

**Stress, Drug Use and Academic Performance among Psychology
Students at Makerere University**

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University**

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DECLARATION

I Namuyonjo Joan hereby submit this research dissertation as our original composition that has not been done by any other person or institution in any academic field except where otherwise acknowledged

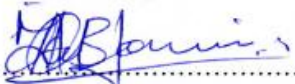

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APPROVAL

This is to certify that this research dissertation submitted for the award of Bachelors Degree of Community Psychology has been examined and recommended for the acceptance and approval.

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List of Abbreviations

APS	Academic Performance Scale
BBC	British Broadcasting Co-operation
DAST	Drug Abuse Screening Test
GPA	Grade Point Average
PSM	Psychological Stress Measure
SPSS	Statistical Package for Social Science
SSA	Stress Scale for Adolescents
NIDA	National Institute on Drug Abuse
UIS	UNESCO Institute for Statistics
UNESCO	United Nations Educational, Scientific and Cultural Organization
UNDP	United Nations Development Program

Operational definitions:

Stress- Is a hugely unpleasant state of emotional arousal that humans experience in situations perceived as troublesome or challenging.

Drug use - Can simply be defined as a pattern of harmful use of any substance for mood- altering purposes

Abstract

This research investigated the correlations between life stress, drug usage, and academic performance among psychology students at Makerere University. A cross-sectional survey was employed, gathering data from 100 randomly selected students via a standardized questionnaire. Data analysis was conducted using SPSS software version 23. The sample was balanced by gender, with males and females each constituting 50% of the participants. The majority of respondents (83%) were aged between 20-30 years, and the largest proportion (74%) were unmarried.

Statistical results demonstrated that drug usage had a significant negative impact on academic performance ($B=-.240$, $p=0.009$), indicating that drug use could be a crucial predictor of academic success among these students. This suggests an inverse correlation between drug use and academic performance, affirming one of our hypotheses. In contrast, no significant relationship was identified between stress and academic performance or between stress and drug use, leading to the dismissal of the other two hypotheses. Considering the notable negative correlation between drug usage and academic performance, strategies focused on preventing and combating drug use could potentially enhance academic success among students. These could include comprehensive drug education programs, availability of counseling and rehabilitation services, peer-led initiatives, strict enforcement of drug-free campus policies, promotion of healthy stress-relief alternatives such as clubs and sports, and collaboration with local community organizations.

CHAPTER ONE

1.0 Introduction

Stress and drug use pose a threat to and tend to undermine kids' motivation for studying and, as a result, harming the school-aged youngsters that the government plans to rely on to advance the economy. Despite the massive intervention efforts made by the government, religious groups, non-state actors, and many other concerned parties to reduce stress and drug use, particularly among young people, the number of psychology students falling victim to drug abuse appears to be rising daily. Therefore, the aim of this study is to investigate the relationship between stress, drug use, and academic performance among psychology students at Makerere University. This chapter therefore contains the background of the study, statement of the problem, objectives, research questions, significance, scope and the conceptual framework of the study.

1.1 Background of the Study

Academic performance is the measure of a person's success in meeting certain objectives that were the focus of activities in learning environments, particularly in school or university (Mimrot, 2016). Academic performance, according to Pickard (2007), is a multifaceted notion that includes the acquisition of factual, conceptual, procedural, and metacognitive information. And in this research work, we determine how the stress and drug use aspects affect this knowledge acquisition. The most notable academic performance trends in higher education have clearly grown significantly globally during the past century. Global enrollment in higher education was estimated at 32.5 million students in 1970 by the UNESCO Institute for Statistics (UIS). This estimate rose to about 100 million in 2000 and to 178 million in 2010. When compared to the 1.6% average annual growth in the global population during the same time period, this equates to a 4.3% average yearly growth in enrollment (UNDP, 2012).

According to academic performance, U.S. News and World Report (2016) placed Makerere University as the 569th best University worldwide and the 8th best in Africa. According to Juliette (2020), Makerere has the highest position in sub-Saharan Africa outside of South Africa according to U.S. News Report rankings. It was ranked as the fourth-best University in Africa in the 2016 Edition of the Times Higher Education World University Rankings. The largest and oldest University in Uganda, Makerere University was founded in 1922 as a technical school. In 1970, it became a standalone National University. There are currently nine colleges and one school at Makerere University, which offers courses to roughly 36,000 undergraduate students and 4,000 postgraduates (The BBC, 2020).

The proportion of students who drop out of college is one of the most urgent problems facing colleges. Less than one-third of first-year, full-time degree-seeking students at nearly one in five three-year colleges graduate within six years (Carey, 2004). Although there are many reasons for attrition, Kuh, Kinzie, Schuh, Whitt, et al. (2005) found that students frequently depart for personal reasons, employment obligations, discontent with the academic environment, and inconsistency with school principles. This study is concentrating more on how stress and drug usage relate to students' academic performance. According to Khodarahimi, Hashim, and Mohd - Zaharim (2012), stress is an extremely unpleasant state of emotional arousal that people experience when they are in difficult or difficult-to-manage circumstances. It can only be felt when one believes that demands are greater than one's capacity to mobilize social and personal resources (Lazarus, 1966). According to reports, students are exposed to stressful situations during their training (Sreeramareddy et al., 2007). According to Romano (1992), stress is ultimately caused by an individual's response to stressors, which are personal or environmental events that produce stress.

According to research (Aktekin et al., 2001), stress is a common occurrence among students in higher education. According to a systematic assessment of the literature, students experience stress at rates ranging from 14.3% to 56% of the time (Salam, Yosuf, Bakar, & Haque, 2013). While studies conducted specifically among students in African universities have found alarming levels of stress ranging from 21.6% to 86%, these findings still show a high prevalence of stress (Amr, El-Gilany, El-Moafee, Salama, & Jimenez, 2011; Dessie, Ebraim, & Awoke, 2014; Ofili, Oriaifo, Okungobwa, & Eze, 2009). Although research on academic stress among students at Mbarara University in Uganda is limited, it did find that students there had moderate levels of stress, which had a negative impact on their academic performance (Nakalema & Ssegonya, 2014).

Any pattern of dangerous drug use for mood-altering objectives qualifies as drug use. In addition to alcohol and other drugs (legal or not), "drugs" can also refer to various drugs that aren't actually drugs. "Use" can occur if you use a drug beyond what is advised or intended, or if you use it more often than is indicated. Undoubtedly, a person can use drugs or alcohol without developing an addiction or even a drug use problem (McLellan, 2017).

