say no to drugs when they are faceed by circumstances that can cause them to engage in substance abuse.

Self-Esteem and Substance Abuse among Adolescents

Self-esteem is a key factor that influences substance abuse among adolescents. Research findings have pointed out that adolescents with low self esteem are more likely to engange in substance abuse compared to those with higher self-esteem (Costa & Gomes, 2018). Students with low self esteem feel as though they are not at the same level with their peers and a s a way of fitting in, and feeling adequate, they may get involved in saubstance abuse (Birtel et al., 2017). Low self esteem also leads to an adolescent isolating from peers and having very little or no interaction with anyone else. This gives them very much time which they may decide to go by with activities like substance abuse (Bartsch, King, Vidourek & Merianos, 2017). Isolation also fives the so much time to view and access literature that exposes them to different kinds of drugs and the ways in which they are used as ell as where these drugs can be found and purchased (Oshri, Carlson, Kwon, Zeichner & Wickrama 2017).

Studies have found that substance abuse patients have a medium level of self-esteem, other studies also found that the age of the firs substance abuse scenario and self esteem are directly co-related (Baikiliza, 2019).Adolescents with low self esteem engage in substance abuse as a way of copying with negative feelings and escape from stressors. Regardless of various studies conducted on self-esteem and substance abuse, there is no evidence about the association between self-esteem and substance abuse (Lee et al., 2018). Although some studies have shown weak or no association between the two variables in question, many others reprt that there is a strong association (Alaei et al., 2017). Substance abuse is described as the use of prescribed or

over the counter drugs in excess of the directions, and any nonmedical use of drugs (Riquelme et al., 2018). The various classes of drugs may include cannabis, solvents, tranquilizers, barbiturates, cocaine, stimulants, hallucinogens or narcotics. Meanwhile, substance abuse is one of the growing health-related problems of human society and for years, in all countries, the issue of narcotics has become one of the major social problems and global concerns (McDonald, 2018). Based on the WHO reports, more than 100000 young people start using tobacco products and illegal substances each day, most of which live in the developing countries (Zhou et al., 2019).

Besides, it has been shown that self-esteem plays an important role in the emergence of a series of mental disorders and social problems (Watson et al., 2019). In fact, low self-esteem is the most common justification of substance abuse as per the statements made by clients referring to treatment center (Wilkerson et al., 2017). While some researchers reported a weak association between self-esteem and smoking or illegal drug abuse, some others reported strong association (Çakar & Tagay, 2017). Evidence from Farzad, Abbas, and Saman, (2014) while evaluating the prediction of tendency to substance abuse on the basis of self-esteem and components of emotional intelligence, revealed that there is a negative significant correlation between tendency to substance abuse and self-esteem (Chen et al., 2017).

Wang and Veugelers (2008) contend that self-esteem is an important determinant of adolescent mental health and development. Several studies such as Liem et al., (2010); and Withya et al., (2007) have found significant negative correlations between self-esteem and substance abuse among adolescents (Zhou et al., 2018). Similarly, a study conducted by James (2003), found a significant negative correlation was between self-esteem and substance abuse (Lipari et al., 2018).

In addition, Zamboanga et al., (2009) asserts that self-esteem is the most consistent predictor of the likelihood and extent of substance abuse (Gomez-Gil et al., 2019). Available

evidence therefore suggests that low selfesteem and peer influence contribute to adolescent substance abuse (Sadeh et al., 2021). In corroboration with the above findings, Kumpulainen and Roine (2002) noted that low self-esteem was potentially connected to substance use (Guillén et al., 2020).

Substance abuse is described as the use of prescribed or over the counter drugs in excess of the directions, and any nonmedical use of drugs (Hayley et al., 2017). The various classes of drugs may include cannabis (marijuana, hashish), solvents (e.g., paint thinner), tranquilizers (Valium), barbiturates, cocaine, stimulants, hallucinogens or narcotics (heroin) (Karaer & Akdemir, 2019). Meanwhile, substance abuse is one of the growing health-related problems of human society (Lancaster et al., 2018) and for years, in all countries, the issue of narcotics has become one of the major social problems and global concerns (McCauley et al., 2019). Based on the WHO reports, more than 100,000 young people start using tobacco products and illegal substances each day, most of which live in the developing countries (Auerbach et al., 2018)

Furthermore , it has been shown that self-esteem plays an important role in the emergence of a series of mental disorders and social problems (Yao et al., 2017). In fact, low self-esteem is the most common justification of substance abuse as per the statements made by clients referring to treatment centers (Jalali et al., 2019). While some researchers reported a weak association between self-esteem and smoking or illegal drug abuse, some others reported strong association (Nie et al., 2017). Evidence from (Erol & Orth, 2017) while evaluating the prediction of tendency to substance abuse on the basis of self-esteem and components of emotional intelligence revealed that there is a negative significant correlation between tendency to substance abuse and self-esteem.

Research by Xiong, Lipsitz, Nasri, Lui, Gill, Phan, Chen-Li, Iacobucci, Ho & Majeed, (2020), shows that self-esteem is an important determinant of adolescent mental health and

development. Several studies such as (Cooper-Vince et al., 2018) have found significant negative correlations between self-esteem and substance abuse among adolescents. Similarly, a study conducted by (Cameron & Granger, 2020), found a significant negative correlation was between self-esteem and substance abuse.

