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RESEARCH ARTICLE

Interventions Undertaken by the Parents in Managing their Youth Abusing Substances in Selected Hospitals, Limpopo Province, South Africa

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Abstract:

Background:

Parents have a significant influence on managing and reducing the risk of substance abuse in the youth. Parents' support and responsiveness to substance abuse progressively produce positive outcomes. They are driven by their parental instincts to help and protect their youth. Thus, when their youth abuse substances, they would do all they can to prevent the use of substances by their youth. They may use different methods to manage their youth before considering going to the hospital for help. This study investigated the interventions the parents use in managing their youth at home to make sure that they do not use the substances.

Methods:

A qualitative approach with the phenomenological design was adopted to explore parents' intervention for youth abusing substances. Parents were purposively selected to participate in the study parents. Data collected through semi-structured interviews were analyzed using Tesch's steps for qualitative data analysis.

Results:

Parents implemented various interventions to reduce and manage substance abuse in their youth. Some of the interventions included consultations with agents to assist their youth and raise awareness regarding substance abuse's dangers to their youth.

Conclusion:

The study findings have indicated that parents use various methods to ensure that their youth do not use substances. There is a need for regular meetings between parents and health care providers. It is recommended that parents consult with the health care providers on managing their youth abusing substances.

Keywords: Interventions, Hospital, Youth, Parents, Abuse, Substance.

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1. INTRODUCTION

Substance abuse by young people and the problems related to substance abuse have always been part of human history. The abuse of substances is overgrowing and such growth is not limited to any age, race, or social group [1]. The effects of substance abuse are not felt by the user only but by family members, including parents. As the primary caregiver, parents are responsible for ensuring that their youth are not using substances [2]. Thus, parents have a significant influence on reducing the risk and management of substance abuse in the

youth. The support and the responsiveness of the parents to the youth have been found to bring positive outcomes in managing the youth and the challenges they face daily [3, 4]. Parents help and protect their youth by implementing various measures such as talking to them, taking their privileges away, and reprimanding them for preventing the use of substances. Furthermore, parents explore other avenues, such as looking for spiritual interventions by going to churches before considering going to the hospital for help [2].

Parents have a role in shaping the habits of their youth by being role models that start with not abusing substances themselves, monitoring their youth, and displaying behaviors to encourage the youth to stay away from substance abuse.

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Parents continuously show concern about their youth abusing substances by taking it upon themselves to assist their youth out of substances. For example, stricter parenting control, such as stricter practices and habits, has contributed to reduced substance abuse by the youth [5]. To achieve some of these measures, it is essential that the parents also develop communication skills regarding substance abuse [5].

Proactive parenting, such as supervising their children closely and limiting the use of substances by the youth is important in managing the abuse of substances even before it can happen. Parents must practice control of their youth to assist their youth out of substances by knowing the whereabouts of their youth, their activities, and who they associate with [6]. Parent interventions that focus on monitoring the involvement of the youth with friends who use substances are effective in reducing youth substance abuse. However, it should be noted that it is not always easy for parents to know the whereabouts of their children and the activities they do [7]. Therefore, this paper aims to explore the interventions the parents undertake in managing their youth abusing substances.

2. MATERIALS AND METHODS

2.1. Research Design

The study adopted a qualitative approach where phenomenological design was used to explore the interventions undertaken by parents in managing youth abusing substances. The chosen design gave the authors a chance to investigate the interventions that parents use in managing youth abusing substances thoroughly [8].

2.2. Study Setting

The selected hospitals in Limpopo Province were used when conducting this study. Limpopo Province is located in the northern part of the Republic of South Africa. This study was conducted because the Limpopo government has a challenge of youth abusing substances in the province. The usage of substances varies according to the district. The authors wanted to find out how parents manage the abuse of substances by the youth at home before they can bring them to the hospital [8]. The province is divided into five districts: Sekhukhune, Vhembe, Mopani, Waterberg, and Capricorn district. The regional hospitals used in this study are Jane Furse, Tshildzini, Letaba, Mankweng Hospital and Mokopane, and Letaba hospitals. The wards sampled were for the youth admitted with substance abuse problems. This made it easy for the authors to meet the parents as they came to visit their youth abusing substances. The researcher was able to request the parents to form part of the study as they came to visit their youth in the hospitals. Limpopo Province, South Africa, was chosen for this study.

