IMPACT OF DRUG AND ALCOHOL ABUSE SCHOOL-BASED PREVENTIVE STRATEGIES ON PUPILS IN SELECTED SCHOOLS IN LIVINGSTONE DISTRICT OF ZAMBIA

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ABSTRACT

In recent years, there has been an upswing of drug and alcohol abuse among pupils in Livingstone District. This development raised concerns in the community who feared that this might put many pupils at risk of poor academic performance, behavior problems, and even contracting HIV and AIDS. This study therefore, sought to determine the impact of drug and alcohol abuse school-based preventive strategies on pupils in selected schools Livingstone District of Zambia.

A total number of 210 respondents formed the sample. This number included: 160 Pupils, 40 Teachers, 8 School managers, 2 Drug Enforcement Commission officers (DEC).

The study used both quantitative and qualitative methods. Questionnaires were used to collect data from pupils and teachers respectively, while semi-structures interview guides were used to collect data from School Managers and Drug Enforcement Commission officers. A focus group discussion guide was also used to collect data from pupils. Quantitative data was analyzed using Statistical Package for Social Sciences (SPSS), while thematic analysis was used to analyze qualitative data.

The study found out that 62% of pupils indicated that their knowledge of drug and alcohol abuse had increased. School managers and DEC officers also felt that pupils were more knowledgeable about drugs and alcohol abuse. Regarding behaviour, teachers, school managers and DEC officers felt that there was very little change in pupils’ behaviour.

In addition, the study also found that some strategies used, such as use of peer educators and involvement of parents were responsible for the positive impact on pupils’ knowledge, while the
use of less-interactive strategies such as lectures and talks contributed to low level of impact on pupils behaviour change.

In order to enhance school-based preventive strategies, respondents suggested the following measures: regular invitation of DEC officers to give talks to pupils, introduction of more clubs and sports activities, in-service training for teachers in preventive education and ban the selling of drugs and alcohol within the school premises and surrounding areas.

The researchers concluded that although preventive strategies used in schools had a significant positive impact on pupils’ knowledge, there was very little impact on pupils’ behaviour change.

On the basis of the study findings, it was recommended that: school-based drug and alcohol abuse prevention should be based on more interactive strategies, providers of drug and alcohol abuse preventive education should teach pupils more of drug refusal skills in combination with social life skills, teachers and peer educators should receive training in drug and alcohol abuse preventive education, DEC officers should provide drug and alcohol abuse preventive education on a regular basis and funding to National Education Campaign Division of DEC be increased to enable it to use research evidence-based strategies.

**INTRODUCTION**

Drugs and alcohol abuse is a worldwide problem. It affects all sectors of society in all countries. In particular it affects the freedom and development of youth who are the world’s most valuable asset (UNODC, 2002). The gravity and characteristics of this problem vary from region to region and country to country. In the recent past, drug and alcohol abuse among young people has risen to unprecedented levels. According to the World Drug Report, a total of 180 million people abuse drugs worldwide and the majority of these are youth (Lakhampal and Agnihotri, 2007). In addition, research indicates that alcohol, tobacco and marijuana are the most commonly abused substances by adolescents across the globe (Bourne, 2005).

In Zambia, alcohol and marijuana are the most abused drugs followed by volatile solvents and hard drugs such as heroin and cocaine (INCB, 1993). In response to the problem, the Drug Enforcement Commission and the Ministry of Education conduct preventive education in schools. The Ministry of Education has infused aspects of anti-drug and alcohol abuse facts into
the school curriculum. In addition, in some schools the ministry has established guidance and counseling departments, which deal with, among others drug and alcohol abuse issues. The Drug Enforcement Commission, through its Institution of Learning Programme, conducts awareness campaigns among pupils on the dangers of drug and alcohol abuse.