Likewise, Cook et al (2017)asserts that self-esteem is the most consistent predictor of the likelihood and extent of substance abuse. Available evidence therefore suggests that low self-esteem and peer influence contribute to adolescent substance abuse (Lancaster et al., 2018). In corroboration with the above findings, (Jalali et al., 2019) noted that low self-esteem was potentially connected to substance use.

In a nut shell, although self-esteem is a key factor in influencing substance abuse among adolescents, some adolescents with a low self esteem may have the ability to overcome subsance abuse since they may choose to be alone and away from peers who may cause them to use the drugs. Adolescents with a higher self-esteem may engage in substance abuse as a way of trying out new experiences. Its therefore not evident that only adolescents with a high self esteem are able to overcome substance abuse and the reverse as well is true.

Social Support and Substance Abuse among Adolescents

Research evidence shows that increased social spport highly influences whether an adolescent actually gets him or serself involved with substance abuse or not (Turner et al., 2017). Further research has also indicated that adolescents with good relationships with their families are less likely to get involved with substance abuse compared to their mates with poor relationships with their families (Lechner et al., 2020).

Religion as another branch of social support has aslo influenced adolesnts use of different substances by condeming the adolescents from using these drugs by quoting holy books and other religious books and beliefs (Kim, 2017). According to Dwrkin and Ullman, (2019), social

support in form of religion helps in different ways, by either using religious norms or by being a source of inetraction for the adolescents. This is commonly refered to as the Social Support Medical Hpothesis (Cole et al., 2017).

In addition, some religious institutions, members may give testimonies of their dreadful experiences with substances and their ways of overcoming these problems (Heerde & Hemphill, 2018). These can indirectly serve as a way for the adolescents to pick a leaf and avoid similar experiences.The increased social support afforded by religion can also influence the relationship between religious involvement and the likelihood of substance use disorders (Van Droogenbroeck et al., 2018). Many times however, high levels of substance abuse are attributed to parternal infulence. Research has shown that adolescentswhose fathers abuse drugs are also very much highly likely to follow in the same footsteps since they look at the actas okay since their fathers engage in the act as well (Camara et al., 2017).

Social support for girls and boys is perceived quite differently. In that girls are more inclined towards family and their closenesss to the different family members serves as aan advantage for reduced chances of substance use by girls (Costa & Gomes, 2018). Boys however are more inclined to peers rather than family which may increase their chances of substance abuse since peers may look at substance abuse as a way of "bonding" and may use it was a basis for acceptiong someone into the peer circle (Birtel et al., 2017). Parental support helps elevate feelings of self-worth and therefore promotes the emotional and behavioral adjustments of adolescents (McDonald, 2018).

There are at least two potential mechanisms linking perceived social support to substance abuse. First and foremost, it has been discovered that the general effects of religion might be due to increased social support (Watson et al., 2019). The increased social support accorded by religion might also influence the relationship between substance abuse and the involvement with substance abuse (Wilkerson et al., 2017). To sum all this up, social support

might have two effects on substance abuse, these are; supporting social Norms against substances through stigma and providing a source of interaction, Dworkin, Ullman (2019) that does not involve any substances (Çakar & Tagay, 2017). This has been described as the social support medication hypothesis.

The effects of peers and family on adolescents' substance abuse have been noticed to be different depending on the gender of the adolescent. For female adolescents, the family characteristics and being close to the family members, is the best predictor for substance abuse (Turner et al., 2017). If a female does not perceive her family as close, the chances of her engaging in substance abuse is relatively high to those of a female that feels her family is close to her (Lechner et al., 2020). For boys on the other hand social support is predicted by peers. They are more likely to be influenced by their peers to get involved in the use of substances (Kim, 2017). Research has further shown that boys are more involved with peers just as much as girls are involved with their families.

However, Piko (2012) contadicted existing research saying that no form of social support, be it mother, father or the peers of an adolecent can act as a predictor of substance abuse but the social support of the father can be a grat inlfuence on whether the adolescent enganges in substance abuse or not (Karaer & Akdemir, 2019).

Although previous studies showed that mother and friends as perceived social support can contribute to substance abuse. On the other hand, father social support is a significant predictor of all sorts of substance abuse. The impact of adolescents' perceived father social support on substance use (Heerde & Hemphill, 2018). The impact of adolescents' perceived social support on substance abuse may be explained due to the effescts of intimate relationships with the father on the adolescents social image and personal identity (Camara et al., 2017)

In conclusion, although many adolescents with adequate social support may not engage in substance abuse, some may still engage in substance absue and this may be due to the fact

that they may not appreciate the social support. For example if an adolescent is given advice from an auntie whom they do not respect or appreciate to sop substance abuse, they may continue to engage in substance abuse.

Hypotheses

Based on the above literature review, the study tested the following hypotheses;

1. There is a signicant relationship between social support and Self-esteem among adolescents.

2. There is a significant relationship between self-esteem and substance abuse among adolescents.

3. There is a significant relationship between social support and substance abuse among adolescents.

Chapter Three

Research Methodology

Introduction

Research methodology is something that people undertake in order to find things out in a systematic way, thereby increasing their knowledge. Kothari (2004) argues that the endeavor of any research is to uncover the concealed reality that is yet to be revealed. This chapter examined the research design, population, sample size and design, instruments and measurements, procedure, quality control, data management, data analysis, and ethical considerations.

