

Substance Use, Depression, and Psychosocial Support among Adolescents in Secondary Schools

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Declaration

I Kavunane Rashidah Aminah here by solemnly declare to the best of my best of my knowledge that this dissertation is my original work expect where otherwise acknowledge

Signed..........

Date.....3rd. Feb. 23.....

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Approval

This is to certify that this dissertation has been accepted as partial fulfillment for the award of Bachelor of Arts in Community Psychology at Makerere University.



18th January 2023

Signature..... Date.....

Dr. Nyende Paul
Supervisor

Dedication

I dedicate this work to my parents Mr. Kiirya Juma Nabongo, Mrs. Kiirya Rehema Lukwago and my uncles Mr. Muyinda Zubair and Sebagala Sharif who loved, endured, and taught me the art of loving, enduring, helping and supporting me financially, morally throughout my studies without forgetting my beloved sisters and friend Naigembe Aisha Nadia, Nalubwama Shamillah and Ssemakula Roger Kittata

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Table of Content

Dedication.....	i
Declaration.....	i
Approval.....	ii
Acknowledgements.....	iv
Table of Content.....	v
List of Tables.....	vii
Abstract.....	viii
Chapter One.....	1
Back ground.....	1
Depression among Adolescents in Secondary Schools.....	4
Psychosocial Support among Adolescents in Secondary Schools.....	8
The Statement of the Problem.....	10
Purpose of the Study.....	11
Objectives of the Study.....	11
Scope of the Study.....	11
Conceptual Frame work.....	13
Chapter Two;Literature Review.....	14
Introduction.....	14
Substance use and Depression.....	14
Depression and Psychosocial Support.....	19
Study Hypothesis.....	21

Chapter Three:Methods.....	22
Introduction.....	22
Study Design.....	22
Sample Size.....	22
Instruments and Measures	22
Procedure of Data Collection.....	23
Data Management	23
Chapter Four:Results and Interpretation	25
Introduction.....	25
Descriptive Statistics.....	25
Inferential Statistics	25
Chapter Five:Discussions, Recommendations and Conclusions	28
Introduction.....	28
Discussions	28
The Relationship between Substance Use and Depression	28
Relationship between Substance use and Psychosocial Support	29
Relationship between Depression and Psychosocial Support.....	31
Recommendations.....	33
Conclusion	33
References.....	35
Appendix I: Questionnaire.....	37

List of Tables

Table 1: Bio data information	25
Table 2 : Relationship between substance abuse and depression	26
Table 3: Relationship between substance abuse and psychosocial.....	26
Table 4: Relationship between depression and psychosocial support	27

Abstract

This research intended to study the relationship between Substance use, depression and psychosocial support among adolescents in secondary schools. Correlation study design that is quantitative was adopted to establish the relationship between variables, a total of 80 respondents participated in the study, Data collected was analyzed using statistical packages .The study revealed that there is a significant relationship between substance use and depression ,it also revealed that there is a significant relationship between substance use and psychosocial support and also revealed that there is a significant relationship between depression and psychosocial support among adolescents in secondary schools. The research was concluded that in this sense it is how important adequate psychosocial support has become in reducing substance use and depression among adolescents in secondary schools.

Chapter One

Back ground

Substance Use depression and psychosocial support among adolescents in secondary schools

Substance use among adolescents in secondary schools

Substance use disorders result from long term exposure to substances and subsequent mental and physical dependence. This can lead to social, academic, and occupational impairment along with negative health effects. To treat these disorders, a combination of pharmacological and non-pharmacological therapies is used to help individuals appropriately. This activity describes the evolution, the mechanism of substance use disorder, and the treatments of substance use disorder (www.startpeals.com)

The services administration for mental health and substance abuse (SAMHSA), the national institute on alcohol abuse and alcoholism (NIAAA), and the national institute of drug abuse have accumulated data over the years. Studies show individuals who abuse other substances. Well in 2012, studies showed that the life time prevalence of alcohol use disorder was 8% and illicit substance use was 2-3%.

Substance use disorder in adolescents often times results in an impairment in psychosocial and academic functioning, and this is sometimes the reason why they come to clinical attention.

The impairment seen can include academic difficulties, interpersonal problems, family conflict, and dysfunction. Other features such as involvement with deviant peer's risk taking behavior may also be seen. Comorbid psychiatric disorders may also be seen with this population, and this is an important area of assessment and intervention (journals.ww.com)

Substance abuse is the medical term used to describe a pattern of using a substance(drug) that causes significant problems or distress this may be missing work or school use the substance in dangerous situations such as that interferes with friendship family relationships or both. Substance use as a recognized medical brain disorder refers to the use of illegal substances alcohol is the most common legal drug of abuse (SOHNSHOPKIN)(www.hopkinsmedicine.org)

Substance use disorder can lead to short term and long term negative health effects. These effects can be physical and mental and can range from moderate to severe. Furthermore, generally drug misuse or substance use disorder refers to the use of psychoactive drugs which are substances that affect the brain then effects on the body depends on the type of substance or person uses and their history. In addition, substance use disorder may exacerbate symptoms of other mental disorders and early drug use is a strong risk factor for the development of substance use disorders. it may be a risk factor for developing other mental illnesses (medically reviewed by Alyssa, Peckham, PharmD, BCPP) June 19 ,2022

Government data shows that SUD tends to be more common among black people than Hispanics Asians and people who are whites. SUD is more common in males among people who are whites black or African Americans Indians or Alaska natives and those who identify as two or more races however it is difficult to determine the accuracy of data on racial disparities. In the united states historically the war on ‘‘drugs’’ has meant that black Americans are 6-10times more likely to be incarcerated for drug offenses even though they are not necessarily more likely to use illegal drugs and this imbalance may impact prevalence data. (written by Jamie. Este) June (9, 2022 medical news)

Adolescents continue to use illicit drugs and alcohol at alarming rates. Although the rates of use of various substances vary from year to year and decade to decade a substantial

number of young people are still using these substances .Alcohol continues to be the drug of choice for intoxication marijuana and halluanogen use is slightly less than in previous decades stimulant use continues its popularity particularly in the form of methylenedioxy methamphetamine(MDMA)''ecstasy' 'and inhalants to be abused particularly by young adolescents (Robert Brown, MD) 1st April 2002,DOI, [https://doi.org/10.10/06/50031-3953\(01\)00002-5](https://doi.org/10.10/06/50031-3953(01)00002-5)