2.3. Population and Sampling

The chosen population for this study were the parents of youth abusing substances in selected hospitals in Limpopo Province. Authors accessed parents of youth abusing substances during their consultations in the out-patients department and visits to the wards that admit youth abusing substances. Homogeneous and criterion purposive sampling strategies were applied to select the parents. Through this

sampling, the authors ensured that the parents were representative of the population and met the standards the authors desired. They had every one of the qualities the Authors wanted: being the parent of the youth abusing substances and staying with the youth abusing substances.

2.4. Data Collection Procedures

Semi-structured interviews are guided by the central question: “what do you do to assist your child to leave substances”? were conducted with parents. The authors probed further to get more clarity as the parents were responding. The probing questions used were: What measures do you put in place to assist your youth? Have you ever talked to your youth about the dangers of substance abuse? Where do you go when you need help for your youth? Who do you communicate with regarding your youth’s substance abuse? The authors recorded the findings using a voice recorder, and field notes were written in the process of collecting data. Data saturation was reached at the 14th parent.

2.5. Data Analysis

Data were analyzed using eight steps of data analysis by Tesch were used to guide the analysis of data: Authors read through data to reduce it to codes. Transcripts were re-read and then they were analyzed. Codes and topics that arose were checked for duplication. Themes and sub-themes were then developed. Data that belonged to each of them were assembled. Co-coder was consulted to reach an agreement regarding themes and subthemes. The existing data was then recorded [9].

2.6. Measures to Ensure Trustworthiness

Measures to ensure trustworthiness were adhered to. Credibility was ensured through prolonged engagement with the parents during data collection until data saturation was reached. Confirmability was ensured through an audit trail. The authors conducted in-depth interviews, wrote field notes, and made observations to understand fully the phenomenon under study. Dependability was ensured by the use of an independent coder where consensus was reached regarding themes and sub-themes. Transferability was achieved by a thorough description of the research methodology used.

2.7. Ethical Clearance and Ethical Considerations

Ethical clearance was granted by Turfloop Research Ethics Committee (TREC), number: TREC/305/2018:PG of the University of Limpopo. Permission to conduct the study was sought from the Department of Health Limpopo Province (approval number LP 201902_009), Department of Health District offices in Limpopo Province, and the CEOs of the selected hospitals. The parents were briefed about the study, and they agreed to be part of the study voluntarily. The authors made them aware that they have a right to withdraw anytime without any victimization. They were also assured of confidentiality and anonymity. The parents signed the consent form before the interviews started.

3. RESULTS

During data collection, parents gave different responses,

leading to the development of themes and sub-themes as they are tabulated below. Table 1 presents the themes and sub-themes that emerged from the study.

Table 1. Themes and subthemes.

Themes	Sub-themes
1. Cutting down the benefits	1.1. Denied the youth money
-	1.2. Denied the youth time with friends
-	1.3. Restricted the movements
2. Consultations with different agents	2.1. Consultations with the traditional healers
-	2.2. Parents opted to pray as their religious belief to help youth
3. Raising awareness about substance abuse	3.1 Talking to the youth about the dangers of substance abuse
-	3.2 Involvement of other family members to talk to the youth

3.1. Theme 1: Cutting down the benefits

3.1.1. Sub-theme 1.1. Denied the youth money

Parents described their reasons for not giving their youth money. One participant said that.

“I don’t want to give him money to carry when he’s going to school because he takes that money and buys substances”. The other participant said, *“We tried to limit his monthly allowance to prevent him from buying substances he still found a way of continuing the use of substances”.* while the other parents described her fears regarding giving out money by saying, *“I even stopped giving him money when he goes to school because I fear he would use it for substances.”*

3.1.2. Sub-theme 1.2. Denied the youth time with friends

Parents reported their efforts to deny their youth use a chance to deny their youth use to be with their friends because they were afraid that the friends would make their youth use substances. One participant gave an account of their experiences by saying, *“He had friends who were using substances. It is peer pressure that made him use substances. He cared too much about how his friends would react to him than what was good for him. He did not know he was slowly dying”.* The other participant said that *“...always make sure that he doesn’t have visitors from his friends. I restrict him from going out”.* The other participant said, *“I tried to stop him from meeting his friends. Still, he could not listen”.* while the other participant said, *“At home, we are trying to limit his friends from visiting him and we always try to encourage him to take medication”.*