Research Design

 A correlational research design was used to investigate the relationship between social support, self-etsteem and substance abuse among adolescents in slums (Akhtar, 2016). This is because this design helps in discovering relationships among variables and in allowing the prediction of future events from present knowledge. Quantitative method of research was adopted where a revised questionnaire comprising of closed ended questions was given to the selected respondents from the target population for data collection (Bloomfield & Fisher, 2019).

Study Population

The study popolation included adolescents both male and females between the ages of 13 to 20 years living in Katanga slums, Kawempe Division, Kampala. The study targeted this area because it has many in-school and out-school adolescents. Reports have shown that many adolescents in this area are emgaged in the use of substances like marijuana, "mira", "waragi" among others and this makes these adolescents ideal participants in the study in order to achieve accurate findings.

Sample Design

The study consisted of about 92 adolecents aged 13-20years. the sample size wasdetermined in accordance with the Krejcie and Morgan(1970) technique (Kang, 2021). Respondents were selected using simple random sampling method since it is non biased and gives an equal opportunity to all the available adolescents to participate (Bujang et al., 2018).

Instruments

Data was collected using self adminitstered questionaires. The questionaire was divided into four section;(A,B,C,D). Section A comprised of the respondents bio data consisting of age,and sex among others,section B for social support, section C, for self esteem,and section D comprising of a questionaire to measure substance abuse.

Measurement

Social support was measured using the Multidimensional scale of perceived social support (MSPSS) Which was invented by Zimet, Dahlem and Fairly , 1988) which consists of 12 items (Chien et al., 2020). To be responded to by a 5 Likert scale ranging from 1=strongly disagree, 2=diagree, 3=neutral, 4=agree, 5=strongly agree.

Self esteem was measured using the Rosenbuerg self esteem scale invented by Rosenburg in 1965.scored as follows. 1=strongly disagree, 2=disagree, 3=agree, 4=strongly agree.

Substance use wasmeasured using the Substance Abuse Scale (SAS, 2013) adopted from National Drug Authority Uganda (Katende, 2019) (see Appendix E). The scale was used to measure substance abuse behaviour among high school students in both "O" and "A" levels (S.1 to S.6) in Makindye Division. The scale has 21 items and is measured on a five- point scale from (1) never to (5) always. The reliability of the adopted SAS using Cronbach's Alpha was 0.730.

Procedure

The researcher sought for a letter of introduction from the School of Psychology, Makerere University to enable the researcher legally access information from the field relevant to the study. Each questionnaire was accompanied with an introductory letter requesting for the respondent's cooperation in providing the required information for the study. The respondents were further assured of confidentiality and that the study findings would be used for academic purposes only and necessary corrective measures in the organization.

Quality Control

This was carried out to ensure that items in the questionnaire are valid and reliable when measuring variables of the study.

Uner quality control, validity was looked at. Jonathan, (2015) defined validity as the extent to which a concept, conclusion or measurement is well founded and likely corresponds accurately to the real world based on probability (Mohajan, 2017). The researcher taken the standardized research tools to Subject Matter Experts (SMEs) in School of Psychology to review the appropriateness, comprehensiveness and relevancy of the research items focusing on specific research constructs (Babincak, 2018). Recommendations from SMEs were integrated into the final versions of the research tool to be used by the study, by rating them on the scale as 'Strongly Disagree' (1) 'Disagree' (2), 'Neutral' (3) and 'Agree' (4), 'Strongly Agree' (5) .

Another aspect looked at under quality control was the reliabilty of the tool.This is the consistency of either measurement or design to give the same conclusions if used by different scholars or at different times (Parsons et al., 2019). Reliability was measured using Cronbach's alpha whereby if the alpha value equaled to 0.7 and above, then the instruments were considered satisfactory (Mohajan, 2017).

Data Management

The questionnaires were gathered back and cross checked to ensure that they are all properly completed and taken for data analysis. The data was arranged and coded to help classify responses into meaningful categories in order to bring about essential patterns. Responses were coded and scored as follows (Taherdoost, 2022).

For social support, 1=strongly disagree, 2=diagree, 3=neutral, 4=agree, 5=strongly agree.

For self-esteem, 1=strongly disagree, 2=disagree, 3=agree, 4=strongly agree.

For substance abuse, (1) never to (5) always

Data Analysis

The collected data was edited with the view of checking its completeness and accuracy. Data was analyzed by the use of computer software, the Statistical Package for Social Scientists (SPSS Version, 27). Frequenncy tables were used for bio-data information as for inferential statistics, Pearson Correlation Coefficient(r) was used to test for the significance of the hypotheses 1, 2 and 3 (Chambers et al., 2018).

Ethical Consideration

When research involves obtaining data from people, hence researchers maintained high ethical standards such as those recommended by professional bodies and institutions, both during research and when sharing data (Sloman et al., 2019). Hence, the researcher followed the following guidelines

The researchers informed all participants of the purpose of the study that was built on rapport and ensured them of confidentiality of the information provided (Arifin, 2018). Respondents were free to make their own consent either to accept or to reject participation in the study and they were free to quit in case there are feelings of little interest.