Substance use and abuse continues to be important public health problem that contribute greatly to morbidity and mortality rates throughout the united states Canada and globally for saved decodes substantial research efforts have been undertaken to understand epidemiology and etiology substance use abuse and knowledge gained from this work has been important in identifying and developing effective prevention (Kenneth W. Griffin, PhD, MPH and Gilbert S. Bovine, PHD)

Substance use often develops in the transitional phase of adolescence a time when puberty and physical growth are occurring and when a young person seeks independence (Morojeke and Ramsoomar, 2016). Adolescence is a momentous period in that human body under goes significant physical growth and psychological changes not only in the bodily changes but also in the brain (Morojele and Ramsoomar, 2016. Winter et al (2011) contend that adolescent is at greater risks of substance addiction due to physiological and plc.] cytological effects of substances on the developing adolescents brain

According to Truce (2020). Substance use during adolescence can continue into adult years increasing the likelihood of dependency on the drug. in particular youth use methamphetamine through gang memberships for income generation especially in struggling communities (Hobbit et along 2016). Consequently, there is a substantial connection between drug trade, substance use,

organized crime network and gang membership in Cape Town (Goga 2014; Rumson and Chatty, 2016)

The use of substances by adolescent is described primarily as intermitted or intensive (bring) drinking and characterized by experimentation and expediency (Debenhardt et al—2016). Majorelle and Ransomed, 2016. Ramos Aviles et al—2016). Intermitted or intensive substance use is linked to the adolescents need for activities that resonate with being cool or fun and unrestrained self-indulgence for a happy mood and peer sanction as by motivations (Ramos Aviles et al—2016)

Preventing substance use by adolescents has been one of the agendas of the government of Uganda for a long time. Government has tried its best using various polices and legislation to curb the habit of substance use by adolescents in particular. However, there is ample evidence showing increased levels of substance use by adolescents including secondary schools yet the factors leading to this tend to be fully known.

Depression among Adolescents in Secondary Schools

Depression is a major source of impairment and suffering in adolescents and is considered to be an important remediate risk factors for suicide the second leading cause of death among adolescents in the United States. Depression in adolescence predicts depression and anxiety in adulthood, and most affected adults had their first depressive episode during adolescence highlighting the need for early identification and treatment (ledge mills, MD; and Jon h V) July 29,2021

Adolescence is an important period in developing knowledge and sally manage emotions relationships, and acquiring attitudes, abilities and attributes for adulthood. Depression in

adolescence in a Common Mental Health disease with a prevalence of 4-5% in mid to late adolescence. It is a major risk factor for suicide and can also lead to social and Educational Impairments Consequently Identifying and treating this disorder is crucial

Depression can be characterized by persistent and recurrent sadness or lack of pleasure that eventually impairs a person's functional ability to work, learn, or cope with daily life, The World Health Organization reports that the prevalence of depression Worldwide is currently 4.4%. however, the prevalence of depression in medical students is reported to be 3-10times higher (11.5-48.2%)

Depression is characterized by persistent low mood, a hedonic, insomnia, fatigue, loss of appetite, feeling worthless, impaired concentration and recurrent suicidal thought that one persistent and severe enough to cause of disability among adolescent. Approximately 1.1% of adolescent aged 10-14years and 2.8%of adolescent aged 15-18years are estimated to have depression. In addition unhealthy lifestyle factors such as physical in activity , disordered eating ,and excessive or pathological use of interest users have been shown significant relationships with adolescent depression.<https://doi.org/10.3389/fpsy.2022.913067>) 09.June 2022

Many studies reported an association between low physical activity and depression among adolescents. A longitudinal study found depression sources were lower among adolescents with persistently high levels of light activity. At age 12 and 14 years old, moderate to vigorous physical activity was negatively associated with depressive symptoms, physical activity during early adolescence has also been found to predict lower levels of depressive symptoms in later years.

Adolescence is a pivoted period of human development (often defined as occurring between 10-24 years of age) characterized by important physical and emotional changes that impact pathways

of wellbeing throughout life. Adolescence represents a time of increased vulnerability for developing depression. The incidence of depression peaks during this period and can continue as a lifelong burden if left unaddressed. Globally, depression is especially problematic as it is characterized by high recurrence rates and poor health outcomes. Published 23. June 2022 by Syed shabby Wahid, Katherine Ottoman, Brandon A. Khort

Current models of adolescent's depression, such as these outlined in the diagnostic and statistical manual of mental disorder (DSM), are conceptualized as presenting core symptoms similar to symptoms profiles observed among adults, these profiles are derived from Research conducted predominately in western, educated, industrialized, rich and democratic (WEIRD) countries. This etic approach is problematic for three reasons. First, symptoms profiles derived from WEIRD societies don't account for heterogeneity of the experience of depression around the world and may not adequately reflect the experience of most relevant to population in diverse global contexts. Second, recent research indicates that adolescent depression may consist of varying clusters of symptoms that are indeed different from adults which manifest via different pathological mechanisms for adolescents as compared to adults and finally as focus on adolescents living in non-WEIRD nations is necessary because 90% of the World's young people live in low and middle income countries (LMIC) and inclusion of youth perspectives from LMIC is crucial in informing a more holistic understanding of adolescent depression.

Adolescence is an important period in developing knowledge and still learning how to manage emotions and relationships and acquiring attributes for adulthood. Depression in adolescence is a common mental health disease with a prevalence of 4-5% in mid to late adolescence. It is a major risk factor for suicide and can lead to social and educational impairments.

Consequently, identifying and treating this disease is crucial. (Diogo Beirao, Helena monte, Francisca Villa Boas)02. October 2020

Depression is the principal cause of illness and disability in the world the world health organization (WHO) has been issuing warning about this pathology for years given that it affects over 300 million thousand most common cause of death in there aged between 15 and 29(World Health Organization (WHO),2017. Depression prevention programs do exist last they are mainly targeted at adolescents and very few focus on children under the age of 10

Depression is a hidden pandemic among adolescents which multifactorial causal risk and risk correlates. The WHO estimated that 322 million people nearly 5% of the global population suffer from depression decades that the age of onset of depression is decreasing and changes associated with normal change during this period make depression difficult to diagnose and more 70% of the children with depression do not receive appropriate treatment.