3.1.3. Subtheme 1.3. Restricted the movements

Parents reported that they had restricted the movements of their youth in trying to manage them so that they do not go out to abuse the substances. One participant said, *“I always make sure that he doesn’t have visitors from his friends, and I restrict him from going out”.* The other participant used a harsher method that did not work, he said *“I tried locking him in the house, but he was just impossible”.* While the other

participant had said, *“During the week we keep him busy indoors. He watches tv and does other indoor activities”.*

3.2. Theme 2: Consultations with different agents

3.2.1. Sub-theme 2.1. Consultations the traditional healers

The parents of youth abusing substances went out to seek help from traditional healers. One participant said, *“We took him to the traditional healers, and then later we took him to church.”* The other participant said, *“I took him to the traditional healers but the healers of these days don’t know their work. They don’t treat people; they just want money”.* The other participant further said, *“I trust God, and we pray in the house, but I tried a traditional healer...”*

3.2.2. Sub-theme 2.2. Parents opted to pray as their religious belief to help youth

Parents took a route of prayer to manage their youth abusing substances. One participant said, *“We took him to the traditional healers, and then later we took him to church.”* The other participant said, *“We once took him to church. He did not become better, so we decided to bring him to the hospital”.* The other parents reported that *“During weekends we go to church with him”*, this is used as a way of managing their youth abusing substances.

3.3. Theme 3: Raising awareness about substance abuse

3.3.1. Sub-theme 3.1. Talking to the youth about the dangers of substance abuse

Parents talked to the youth about the dangers of substances. one participant said, *“I tried talking to him, but he could not listen. I told him that substances are bad for him, but he couldn’t listen. I even stopped giving him money when he goes to school because I fear he would use it for substances”.* the other participant talked to her youth in trying to prevent the substance abuse disorder. She said *“I used to tell him to stop using this thing, but he could not listen”.* the other participant also said *“I tried to educate him about the effects of substance abuse, prayed for him and made sure that he goes to church. But he continued using substances, which is why I ended up taking him to the hospital to help him out of the substances. He smokes dagga, and he seems addicted”.*

3.3.2. Sub-theme 3.2. Involvement of other family members to talk to the youth

The parents further asked for help from the extended family members. One participant said, *“I don’t...know (crying). I even asked his uncles to come and talk to him but that did not help”.* The other participant said, *“I talked to his uncle. His uncle could not help. I talked to the social workers so that they take him to the rehabilitation Centre they could not help....he has never come to the hospital until now”.*

4. DISCUSSION

This study aimed to explore the interventions that parents use to manage their youth abusing substances. Through this study, the authors can conclude that parents use different

methods to manage their youth in managing their youth abusing substances. Parents' interventions range from cutting down the benefits for the youth abusing substances, consulting with different agents to get help, to raising awareness about substance abuse. Parents reported cutting down the benefits and privileges that they were initially given to their youth. The benefits that were denied the youth included denying youth money, denying youth time with friends, and restricting their movements.

The study by Pedersen, Andersen, and Sabroe [10] agrees that there is a positive association between giving the youth money and substance abuse. Limiting the pocket money for the youth has proven to prevent substance abuse by the youth. Thus, it has been concluded that it is likely that pocket money plays a significant role in substance abuse among the youth. Parents have a responsibility to monitor the spending habits of their youth. They must ensure that they do not give their children much money or closely monitor how and where the money is spent. It is recommended that the parents not just be generous with money because it can tempt them to spend it on things they do not need, like substances [11].

The use of substances by the youth has been associated with the availability of money and the amount of money given to the youth. The more they have money or are given money, the more they will abuse the substances [12]. The study by Cui *et al.* [13] has confirmed that giving children too much money is a strong predictor for the youth to start using substances. The more they get the money, the more they will even try other substances.

Adolescence is a development stage where the youth can be easily influenced; hence parents deny the youth time with friends. Adolescents can be easily influenced by anyone around them [14]. Having friends who abuse substances is a factor that is associated with substance abuse in youth. Youth who have friends abusing substances are five times more likely to abuse substances than those who do not have friends who abuse substances [12]. The influence of peers on the abuse of substances has been well established in the literature [15].

The parents deny their youth time with friends because they have realized that substance abuse is a clear, learned behavior in which the behavior is learned through imitation, modeling, and reinforcement. An individual can learn about the use of substances from their friends and their significant others, which can be influenced by the individual's beliefs, attitudes, and cognition [1].