The information provided by the respondents in the questionnaire was used for research purposes. It was not be used in any manner which would allow identification of their individual responses (Sloman et al., 2019).

Researchers obtained informed consent for people to participate in research and for use of the information collected. Consent also took into account any future uses of data, such as the sharing, preservation and long-term use of research data. To ensure that consent is informed, consent was freely given with sufficient information provided on all aspects of participation and data use (Hasan et al., 2021).

There was active communication between the parties that is researchers and participants for the purpose of understanding the terms and conditions of the research study.

The researchers also ensured access control where sensitive and confidential data was safeguarded by regulating use of or restricting access to such data, while at the same time enabling data sharing for research and educational purposes (Saltz & Dewar, 2019).

Chapter Four

Results

Introduction

This chapter contains all the presentations and the descriptions of the demographic data

including, ages of all the respondents, the descriptive statistics as well as the correlations that

were carried out in this study.

Bio-Data Information

The respondents were asked to indicate their age in years, sex, class residence and guidance;

the results are shown in the tables below.

Table 1: Years of the Respondents

Variables		Frequency	Percentage (%)
Age	12.00	2	2.2
	13.00	1	1.1
	14.00	1	1.1
	15.00	1	1.1
	16.00	9	9.8
	17.00	24	26.1
	18.00	27	29.3
	19.00	14	15.2
	20.00	10	10.9
	21.00	2	2.2
	23.00	1	1.1
Sex	Male	53	57.6
	Female	39	42.4
	Total	92	100.0

Results in Table 1, show that the majority of respondents were in the age   of 18 years with a

frequency of 18 (29.3%), and those from 13-15 years but also 23 years were least represented

with a frequency of 1(1.1%) of the respondents. Additionally, the results also show that the

male respondents were more with a frequency of 53(57.6%) while the female were least

represented with a frequency of 39(42.4%).This means that the study had more males

participants compared to the females.

Table 2: Frequencies on Social Support

Items	Strongly Agree N (%)	Agree N (%)	Neutral N (%)	Disagree N (%)	Strongly Disagree N (%)
There is a special person who is around when I am in need	46(57.5%)	16(20.0%)	6(7.5%)	7(8.8%)	5(6.3%)
There is a special person with whom I can share my joys and sorrows.	43(53.8%)	16(20.0%)	11(13.8%)	7(8.8%)	3(3.8%)
My family really tries to help me	49(61.3%)	15(18.8%)	6(7.5%)	3(3.8%)	7(8.8%)
I get the emotional help and support I need from my family	41(51.3%)	10(12.5%)	10(12.5%)	12(15.0%)	7(8.8%)
I have a special person who is a real source of comfort to me.	43(53.8%)	13(16.3%)	12(15.0%)	5(6.3%)	7(8.8%)
My friends really try to help me.	26(32.5%)	33(41.3%)	12(15.0%)	4(5.0%)	5(6.3%)
I can count on my friends when things go wrong.	21(26.3%)	26(32.5%)	15(18.8%)	10(12.5%)	8(10.%)
I can talk about my problems with my family.	27(33.8%)	16(20.0%)	12(15.0%)	14(17.5%)	11(13.8%)
I have friends with whom I can share my joys and sorrows.	29(36.3%)	21(26.3%)	11(13.8%)	11(13.8%)	8(10.0%)
There is a special person in my life that cares about my feelings.	43(53.8%)	13(16.3%)	11(13.8%)	7(8.8%)	6(7.5%)
My family is willing to help me make decisions.	37(46.3%)	13(16.3%)	13(16.3%)	8(10.0%)	9(11.3%)
I can talk about my problems with my friends	16(20.0%)	27(33.8%)	12(15.0%)	14(17.5%)	11(13.8%)

Results in Table 2 indicate that 61.3% of the respondents revealed that they strongly agreed

that their families tries really had to help ,also 53.8% strongly agreed that they had a special

person who is a real source of comfort to them. Furthermore, the findings revealed that 6.3%

of the respondents strongly disagreed that there is a special person who is around when they
are in need.

Table 3: Frequencies of Self-esteem.

Items	Strongly Agree N (%)	Agree N (%)	Disagree N (%)	Strongly Disagree N (%)
On the whole I am satisfied with myself	25(50%)	13(26%)	7(14%)	5(10%)
At times I think I am no good at all	9(18%)	9(18%)	16(32%)	16(32%)
I feel that I have a number of good qualities	29(58%)	15(30%)	4(8%)	2(4%)
I am able to do things as well as most other people	28(56%)	15(30%)	5(10%)	2(4%)
I feel I do not have much to be proud of	10(20%)	16(32%)	11(22%)	13(26%)
I certainly feel useless at times	11(22%)	8(16%)	11(22%)	20(40%)
I feel that I'm a person of worth, at least on an equal plane with others	22(44%)	19(38%)	6(12%)	3(6%)
I wish I could have more respect for myself	32(64%)	14(28%)	2(4%)	2(4%)
All in all ,I am inclined to feel that I am a failure	4(8%)	4(8%)	6(12%)	36(72%)
I take a positive attitude toward myself	37(74%)	7(14%)	2(4%)	4(8%)

Results in Table 3 show that 74% of the respondents revealed that they strongly agreed to the

fact that they take positive attitude towards themselves as 72% strongly disagreed that all in all

they are inclined to feel that they are failures.64% of the respondents strongly agreed that they

could have more respect for themselves.