However, in the recent years, there has been an ups wing of drug and alcohol abuse among pupils in Livingstone district. This development raised concerns in the community members who feared that this might put many pupils at risk of poor academic performance, behaviour problems and even contracting HIV. In view of the increasing levels of abuse, questions have been raised concerning whether the school-based preventive strategies put in place are working or not. As far as is known, no study has been done in Livingstone District to determine the impact of these strategies on pupils. To this effect, it was necessary to conduct a study of this nature. It was hoped that the findings of this study could add to the body of knowledge on impact of school-based preventive strategies for drug and alcohol abuse on pupils. In addition schools and the Drug Enforcement Commission may come to know the factors that influence pupils to abuse drugs and alcohol and measures to address such factors.

The purpose of the study was to determine the impact of drug and alcohol abuse preventive strategies used by teachers and the Drug Enforcement Commission on pupils in selected schools in Livingstone District. The study was guided by the following objectives:

- To establish factors that influence pupils to abuse drugs and alcohol in schools.
- To identify types of preventive strategies for drug and alcohol abuse education used in schools.
- To determine the impact of preventive strategies for drug and alcohol abuse on pupils.
- To identify ways of enhancing preventive strategies for drug and alcohol abuse education in schools.
Research sites

The study was carried out in four basic schools and four high schools in Livingstone District. The basic schools included: Nalituwe, Linda West, Zambezi, and Shungu while the high schools included: Hillcrest, Linda, St Raphael’s and David Livingstone.

METHODOLOGY

The study used a descriptive research design. It involved both quantitative and qualitative methods. In quantitative method questionnaires were used. Qualitative methodology relied on the use of semi-structured interviews.

The population for the study was composed of all pupils, teachers, and school managers in Livingstone district. In addition all officers from the Drug Enforcement Commission (DEC) in Livingstone were part of the population.

A total number of 210 respondents formed the sample. This number included: 160 Pupils, 40 Teachers, 8 School managers, 2 DEC officers.

Simple random sampling procedure was used to select pupils and purposive sampling procedure was used to select teachers, school managers and DEC officers. Snowball sampling procedure was used to select the sample for ‘friendship groups’ who participated in focus group discussions.

Questionnaires were used to collect data from pupils and teachers, while semi-structured interview guides were used to collect data from School Managers and DEC officers. In addition, focus group discussion guide was used to collect data from pupils.

Quantitative data was analyzed using Statistical Package for Social Sciences (SPSS) in order to generate tables, graphs and percentages in an easier and fast way. Thematic analysis was used to analyze qualitative data. Major themes were drawn from interviews with respondents for easy descriptions.

Due to the sensitive nature of the subject, ethical precautions were taken in this study. These included explaining the purpose of the study, giving respondents chance to decide on whether to
participate in the study and keeping their names anonymous. Confidentiality was also assured by making verbal appeals that the information given would only be used for educational purposes.

FINDINGS AND DISCUSSION

Factors that influence pupils to abuse drugs and alcohol in schools

Pupils indicated a number of factors that influenced them to abuse drugs and alcohol. Among the leading factors were peer pressure, personal and emotional problems propelled by poor parent-child relationship, availability of cheap drugs and alcohol in the community. In addition, parents, siblings and other adults served as models for drug and alcohol abuse among pupils. Others factors were: curiosity, having fun and feeling ‘cool’, the need for recognition, to be feared, being famous among other pupils in the school and belief among them that certain drugs increase academic performance.

With regards to peer pressure, they stated that the need to fit with others and not being seen as backward among friends was a strong instigating factor in many pupils. This view is consistent with that of Bourne (2005) who reported that young people feel pressured to fit in and engage in activities that their friends are doing. This consequently led the pupils to abuse drugs especially in situations where their friends abused drugs and alcohol.

Teachers cited family related factors such as bad parenting style and broken homes as contributors to drug and alcohol abuse. For example parents and siblings who abuse drugs and alcohol or tolerate abuse of these substances by children in their homes instigated them to do the same. Similar findings were reported by Boog et al. (1999) who found out that weak parental guidance was one of the major factors that increased abuse of drugs and alcohol among pupils in Zambia.