Even though there have been numerous studies on drug abuse among university students, such as Drug Abuse and Academic Performance Among University Students, Jackson Bunch (2002), and Drug Abuse Among Students, (Muhammad et al., 2015), little research has focused on the

relationship between drug use and academic performance. In one study that solely looked at legal drugs, Musgrave-Marquart, Bromley, and Dalley (1997) discovered that alcohol and nicotine usage were negatively connected to GPA, but caffeine was not. Carlson and Davis (1988) discovered that marijuana users had poorer high school grade point averages in another study on drug misuse by university students that focused on demographic characteristics.

Glickman, Newton- Taylor, Adlaf, and Giesbrecht (1997) conducted a study of drug use by university students in Ontario that found many tendencies. Students with poorer grades were more likely to engage in heavy drinking. Students with a B average were more likely than A students to utilize hallucinogens. When compared to students with the highest academic average, C- students were less likely to use cocaine, crack, heroin, stimulants with a prescription, and barbiturates without a prescription. As a result, ongoing declines in academic performance are more likely to result in a high number of school dropouts, high rates of unemployment, early marriages, and other problems; hence, there is a need to learn how stress and drug use affect academic performance.

1.2 Statement of the Problem

The proportion of students who drop out of college is one of the most urgent problems facing colleges. Less than one-third of first-year, full-time degree-seeking students at nearly one in five three-year colleges graduate within six years (Carey, 2004). Students frequently leave for personal reasons, stress, drug usage, and inconsistency with school principles' however there are many other causes of attrition (Kuh, Kinzie, Schuh, Whitt, et al., 2005).

According to Beilock (2011), kids' academic performance is impacted by stressful circumstances. Stress can inhibit students from successfully completing their academic goals if it is not effectively controlled. According to the American Institute of Stress, "stress can have wide-ranging effects on emotion, mood, and behavior." Stress has an impact on pupils' physical and mental health. According to Gilmour (2017), students abuse a variety of legal and illegal drugs as well as prescription and over-the-counter medications. Each has a different impact on students' academic performance, largely due of their distinctive chemical compositions.

Drug misuse is a serious issue that has an impact on adolescents between the ages of 13 and 24 in the school setting. According to a recent study financed by the National Institute on Drug Abuse (NIDA), 23% of high school students took more alcohol than a few sips, 9.4% used marijuana, and 5% used other illicit drugs in 2016. Throughout high school and college, students continue to

use both legal and illicit drugs, which raise their chance of developing a drug abuse problem (Gilmour, 2017). According to Gilmour (2017), drug and alcohol abuse is a common problem that starts in high school. Although the prevalence is decreasing for high school students, it is getting worse as kids advance to college. Stress and drug use generate the most problems among all the factors that can hinder a student's achievement in university, according to Libraries (2010), everyone is aware of the consequences of excessive drinking. You may act in an unsafe manner because your judgment is clouded, your health could be compromised and thus academics are undoubtedly impacted.

1.3 Objectives of the study

1.3.1 General objective

The aim of this study was to determine the relationship between stress, drug use, and academic performance among undergraduate students at Makerere University.

1.3.2 Specific Objectives

1. To establish the relationship between stress and academic performance of psychology students at Makerere University.
2. To establish the relationship between drug use and academic performance of psychology students at Makerere University.
3. To establish the relationship between stress and drug use among psychology students at Makerere University.

1.4 Significance of the Study

This study contributed to the existing knowledge on stress, drug use, and student academic performance. This study assisted a wide range of people, including students, lecturers, therapists, and future researchers, among many others. Conducting research on the relationship between stress, drug use, and academic performance of students was significant for various stakeholders involved in the education sector. Here's an explanation of the significance for different stakeholders:

Educational Institutions: Planning and intervention: Research findings can help educational institutions understand the factors that contribute to student stress and drug use, enabling them to develop effective intervention strategies and programs.

Resource allocation: By understanding the impact of stress and drug use on academic performance, institutions can allocate resources appropriately, such as counseling services, mental health programs, or academic support initiatives.

Policy development: Research can inform the development of policies and guidelines to create a supportive and healthy environment for students, addressing stress-related issues and drug use.

Student support: Research can provide teachers with insights into the factors affecting students' academic performance, allowing them to identify signs of stress or drug use and provide appropriate support and resources.

Teaching strategies: Understanding the impact of stress and drug use on learning outcomes can help teachers adapt their teaching strategies to accommodate the diverse needs of students and create a positive classroom environment.

Parents and Guardians: Awareness and understanding: Research can increase parents' awareness of the potential effects of stress and drug use on their children's academic performance. It helps them understand the importance of monitoring and supporting their child's mental health and well-being.

Parental involvement: Research findings can encourage parents to actively engage in their child's education, collaborate with schools, and support initiatives that address stress-related issues and drug use.

Healthcare Professionals: Treatment and prevention: Research on stress and drug use can inform healthcare professionals about effective prevention and treatment strategies for addressing these issues among students. This knowledge can guide their interventions and contribute to improved mental health outcomes.

Collaboration with schools: Healthcare professionals can collaborate with educational institutions based on research findings to develop comprehensive health programs, provide counseling services, and offer necessary support to students.

Policy Makers and Government: Evidence-based policymaking: Research outcomes can serve as evidence for policymakers to develop comprehensive policies addressing stress and drug use in

educational settings. It can help allocate resources, design preventive measures, and establish guidelines for schools to follow.

Public health initiatives: By understanding the relationship between stress, drug use, and academic performance, policymakers can develop public health initiatives that focus on promoting mental well-being and reducing substance abuse among students

1.5 Scope of the Study

1.5.1 Content scope

The study focused on determining the relationship between stress, drug use, and academic performance

1.5.2 Geographical scope

The study was conducted at the School of Psychology, Makerere University Kampala, Uganda.

1.5.3 Time scope

The study was carried out between June and October 2023.

1.6 Conceptual framework

Stress (IV)

- ❖ Anxiety
- ❖ Feeling hurried
- ❖ Uncertainty
- ❖ Fatigue
- ❖ Sleep difficulties

Drug Use (IV)

- ❖ Abusing many substances at the same time;
- ❖ Being unable to quit taking drugs when needed;
- ❖ Experiencing "blackouts" or "flashbacks";
- ❖ Feeling unhappy or guilty about drug use;