Table 4: Frequencies of Substance abuse

Items	Stronngly Disagree N (%)	Disagree N (%)	NotSure N (%)	Agree N (%)	Strongly Agree N (%)
I have used drugs other than those prescribed for medical purposes	91 (60.7)	16 (10.7)	19 (12.7)	24 (16.0)	91 (60.7)
I have used more than one drug at a time.	91 (60.7)	23 (15.3)	22 (14.7)	14 (9.3)	91 (60.7)
I can not get through the week without using drugs.	33 (22.0)	13 (8.7)	26 (17.3)	78 (52.0)	33 (22.0)
I feel good when I use drugs like alcohol, kuba.	76 (50.7)	29 (19.3)	21 (14.0)	24 (16.0)	76 (50.7)
I have blackouts as a result of using drugs.	98 (65.3)	24 (16.0)	16 (10.7)	12 (8.0)	98 (65.3)
I have lost friends as a result of drug use.	111 (74)	17 (11.3)	13 (8.7)	9 (6.0)	111 (74)
My family has ever neglected me because of drug use.	111 (74)	21 (14.0)	9 (6.0)	9 (6.0)	111 (74)
I feel bad/guilty about my drug use.	86 (57.3)	33 (22.0)	16 (10.7)	15 (10.0)	86 (57.3)
I have beeen purnised for using drugs.	97 (64.7)	27 (18.0)	9 (6.0)	17 (11.3)	97 (64.7)
I have ever involved myself in criminal acts to obtain drugs.	92 (61.3)	30 (20.0)	9 (6.0)	19 (12.7)	92 (61.3)
I have experienced withdrawal symptoms/ side effects when I stopped taking drugs.	91 (60.7)	16 (10.7)	19 (12.7)	24 (16.0)	91 (60.7)
In the last 12 months, I have used substances like alcohol.	91 (60.7)	23 (15.3)	22 (14.7)	14 (9.3)	91 (60.7)

Results in Table 4, show that 60.7% of the respondents strong disagreed that they have used drugs other than those required for medical reasons while 12% agreed. 60.7% strongly disagreed that they have abused more than one drug at a time while 9.3% strongly agreed.52% strongly agreed that they can through the week without using drugs while 8.7% disagreed.50.7% strongly disagreed that their family has ever neglected them while 14% agreed.65.3% strongly disagreed that they have gotten into drugs under the influence of drugs while 8.0% strongly agreed. 74% strongly disagreed that they have engaged in illegal activities to obtain drugs while 6% strongly agreed.

Correlation results

Social Support And Self-Esteem Among Adolescents

The first hypothesis ($H_1$1) of the study stated that, there is a significant relationship between social support and Self-esteem among adolescents.. To test this hypothesis, Pearson's correlation co-efficiency (r) was used.

Table 5: The Relationship between social support and Self-esteem among adolescents.

		Social Support	Substance Abuse
Social Support	Pearson Correlation	1	-.204
	Sig. (2-tailed)		.052
	N	92	92
Substance Abuse	Pearson Correlation	-.204	1
	Sig. (2-tailed)	.052	
	N	92	92

Correlation results in Table 4 show that there is no significant relationship between social support and substance abuse among adolescents (r = -.204 and p >0.05). this is because p(.052) is greater in magnitude of 0.05. Therefore the alternative hypothesis is rejected and it is concluded that there is no significat relationship beteen social suppport and substannce abuse among adolescents.

Self-Esteem and Substance Abuse Among Adolescents

The second hypothesis (H_1 2) of the study stated that, there is a significant relationship between Self-esteem and substance abuse among adolescents. To test this hypothesis, Pearson's product moment Correlation Co-efficient (r) was used.

Table 6: The Relationship between Self-esteem and substance abuse among adolescents

		Self Esteem	Substance Abuse
Self Esteem	Pearson Correlation	1	.013
	Sig. (2-tailed)		.905
	N	92	92
Substance Abuse	Pearson Correlation	.013	1
	Sig. (2-tailed)	.905	
	N	92	92

Correlation results in Table 5 show that there is no significant relationship between Self-esteem and substance abuse among adolescents (r = .013, p>0.05). This is because p(.905) is greater in magnitude of 0.05. Therefore, the alternative hypothesis is rejected and it is concluded that there is no significant relationship between self-esteem and substance abuse among adolescents.

Social Support and Substance Abuse Among Adolescents

The third hypothesis (H_13) of the study stated that, there is a significant relationship between Self-esteem and substance abuse among adolescents. To test this hypothesis, Pearson's correlation co-efficiency (r) was used. The findings are shown in the Table below.

Table 7: The Relationship between Social Support And Substance Abuse Among

   Adolescents

		Social Support	Substance Abuse
Social Support	Pearson Correlation	1	-.204
	Sig. (2-tailed)		.052
	N	92	92
Substance Abuse	Pearson Correlation	-.204	1
	Sig. (2-tailed)	.052	
	N	92	92

Correlation results in Table 6 show that there is nno significant relationship between social support and substance abuse among adolescents(r = -.204, p>.052). This is because p(.052) is greater in magnitude of 0.05.Therefore, the alternative hypothesis is rejected and it is concluded that there is no significant relationship between social support and substance abuse among adolescents.