In a face to face interview, one school manger lamented on the availability of drugs and alcohol in the community. He stated that,

“There is too much illicit drugs and alcohol being sold in the community around the school.”
It can be argued that when pupils live in a community where drug and alcohol abuse is prevalent they easily see the behaviour of abusing drugs as normal. In addition, it makes accessibility of drugs easier. This view is consistent with that of Public Safety Canada (2009) who found out that the availability of drugs and alcohol in the community influenced young people to abuse them.

In addition, the myth that when one smoked marijuana would become intelligent influenced pupils to abuse drugs. Similar findings by Nsemukila and Mutombo (2000) revealed that widespread belief of increased intellectual capacities or perceived high academic performance in school also influenced pupils to abuse drugs.

**Preventive strategies for drug and alcohol abuse education used in schools**

In terms of planned activities, findings show that pupils learn about drug and alcohol abuse prevention through lessons or lectures in classrooms, talks with DEC officers and video shows. Other strategies were role plays, group discussions, anti-drug club meetings, life skills training and sporting activities. Teachers also said that they used lessons in classroom, lectures, talks, and video shows. The findings from school managers and DEC officers were consistent with that of pupils and teachers. However, DEC officers added that other than awareness talks, they also occasionally use focus group discussions, debate, quiz and drama. The reason for not frequently using these activities was that they required longer time to conduct and more financial resources to prepare.

An analysis of these findings shows clearly that the common and frequently used preventive strategies in schools in Livingstone include: lessons in classroom, lectures, talks, and video shows. All these strategies are classroom-based, and to a larger extent are characterized by one way communication; from source (provider) to audience (pupil). They allow limited interaction between the source and audience. Comparatively, these activities do not promote interactivity as compared to focus group discussions, debate, quiz, games, anti-drug club meetings and theater performance. As rightly pointed out by Ministry of Education (2003) interactive teaching strategies should be encouraged because they stimulate active participation among pupils in the classroom or group activity. In addition, they allow for the development of interpersonal
competencies. Similarly, Tobler et al. (1999), argued that the more communication exists among teachers, pupils and peers, the more pupils will be prevented from abusing drugs and alcohol.

In terms of the content of the preventive education taught in schools, it includes facts about types of drug and their dangerous effects, normative education, drug resistance skills and life skills. Teachers indicated similar responses to those of pupils. The teachers who took part in the study also indicted that they mainly taught factual information about drugs and alcohol. DEC officers indicated that although they teach more of factual information, they also include drug refusal skills. They felt that these skills were necessary for enhancement of drug and alcohol behaviour change or abstinence. They also felt it was important to dispel pro-drug abuse beliefs through normative education in pupils.

An analysis of these findings show that the most used approach in preventing abuse of drugs and alcohol among pupils is information dissemination which involves teaching and learning of facts about types of drugs and the dangerous effects of such drugs. From the findings it is noted that, other strategies such as resistance skills and life skills training are less used. As rightly pointed out by Botvin (2006), information dissemination strategy is a conventional approach to drug and alcohol abuse prevention. It is the most commonly used strategy which involves giving pupils factual information about drugs and alcohol. However, it does not promote interaction between the giver of information and the receiver. Advocates of this strategy believe that lack or inadequate knowledge can cause drug and alcohol abuse problems in pupils (Botvin and Griffin, 2003). Therefore, having in-depth knowledge of the effects of drugs and their potential harm is the first step in preventing it.

**Impact of preventive strategies on pupils’ knowledge, attitudes and behaviour**

Out of all pupils who had experienced change due to the preventive education, 62% indicated that their knowledge about drug and alcohol abuse had increased. For instance, they were more knowledgeable on the effects of drug abuse. Similarly, school managers and DEC officers felt that there was increased knowledge about the effects of abusing drugs and alcohol among pupils. To the contrary, 72% of the teachers observed that there was very little change in behaviour of pupils towards drug and alcohol abuse. This view by teachers could have been influenced by the fact that they looked at change in terms of actual attitude and behaviour other than acquisition of knowledge.
These findings show that although there was significant positive impact on pupils’ level of knowledge about drug and alcohol abuse, as a result of preventive strategies applied, there was very little impact on behaviour of pupils. These findings are consistent with that of Bangert-Drown (1988) who examined the impact of information educational strategies on knowledge, attitude and drug abuse behaviour. He found that information education strategy increased drug related knowledge, but very little behaviour change occurred in pupils.