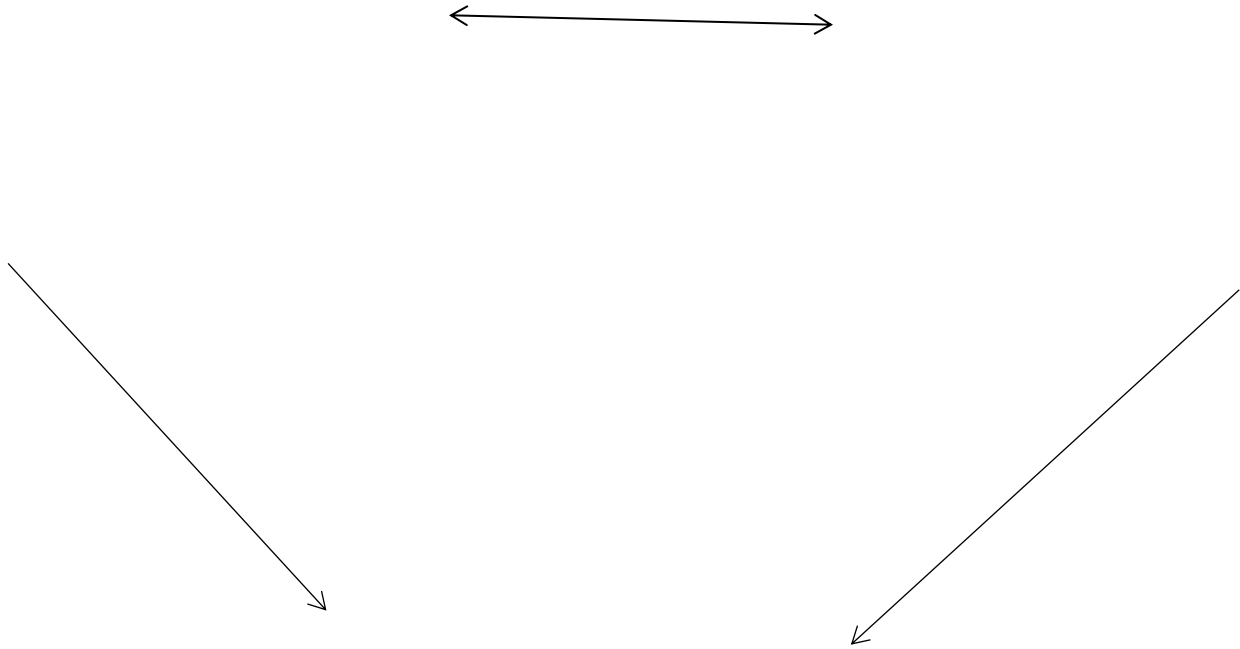


Figure 1: Conceptual framework showing the relationship between stress, drug use and academic performance

The framework showed stress and drug use as the independent variables and academic performance as the dependent variable. It also indicated that stress had a relationship with drug use. Drug use was related to stress, and both stress and drug use were associated with academic performance.

Chapter Two: Literature Review

2.0 Introduction

This chapter outlines the literature related to the study topic of stress, drug use and academic performance among Psychology students of Makerere University.

2.1 Stress and Academic Performance

Stress is a hugely unpleasant state of emotional arousal that humans experience in situations perceived as troublesome or challenging (Khodarahimi, Hashim, & Mohd – Zaharim, 2012). Baker (2003) noted that the undergraduates are faced with many new interpersonal, social, and academic demands during the transition from secondary school life to university, which is stressful for many of them. The immediate challenges that students face are the decisions they have to make about the presented career paths in addition to developing and negotiating new relationships, getting novel ideas that challenge their past-learned views, and moving away from home (Lumley & Provenzano, 2003). Baker further noted that adjustment during the transition period is linked to the way the undergraduate copes with that stress which affects academic motivation and performance. DeBerard, Spielmans, and Julka (2004) emphasize that the potential buffer for stress during the transition into university life is social support from friends, peers, and religious peers that provide insulation from the harmful impact of stress.

In the academic environment, high expectations, information overload, academic pressure, unrealistic ambitions, limited opportunities, and high competitiveness are some of the common sources of stress that create tension, fear, and anxiety in students (Sinha, Sharma, & Nepal, 2001). In a study by Dahlin, Joneborg, and Runeson (2005), undergraduate students indicated experiencing the highest degree of pressure from studies. Misra, Mckean, West, and Russo (2000) pointed out that students have found the requirement to meet assessment deadlines as a major source of stress. Students report experiencing academic stress with the greatest sources of academic stress coming from taking and studying for exams, grade competition, and the large amount of content to master in a small amount of time (Kohn & Frazer, 1986).

Course load versus time available has also been cited to be a stressful factor in the academic environment (Zeidner, 1992). Studies reveal that students perceive course load to be high in their first year of study, and that the perception of course load positively correlates with exam stress (Mani, 2010). In their study, Talib and Zai-ur-Rehman (2012, p. 129) found out that majority of the students (53%) claimed that course load is the source of their stress which in turn affected their GPA. Further students report that the prospect of having to sit for examinations are stressful because of the pressure to review all the learned material within a given period of time (Mani, 2010). Mani explains that it is not the examination itself that induces stress but the fact that the

possibility of failing or passing the exam can shape the course of one's academic career and professional life.

Besides the course load and exam preparation, there are course demands that may induce academic stress depending on the nature of the course that the student is undertaking (Bernold, Spurlin, & Anson, 2007; Kuhn, Kranz, Koo, Cossio, & Lund, 2005). Research conducted to explore factors that lead to academic related stress of medical students cite academic demands like variable hour shift for clinical rotations, sleep deprivation in addition to the curriculum overload (Kuhn, et al., 2005). Psychology students reported that stress emanating from the supervisory process while in field placement was due to the individual differences between the trainee and the supervisor (Dodds, 1986). Further research by Talib and Zai-ur-Rehman (2012) showed that there was a significant difference in the perceived stress between engineering students and management science students. The engineering students had a higher mean academic stress score than the management science students.

In their study on sources of stress among college students, Ross, Niebling, and Heckert (1999) found that daily hassles related to interpersonal relations were the most often reported source of academic stress among the college students. This can be attributed to personal issues such as the individual differences in values, beliefs, situational intentions, and goal commitments that greatly influence one's perceived stress (Devonport & Lane, 2006). Jou and Fukada (1996) confirmed this as their research findings illustrated a positive correlation between interpersonal problems and other stressors implying that the more interpersonal problems students had, the more stress they were likely to face. Personal factors were recognized as a challenge that influenced their coping mechanisms and eventual levels of stress (Bang, 2009; Zeidner, 1992).

Ross et al. (1999) emphasized the fact that stress levels varied basing on the year of study. The first-year students were more prone to greater stress compared to other years of study. This resulted from the absence of a social support framework and the transitional nature of college life that requires adjustment to the new environment amidst new responsibilities and challenges. At times, the first-year students are leaving home for the very first time and therefore need to adjust to the newfound freedom as well as maintain a high level of academic performance (Robotham, 2008). On the other hand, Shaikh et al. (2004, p. 346) found that senior students experienced higher levels

of stress that is 95% and 98% for fourth and final year students respectively due to the academic demands like having supervised clinical rotation. Furthermore, that final year students are required to write their research dissertations that exposes them to additional stress. In addition to stress levels varying across the year of study, Misra, McKean, West, and Russo's (2000) research findings suggest that stress levels vary by gender of the students.