Chapter Five

Discussion, Conclusion and Recommendations

Introduction

This chapter consists of discussions of the findings obtained in the study, the conclusions and the recommendations for further research. It is divided in to sections in which the first section presents discussions and conclusions of the results to the correlation between the variables. The second section presents the recommendations that can be referred to for future studies.

Discussion

The discussion section shows literature that is in agreement with or inconsistent with the research findings.

Social Support and Self-Esteem among Adolescents

The first hypothesis stated that there is a significant relationship between social support and self-esteem among adolescents. The final findings of the study show that there is no significant relationship between social support and self-esteem.This implies that however much adolescents receive the necessary social support from parents, frinds annd significannt others, their self-esteem can still be low,this is in disagreement and in agreemennt with many previous findings some of them are the following;

Recent research has provided empirical evidence indicating that psychological and environmental factors may influence school engagement (Wilkerson et al., 2017). The psychological variables involved include Self-esteem, understood as the set of perceptions that an individual has about him or herself, based on their own personal assessment and that of significant others (Sadeh et al., 2021). Self-esteem is vital to adolescent adjustment.

Numerous studies have shown that self-esteem is directly related to academic achievement (Zhou et al., 2018). Less, however, is known about the role played by positive

self-perceptions in school engagement. Some authors posit that Self-esteem is linked to educational variables such as students' involvement in the learning process (Lipari et al., 2018), while others go one step further to claim that school engagement may mediate between Self-esteem and academic achievement. One contextual variable that predicts adaptive behavior during adolescence is perceived social support (Han et al., 2017), understood as the individual's feeling that their social network provides adequate support in moments of need (Valkov, 2018). This concept is a complex one which encompasses a series of elements that interact and evolve throughout the course of adolescence. The relationship between this environmental factor and adolescents' self-esteem is beyond any doubt (Cappelli et al., 2021). In this sense, a close correlation has been found between family support and self-esteem. It has also been observed that acceptance by one's peers has a global protective effect (Wilkerson et al., 2017).

It can therefore be concluded that there is no siginificant relationship between social support and self-esteem among adolescents because not all adolescennts who receive support have high self-esteem. An adolescent may receive adequate social support which may go on to be alittle to much and cause them to be bullied among their peers hence leading to low self-esteem. An adolescent may get very comfortable especially with socail support from family members and may be afriad to associate with peers of their age. This is a sign of low self-esteem.

Self-Esteem and Substance Abuse among Adolescents

The second hypothesis stated that there is a significant relationship between self-esteem and substance abuse among adolescents. The final findings of thye study show that there is no significant relationship between Self-Esteem and Substance Abuse.This implies that not all adolescents with high or low self-esteem will abuse substances like Marijiuan as it can depend on other factors like personality annd the environmemnt where the adolescent lives.

Many research findings have pointed out that adolescents with low self esteem are more likely to engange in substance abuse compared to those with higher self-esteem (Costa & Gomes, 2018). Students with low self esteem feel as though they are not at the same level with their peers and a s a way of fitting in, and feeling adequate, they may get involved in saubstance abuse (Birtel et al., 2017).

Low self esteem also leads to an adolescent isolating from peers and having very little or no interaction with anyone else. This gives them very much time which they may decide to go by with activities like substance abuse (Bartsch et al., 2017). Isolation also fives the so much time to view and access literature that exposes them to different kinds of drugs and the ways in which they are used as ell as where these drugs can be found and purchased (Oshri et al., 2017). Studies have found that substance abuse adolescents have a medium level of self esteem, other studies also found that the age of the firs substance abuse scenario and self esteem are directly co-related (Baikiliza, 2019). Adolescents with low self esteem engage in substance abuse as a way of copying with negative feelings and escape from stressors.

Regardless of various studies conducted on self-esteem and substance abuse, there is no evidence about the association between self-esteem and substance abuse (Lee et al., 2018). Although some studies have shown weak or no association between the two variables in question, many others reprt that there is a strong association (Alaei et al., 2017).

Substance abuse is described as the use of prescribed or over the counter drugs in excess of the directions, and any nonmedical use of drugs (Riquelme et al., 2018). The various classes of drugs may include cannabis (marijuana, hashish), solvents (e.g., paint thinner), tranquilizers (e.g.,Valium), barbiturates, cocaine, stimulants, hallucinogens or narcotics (e.g., heroin) (Fisher et al., 2017). Meanwhile, substance abuse is one of the growing health-related problems of human society and for years, in all countries, the issue of narcotics has become one of the major social problems and global concerns (McDonald, 2018). Based on the WHO reports, more than 100000 young people start using tobacco products and illegal substances each day, most of which live in the developing countries (Zhou et al., 2019).

Besides, it has been shown that self-esteem plays an important role in the emergence of a series of mental disorders and social problems (Watson et al., 2019). In fact, low self-esteem is the most common justification of substance abuse as per the statements made by clients referring to treatment center (Wilkerson et al., 2017). While some researchers reported a weak association between self-esteem and smoking or illegal drug abuse, some others reported strong association (Çakar & Tagay, 2017). Evidence from Farzad, Abbas, and Saman, (2014) while evaluating the prediction of tendency to substance abuse on the basis of self-esteem and components of emotional intelligence, revealed that there is a negative significant correlation between tendency to substance abuse and self-esteem (Chen et al., 2017).