Depression in adolescents is a serious public Health Concern Recent epidemiological data show that approximately 11 percent of youth will experience (Aeneid, Swendsen, He, Burstein and Markings 2015) and these risky behavior engagement, non-suicidal self-injury and adulthood egg lower income levels, higher divorce rates, suicidality (e.g. Auerbachian Kim al 2014: Aserbach Tsai and Abele 2016);Avenevoli,Knight,Kessler,and Merikanas 2008).Most notably an alarming 75 percent of the individual experiencing depression during adolescence will make a suicide attempt in adulthood (Nock,Green,et.al.2013). Despite these unsettling statistics and associated negative consequences, the etiological mechanisms contributing to the onset and maintenance of depression in adolescence remain unclear.

According to the type of mental health diagnosis depression has been the most frequently examined without studies suggesting a range of 20% to 30% comorbidity of SUDs and depression. (Mason, et al. 2016). Research on the role of peers in the development of depression disorders provides insights into how peers context can be uniquely leveraged to address adolescent's depression.

Depression is one of the most important mental health outcomes impacting diseases and disability worldwide particularly among adolescents aged 10 to 19 years with estimates of more than 264 millions people worldwide being affected (World health organization WHO, 2020). The world health organization has identified depression as an illness that appears when there is a set of features persistent sadness and loss of interest in activities that you normally enjoy accompanied by an inability to carry out daily activities for at least two weeks.

Depression is also a common mental health problem identified following an earthquake, it is common mood disorder that can begin in early childhood, unlike PTSD, it's not always related to a traumatic event various factors can contribute to such as an environment, family, friends, schools, and community. It is diagnosed when the symptoms last for a minimum of two weeks, symptoms of depression in adolescents include, sadness, lack of sleep, crying and emotional numbing.

Psychosocial Support among Adolescents in Secondary Schools

All children have a right to opportunities that survival, grow and develop within the context of physical, emotional and social wellbeing to achieve their full potential (UN 2013). Mental health has been defined as a state of wellbeing in which the individual realizes can work productively and fruitfully and is able to make a contribution moves away from the conceptualization of mental

health as solely adolescents focus on the mental health conditions that affect mood, thinking and behavior.

In order to incorporate psychosocial therapy into the routine treatment of cancer patients ,the question of which patients might need professional psychosocial support and which patients would respond to the offer has been answered .for instance Wellish and WEolcott 1994 tried to define criteria from their clinical experience of bone marrow transplantation that would enable the assessment of the need for psychosocial therapy based on individual coping abilities ,stress in daily life and psychiatric history.

Adolescence is a critical period for sharpening future mental health and wellbeing ,yet adolescents living in adversity , particularly those growing up in humanitarian emergencies face myriad risk factors these include family, community violence, poverty ,and associated, daily stressors, limited education opportunities and in addition this has been assessed to quality mental health services often severely constrained to multiple factors including limited numbers of mental health professionals , lack of availability of affordable care and stigma . Recently, research and practice have turned attention to innovative task shifting approaches whereby non specialists are trained and supervised to deliver mental health and psychosocial support interventions and provide referral to specialist's services for the small number of individuals requiring them. evidence from an increasing numbering of trails for psychosocial intervention with adults, children and adolescents increasing accessibility of care. (Felicily L.Brown ,Tania Bosqui, Mark J.Jordans).

Adolescents can be prone to mental health problems such as PTSD and depression following disasters , school teachers can provide timely psycho social support that could instill hope and improve mental health among adolescents in post-earth quake situations in a low resource setting .Timely support from caring and responsible adults such as teachers can instill hope in

adolescents which could help them overcome difficult .the concept of hope includes the belief in ones potential to achieve a goal and to militate and sustain the way towards achieving a goal ,hope is directed towards positive future expectations and working towards them and finally hope can help adolescents shape their future positively as they transition to adulthood (Rolina Dhital, Akira Shidanuma, Moe Miyaguchi,Junko Kiriya,Masamine Jimba)2019

School is an important community setting to promote mental health and hope for adolescents. systematic review and met analyses on school based psycho social intervention for adolescents after natural disasters such as an earth quake have suggested positive findings however most of the psycho social support interventions for children and adolescents in previous studies were provided by health providers or psychologists ,though the psychosocial support provided by health care providers are considered to be effective , such intervention is not always feasible in low resource setting most low and middle income countries (MICS)are likely to continue facing shortage of health professional and the storage of mental health professionals is severer (Editor Joel Msafiri Francis,university of the Witwatersrand, SouthAfrica)

The Statement of the Problem

Substance use is steadily on increase among the adolescents in secondary schools in Uganda. We need an open environment in which we can share information and talk about addiction said Harm reduction networks

The overall effect of this problem has led to depression and general behavioral changes among adolescents and finally failure in school.

The government of Uganda has put several strategies in prevention and controlling of substance use and abuse such as information dissemination, prevent education and enactment of

law by parliament but in veins. Therefore, the clinical effacement on substance use and depression calls for psychological therapy and intervention to protect the Ugandan adolescents in secondary school

Purpose of the Study

To examine the relationship between substance use, depression and psychosocial support among adolescents in secondary schools

Objectives of the Study

1. To examine the relationship between substance, use and depression disorder
2. To examine the relationship between substance, use and psycho social support
3. To examine the relationship between depression and psychosocial support

Scope of the Study

The study was carried out in Wakiso district ,Namugongo town. It only confined substance use, depression and psychosocial support among adolescents in secondary schools aged (14-20) years.

Substance use This refers to the use of illegal drugs or the use of the prescription or over the counter drug or alcohol for purpose other than those for which they are meant to be used or in excessive amounts. Substance use can lead to social, physical, emotional and job-related problems.

Depression this is mood disorder that causes a persistent feeling of sadness and loss of interests. Also called major depressive disorder or clinical depression. It affects how you feel, think and behave and can led to a variety of emotional and physical problems you may have trouble during normal day today activities and sometimes you may feel as if life isn't worth living,

Depression is a common and serious medical illness that negatively affects how you feel the way you think and how you act.