Levels of academic related stress differed among male and female students with female students being more prone to more academic stress than their male counterparts (Abouserie, 1994; Bang, 2009; Misra & Mckean, 2000; Rayle & Chung, 2008). Females experienced higher levels of academic stress because of negative appraisals of the stressful event and focus on the emotional challenges in the wake of the stressful event. Male students are trained to display strength and machismo in the face of challenges right from their young age (Misra & Mckean, 2000). However, female students performed better than the male students and had better GPAs than male students even in case of significant stress (Talib & Zia-ur-Rehman, 2012).

Despite all the sources of stress in the academic environment, the future of the students depends most on high academic performance. It is estimated that 10 to 30 percent of the students experience academic related stress that affects their academic performance (Sinha, Sharma, & Nepal, 2001, p. 105). Academic stress is documented to have several negative effects not only to the academic performance of the students but also to their wellbeing. Academic stress is seen to interfere with the students' way of life, cognitive processes, and adaptive behaviors such as class attendance (Lumley & Provenzano, 2003). Studies have shown that there is a positive association between academic stress, depression, and physical illness, which these associations decrease with the provision of informational support (Fisher, 1994).

Other forms of coping mechanisms used by students include sports, music, hanging out with friends, sleeping, or going into isolation (Shaikh, et al., 2004). Students with higher problem-solving appraisals reported better psychosocial adjustment to university life, had lower levels of stress while studying, and better academic performance than their counterparts with lower problem-solving appraisals (Baker, 2003). More specifically, male students use more active coping, positive reframing, planning, and accepting the stressor whereas female students use more emotion focused strategies like venting, self-blame, and behavioral disengagement (Davonport & Lane, 2006). The choice of coping mechanisms used is accounted for by the difference in the

gender role expectations and sex role stereotypes where females are taught to focus on emotions and seek social support whereas males are trained to take outward action to deal with the stressful situation (Bang, 2009).

Many college students may find the academic experience very stressful, attributing it to various poor study habits such as poor time management that may include not allocating time properly or last-minute cramming for exams. This is frequently discussed as a source of stress and poor academic performance (Macan, et al., 1990). In addition, very often students are urged to start working on large tasks well before due dates. The large tasks are broken down into small ones, which are achievable on a regular schedule. Students who regularly ignore these techniques find themselves in great distress before exams (Brown, 1991). This results in the students having increased stress due to pressure and as a result students engage in emotional and cognitive reactions to stressors more frequently (Misra & Mckean, 2000).

Generally, students appreciate the fact that examination grades are the most important aspect of their school life. However, the process of preparing for examinations was reported to be the most stressful event of their school life (Ang & Huan, 2006; Ang, et al., 2009; Dobson, 1980).

2.2 Drug use and Academic Performance

Drug use can simply be defined as a pattern of harmful use of any substance for mood- altering purposes. "Drugs" can include alcohol and other s (illegal or not) as well as some substances that are not drugs at all. "Use" can result because you are using a Drug in a way that is not intended or recommended, or because you are using more than prescribed. To be clear, someone can use Drugs and not be addicted or even have a Drug use disorder. (AT. McLellan, 2017).

University students have been reported to consume higher levels of alcohol than non- university students worldwide (Kypri, Langley, 2005). Various theories have been advanced to explain this observation. For example, the tension reduction theory contends that tension producing circumstances (i.e. stressors) could lead to increased drinking (Sher, Bartholow, 2007; Young, Oei, Knight, 1990). Given that alcohol is perceived to reduce tension, high levels of stress and depressive symptoms are associated with alcohol consumption (Dyrbye et al., 2006; Ansari, Stock, 2010; Dahlin, Nilsson, Stotzer, Runeson, 2011; Jones-Webb, Jacobs, 1996). Indeed, college

students have been reported to consume alcohol to potentially relax or relieve tension, celebrate, and feel comfortable with the opposite sex, as a reward for working hard and to get away from troubles (Marczinski et al., 2011).

Unfortunately, excess consumption of alcohol has adverse physical and mental health consequences which lead to impaired academic malfunctioning. The majority of research studies on the alcohol use patterns of university students have been conducted in developed countries. These studies have shown that among university students, factors including year of study, peer influence, age, having an income source among others as divers to high levels of alcohol consumption in these settings (Berkowitz, Perkins, 1986).

University life is a developmental transition to new responsibilities in absence of well- established networks of social support. On the other hand, it also represents freedom, liberty and fewer restrictions due to living away from parents (A. Claes, J. Kent, 2007). Both aspects can increase the use of alcohol among university students. The alcohol patterns of young adults vary according to gender in the same way as in the general population (Dyrbye et al., 2006). In general, men drink more alcohol and experience more and different kinds of alcohol related problems. To our knowledge, alcohol use patterns among university students in sub-Saharan Africa are limited and non-existent in Uganda. Studies on alcohol consumption among university students have mainly focused on prevalence rates and associated factors of alcohol use problems (Atwoli et al., 2011; T. Steyl, J. Phillips, 2011). Information about the different alcohol use patterns and their correlates is lacking. Further, the extent to which various factors such as gender and year of study may be associated with various alcohol use patterns has not been

2.3 Stress and Drug Use

There have been reports on the use of alcohol to relieve stress since ancient times. The concept of “drinking to relax”, in addition to drinking in social settings, has had a strong influence in different cultures (Sayette, 1999). According to the stress-reducing theory, some people use alcohol for its anxiolytic and stress-reducing effects, since this helps them to cope with stressful situations (Conger, 1956). Most theories of dependence assume that stress plays an important role in increasing Drug use and also in triggering relapse (Campbell, Szumlinski, & Kippin, 2009; Ungless, Argilli, & Bonci, 2010). Moreover, studies in animals and humans have shown that exposure to stress increases the self-administration of s (Caldwell & Riccio, 2010; Erb, 2010;

Weiss, Ciccocioppo, Parsons, Katner, Liu, Zorrilla and Richter2001). Interestingly, Farber, Khavari, & Douglass (1980) reported that while most of the social drinkers used alcohol for its positive reinforcing effects (pleasant mood, celebration, sociability), 93% of a sample of alcoholics used alcohol for its negative reinforcing properties (stress reduction). In addition, the use of ethanol tended to be high in individuals with high levels of stress and anxiety (Kushner, Sher, & Beitman, 1990; Terra, Barros, Stein, Figueira, Jorge, Palermo and Da Silveira2006).

Most of the studies on the relationship between stress and Drug use were carried out in adult - dependent individuals (Battista, Stewart and Ham2010; DeMartini & Carey, 2011). There are few studies on this issue in the adolescence period, although this is the most critical and susceptible period to start using s (Ernst & Korelitz, 2009; Ernst, Romeo, & Andersen2009; Silva, Malbergier, Stempliuk and de Andrade 2006).

