



Substance abuse among youth antecedents, consequences, and intention to stop: A case of three towns in Adea Berga Woreda

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Abbreviation

DACE: Drug Administration and Control Authority Ethiopia

IBM SPSS: International Business Machines Statistical Package for the Social Sciences

UNODCCP: United Nations Office for Drug Control and Crime Prevention

NGO: Non-Governmental Organization

UN: United Nations

UNDCP: United Nations Drug Control Program

UNODC: United Nations Office on Drugs and Crime

WHO: World Health Organization

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ABSTRACT

Concerning youth substance abuse, particularly in Africa and Ethiopia, was causing significant challenges for millions worldwide, including Adea Berga Woreda, who has also faced significant challenges. The aim of this study was to assess substance abuse among young people and identify its antecedents, consequences, and intention to stop among youths using substances in the three towns of Adea Berga Woreda. To achieve the objective of the study, this research adopted a descriptive research design and followed a mixed method of quantitative and qualitative approaches. In this study, convenience sampling was employed due to the lack of a complete list of substance abuse-related young people registered in the three towns other than the total of substance users. The process involved proportionately allocating the sample size to each town and continuing the sampling until the desired sample size of 256 was reached. . The necessary data collection and information for the study were conducted through structured questionnaires, observation, and in-depth interviews. Using descriptive statistics, the acquired data were analyzed using frequency distributions, percentages, graphs, and tables. The findings of this study showed that, among young people in the three towns of Adea Berga Woreda, the most commonly abused substances were alcohol (33.07%), chewing kchat (24.30%), smoking hashish (19.52%), smoking shisha (12.35%), cannabis (2.79%), and tobacco/cigarettes (2.39%). The results showed that alcohol, chewing kchat, and smoking hashish were the most highly abused substances by young people. The result demonstrates that youth's main source of money to buy substances was the job creation office, which organized Dangote cement factories in small cement enterprises, earning enough money in their pockets every month without work. The main reasons participants increased substance use in the towns were Adea Berga Woreda's cement industries, the opportunity for young people organized in Dangote cement factories by small cement enterprises, earning enough money in their pockets every month without work, peer pressure, drug accessibility, poor parental supervision, and a lack of local police. According to the study, the majority of respondents to the in-depth interview stressed that the main consequences encountered by young people who abuse substances were various societal issues, impairments in physical well-being, and psychological, social, and behavioral problems. This study indicates that a significant proportion of youths expressed a high intention to quit substance abuse, indicating their awareness of the harmful effects of substance abuse and their desire to change their behavior. Based on the findings of the study, some possible recommendations were made for family, government, and the researcher.

CHAPTER ONE

1. Introduction

1.1 Background of the study

Substance abuse is a huge problem in the world today, and it is ruining the lives of many millions of people, both young and universal. The use of substances including alcohol, cigarettes, and kchat leaves has grown to be a significant public health issue with associated socioeconomic issues on a global scale (Sawicka et al., 2020). No country has ever been safe from the destructive issues brought on by social drugs or substance abuse (Lewis et al., 2008). Adolescents and the larger community suffer most from the non-medical use of psychoactive substances such as alcohol, cigarettes, hashish, and other legal and illicit drugs (Hall & Degenhardt, 2009). According to a study based on data from the 2010 Global Burden of Disease Survey (Whiteford, 2013), mental health and drug use disorders together were thought to be the main contributors to years lived with disability globally.

Substances are becoming a crucial part of society, and there is widespread worry about the use of both legal and illicit drugs, especially by young people for non-medical purposes. (Hulme et al., 2018). It is perhaps not surprising that young people are exposed to substances of misuse during their lifetime and that some choose to practice with tobacco, alcohol, and illegal drugs, but it is detrimental to their lives and those of their families (Adams & Berzonsky, 2008).

Each year, 40 million significant diseases or injuries are discovered among these substance addicts. Over time, the trend is intensifying (Teferi, 2011). Intentional inhalation of volatile solvents and other inhalants is becoming more and more of a concern in both developed and developing nations, particularly in vulnerable groups like street children and

indigenous adolescent people (Alebachew, 2014). Substance abuse has become a major problem in Africa in recent years. Alcohol, hashish, and cannabis use is an increasingly common cause of health and physical problems among young people (Kassew et al., 2023). According to (Dida et al., 2014), the use of tobacco, alcohol, kchat, and other drugs is a global concern that particularly affects young people and is widespread among Ethiopian adolescents.