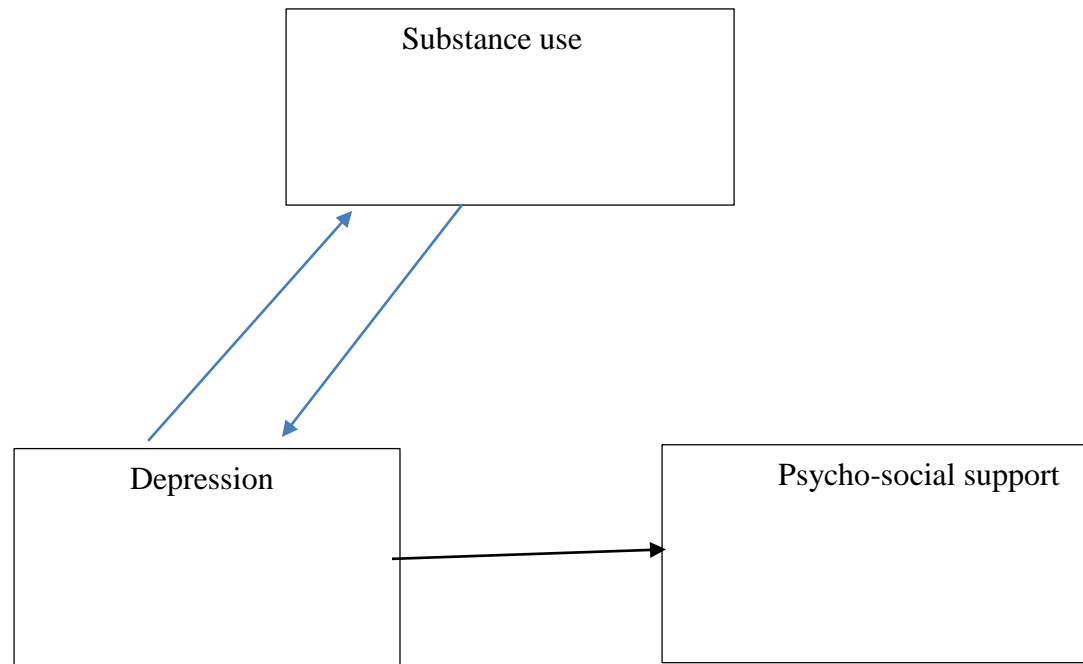
Psychosocial support □ This refers to local or external support provided that aims to promote or protect psychosocial wellbeing of individuals or groups of people. It's also the action that address both psychological and social needs of individuals, families and communities. it helps in facilitating and strengthening resilience with I n individual, families and communities to recover from and adopt to Significance of the Study

The study gives knowledge to the general public conduct seminars and awareness, workhand in hand with the schools and parents to combat substance use among adolescents in secondary schools. common understanding of the factors that lead to substance use which will help to develop more effective response to substance use such that understanding helps adolescents to avoid the use of substances, help to reduce the number of victims of substance use among the adolescents

Schools, communities and mental health centers can use this research to know how to empower adolescents that aren't yet victims of substance use to report cases of substance use to the responsible powers for help.

The school counseling staff can use this research to know how to improve on the students or adolescent's awareness and dangers of the substance use and how effective it is to use drugs and change their perceptions that they can make it in life without depending on substances to those who had started using them.

Conceptual Frame work



Substance use will affect depression in that adolescents who use substances like alcohol, cigarettes, cocaine etc. due to peer pressure, access to drugs, poor parenting styles are likely to develop depression since they face challenges like fatigue, weakness in the body, poor academic performance, feeling hopeless, helplessness, adverse effects, interpersonal conflicts, bereavement as compared with their counterparts who don't use drugs and Depression can also lead to substance use in case the adolescents feel lonely, hopelessness, unloved, isolated, etc. or she can resolve to substance use. In addition, depression can lead to psychosocial support from family, friends, teachers, psychologists, and community by adolescents who have symptoms like loss of weight, poor academic performance etc.

Chapter Two

Literature Review

Introduction

This chapter includes the arguments, options from different write ups of earlier authors and studies related to substances, depression and psychosocial support among adolescents in secondary schools. Literature will be discussed in sub themes related to the major objectives and purpose of the study.

Substance use and Depression

Substance use and depression go hand in hand. Depression can be brought by the variety of factors and can be a serious issue among adolescents in secondary schools. Depression is accompanied by multiple comorbidities among which substance use is particularly common. SUDs is characterized by patterns of escalated sustained drug intake and drug craving (DSM.5) American Psychiatric Association 2013) SUDs occur only individuals whose substance use opportunities develop into a maladaptive pattern of substance taking and seeking (Lepoz Quintero et al.2011, Wogner and Anthony 2002)

Studies indicate that the relationship was found between un supervised care after susceptibility of substance use e.g. cigarettes, alcohol and marijuana use, depressed moods, risk-taking and lower academic grades. Adolescents who were unsupervised at home were slightly more likely to engage in problem behavior than those who were supervised at home. (Jean L; Richardson, Barbara Radziszwska; Clyde W. Dent; BrainR.Flay).

According to the Journal of adolescent's health volume 60, issued, January 2017, page 50-56, Depressive symptoms during adolescence are positively associated with peer related beliefs

perceptions and experiences that are known risk factors for substance misuse. these same risk factors are targeted by many universal substance misuse prevention programs.

Substance use among adolescents is a major problem worldwide producing many health and economic consequences. it seems that students who feel connected and part of their school are less likely to engage in substance use, on contrary students who feel less supported and engaged and respected by teachers and peers and less part of school may feel isolated , depressed , resulting in high risks of using substance and to failing in school , additionally students who don't feel part of the schools are less likely to perceive substance use as a problem that may affect their future academic goals ([https://doi.org/10.3389.fpsy.2018.00025](https://doi.org/10.3389/fpsy.2018.00025)).

According to popular belief, Depression is one of the main causes of substance use and addiction in adolescents. It's through that depressed youth tend to self-medicate with things such as drugs and alcohol which overtime lead them to becoming addicted yet as studies continue to emerge around depression and substance use. It seems more and more unclear as for weather are not depression does actually lead to substance use. Some research now suggests that depression is in many cases actually caused by on already existing substance problems so much likely to debate many want to know which comes first depression or substance use and the truth is there is no definitive.

In many cases it's hard to tell which problem came first. Per phases the mental illness prompted the person to misuse drug or else the drug problem predated the mental illness. the substance use could also worsen the symptoms of the person's mental illness for example smoking marijuana can trigger psychotic episode in some adolescents with alcohol and others drug problems is higher than that in the general community. This includes increased instance of anxiety and depression.