According to many reports, exposure to stress in students is significantly associated with the use of alcohol and s (Agnew & White1992; Hoffmann, Cerbone and Su, 2000; Hoffmann & Su, 1998; Koch-Hattem & Denman, 1987; Shahtahmasebi & Berridge, 2009). However, few studies take into account the different kinds of stress or its stage (Tarter, Blackson, Brigham, Moss, & Caprara, 1995). Stress is a process that involves both cognitive and affective perceptions of a stressful event, the development of coping strategies and the production of biological, behavioral and cognitive responses (Sinha, 2001). Selye (1956) defined this set of non- specific reactions that the body develops in the face of stressors as the “General Adaptation Syndrome”. It manifests itself in three distinct stages: alarm or alert stage, resistance stage and exhaustion stage. Lipp (2000) proposed the inclusion of a fourth stage to Selye’s triphasic model: the “near exhaustion” stage, which corresponds to the second half of the resistance stage where the body’s energy is nearly depleted. Tricoli (2002) validated an instrument (Stress Scale for Adolescents - SSA) to evaluate the psychological, cognitive, physiological and interpersonal aspects of stress, classifying them according to the stages proposed by Lipp (2000). Cerbone & Larison (2000) pointed out the need for studies that use standardized instruments and also focus on other factors, such as the cultural context, to allow for a more adequate evaluation of the complex relationship between stress and Drug use, since there are many other issues associated with both in this period, such as academic performance (Wechsler, Davenport, Dowdall, Moeykens, & Castillo, 1994), living arrangements (De Micheli & Formigoni, 2004) and neurobiological vulnerabilities (Ernst & Korelitz, 2009).

2.4 Hypotheses

1. There is significant relationship between stress and academic performance.
2. There is significant relationship between Drug use and academic performance.
3. There is significant relationship between stress and Drug use.

Chapter Three: Methodology

3.0 Introduction

This chapter entailed the study design, population, sampling procedure and sample size, data collection methods, data collection instruments, data quality control, data analysis and presentation plan and ethical considerations.

3.1 Research design

The study undertook a quantitative research approach. By adopting this approach, correlational research design was preferred. Wood (2006) defines Correlational design as a study design for examining the relationships between or among two or more variables in a single group, which can occur at several levels. Therefore, the correlational design was preferred in this study because it allowed the researcher to investigate relationships between the study variables without the researcher controlling or manipulating any of them. This allowed the researcher to reflect the strength and/or direction of the relationship between the variables.

3.2 Study Population

Study population was referred to as the total sum of elements from which conclusions were drawn (Odoh, M. & Chinedum, 2014). The target population was defined as the population to which a researcher wanted to generalize the results of a study (Saunders, 2016). The study population consisted of Psychology students of Makerere University Kampala. Specifically, the study targeted third-year undergraduate students from the courses of Community Psychology. This specific population was chosen because the students were more open to discussing stress, drug use, and academic performance due to the fact that they had studied deeply about these issues during their three years in course units like; Alcohol and Behavior, Stress and Stress Management, Introduction to Research Methods, Behavior Change, and many others.

3.3 Determination of the Sample size

A sample size was the number of elements that the study intended to cover from the target population and these could be human beings, animals, or other things (Amin, 2005). The study sample size was computed using the Krejcie and Morgan formula of Sample Size Determination (1970). The formula was:

$$n = \frac{X^2 * N * P * (1-P)}{(ME^2 * (N-1)) + (X^2 * P * (1-P))}$$

Where;

N = sample size

X^2 = Chi-square for specified confidence level at 1 degree of freedom

N = Population size

P = Population proportion

ME = Desired Margin of Error

A summary of the sample sizes is offered in Table 3.1.

Table 1: Population Sample Size

Category	Population	Sample size	Sampling technique
Psychology students	100	80	Simple random sampling Stratified sampling
Total	100	80	

Source: Krejcie and Morgan (1970) table

The study sample size was 80 students selected from the school of psychology to meet the sample size.

3.4 Sampling procedure

Sampling is the process of selecting a number of individuals for a study in such a way that the individuals selected represented the larger group from which they were selected (Ogula, 2015). The study employed sampling techniques. Probability sampling involved everyone having an equal chance of being selected. Sampling procedures included; simple random sampling, and stratified sampling techniques.

3.5 Sampling techniques

3.5.1 Simple random sampling

Mugenda and Mugenda (2019) explain that the goal for simple random sampling is to achieve desired representation from the members of accessible population. This sampling technique involved selecting students at random without discrimination and all samples were given equal chances of being selected for the study.

3.6 Data collection Instruments

A self-administered questionnaire with structured and closed-ended questions was the main data collection tool. Section A measured respondents' socio-demographic information which included; age, sex, and marital status. Section B examined stress; Section C examined drug use; and Section D examined academic performance among students of Makerere University. The Perceived Stress Scale (PSS), a widely used psychological tool designed to measure the level of perceived stress in individuals, was used. It assessed the subjective experience of stress by examining the extent to which situations in one's life were appraised as stressful. The scale captured the degree to which individuals felt overwhelmed, overloaded, and unable to cope with the demands of their lives.

The PSS was developed by Sheldon Cohen, a psychologist at Carnegie Mellon University, in collaboration with R. L. Kamarck and S. Mermelstein. The scale was first published in 1983 in the *Journal of Health and Social Behavior* in a paper titled "A Global Measure of Perceived Stress." The scale consisted of 14 items that evaluated the individual's thoughts and feelings about their life circumstances over the past month. Respondents rated each item on a 5-point Likert scale ranging from 0 (never) to 4 (very often). The items focused on the unpredictability, uncontrollability, and overload of life situations, as well as the perception of coping ability. Scores on the Perceived Stress Scale could range from 0 to 56, with higher scores indicating higher levels of perceived stress. The scale has been widely used in research and clinical settings to assess stress levels and explore the relationship between stress and various outcomes, such as physical health, mental well-being, and performance. It has been translated into numerous languages and has been validated in diverse populations. Perceived academic performance scale also was a common tool used in research for scaling responses in survey research. This particular scale had five response options ranging from Strongly Agree to Strongly Disagree, designed to capture the intensity of the respondents' feelings towards their perceived academic performance.

In this instance, the scale was used to understand the participants' perceptions of their academic engagement and performance. The questions ranged from self-perceptions of preparedness and attentiveness, to motivation, participation, problem-solving abilities, and attitudes toward homework and challenging assignments. In scoring the Likert scale, often, values were assigned to each option. For example, Strongly Agree might have been worth 5 points, Agree 4 points, Neutral 3 points, Disagree 2 points, and Strongly Disagree 1 point. By totaling the scores for each response, researchers could quantify the perceived academic performance of the participants.