In the opinion of Wang and Veugelers (2008), they contend that self-esteem is an important determinant of adolescent mental health and development. Several studies such as Liem et al., (2010); and Withya et al., (2007) have found significant negative correlations between self-esteem and substance abuse among adolescents (Zhou et al., 2018). Similarly, a study conducted by James (2003), found a significant negative correlation was between self-esteem and substance abuse (Lipari et al., 2018). In conclusion therefore, there is no significant

relationship between self-esteem and substance abuse among adolescents. This is because other factors like socialization can also influence an adolescent to start abusing substances.

To sum it up, there is no significant relationship between self-esteem and sbstance abuse among adolescents. It has been seen that even adolescents who have a high self-esteem engage in substance abuse despite the different studies that have come up to prove otherwise. This shows that substance abuse is not hinged on only self-esteem but has very many other factors that cause it.

Social Support and Substance Abuse among Adolescents

The third hypothesis stated that there is a significant relationship between Social Support And Substance Abuse Among Adolescents. The final findings of the study show that there is no significant relationship between Social Support And Substance Abuse. This implies that even if adolescents receive the expected social support from family, frinds and the socety in which they live, this is nnot going to prohibit them from abusing substances like Marijuana. This is in agreement and in line with many previous findings and some of them are the following; Various studies have shown that increased social spport highly influences whether an adolescent actually gets him or serself involved with substance abuse or not (Turner et al., 2017).

Further research has also indicated that adolescents with good relationships with their families are less likely to get involved with substance abuse compared to their mates with poor relationships with their families (Lechner et al., 2020).

Religion as another branch of social support has aslo influenced adolesnts use of different substances by condeming the adolescents from using these drugs by quoting holy books and other religious books and beliefs (Kim, 2017). According to Dwrkin and Ullman, (2019), social support in form of religion helps in different ways, by either using religious norms or by being

a source of inetraction for the adolescents. This is commonly refered to as the Social Support Medical Hpothesis (Cole et al., 2017).

In addition to the latter, in some religious institutions, members may give testimonies of their dreadful experiences with substances and their ways of overcoming these problems (Heerde & Hemphill, 2018). These can indirectly serve as a way for the adolescents to pick a leaf and avoid similar experiences.

The increased social support afforded by religion can also influence the relationship between religious involvement and the likelihood of substance use disorders (Van Droogenbroeck et al., 2018).

Many times however, high levels of substance abuse are attributed to parternal infulence. Research has shown that adolescentswhose fathers abuse drugs are also very much highly likely to follow in the same footsteps since they look at the actas okay since their fathers engage in the act as well (Camara et al., 2017).

In 2012, however, piko came in to contadict all further studies saying that no form of social support, be it mother, father or the peers of an dolecent can act as a predictor of substance abuse but the social support of the father can be a grat inlfuence on whether the adolescent enganges in substance abuse or not (Karaer & Akdemir, 2019).

Social support for girls and boys is perceived quite differntly. In that girls are more inclined towards family and their closenesss to the different family members serves as aan advantage for reduced chances of substance use by girls (Costa & Gomes, 2018). Boys however are more inclined to peers rather than family which may increase their chances of substance abuse since peers may look at substance abuse as a way of "bonding" and may use it was a basis for acceptiong someone into the peer circle (Birtel et al., 2017). Parental support helps elevate feelings of self-worth and therefore promotes the emotional and behavioral adjustments of adolescents (McDonald, 2018). From the study, it can be concluded that there is no

significant relationship that exist between social support and substannce abuse among adolscents.These findings may be attributed to other factors like the environmennt in which someone grows also can bring about substance abuse among adolecents.

Overall, there is no significant relationship betwwen social support and substance abuse. This is because despite the fact that many adolescents may receive adequate social support, this is because they may be receiving the social support from people that they do not appreciate. At times, adolescents with adequate social support may engabe in substance abuse because of a multitude of other factors apart from inadequate socaila support since social support is not hinged to only one causal factor.

Conclusion

In conclusion the study results showed that there is no significant relationship between social support and self-esteem among adolescents hence the parents, the community and government should put emphasis on ensuring that adolescents have healthy packages during their time of growth so as their self-esteem can be lifted high while spending time with the differrent people through their life development.

Furthermore results showed that there is no significant relationship between self-esteem and substance abuse among adolescents. Therefore different stakeholders from the government and the community at large need to understand that self-esteem does not explain drug abuse hence other factors which need to be studied and may be crucial include peer influence, school setting, teaching methods and also the student teacher relationship. All these are very vital in explaining drug use among adolescents.

Furthermore results showed that there is no significant relationship between social support and substance abuse among adolescents. This can be attributed to adolescents engaging in substance abuse because they want to seek for acceptance and love from the people around

them. Hence other factors need to be researched to justify the factors that are associated with adolescent substance abuse.