The comorbidity of substance use and depression corresponds to a higher risk of suicide , greater social and personal impairment and an increased number of comorbid psychiatric conditions.(i.e. ;anxiety disorder)that further limits the effectiveness of treatment for depression (Cumming et .at.2014)Goldstein et al.)also discovered that substance related impairment was strongly associated with treatment response among adolescents with MDD(Goldstein et al. ,2009).Several studies have suggested that ADHD is a prominent risk factor for treatment resistance among adolescents with depression (Curry et al. ,2006;Chen et al.2016a). Further the sequence of onset isn't predictive of response to depression treatment. The severity of substance related impairment is associated with more severe depression similarity depression severity is associated with greater substance use disorder severity.

Basing on the study in the Journal of the American Academy of child and adolescent psychiatry (JAACAP)published by Elsevier reports that earlier studies have shown that some of these young people will show significant improvement sustained they may not need additional depression treatment. Based on this evidence, the researchers tested an adoptive approach in which everyone received substance use treatment yet if they were still depressed after a month they would receive additional depression treatment either with the same therapist or in the community.

In addition to the current paragraph, this approach allowed us to examine two different approaches to depression treatment for youth with substance use, said Dr. Curry we also wanted to discover what proportion of the youth would have an early depression response during substance use reduces depression for many adolescent and young adults with both problems. When adolescents with substance use problem and depression are treated for substance use about a third also have early improvements in depression science, Daily science Daily29th march 2022

Studies have found a significant relationship between substance use and high levels of depression e.g. (Brook, Walfish, Stenmark, Cange 1981; Hanna, Yi, Dufour and 2001). However the relation between depression symptoms and the substance use is not entirely clear neither is there any clear evidence of whether it is the mental problem or the high risk of substance use which comes first or whether all substances have the same emotional connection with the problem.

Substance use and psychosocial support

The most effective psychosocial modalities for treating substance use disorder are cognitive behavioral interventions. Motivational interviewing and motivational enhancement, contingency risk management community reinforcement, behavioral couples and family therapies and 12 steps facilitation approaches. Substance use behavior is one of the facilitation of these interventions (Daniel M. Blonigen, John W. Finney, Paul L. Wilbwrne and Rudoltt Moos).

Psychosocial interventions for substance misuse was commissioned by the National Treatment Agency for substance misuse (NTA) from the British psychological society (BPS) to provide support for drug treatment providers and commissioners wishing to develop or to introduce a range of evidence based psychosocial interventions for those with drug misuse problems. In addition the key evidence based psychosocial intervention categorized as either low or high intensity that are discussed in detail in the document are for the management of drug misuse , motivational intervention low intensity contingency management , low intensity and behavioral couples therapy , high intensity and for the management of common mental health problems , cognitive behavioral therapy by guided self-help , low intensity behavioral activation low intensity and cognitive behavioral therapy for depression and anxiety high intensity.

Psychosocial support has been one of the observed stimulate interest in primary prevention of substance use among adolescents in secondary schools. High psychosocial competence is one of the factors that has been started to be protective against progressing to problematic use of substances and it is a critical starting point for policy reform aimed at promoting mental health and foe preventing and controlling illicit substance use by, young people in Uganda. (AmJ Public Health 1995Jauary)

Psychosocial approaches to treatment of substance use in adolescents must begin with, comprehensive understanding of the problem. A formulation provides an opportunity to the treating team to incorporate and integrate various risk factors that have predisposed precipitated and finally continue to maintain the adolescent substance use problem and protective factors as looked for actively.

The Clinician needs to outline treatment options including pharmacological, psychological and psycho social support and discuss with the adolescents and the family, teachers and friends the options that would be most suitable. The substance testing as part of the treatment plan needs to be discussed upfront with the adolescents as others wise it is looked upon as a trust from the testing team and that can affect the therapeutic alliance

Basing on this study there is also a growing recognition of the high cost of treatment and of the inability of existing treatment programs to keep up with increasing demand half of the admissions in the Ugandan National Mental Health Referral Hospital are young people with substance use disorders. These observations stimulate interests in primary prevention of substance use in adolescents. High psychosocial competence is one factors that has been started to be protective against progressing to problematic use of substances and it is critical starting point for

policy reform aimed at promoting mental health and preventing and controlling illicit substance use among adolescents in Uganda (Catherine Abbo, Elialilia S.Okello, and Emilio Ovuga)

Depression and Psychosocial Support

According to (UNICEF2021). The Worldwide pooled prevalence of mental health condition among adolescents aged 10 to 19 is estimated 12.17 % for depression which often comorbid depression is among the leading cause of disability among adolescents while suicide is leading cause of death among adolescents worldwide and 15 to 19 year olds are adolescents girls. Most mental health conditions originate early in life with 50% arising before the age of 14 and 75% by the mid-20s (Kessler et al.2010; Solmi et.2021) yet despite its prevalence the evidence on effective intervention addressing the mental health and psychosocial wellbeing of children and adolescents hasn't been consistently gathered and mapped (Kieling et.al.2011).

Major Depressive Disorders affect between 2% and 5% of adolescents at any point in time. Depression in adolescence is associated with serious psychosocial deficits and has negative effects on functioning during young adulthood starting with the pioneering work of Lenore Butter and her colleagues many psychosocial interventions have been developed and studies generally positive results on the basis of a meta-analysis of the existing cognitive behavioral therapy. In addition studies estimate an overall effect size of 1.27 and that 63% of patients show clinically significant improvement at the end of treatment. It seems CBT has been demonstrated to be an effective treatment for depression among adolescents.

Depression treatment guidelines typically recommends cognitive behavioral therapy or interpersonal therapy for the acute treatment of mild to moderate depression however several new developments support an expanded role for psychotherapy in depression treatment emerging

evidence support an expanded role for the use of psychosocial interventions as a cute and continuation maintenance treatments for unipolar depression although further more research is requested to replicate these findings (Mark A Lau. Cun Opin Psychiaty 2008 Jan).

It is well documented that physical activities participation has a positive association with depression in both adolescents and adults. The Randomized Controlled Trial (RCT) among adults revealed that at least moderate to vigorous intensity levels of PA (physical activities), MUPA have significate positive effects in people with depression. A recent review vigorous level of PA (VPA), three times per week for 6 to 12 weeks would improve depressive symptoms in a clinical sample of adolescents. Carter and colleagues also suggest that a preform level of PA i.e. low to moderate intensity can lead to improved mood and enjoyment which ultimately results in the reduction of depressive symptoms among adolescents who were in treatment for depression.