The instrument used to measure drug use in this study was a self-administered questionnaire. The questionnaire was developed specifically for this study and consisted of twelve statements relating to participants' experiences and behaviors related to drug use within the last 12 months. Each statement was measured on a 5-point Likert scale ranging from 0 to 4. Here is a general description of each level: 0: Strongly Disagree/Not at all applicable, 1: Disagree/Slightly applicable, 2: Neutral/Somewhat applicable, 3: Agree/Very applicable, 4: Strongly Agree/Extremely applicable. The scale included a range of items to assess the frequency of drug use, the use of multiple drugs simultaneously, drug-related troubles with friends and family, physical and psychological impacts (such as blackouts or flashbacks), loss of self-control, withdrawal symptoms, engagement in illegal activities to obtain drugs, and feelings of guilt or regret. This scale provided a total score obtained by summing the responses to each item. Higher scores on this scale represented a higher level of drug use and potentially more severe consequences of drug use. Although this instrument was not a standardized or validated scale, it was designed carefully to encompass critical aspects of drug use and its consequences.

All questionnaire responses were self-reported, requiring respondents to reflect honestly on their personal experiences with drug use. Despite potential limitations, such as social desirability or recall bias, this scale provided valuable insights into the drug use behaviors and experiences of our sample.

3.7 Validity and Reliability of study instrument

3.7.1 Validity

Validity is the extent to which the instrument measures what it was intended for (Kakinda-Mbaaga, 2000). The validity of the instruments was ensured with the help of knowledgeable people, specifically supervisors from Makerere University. The validity of the questionnaire was

determined using these content experts or supervisors. The supervisors were provided with the instrument to judge questions as either relevant or irrelevant, and afterward, a content validity index was calculated using a specific formula. According to Kakinda-Mbaag (2000), the instrument was considered valid when the final or computed value was greater than 0.5.

3.7.2 Reliability

The reliability of the instruments was established using the Cronbach Alpha method. Ten questionnaires were pretested with students and lecturers of Makerere University School of Psychology. The data derived was then entered into a computer using SPSS. Using the Cronbach Alpha method, the reliability values for the questionnaire were considered acceptable once they were greater than 0.5 (Cresswell, 2009). Following this, the rest of the questionnaires were provided to respondents for the purpose of data collection.

3.8 Data Collection Procedure

With the approval of the proposal, an introductory letter was sought from Makerere University to introduce the researcher to the psychology students, lecturers, and administrators in Makerere University. In addition, the researcher wrote a personal introductory letter requesting respondents to provide primary data and required responses. This was followed by testing for the reliability and validity of the study instruments. Afterwards, two research assistants were recruited and trained to help administer questionnaires to the respective respondents. The collected data was then analyzed, followed by the writing of a final report which was submitted to Makerere University for examination.

3.9 Data analysis and presentation plan

Collected data from the field was compiled, sorted, edited, and coded. It was then entered into the computer for analysis using the Statistical Package for Social Sciences (SPSS). Linear regression analysis was used to show the relationship between the variables and to reject or accept the hypothesis. The results were presented in descriptive formats such as tables, frequencies, percentages, and figures.

3.10 Ethical considerations

This referred to the integrity involved in conducting research to ensure that law and order were maintained (Hair, 2010). Issues frequently encountered in ethics included, among others: plagiarism, obtaining consents from relevant authorities before engaging in research, use of faulty methods and procedures of data collection, and misleading authorship. The researcher was careful

to ensure that all ethical issues were adhered to during the whole process of research. To achieve this, the researcher kept confidential information provided by respondents with privacy and anonymity and was highly alert to cases of plagiarism. No cases of falsification of cited sources and information were accepted. All references were acknowledged as acquired during the review. Adulteration of findings to suit the researcher's ambitions was strictly prevented. Thus, they were presented as originally acquired from the field. Respondents were not interfered with during data collection. The researcher considered the following ethical aspects; Respect: Respondents were respected through the use of polite language and a considerate approach. Confidentiality: Respondents' confidentiality was ensured by use of codes instead of their names.

Gender Consideration: Both male and female respondents were involved to avoid bias based on gender.

Chapter Four: Results

4.0 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 linear regression analysis.

4.1 Sociodemographic information

The study consisted of 100 respondents evenly split in terms of sex with 50% males and 50% females. The majority of these individuals are in the 20-30 age group, comprising 83% of the sample, with the remaining 17% falling in the 31-40 age bracket

In terms of marital status, most are single (74%), while 21% are married, and a small fraction, 5%, are divorced. (*Table 2*)

Table 2: Socio demographic information of respondents

Variable	Category	Frequencies(N=100)	Percentages%
Sex	Male	50	50
	Female	50	50
Age category	20-30	83	83
	31-40	17	17
Marital status	Single	74	74
	Married	21	21
	Divorced	5	5

4.2 Inferential statistic

This was aimed to examine the significant relationship between Stress, and Academic performance.

Table 3: Multiple regression analysis to determine the relationships between stress (independent variables) and academic performance (the dependent variable)

Model Summary				
Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.263 ^a	.069	.050	.45617

a. Predictors: (Constant), Stress

ANOVA^a						
Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	1.499	2	.750	3.602	.031 ^b
	Residual	20.185	97	.208		
	Total	21.684	99			

a. Dependent Variable: Academic performance

b. Predictors: (Constant), Stress

Coefficients^a						
Model		Unstandardized Coefficients		Standardized Coefficients	t	Sig.
		B	Std. Error	Beta		
1	(Constant)	3.441	.423		8.127	.000
	Stress	.012	.121	.010	.099	.921
	Drug use	-.240	.089	-.264	-2.681	.009

a. Dependent Variable: Academic performance

Table 3 presents the results of a multiple regression analysis to determine the relationships between academic performance (the dependent variable) and stress (independent variable)

R, the correlation coefficient, indicates the strength and direction of a linear relationship between two variables. In this case, an R value of .263 suggests a weak positive relationship between both stress and academic performance.

R Square, which indicates the proportion of variance in the dependent variable that can be explained by the independent variables, is .069. This suggests that stress only account for about 6.9% of the variation in academic performance, indicating a weak predictive power.

The F statistic (3.602) with a significance (p-value) of .031 is less than the standard cutoff of .05, suggesting that the model as a whole is statistically significant, i.e., the independent variable (stress) significantly predict the dependent variable (academic performance).

The coefficient table provides information about each predictor's effect on the dependent variable. Stress has a positive but minimal impact on academic performance (B=.012), and its high p-value (.921) indicates that this result is not statistically significant.