The parents who are actively involved in their youth's lives can contribute to reduced abuse of substances by the youth. When the parents limit the movements of youth by encouraging the youth to stay home, they minimize the abuse of substances by the youth. When the youth do not walk around, the parents can communicate with them about the dangers of abuse of substances. They actively engage in strategies that reduce the chances of substance abuse, even though they do that on an informal basis [16]. The study by Elsaesser *et al.* [3] reported that parents could protect their youth from substance abuse by implementing restrictions that can include limiting or controlling youth movements. Parental

monitoring and active participation reduce the youth's risk of substance abuse.

Traditional healers are consulted throughout the world to prevent, diagnose, and manage various conditions and illnesses. This is because traditional healing is grounded on beliefs native to different cultures [17]. African populations consult the traditional to get well. The traditional healer is the first alternative for Africans who believe in traditions to help mentally disturbed family members, resulting from substance abuse. Some of the people who consult the traditional healers have reported positive outcomes which are one factor that makes the traditional healers popular among Africans [17].

The parents took it a step further to consult with different agents in order to help their youth out of substances. They consulted their traditional healers. The traditional healer is respected by members of the community, and members of the community who once consulted with them refer others to them for their health problems [18]. The youth abusing substances are taken to the traditional healer's place and kept for rehabilitation. To treat substance abuse disorder, they have to follow different therapies, including herbal remedies, rehabilitation, and withdrawal [18, 19]. Parents believe that the use of traditional healers strengthens their cultural identity, improves their youth's mental health, and reduces the use of substances by their youth. After consulting the traditional healers, most of the parents reported an improvement in spiritual and emotional well-being [20].

Some parents opted to pray as their religious belief to help their youth. The church is a spiritual home with services ranging from casting away evil entities, witchcraft, sorcery, family problems, and different diseases or disorders to solving spiritual problems. They treat the patients who were once admitted to the hospital but did not get the help they wanted from the hospital [17]. Parents believe in the high power of God; hence they take their youth to church. This means that the parents have realized that their youth's recovery journey cannot be taken alone, so they surrender their youth's substance abuse to God. It is believed that faith in God or higher power leads to desired recovery [18].

Prayer is significant in the psychological and physiological welfare of individuals. The effects of prayer contribute to mental health by increasing love, releasing the tension, reducing loneliness, and shedding false self [19]. It is also evident that prayer has an instrumental contribution to substance abuse prevention and recovery. It has been proven that prayer and spiritual beliefs and practices contribute to lower levels of substance abuse and reduced chances of using substances in the future [20]. Thus, religious therapy is important in improving the well-being of the substance abuser, and participation in religious programs reduces the chances of substance abuse [21].

Some parents believe that raising awareness regarding substance abuse can be helpful in managing substance abuse by the youth. They talked to the youth abusing substances, and they also involved other family members to come in to speak to the youth. Communication between the parents and the youth is important in preventing and managing the abuse of substances. Through communication, the parents can determine if their

youth are abusing substances or depicting normal youthful behavior. It is important to discuss the consequences of using substances earlier in life to prevent them from choosing the substance abuse route; open and honest discussions are effective in managing substance abuse [22]. When the parents realize that their youth abuse substances, they may begin communicating with them, making them aware of the dangers of using the substances. They may also go further in setting the ground rules and punishments to prevent further use of substances [23]. Parents believe that when they communicate with their youth about the dangers of abusing substances, they will help reduce the harm associated with substance abuse and reduce negative incidents associated with substance abuse through communication [16]. When parents work together with their youth they are more likely to assist their youth to get out of the substances. It will be easy for the youth to understand when the parents communicate with them. They will easily understand the parents' rules and their barriers to assisting them out of substances [3].

Social support among the relatives forms part of significant family relations if well maintained [24]. Family, both extended and immediate, has proven to contribute to both the parents and the youth abusing substances. It serves as a source of support in many ways [25]. Extended family members can provide emotional support, including talking to the youth, listening to the parents when they speak, and being empathetic to them [26].

After dealing with their youth abusing substances, the parents go out to look for help to assist in their challenges. In some instances, they will ask other family members to assist in helping their youth out of substance. They may ask the uncles and aunts to talk to their youth about the dangers of using substances [23]. Extended family members such as aunts and uncles can play an important role in communicating with the youth the issues that they may feel uncomfortable talking about with their parents. The role of the extended family in communicating with the youth abusing substances can complement and support the role of the parents [27].