It was also found most pupils (53%) first knew about drug and alcohol abuse when they were between 8 and 10 years old. Very few pupils (4%) knew about it after they had reached 14 years of age. In addition, school managers stated that drug abuse education started from lower basic school, through to high school level. The reason for starting at lower level was to help children acquire knowledge and anti-drug attitudes early so that they could lead a drug free life as they grow. This view is consistent with that of Tobler et al. (1999) who found out those interventions that were implemented when children were in basic school, were effective. This early intervention appeared to be responsible for the increased level of knowledge about drug education among pupils in the selected schools in Livingstone District.

Concerning impact of specific sources of preventive strategies, findings show that most pupils found it easier to pick information from their friends. The implication for these findings is that drug abuse education which is channeled through peer educators has a greater impact on pupils’ knowledge, attitude and anti-drug abuse behaviour. Similar views were reported by Midford et al. (2000) who said that peer educators serve as potential role models by creating a norm that drug abuse is deviant and by providing alternatives to drug and alcohol abuse.

As regards to providers of preventive education, it was found that most of the preventive education is done by the school staff, namely teachers, guidance counsellors and school managers. It was also found out that very few teachers had special training to teach about anti-drug and alcohol abuse issues in schools. As rightly noted by Botvin (2006) trained teachers, can contribute greatly to the success of a school-based drug and alcohol abuse prevention intervention. The impact is great when education providers are highly credible and well trained in issues of drug and alcohol abuse prevention. The researcher therefore, views lack of special training by teachers as one reason why
strategies such as resistance skills and life skills training, focus group discussion and games and sports, which are known to have impact on behaviour, were not widely used.

Concerning the impact of the frequency (Intensity) of the strategies used, 57% of pupils indicated that they had received preventive education at least twice or three times in the past six months, while 43% indicated that they had not. In contrast, 55% of teachers who took part in the study revealed that they only conducted this kind of education once per year. This variation in responses may be due to teachers considering what was in the formal subject syllabi. It was also revealed by DEC officers that they visited each school for drug abuse education, on an average of two to three times in a year. The importance of intervention intensity cannot be overemphasized. As Botvin and Griffin (2003) pointed out, evidence of value in anti-drug abuse programmes that involve multiple sessions is immerse. The more intensive the delivery system is, the greater the impact on the pupils’ delay of the onset of drug abuse, reduction or complete abstinence from drugs and alcohol abuse. When pupils are given more opportunities to hear and practice skills they are likely to internalize them. The results show that pupils did not receive drug and alcohol abuse education quite often. Consequently, their retention and ability to practice what they learnt over time was negatively affected. It is clear that erratic delivery of drug and alcohol abuse preventive education was responsible for little behaviour change among pupils.

With regard to involvement of parents or guardians in drug and alcohol abuse preventive education, the majority (85%) of the teachers indicated that they involved parents or guardians. Similarly, both school managers and DEC officers stated that parents were sometimes involved in finding solution to drug problems of their children. The calling of parents to discuss their children’s behaviour in relation to drug and alcohol abuse helped some pupils to change their behaviour. These findings were consistent with those of Dusenbury and Falco (1995) who found that involvement of family members, the community, and the media resulted in significant reduction of drug and alcohol abuse behaviour among the youth in the community. Summoning parents to discuss their children’s behaviour concerning drug and alcohol abuse should therefore be encouraged if pupils have to change their behaviour against drug abuse.
Ways of enhancing drug and alcohol preventive strategies in schools

The study found that the current measures applied in schools to prevent drug and alcohol abuse included: punishment, suspension, forced transfers, summoning parents, appearing before the disciplinary committee and counselling. These measures were largely disciplinary in nature and not educational. Such measures did very little to give sustainable reformation in pupils who abuse drugs and alcohol. The study also found a few educational measures being applied, such as putting posters around the school with drug abuse messages, lectures by the school managers during school assemblies, arranging for drug abuse preventive talks with DEC officials and guidance teachers. However, these measures had not done much to induce significant change in behaviour of pupils. In other words they had little impact on drug and alcohol abuse behaviour among pupils because they were either done occasionally or they were not interactive enough.