Table 4: Multiple regression analysis to determine the relationships between Drug use (independent variables) and academic performance (the dependent variable)

Model Summary				
Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.263 ^a	.069	.050	.45617
a. Predictors: (Constant), Drug use				

ANOVA ^a						
Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	1.499	2	.750	3.602	.031 ^b

	Residual	20.185	97	.208		
	Total	21.684	99			
a. Dependent Variable: Academic performance						
b. Predictors: (Constant), Drug use						

Coefficients ^a						
Model		Unstandardized Coefficients		Standardized Coefficients	t	Sig.
		B	Std. Error	Beta		
1	(Constant)	3.441	.423		8.127	.000
	Drug use	-.240	.089	-.264	-2.681	.009
a. Dependent Variable: Academic performance						

Table 4 presents the results of a multiple regression analysis to determine the relationships between academic performance (the dependent variable) and drug use (independent variable)

R, the correlation coefficient, indicates the strength and direction of a linear relationship between two variables. In this case, an R value of .423 suggests a weak positive relationship between drug use and academic performance.

R Square, which indicates the proportion of variance in the dependent variable that can be explained by the independent variables, is .009. This suggests that drug use only account for about 9% of the variation in academic performance, indicating a weak predictive power.

The F statistic (3.441) with a significance (p-value) of .0240 is less than the standard cutoff of .05, suggesting that the model as a whole is statistically significant, i.e., the independent variable (drug use) significantly predict the dependent variable (academic performance).

The coefficient table provides information about each predictor's effect on the dependent variable. Drug use has a positive but minimal impact on academic performance ($B=.0.240$), and its high p-value (.089) indicates that this result is not statistically significant. Drug use negatively affects academic performance ($B=-.240$), with a significant p-value of .009, meaning it's likely a meaningful predictor.

Table 5: Simple regression analysis examining the relationship between stress (independent variable) and drug use (dependent variable).

Model Summary				
Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.083 ^a	.007	-.003	.51584
a. Predictors: (Constant), Stress				

ANOVA^a						
Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	.180	1	.180	.675	.413 ^b
	Residual	26.077	98	.266		
	Total	26.257	99			
a. Dependent Variable: Drug use						
b. Predictors: (Constant), Stress						

Coefficients^a					
Model	Unstandardized Coefficients		Standardized Coefficients	t	Sig.
	B	Std. Error	Beta		

1	(Constant)	2.768	.389		7.120	.000
	Drug use	.112	.136	.083	.822	.413
a. Dependent Variable: Drug use						

Table 5 presents a simple regression analysis examining the relationship between stress (independent variable) and drug use (dependent variable). The model summary shows an even weaker relationship ($R = .083$) than in Table 2, and an extremely low R Square value (.007) suggests that stress explains just 0.7% of the variance in drug use. The F statistic (0.675) with a significance of .413, which is above the common cutoff of .05, suggests that the model is not statistically significant. Therefore, stress is not a significant predictor of drug use based on this model.

Therefore, in reference to results in table 3 and 4;

There is no significant relationship between stress and academic performance among psychology students at Makerere University, rejecting the first hypothesis.

There is a significant negative relationship between drug use and academic performance, accepting the second hypothesis.

There is no significant relationship between stress and drug use among these students, rejecting the third hypothesis.

Chapter Five: Discussion, conclusions and recommendations

5.1 Introduction

This chapter represents discussion of the study findings in comparison to previous research findings, conclusion and recommendations.

5.2 Discussions

5.2.1 Stress and Academic performance

The current study reveals that there isn't a significant correlation between stress and academic performance among psychology students at Makerere University, thus negating the first hypothesis. This conclusion aligns with the findings of a cross-sectional study conducted among university medical students, which also did not find a statistically significant association between stress and academic performance (Rafidah, 2009). Such results suggest that public health efforts may need to reconsider focusing on stress management as a key to improving academic performance. Instead, resources could be directed more effectively towards other factors that have a direct influence on academic outcomes.

The lack of a significant link between stress and academic performance highlights the potential need for public health initiatives to pay attention to other influences on academic performance. These could include the quality of education, personal motivation, study habits, or other mental health concerns aside from stress.

However, these findings are at odds with a cross-sectional study conducted among medical students in Pakistan, which revealed a moderate negative correlation between academic performance and sources of stress (Akgun,2003). This discrepancy emphasizes the importance of understanding the unique cultural, academic, and personal contexts of various student populations when creating public health interventions. The results underscore that strategies effective for one group may not be applicable to another, underlining the need for bespoke, population-specific initiatives.

5.2.2 Drug use and Academic performance

The findings of this study suggest a substantial negative correlation between drug usage and academic performance among psychology students at Makerere University, thus validating the second hypothesis. This aligns with the results from a comparative cross-sectional study conducted among university students in Bangladesh, which also indicated a negative correlation between drug abuse and academic performance (Sujan, 2021).

Furthermore, this study echoes the findings from a cross-sectional study among Wolaita Sodo University students, where a significant negative association was observed between drug use and students' academic performance (Mekonen, 2017).

Given the congruent findings across these studies, it becomes imperative to develop and bolster substance abuse prevention programs at universities. Implementing such strategies could help curb drug use and lessen its associated negative influence on academic success among students.

5.2.3 Stress and Drug use

The current research did not find a significant correlation between stress and drug use among the surveyed students, contradicting the third hypothesis. This outcome differs from a prior study by Coleman et al (2015), which demonstrated a significant link between stress and drug use among university students. The lack of correlation in the present study indicates that other key factors that contribute to drug use among university students should be considered when creating prevention and intervention strategies.

Conversely, our findings align with research carried out among medical students in a North Indian medical college (Arora, 2016), where psychological stress was a leading reason for substance use. These results underscore the importance for universities and public health organizations to concentrate on developing effective stress management programs and bolstering mental health services. Such initiatives could provide healthier stress coping mechanisms, potentially diminishing the appeal of substance use.

The findings also highlight the need for preventative steps to discourage drug use among university students. Public health initiatives could focus on raising awareness about the adverse effects of resorting to substance use as a stress coping mechanism, while also advocating for healthier stress management alternatives. Universities have a critical role to play in this process by ensuring comprehensive mental health support services are available and accessible to students. Crucially, this should include cultivating an environment free of stigma, where students feel comfortable seeking help when faced with psychological stress or other mental health issues.

5.3 Study limitations

Ethical Issues: Due to the sensitive nature of the topics (stress, drug use), some participants might not have been comfortable disclosing truthful information, which could have affected the accuracy of the results.

Limited Scope: The study focuses only on drug use and stress, while there might be other significant factors impacting academic performance such as mental health issues, learning disabilities, or family problems.

Self-Reported Data: The data was collected using self-reported measures, which are subject to response bias, including social desirability bias where participants may underreport drug use or overreport academic performance.

Sample Size and Composition: The sample size of 100 students from a single university, and specifically from the psychology department, may not be representative of the larger student population at Makerere University or other universities. Therefore, the results might not be generalizable to all students.