A number of trail have been conducted to investigate the effect of psychological and psychosocial interventions. In high income countries psychotherapies have been found to be effective in treating common mental disorders. In low and middle income countries studies focusing on adult populations have shown that psychological therapies can reduce symptoms of depression. Considering the effectiveness of psychological intervention for children and adolescents in low and middle income settings meta-analysis which evaluate the evidence of RCTs examing these interventions are still lacking (18 February 2020) <http://doi.org/10.3389/fpsy.2019.00933>.

According to the child and adolescent psychiatry, the trials that have been conducted with children and adolescents implemented various forms of psychological and psychosocial treatments such as school based treatments parents, and family focused interventions, psycho educational and supportive interventions all of which can include components of cognitive behavioral and exposure

based techniques, expressive techniques and mind body oriented skills. Although recommendations advise adjusting an intervention to its target group by making culture adoptions, these aren't commonly implemented or are poorly reported. (18 Feb .2020).

It witnessed over the past 20years that the major advances in knowledge regarding depression in adolescents although additional research is still needed , Clinicians can now turn to treatment in adolescents and offer a working model to guide the treatment of depressed adolescents (Joan Rusenbam Asarhow ,Lisalt. Jaycox and Martha C.Tompson)

According to the WHO ,Depression is diagnosed when the symptoms last for a minimum of two weeks , symptoms of depression in adolescents include sadness, lack of sleep, crying, emotional numbing , change in appetite, social isolation, tearful or irritable and not enjoying things as much as they used to however timely support from caring and responsible adults such as teachers can instill hope in adolescents ,which could help overcome difficult .the concept of hope includes the beliefs in ones potential to achieve the goal ,directed towards positive change or future expectations and working towards them. This can enable adolescents shape and build their future positively as they transition to adult hood.

Study Hypothesis

- I. There is a significant relationship between substance use and depression
- II. There is significant relationship between substance use and psychosocial support
- III. There is a significant relationship between depression and psychosocial support

Chapter Three

Methods

Introduction

As was indicated in the title, this chapter includes, the Research Methodology of the dissertation. This presents the Research design, sample design, data collection instruments, data management, data collection procedure and data analysis method that were in the study.

Study Design

The study used a correlation study design that was quantitative in nature. The study exposed the relationship between substance use, depression and psychosocial support among adolescents in secondary schools.

Sample Size

The sample comprised of adolescents in secondary schools aged 14 to 20 years from which information concerning the topic of study was got. A sample of 80 students was selected from the population.

Instruments and Measures

The researcher used self-administered questionnaires to collect information from the respondents . one secondary school located in Wakiso, Namugongo area was randomly selected to participate in the survey. A Total of 80 students aged 14 to 20 years recruited by proportionate multi stage sampling. Data was collected using social demographic , questionnaire that included questions about the nature and frequency of substance use ,depression and psychosocial support .Aprea tested self adminsted survey questioner with scales to measure components of psychosocial support was administered .Data was entered in epi data and exported to SPSS version 12 to 0 for

analysis psychosocial support was classified as high or low depending on the response in the sub scale of decision making self-efficiency , empathy , emotional awareness , coping with stress and emotional and accurate self-assessment and self-confidence.

Procedure of Data Collection

The Researcher obtained an introductory letter from the school of psychology, Makerere University. The letter was presented to the relevant authority of Wakiso district, Namugongo area where the Research was carried out. The Researcher introduced herself to the Respondants, introduced the topic of study and explained to the respondents the purpose and objectives of the study. A total of 80 questionnaires were randomly distributed among the respondents. There after the Researcher explained to the Respondants how to complete the questionnaires issues of confidentiality were also critically emphasized by the Researcher completeness and therefore questionnaires were cross checked for completeness and therefore were collected and used for analysis of data.

Data Management

Substance use had 10 items and their total score was 100. Scores between 0-25 indicated high total levels of substance use, moderate levels ranged between 26 to 45 while low levels of substance use indicated 46 to 100

Depression had 10 items and their total score was 100. scores ranging between 0 to 25 indicated high levels of depression, scores ranging between 26 to 45 indicated moderate levels while ranging between 46 to 100 indicated low levels

Psychosocial support had 20 items and their total score was 100. Scores 0 to 30 indicated high, scores 31 to 40 indicated moderate while scores 40 to 100 indicated low levels of psychosocial support.

Chapter Four

Results and Interpretation

Introduction

This chapter consists of results and interpretation of the findings in line with the objectives and hypothesis, data is presented in form of frequencies and percentages followed by correlations between substance use, depression, and psychosocial support

Descriptive Statistics

In this section, the respondents' personal data results are presented in form of frequencies and percentages as shown in the tables below;

Table 1: Bio data information

Items	Responses in percentages (%)	
	Frequency	Percentage (%)
Age in years		
14-16	20	20.0
17-20	80	80.0
Total	100	100
Sex		
Female	48	48.0
Male	52	52.0
Total	100	100
Class		
S1	25	25.0
S2	18	18.0
S3	29	29.0
S4	2	2.0
S5	24	24.0
S6	2	2.0

Inferential Statistics

The table below presents Pearson's Correlation Coefficient of the relationship between substance abuse and depression

Table 2 : Relationship between substance abuse and depression

		Substance	Depression
Substance abuse	Pearson Correlation	1	.365**
	Sig. (2-tailed)		.000
	N	100	100
Depression	Pearson Correlation	.365**	1
	Sig. (2-tailed)	.000	
	N	100	100

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

Results in table 2 shows that there is a significant relationship between substance abuse and depression, ($r=.365^{**}$, $p=.000$) since p values are smaller in magnitude than the level of significant ($.00 < 0.01$). Therefore the alternative hypothesis is retained and it is concluded that there is a significant relationship between substance abuse and depression.

The table below presents Pearson's Correlation Coefficient of the relationship between substance abuse and psychosocial support

Table 3: Relationship between substance abuse and psychosocial

		substance	psychosocial
substance	Pearson Correlation	1	.358
	Sig. (2-tailed)		.110
	N	100	100
psychosocial	Pearson Correlation	.358	1
	Sig. (2-tailed)	.110	
	N	100	100

Results show that there is no significant relationship between substance abuse and psychosocial support, ($r=.358$ $r=.110$). Since p values is bigger in magnitude than the level of significant ($.110 > 0.05$). Therefore the alternative hypothesis is rejected and it is concluded that there is no relationship between substance abuse and psychosocial support.