In order to prevent drug and alcohol abuse among pupils in the schools, pupils suggested the following measures: regular invitation of DEC officers to give talks to pupils, introduction of more clubs and sports activities so that they could involve more pupils, taking those who are caught abusing drugs to DEC offices for punishment or to be counseled, ban the selling of tujilijili (tot packs) in bars and tunthemba (make shift stores) near the school premises and teachers to talk about the dangers of drug and alcohol abuse every day to pupils during lessons in classrooms.

In addition, teachers suggested that guidance teachers should have at least one period per week to teach about health issues, teachers should be trained in psychosocial issues of pupils, and formation or in some cases strengthening of anti-drug clubs in schools. They also indicated that more peer educators should be trained and government to increase support in enforcing drug laws.

School managers suggested special in-service training of teachers in drug and alcohol abuse preventive education. Similar views were reported by UNODC, (2002), who recommended that sufficient training for teachers in drug education competencies was necessary to ensure effective delivery of preventive education. In addition, sensitization of parents on healthy parent-child relationship and need to take interest in the affairs of their children were also suggested. Other measures suggested by school managers were that teachers should not be allowed to smoke or
come drunk in the school premises. This suggestion is consistent with the Public Service General Orders that states that public service workers should not take alcohol while on duty.

DEC officers also suggested a number of measures. For example they suggested the revival of anti-drug abuse clubs so that they could offer pupils a forum for interactive communication in matters of drug and alcohol abuse. They also suggested the increase of funding to the NECD office in order to facilitate the use of strategies that required more money to be conducted and training of peer educators and teachers. It was further felt that school authorities should allocate time to DEC officers to enable them do activities such as role plays, focus group discussions, debates and other activities that required more time and resources. As rightly put by Hansen (1992) and Gorman (2003), these activities should be supported because they are interactive in nature, can increase knowledge and behaviour change in pupils.

CONCLUSION AND RECOMMENDATIONS

In line with the objectives and findings of the study, the researcher concludes that the current drug and alcohol abuse school-based preventive strategies had to a larger extent impacted on pupils positively. For instance, pupils were now more knowledgeable about the dangers of drug and alcohol abuse, they are able to learn about drug abuse at a younger age, and the involvement of parents to discuss their children’s drug and alcohol abuse behaviour helped some pupils to change their behaviour. However, the aspect of positive behaviour change has not significantly been influenced. Some pupils still abuse drugs and alcohol as a way of fitting in peer groups, believing that it can enhance their intellectual capacities or feel that they are grown-ups. It can therefore, be argued that although the use of these strategies (lessons in classrooms, lectures, talks by DEC officers, video shows, counselling and over reliance on information dissemination) had a significant positive impact on pupils’ knowledge about drug and alcohol abuse, there was very little impact on pupils’ behaviour change. It is the view of the researchers, just as this study and many other studies have indicated that in order to have a greater impact on pupils,’ in terms of behaviour change, there is need to:

1. Use school-based preventive strategies that are interactive and skill-based, such as role plays and focus group discussions.
2. Educators should ensure that they teach pupils more of drug refusal skills in combination with social life skills training.

3. Give teachers and peer educators special training in drug and alcohol preventive education.

4. Provide preventive education to pupils on a regular basis.

5. Increase funding to National Education Campaign Division of Drug Enforcement Commission to enable it to use evidence-based strategies such as focus group discussions, life skills training and role plays which require a lot of financial and material resources.

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