5.4 Conclusion

The multiple regression analysis presented in this research reveals a significant, albeit negative, relationship between drug use and academic performance among psychology students at Makerere University, with drug use accounting for a notable proportion of variance in academic performance. This implies that increased drug use corresponds with decreased academic performance, validating our second hypothesis. On the contrary, the data does not support a significant relationship between stress and academic performance, nor between stress and drug use, leading us to reject the first and third hypotheses. Therefore, while stress appears to have a negligible impact on both academic performance and drug use in this context, interventions aimed at reducing drug use among students might be an effective strategy to enhance academic performance.

5.5 Recommendations

1. Although stress doesn't appear to directly impact academic performance, it's crucial to implement strategies to manage stress for overall student wellness. For examples;
 - a. **Counseling Services:** Provide professional counseling services that students can access when they are feeling stressed, anxious, or depressed. These services should be free or at a low cost to ensure all students can access them.
 - b. **Mental Health Programs:** Implement mental health programs that educate students about the effects of stress, symptoms of mental health issues, and ways to manage stress. These programs could include workshops, lectures, and online resources.

- c. **Exercise and Recreational Facilities:** Regular exercise has been shown to reduce stress. Therefore, providing adequate and well-equipped exercise and recreational facilities is crucial. Encourage students to use these facilities regularly.
2. Given the significant negative relationship between drug use and academic performance, programs aimed at drug use prevention and cessation could be beneficial for improving students' academic performance. For examples;
 - a. **Prevention and Education Programs:** The university should create a comprehensive drug education program that provides accurate information about the harmful effects of drug use on both physical health and academic performance. It should also explain the legal implications of drug use.
 - b. **Counseling and Rehabilitation Services:** Counseling services should be readily available for students who are struggling with substance abuse. Additionally, students should be given information about off-campus resources, like local rehabilitation centers or nationwide hotlines.
 - c. **Peer Education Programs:** Peer-led initiatives can be effective because students may be more likely to listen to their peers than to authority figures. Train student leaders to provide education about the risks of drug use, how to resist peer pressure, and where to find support if they're struggling with substance abuse.
 - d. **Support Groups:** Regularly held support groups can provide a safe space for students who are dealing with substance abuse issues to discuss their experiences and coping strategies.
 - e. **Drug-Free Campus Policies:** Universities should have clear, firm policies against drug use on campus, including appropriate consequences for violations. However, these policies should also prioritize getting help for students who are struggling with drug use, rather than
3. More research could be conducted to identify other potential variables impacting academic performance, as the current model only explains a small percentage of its variance.
4. Despite stress not directly affecting drug use, addressing stress management might indirectly help in curbing drug use as stress can sometimes lead to unhealthy coping mechanisms such as drug use.
5. Further research could also be conducted using a larger sample size or different context, to establish whether these findings hold or vary in different settings or groups.

6. Finally, it would be beneficial to explore the causal relationship between drug use and academic performance to understand this link better and design effective interventions.

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Appendices

Appendix 1: Informed Consent Form

Dear respondent, we are students pursuing Bachelor of Community Psychology at Makerere University. This form is meant to seek for your consent before you take part in this study which will be used for academic research purposes only. Our topic is: “Stress drug use and academic performance...” You have been randomly selected to participate in this study. I-----of ----- agree to participate in this study and I understand that my participation is voluntary. I am aware that I have a right to withdraw from the exercise at any time if I feel that I am not comfortable without being asked to give a reason. By signing below, I am indicating my consent to participate in this study and I understand that the data collected from my participation will be used primarily for a bachelor’s degree dissertation, I consent for it to be used in that manner.

Signed

Date...../...../.....

Name

Appendix 2: Questionnaire
Section A: Respondent’s Bio data

S/N	Categories	Coding Category	Response (tick or fill)
1.	Sex	Male	
		Female	
2	Age	20-30yrs	
		31-40yrs	
3.	Marital status	Single	
		Married	
		Divorced	
		Widowed	

Instructions: The questions in this scale ask you about your feelings and thoughts during the last month. In each case you will be asked to circle or tick that option that corresponds to you.

Please tick the appropriate answer for each of the following questions below

0 = Never 1 = Almost Never 2 = Sometimes 3 = Fairly Often 4 = Very Often

These questions refer to the past 12 months		0	1	2	3	4
1	In the last month, how often have you been upset because of something that happened unexpectedly?					
2	In the last month, how often have you felt that you were unable to control the important things in your life					
3	In the last month, how often have you felt nervous and “stressed”?					

4	. In the last month, how often have you felt confident about your ability to handle your personal problems?					
5	In the last month, how often have you felt that things were going your way					
6	In the last month, how often have you found that you could not cope with all the things that you had to do?					
7	In the last month, how often have you been able to control irritations in your					
8	In the last month, how often have you felt that you were on top of things?					
9	In the last month, how often have you been angered because of things that were outside of your control?					
10	In the last month, how often have you felt difficulties were piling up so high that you could not overcome them?					

SECTION B: DRUG USE

Instructions: Please respond honestly by indicating to what degree you agree with each of the following statements by ticking against the statements below.

Please tick the appropriate answer for each of the following questions below

	These questions refer to the last 12 months	0	1	2	3	4
1	In the past 12 months I have used drugs					
2	I have used more than one drug at a time					
3	In the past 12 months, using drugs has got me into trouble with my friends and family					

4	I have had blackouts or flashbacks as a result of drug use					
5	Whenever I use drugs, I lose self-control					
6	Whenever I use drugs, I avoid people who are close to me					
7	Am always able to stop using drugs whenever I want					
8	I have engaged in illegal activities in order to obtain drugs					
9	I have ever experienced withdrawal symptoms when I stopped taking drugs					
10	I have had medical problems as a result of my drug use e.g. memory less, convulsions					
11	I feel guilty about my drug use					
12	I continue to use drugs despite the negative consequences					

SECTION C: ACADEMIC PERFORMANCE

Instructions: Instructions: Respond by answering some questions about your use of substance. Your answers will remain confidential so please be honest. Place a tick in one box that best describes your answer to each question.

Please tick the appropriate answer for each of the following questions below

SA– STRONGLY AGREE **A** – AGREE **N** – NEUTRAL

D –DISAGREE **SD** – STRONGLY DISAGREE

Questions	SA	A	N	D	SD
1. I made myself ready in all my subjects.					
2. I pay attention and listen during every discussion.					
3. I want to get good grades in every subject.					

4. I actively participate in every discussion.					
5. I gain focus when I see technical problems.					
6. I enjoy homework and activities because they help me improve skills in every subject.					
7. I exert more effort when I do difficult assignments.					
8. Solving problems is a useful hobby for me.					

Appendix 3: Budget

The following items will be required for the researcher to carry out research

No	Item	Quantity	amount per item	Total amount
1	Transport	4	4000	16000
2	Spring file	3	3000	9000
3	Printing	150	200	30000
4	Ream of papers	1	20000	20000
5	Pen	1	500	500
Total			27700	75,500