Substance abuse has been a growing problem in Sub-Saharan countries in general, specifically in Ethiopia. It is well known that substance abuse among Ethiopian young people is considerably increasing (Teshome & Gupta, 2017). College and university aged adolescents and youth in Ethiopia are most at risk of substance addiction among the country's youthful population (Deressa & Azazh, 2011). In Ethiopia, drug misuse is becoming a bigger issue. With an estimated population of over 109 million people (WHO, April 2019). Ethiopia is the second most vibrant country in Sub-Saharan Africa; the majority of its citizens are adolescents and live largely in rural areas. (Fekedu et al., 2007). One of the first concentrations of alcoholic production is supposed to have been in Ethiopia, one of the ancient African countries with a rich cultural past. Ethiopia is known as the original originator of coffee and kchat.

The magnitude, direction, and structure of community-based poverty in Ethiopia have been the subject of only a few recent national surveys; the presence of this drug issue is undeniable. According to the 1995 Rapid Assessment Survey, which was conducted in 25 selected urban locations with 3200 respondents, a significant proportion of those in all demographic groups abuse cannabis, kchat, cigarettes, and inhalers (Mekuria et al., 2019). According to several research studies, substance abuse is linked to risk-taking behavior, psychological suffering, attempted suicides, functional impairment, and physically ill health

(Alebachew, 2014). Alcohol and the evergreen plant kchat are two of the things that Ethiopian children and adolescents regularly ingest (Tesfahun, Gebeyaw, and Girmay, 2013).

The many negative effects of substance abuse are so severe and deplorable that both national and international organizations are concerned about the spread of this scourge among adolescents. Some of these effects include mental illness, lack of role engagement, cultism, social violence, internet fraud, gang formation, social miscreants, lawlessness among youths, and disrespect for elders, rape, instant death, and sense of hopelessness (Teferi, 2011). Rapid physical and psychological development occurs during adolescence. Moreover, it has been described as a phase of greater curiosity, experimentation, and identity exploration. (WHO, 2020).

Youth substance misuse is a persistent public health concern everywhere, including in Ethiopia. The WHO urges member states to implement effective efforts to postpone the initiation of alcohol use because the Global Status Report highlights the fact that many children experiment with alcohol before the age of 15, and the WHO encourages member states to put into practice effective strategies to delay the onset of alcohol use. (WHO, 2020).

The frequency of substance abuse varies from country to country. So, regular updates on substance abuse, its causes, and its effects could be a vital contribution to effective and flexible interventions aimed at lowering youth substance abuse. Therefore, the primary goal of this study was to assess the substance abuse among youths, its effects, consequences, and intentions to stop substance use among young people in Adea Berga Woreda.

1.2. Statement of the Problem

Many studies have been conducted internationally, particularly in the Western world, on a variety of topics, including methods of treatment, factors of substance abuse, youth substance use and social support, impact, and support systems, and the causes of alcoholism, drug abuse, and other problems with alcohol. Even though substance abuse is a global issue, it poses a serious public health, social, economic, and personal risk, particularly for young people and other communities in developing nations.

Oshodi et al. (2010), in a study on substance use in Nigeria, found that drug abuse among secondary school students was primarily due to curiosity, peer influence, and social pressure. With varying prevalence rates for both overall and specific substance use discovered, followed by hypo-sedatives like tobacco and alcohol, and the most commonly abused substances are tobacco and psycho stimulants. According to the research the lifetime prevalence rates of substance use ranged from 1.5% for tobacco to 47% for psych stimulants.

Reda et al., (2012) conducted a study on the prevalence and determinants of substance use in Ethiopia, which revealed that kchat is commonly chewed in Africa and Arabia for its stimulant and euphoric effects. The most demanding kchat chewing is initiated by peer pressure, followed by the purpose of passing time and the ritual of kchat. Kchat consumption that goes on for a long time might cause personality issues and mental health problems. Additional negative consequences of kchat include dependency, insomnia, anxiety, nightmares, and impotence. Even though concentration and judgment are objectively degraded, kchat users claim to think more clearly, more rapidly, and be more attentive. A sizable portion of the population in Ethiopia, particularly those in the working age bracket, is said to be affected by the practice of chewing kchat. It has a detrimental effect on socioeconomic, personal influence, political, and health issues. This is especially true because the habit of chewing kchat encourages the development of other behaviors, like cigarette smoking, drinking alcohol, and drug addiction(Wondemagegn et al., 2017).

Adamu (2018), in a study on drug abuse among secondary and preparatory school students in Ambo Town, central Ethiopia, found that rising adolescent drug use poses a serious threat to social security, family stability, and national development. This is evidence that youths and society are becoming increasingly concerned about alcoholism and other associated issues, and that those most impacted are young people who can make valuable contributions to the nation's economic development.

According to (Tucker et al., 2023) drug use permanently alters a person's personality and shapes them into a criminal type. Drug usage has a profound effect on a person. Wu and Khan (2005) elaborated on how drug abuse raises the probability of sociality and can cause an individual's social group to become chaotic. Significant turning points like avoiding legal harm and fostering interpersonal and social relationships may also be harmed. Windle & Windle, (2012) found that early onset problem behaviours. The developments of mental health issues in early adulthood as well as and substance abuse problems are associated with problem behaviours in childhood and early adolescence, such as smoking and delinquent behaviours.