The table below presents Pearson's Correlation Coefficient of the relationship between depression and psychosocial

Table 4: Relationship between depression and psychosocial support

		Depression	psychosocial
Depression	Pearson Correlation	1	.275**
	Sig. (2-tailed)		.006
	N	100	100
Psychosocial	Pearson Correlation	.275**	1
	Sig. (2-tailed)	.006	
	N	100	100

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

Results in table 4 show that there is a significant relationship between depression and psychosocial support, ($r=.275^{**}$, $p=.006$). This is because p values ($.006$) is smaller in magnitude than the level of significant ($.006 < 0.01$). Therefore the alternative hypothesis is retained and it is concluded that there is a significant between depression and psychosocial support.

Chapter Five

Discussions, Recommendations and Conclusions

Introduction

This chapter focuses on the discussion of the study findings in relation to the findings of the previous researchers. It also contains the conclusions and recommendations drawn from the study findings.

Discussions

The Relationship between Substance Use and Depression

The findings of the study are in agreement with (Lepoz Quintero et al.2011, Wogner and Anthony 2002) who noted that substance use and depression go hand in hand. Depression can be brought by the variety of factors and can be a serious issue among adolescents in secondary schools. Depression is accompanied by multiple comorbidities among which substance use is particularly common. SUDs is characterized by patterns of escalated sustained drug intake and drug craving (DSM.5) American Psychiatric Association 2013) SUDs occur only individuals whose substance use opportunities develop into a maladaptive pattern of substance taking and seeking.

The findings of the study are in agreement with (Jean L; Richardson, Barbara Radziszwska; Clyde W. Dent; BrainR.Flax) who proposed that that the relationship was found between unsupervised care after susceptibility of substance use e.g. cigarettes, alcohol and marijuana use, depressed moods, risk-taking and lower academic grades. Adolescents who were unsupervised at home were slightly more likely to engage in problem behavior than those who were supervised at home.

The findings of the study are in agreement with (Cumming et .at.2014, and Goldstein et al.) who proposed that comorbidity of substance use and depression corresponds to a higher risk

of suicide , greater social and personal impairment and an increased number of comorbid psychiatric conditions.(i.e. ;anxiety disorder)that further limits the effectiveness of treatment for depression. The researcher also discovered that substance related impairment was strongly associated with treatment response among adolescents with MDD. Several studies have suggested that ADHD is a prominent risk factor for treatment resistance among adolescents with depression further the sequence of onset isn't predictive of response to depression treatment. the severity of substance related impairment is associated with more severe depression similarity depression severity is associated with greater substance use disorder severity.

The findings of the study are in agreement with (Dr. Curry, 2022) who tried to examine about two different approaches to depression treatment for youth with substance use and also wanted to discover what proportion of the youth would have an early depression response during substance use reduces depression for many adolescent and young adults with both problems. When adolescents with substance use problem and depression are treated for substance use about a third also have early improvements in depression science, Daily science Daily29th march 2022

The findings of the study are in agreement with (Brook, Walfish,Stenmark ,Cange 1981;Hanna,Yi,Dufour and 2001) who found a significant relationship between substance use and high levels of depression. However the relation between depression symptoms and the substance use is not entirely clear neither is there any clear evidence of whether it is the mental problem or the high risk of substance use which comes first or whether all substances have the same emotional connection with the problem.

Relationship between Substance use and Psychosocial Support

The findings of the study are in agreement with who proposed that the most effective psychosocial modalities for treating substance use disorder are cognitive behavioral interventions.

Motivational interviewing and motivational enhancement, contingency risk management community reinforcement, behavioral couples and family therapies and 12 steps facilitation approaches. Substance use behavior is one of the facilitation of these interventions (Daniel M. Blonigen, John W. Finney, Paul L. Wilbwrne and Rudolft Moos).

The findings of the study are in agreement with who noted that Psychosocial interventions for substance misuse was commissioned by the National Treatment Agency for substance misuse (NTA) from the British psychological society (BPS) to provide support for drug treatment providers and commissioners wishing to develop or to introduce a range of evidence based psychosocial interventions for those with drug misuse problems. In addition the key evidence based psychosocial intervention categorized as either low or high intensity that are discussed in detail in the document are for the management of drug misuse , motivational intervention low intensity contingency management , low intensity and behavioral couples therapy , high intensity and for the management of common mental health problems ,cognitive behavioral therapy by guided self-help , low intensity behavioral activation low intensity and cognitive behavioral therapy for depression and anxiety high intensity.

The findings of the study are in agreement with who noted that psychosocial support has been one of the observed stimulate interest in primary prevention of substance use among adolescents in secondary schools. High psychosocial competence is one of the factors that has been started to be protective against progressing to problematic use of substances and it is a critical starting point for policy reform aimed at promoting mental health and for preventing and controlling illicit substance use by, young people in Uganda. (AmJ Public Health 1995Jauary)

The findings of the study are in agreement with who proposed that Psychosocial approaches to treatment of substance use in adolescents must begin with, comprehensive understanding of the

problem. A formulation provides an opportunity to the treating team to incorporate and integrate various risk factors that have predisposed precipitated and finally continue to maintain the adolescent substance use problem and protective factors as looked for actively.

The findings of the study are in agreement with who noted that The Clinician needs to outline treatment options including pharmacological, psychological and psycho social support and discuss with the adolescents and the family, teachers and friends the options that would be most suitable. The substance testing as part of the treatment plan needs to be discussed upfront with the adolescents as others wise it is looked upon as a trust from the testing team and that can affect the therapeutic alliance

The findings of the study are in agreement with who proposed that Basing on this study there is also a growing recognition of the high cost of treatment and of the inability of existing treatment programs to keep up with increasing demand half of the admissions in the Ugandan National Mental Health Referral Hospital are young people with substance use disorders. These observations stimulate interests in primary prevention of substance use in adolescents. high psychosocial competence is one factors that has been started to be protective against progressing to problematic use of substances and it is critical starting point for policy reform aimed at promoting mental health and preventing and controlling illicit substance use among adolescents in Uganda (Catherine Abbo, Elialilia S.Okello, and Emilio Ovuga)

Relationship between Depression and Psychosocial Support

The findings of the study are in agreement with (Kessler et .at.2010; Solmi et.2021) who pooled prevalence of mental health condition among adolescents aged 10to 19 is estimated 12.17 %for depression which often comorbid depression is among the leading cause of disability among adolescents while suicide is leading cause of death among adolescents worldwide and 15 19 year

most are adolescents girls. Most mental health conditions originate early in life with 50% arising before the age of 14 and 75 by the mid-20s yet despite its prevalence the evidence on effective intervention addressing the mental health and psychosocial wellbeing of children and adolescents hasn't been consistently gathered and mapped (Kieling et.al.2011).