5. LIMITATIONS

The study's findings could not be generalized in other settings as the study was conducted in selected hospitals in Limpopo Province, South Africa

6. IMPLICATIONS OF THE FINDINGS ON PRACTICE, POLICY AND RESEARCH

The involvement of parents in the lives of youth has been associated with positive outcomes. This is because parents are important in the socialization of youth from childhood to teenage years. The socialization of youth by the parents exerts a strong influence on the youth's life. It regulates the thoughts, impulses, and emotions of youth. It is, in turn, associated with lower behavioral problems, substance abuse, and positive pro-social behaviors [28].

The parents employ different interventions in managing their youth using substances; these interventions are done mostly before the youth abusing substances can be taken to the hospital for help. Parents need to know how substances work in

the body. This will assist in the interventions that the parents undertake to manage their youth. Parents need to be capacitated with skills to manage the youth abusing substances. The efforts of parents need to continually be supported so that they can continue taking care of their youth and reduce the chances of relapse by the youth [29].

Health professionals should encourage parents to try out different skills at home as this will give them the opportunity to solve problems within a supportive environment. There should be programs that aim to benefit the parents in managing youth abusing substances. The programs may be practical so that the parents can easily relate to and utilize them. Part of the program should include home visits by health professionals to ensure that the programs are put in place, and parents are supported [30].

Substance abuse in youth should be given attention at home, schools, and places where youth spend most of their time. Schools should be equipped with support to combat substance abuse. Teachers need to be taught about the strategies to combat substance abuse. There should be guidelines to address substance abuse at school. Health education programs about substance abuse can be included in schools [31].

A study by Lee, Padilla-Walker, and Memmott-Elison [28] has indicated that interventions such as communication can reduce the risk of continued substance abuse by the youth. Further research is needed to assess the effectiveness of the other interventions that the parents undertake to manage their youth abusing substances.

7. RECOMMENDATIONS

The following recommendations can be helpful to the parents.

7.1. The Parents

With many available interventions that parents use to manage their youth abusing substances, they must consult with the health care providers the ways that can be suitable in managing their youth.

7.2. The Healthcare Professionals

The nurses and other health care professionals must be available for the parents and give them information on how to manage the youth abusing substances and where to get help when faced with different challenges. Health education programmes by the health professional can help the parents to manage their youth abusing the use of substances

7.3. Limpopo Department of Health

The Department of Health can organize roadshows and awareness programs for the parents of youth abusing substances and the youth abusing substances. The parents will know when to use their preferred interventions and when to seek professional help. The roadshows and the awareness programs will also assist the parents of youth abusing substances in determining whether the methods they use at home work or not.

CONCLUSION

This study investigated the interventions the parents use in managing their youth at home to make sure that they do not use the substances. The parents used the methods such as cutting down the benefits for the youth, which included denying the youth money, denying them time with friends, and restricting their movements. They consulted different agents, including consulting the traditional healers and going to church for prayer. They further took a stand in raising awareness of the youth abusing substances by initiating talks with them and asking other family members to talk to the youth abusing substances about the dangers of using substances.

It is clear that parents use different interventions in managing their youth abusing substances, and the literature supports all those methods. Further research can be done to find other effective methods to assist youth out of substances because, in this case, the parents used different interventions, but still their youth were admitted to the hospital. There should be regular meetings between the parents and the health professionals to assess the effectiveness of the interventions they are using; if the interventions fail, parents can be advised to use other methods. The youth abusing substances should be involved in their care. Parents can ask their youth on how they(youth) want to be helped and then help them from their perspective. There is also a need for support groups for parents to share ideas on managing their youth.

ETHICS APPROVAL AND CONSENT TO PARTICIPATE

Ethical clearance was granted by the University of Limpopo's Turfloop Research Ethics Committee (TREC) (TREC/305/2018:PG). Permission to conduct the study was sought from the Department of Health Limpopo Province (approval number: LP 201902_009), and the CEOs of the selected hospitals.

HUMAN AND ANIMAL RIGHTS

No animals were used that are the basis of this study. All the human procedures were performed in accordance with the guidelines of the Declaration of Helsinki.

CONSENT FOR PUBLICATION

Informed consent was obtained from all participants of this study.

AVAILABILITY OF DATA AND MATERIALS

The data supporting the finding of the study are available within the article.

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None.

CONFLICT OF INTEREST

The authors declare no conflicts of interest, financial or otherwise.

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