Assefa (2015) conducted a study in Addis Ababa to investigate the trends and challenges of substance abuse among Ayer Tena Secondary School students. The study demonstrated that alcohol misuse is categorized as a depressive disorder since it is a sedative and sleep-inducing chemical with a primary impact of frequently being regarded as a stimulant, especially at low dosages. Alcoholism's side effects include a drinking preoccupation, anxiety, self-deception, guilt, memory loss and impairment, and sadness. There are several signs of alcohol withdrawal, including a desire for alcohol, trembling, irritability, nausea, disturbed sleep, and vomiting.

Manaye (2011) points out that, in an assessment of substance abuse among secondary school students in the Harari region, cigarette smoking is a frequent behavior among youths. Despite this, many youths continue to smoke because trying to stop smoking involves enduring severe pullout symptoms. Most smokers begin smoking during childhood and adolescence. The use of cigarettes is the most extensively rehearsed habit in the world moment.

Substance abuse has a terrible consequence for the family, the individual, and the larger community. Youth substance use is a major health and social concern, with adolescents being vulnerable in many countries, including Ethiopia. Specifically, Adea Berga Woreda is where the cement factories are located, where the youth who earn enough money face the biggest challenge of spending money and wasting their time on the consumption of substances. Family conflict & tensions, losing friends and sense of hopelessness, social isolation, physical conflict and injuries, depression, personality changes, psychological and behavioral illness, and crime were created among adolescents who use substances that negatively affect their lives in Adea Berga Woreda.

In Ethiopia, research on youth substance use, priorities, consequences, and intention to quit is limited, and it has not been extensively studied separately on how and what is the priority. Despite the fact that many academics have studied drug use, few studies have sought to explicitly evaluate causes, effects, and quitting intentions. Researcher Teferi (2011) found that despite organizational-based research on substance use and the intention to stop it, adolescent and community-based research on the causes and antecedents of substance use has not been conducted. There was insufficient previously published research on the causes, consequences, and intentions of substance use discontinuation in the study setting. The researcher created the study with the intention of filling this research gap by studying substance abuse, its causes, effects, and intention to stop using substances.

To the best of the researcher's ability to fill the gap in this area, this study is especially relevant in the three towns of Adea Berga woreda, near the cement factory and one of the substance use areas. The youths and the people in the woreda also linked the issue of cement factory work and the driver of the vehicle with drug addiction, and the use of drugs seems to be spreading as a tradition. The fact that many young people in the area are organized in cement industries, earn a lot of money from cement every month without doing any labor, stay in drug and alcohol houses day and night, and are involved in drugs gave me the desire to conduct this research in Adea Berga.

To assess substance use behaviour, it was essential to look at the reasons and effects of substance use and identify them for the future. The youths of the district leave their families and live alone, engaging in substance use as they earn enough pocket money by organizing small microenterprises at the three cement industries in Adea Berga woreda. Thus, the aim of this study was to assess and find out about substance abuse practices, their antecedents and consequences, and youths' intentions to stop using substances in the three towns of Adea Berga woreda, specifically in Enchini, Mughar, and Olonkomi.

1.3. Research Questions

1. What are the major types of substances abused by youth in Adea Berga Woreda?
2. What are the factors that lead youth to engage in substance abuse?
3. What are the intentions of youths regarding quitting substance abuse in the future?
4. What are the consequences of substance abuse on youth in Adea Berga Woreda?

1.4. Objectives of the study

1.4.1. General Objectives of the Study

The overall goal of this study was to identify substance abuse among youth as well as its antecedents, consequences, and intention to quit substances in the three towns of the Adea Berga district, specifically Enchini, Mugher, and Olonkomi town.

1.4.2. Specific Objectives

- ❖ To find out the main substances that young people abuse
- ❖ To identify the factors that lead youth to engage in substance abuse
- ❖ To assess the willingness of youths to quit substance abuse
- ❖ To point out the consequences of substance abuse among youth in the three towns

1.5. Significance of the study

Considering the lack of antecedents and consequences, as well as the intentions of youths in Ethiopia not to use substance-related research, this study contributed to the knowledge of the work developed so far. Substance abuse needs the attention of health workers, parents, religious leaders, and the community at large because it is a significant issue in the social, educational, health, and other related sectors affecting youth. As a result, the study examined drug abuse, its causes, related problems, and the goal of stopping drug use. The study was carefully planned because youths are the most vulnerable segment of society, and significant suggestions were made in light of the results. To assist in reducing the substance problem among youths in the three towns of the Adea Berga district, specifically in Enchini, Mugher, and Olonkomi towns, in particular, and elsewhere in general, it was hoped that the results of this study would help the youth office, administrators, parents, and other concerned bodies.