Recommendations

According to the findinngs, the following recommendations are proposed:

In schools, education centres, mentorship programs by school counsellors, others, wardens and matrons should to be provided to adolescents. They should also adopt a favourable culture of equipping adolescents with skills for example communication skills, social support to boost their self-esteem, confidence to enable them face challenges in life positively about making decisions like engaging into risky sexual behaviours, and also equip adolescents with knowledge about dangers of bad peer influence which may engage them into bad behaviours like substance abuse hence leading to juvenile law breaking.

Psycho education classes for the administration, teachers and other stuff in the school setting should be offered. This will equip teachers and administration with knowledge about substance abuse for example the early warning signs of substance abuse and what measures can be taken when an adolescent is identified to be using drugs.

As revealed by the study, substance use and law breaking among adolescents are not attributed by a single factor. It is important that good role modelling programs are developed among adolescents. The models should then be empowered to have a greater influence on their fellow students.

Monitoring and role modelling should be given prominence in schools, homes and community gatherings like at churches, mosques and also include in modelling good behaviours and involving adolescents in exciting youth programs.

Monitoring and role modelling should be given prominence in schools, homes and community gatherings like at churches, mosques and also include in modelling good behaviours and involving adolescents in exciting youth programs

Areas for Future Research

There is need to conduct a similar study in many parts of Uganda to observe if similar results or different results will be obtained since the experience in areas may be different

Future research is needed to carry out qualitative research on self-esteem, socual suopport and substance abuse among adolescents, with a big sample size to observe if the same results will be obtained.

Limitations of the Study

The researcher anticipated a methodology limitation since the designed questionnaire was closed ended which requires NO or YES without giving room to the explanations of respondents. It also involves self-reports which are subjected to reporting bias.

Slow and non- response**;** since the researcher did not know the kind of respondents they were dealing with, some of them failed to respond to questionnaires, delay to fill them and others were be rear to be found. Therefore, this required the researcher to set an appropriate appointment with the respondents in order to ensure that data is availed in time.

Limited disclosure; Due to the sensitivity of the study, some respondents refused to give some data to the researcher. The researcher however tried to overcome this by building a rapport and ensure confidentiality and showing an introductory letter acquired from the university fully explaining the purpose of the research.

The research was carried out in a school meaning the research only focused on in-school adolescents leaving out-school adolescents out of the research. Therefore the research findings are only accurate for in-school adolescents.

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Appendix I : Questionnaire

Dear respondent,

This questionaire is seeking information that will assist and guide in understanding the relationship between social support, self esteem and substance abuse among adolescents. Responding to this questionaire will not affect your academic performance. Information provided is to be treated with the utmost confidentiality and is strictly for academic purposes.I kindly ask you to answer the questions honestly and correctly.

SECTION.A: PERSONAL INFORMATION.

SEX _____   CLASS _____

AGE _____

SECTION B: SOCIAL SUPPORT

You are kindly requested to choose the best alternative as provided to you. Simply tick the situation that best applies to you according to the number of the statement that applies to you.

Strongly disagree (SD)	Disagree (D)	Not sure (NS)	Agree (A)	Strongly agree (SA)
1	2	3	4	5.

	Items	SD	D	NS	A	SA
1	There is a special person with me when I'm in need.					
2	There is a special person with whom I can share my joys and sorrows.					
3	My family tries to help me.					
4	I get emotional suport help from my family when I need.					
5	I have a special person who is real source of comfort to me					
6	My friends really try to help me.					
7	My friends really try helping me.					
8	I can talk about my problems with my family.					
9	I have friends with whom I can share my sorrows and joys.					
10	There is a special person who cares aboy my feelings.					
11	My family is willing to help me make my decisions					
12	I can talk about my problems with my friends.					

SECTION B: SELF-ESTEEM.

Below is a list of statements dealing with your general feelings about yourself. Please indicate how strongly you agree or disagree with each statement.

Strongly agree(SA)	Agree (A)	Disagree(D)	Strongly disagree(SD)
1	2	3	4

	Items	SA	A	D	SD
1	On a whole, I am satisfied with myself.				
2	At times I think I am no good at all.				
3	I feel I have anumber of good qualities.				
4	I am able to do things as well as most other people.				
5	I feeel I do not have much to be proud of				
6	I certainly feel useless at times.				
7	I feel that I am a person of worth. Atleast on an equal plane with others.				
8	I wish I could have more respect with others.				
9	All in all, I am inclined to feel that I am a failure.				
10	I take positive attitude towards myself.				

SECTION D: SUBSTANCE ABUSE.

You are kindly requested to choose the bes alternative provided to you. Simply tick the situation that most applies to you.

Strongly disagree(SD)	Disagree(D)	Not sure(NS)	Agree(A)	Strongly agree(SA)
1	2	3	4	5

	Items	SD	D	NS	A	SA
1	I have used drugs other than those prescribed for medical purposes					
2	I have used more than one drug at a time.					
3	I can not get through the week without using drugs.					
4	I feel good when I use drugs like alcohol, kuba.					
5	I have blackouts as a result of using drugs.					
6	I have lost friends as a result of drug use.					
7	My family has ever neglected me because of drug use.					
8	I feel bad/guilty about my drug use.					
9	I have beeen purnised for using drugs.					
10	I have ever involved myself in criminal acts to obtain drugs.					
11	I have experienced withdrawal symptoms/ side effects when I stopped taking drugs.					
12	In the last 12 months, I have used substances like alcohol.					

Thank you for your participation.