The findings of the study are in agreement with (Mark, & Opin, 2008) who proposed that depression treatment guidelines typically recommends cognitive behavioral therapy or interpersonal therapy for the acute treatment of mild moderate depression however several new developments support an expanded role for psychotherapy in depression treatment emerging evidence support an expanded role for the use of psychosocial interventions as a acute and continuation maintenance treatments for unipolar depression although further more research is requested to replicate these findings.

The findings of the study are in agreement with (Rusenbam Asarhow ,Lisalt. Jaycox and Martha C.Tompson) who witnessed that over the past 20years that the major advances in knowledge regarding depression in adolescents although additional research is still needed , Clinicians can now turn to treatment in adolescents and offer a working model to guide the treatment of depressed adolescents.

The findings of the study are in agreement with World Health Organization which suggested that depression is diagnosed when the symptoms last for a minimum of two weeks , symptoms of depression in adolescents include sadness, lack of sleep, crying, emotional numbing , change in appetite, social isolation, tearful or irritable and not enjoying things as much as they used to however timely support from caring and responsible adults such as teachers can instill hope in adolescents ,which could help overcome difficult .the concept of hope includes the beliefs in ones potential to achieve the goal ,directed towards positive change or future

expectations and working towards them. This can enable adolescents shape and build their future positively as they transition to adult hood.

Recommendations

Basing on the strength of the results of the study, the researcher would like to recommend the following ideas to the concerned people.

Future research should be conducted on the relationship between other factors affecting Substance abuse, depression and psychosocial support. This is because this study only focused on establishing the relationship between Substance abuse, depression and psychosocial support secondary school students.

Institutions should device possible means to adjust in their work environment that is feet enough to influence and instill vigor and dedication in their students in order for them to study in such an environment which effectively supports their wellbeing.

Sensitization and training should be carried out at different institutions among staff members to students about the effects of drug abuse and delinquency

Conclusion

This research found that high levels of substance abuse in students significantly predict depression and psychosocial support, and it has a full intermediary effect on the relationship between the study variables. These results reveal that psychosocial support is an important variable in announcing the impact of substance abuse and depression. This is because psychosocial support contribute to harmony and development in all individuals and to protect them against substance abuse and depression. In this context, in adolescents who experience a lot of depression need enough psychosocial support order to advise them about the disadvantages substance abuse, however it can be thought that low levels of psychosocial support will be negatively reflected in

adolescent's compliance and development, as well as the adolescent will be vulnerable to experience high levels of depression. In this sense, it is seen how important adequate psychosocial support has become in reducing substance abuse and depression among students.

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Appendix I: Questionnaire

Dear respondent, my name is Kavunane Rashidah Aminah, a student from Makerere University Kampala pursuing a Bachelor's degree in Community Psychology I'm carrying out research on substance use, depression and psychosocial support among adolescent in secondary schools. You have been selected to participate in this study, please answer this questionnaire as honestly as possible. Your response will be treated with utmost confidentiality. Your name is not required.

Thank you.

Section A: Bio data.

Age

Sex Female Male

Class

SECTION B

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

Item	Strongly agree	Agree	Disagree	Strongly disagree
I used drugs other than these prescribed for medical purpose				
I have more than one drug at a time				
I feel good when I abuse drugs like alcohol. Cuba				

I have black outs are at result of using drugs				
I have lost friends as a result of using drugs				
My family has ever neglected me because of drug use				
I feel bad/guilty about my drug use				
I have been punished for drugs				
I have ever involved myself in criminal acts in order to obtain drugs				
I have experienced withdrawal symptoms side effects when I stopped taking drugs				
In the last one month I have used substances like alcohol				

SECTION C

In this section, please indicate whether you strongly agree, disagree, strongly disagree, agree or are neutral about each of the statements

1. Strongly agree (SA) 2. Disagree (D) 3. Strongly disagree (SD) 4. Agree 5. Neutral (N)

NO	ITEMS	SD	D	N	A	SN
1.	I have trouble sleeping at night	1	2	3	4	5
2	I hate myself	1	2	3	4	5
3.	It Is my fault to abuse me	1	2	3	4	5
4	I am sad and unhappy all the time	1	2	3	4	5
5	I have difficulty making decisions	1	2	3	4	5
6	I do not feel like studying	1	2	3	4	5
7	I have lost interest in aspects of life that used to be important	1	2	3	4	5
8	Poor appetite or over eating	1	2	3	4	5
9	It takes a great effort for me to do simple things	1	2	3	4	5
10.	I deserve the bad treatment I get from other people	1	2	3	4	5

Thank you.

SECTION D**Psychosocial adjustments needs from social relations.**

Directions: Please indicate in the extent to which statement applies to you by marking the box. (x)
that corresponds to your appropriate response kindly follow the numerical guide below.

4- Always

3- Very often

2- Some times

1- Never

	Teachers	4	3	2	1
1.	I am afraid of my teachers				
2.	I feel very upset when called to recite unexpectedly				
3.	My teacher do not understand how I feel				
4.	Some of my teachers us unfriendly words and does not think about how I feel about it.				
5.	Teachers keep feelings of dislike or anger towards students				

	Parents	4	3	2	1
1.	I live with only one of my parents				

2.	I live with a guardian and not with any one of my parents				
3.	My life at home is unhappy				
4.	My parents always criticize and judge me.				
5.	I can not talk about my problem to my parents				
6.	I feel unwanted in the family				
7.	My parents are making unreasonable demands				
8.	My parents are always fighting				
9.	My parents do not have time for me.				
10.	My parents do not listen to me				
	Peers (class mates, school mates)	4	3	2	1
1.	I do not trust my class mates and school mates				
2.	I find it hard to hand out or mangle with peers				
3.	I feel that my peers are better than me.				
4.	I feel that I don't belong in the group				
5.	I find it hard to listen to others.				

	Siblings (brothers, sisters)	4	3	2	1
1.	My brothers and sisters receive more support than I do				
2.	I do not feel that my siblings love me.				
3.	I do not trust my brothers and sisters				
4.	My siblings and I fight with each other.				
5.	I can not talk about my problems to my siblings				