1.6. Scope of the Study

This study focused only on substance abuse among youths, its antecedents, consequences, and intention to quit using substances in the three towns of the Adea Berga

woreda, specifically in Enchini, Mughar, and Olonkomi towns. The main reason I focused only on this area was because there is a cement factory in this area, and there are cement drivers with various addictions. The youth in this area use drugs together with the cement drivers. There is no research on addictive substances in this area. Youths do not hesitate to use addictive substances easily, as they earn money by organizing small enterprises as unemployed people. This study, which included young people with substance abuse issues and ages ranging from 15 to 30 years old, was conveniently chosen until the desired sample size was reached by the researcher from each of the three Adea Berga Woreda towns.

1.7. Limitations of the study

Throughout the study, the researcher ran into the following obstacles: These were the lack of organized and recorded data in the two towns of Mughar and Olonkomi that enriches the study; the lack of political stability in Adea Berga towns because of the problems associated with armed elements and government structures; and, besides, because the research subject is sensitive, shy adolescents were refusing to openly express their feelings. The solution to this issue was to provide adolescents with a welcoming and comfortable atmosphere that allowed them to freely express their opinions.

1.8. Operational Definition

Youth: The term “youth” in this study refers to the ages between 15 and 30, currently living in the three towns of Adea Berga Woreda.

Abuse: using an illegal substance, even with the knowledge that it causes serious problems.

Substance: describes anything that modifies or interferes with a person's ability to function on a mental, physical, or emotional level. These include substances such as alcohol, kchat,

cigarettes, and shisha, as well as cannabis that can be consumed by drinking, chewing, inhaling, and smoking.

Consequence: refers to the result of substance abuse among youths; it may include behavioral issues, physical harm, psychological effects, and social problems.

Intention to quit: Having a plan in place to stop using substances.

1.9. Organization of the Study

This research was divided into five chapters. The first chapter introduces an introduction, a statement of the problem, research questions and objectives, the significance and limitations of the study, and introductory information about substance abuse among young people, including causes, consequences, and intent to stop using substances, in the three towns of Adea Berga woreda, specifically Enchini, Mugher, and Olonkomi. The second chapter was devoted to related literature that presented the findings of various authors and provided an overview of substance abuse among youths, including types of substance abuse and some related theories. The study's methodology, including data collection, method of data analysis, and ethical considerations, are covered in the third chapter. Data presentations and analysis findings are covered in the fourth chapter, and finally, the fifth chapter presents discussions, conclusions, and recommendations for the study.

CHAPTER TWO

2. Related Literature

2.1. General Overview of Substance Abuse Concepts

Depending on the author, the substance is defined differently. Substance abuse is the use of hazardous chemicals, such as alcohol and illicit drugs (WHO, 2011). According to the UNODC (2008) World Drug Report, substance abuse is also defined as “the use of a drug by an individual when there is no legitimate medical need to do so. A general definition of a drug is any substance that interferes with a live organism's ability to operate normally when taken. It modifies consciousness, perception, or mood. Substances abuses that are commonly abused include kchat, marijuana (ganja), cannabis, tobacco, and alcohol. The use of drugs and other substances is the interactions between the individual, the substance and the environment, with young people especially having particular characteristics that make them vulnerable to substance use (UNODCCP, 2000). Drugs are defined as any substance, man-made or natural, aside from food, that alters a living organism's structure and function because of its chemical makeup (Ray, 1978). Drug abuse is defined as using a substance with great intensity or in situations that are likely to cause problems or significantly raise the likelihood of problems occurring. These issues can be social, professional, financial, psychological, or physical. Any substance that has the ability to improve physical or mental health or prevent or cure disease is referred to as such in medicine. In everyday speech, the phrase frequently alludes particularly to psychoactive substances and, more frequently still, to illegal substances. But drugs are substances such as coffee, cannabis, heroin, kchat, tobacco, alcohol, and others with widespread use that are primarily used for their psychoactive effects (UNODCCP, 2000). Risk factors include peer pressure, having enough pocket money and

redundancy, wanting to socialize, feeling high, wanting to forget problems, wanting to become separate from the family, and wanting to fit in and be accepted (WHO, 2000, p. 43).

2.2. Categories of Drugs/Substances

2.2.1. Hallucinogens: a type of chemical drug that causes changes in perception of reality, rational thought capacity, and emotional expression similar to those seen in people suffering from psychotic illness. These drugs (Lysergide, Phencyclidine, Methylenedioxymethamphetamine, Cannabis, etc.) produce euphoria, anxiety, and changes in behavior, delusions, paranoid reactions, depression, and a sense of identity loss. Although there are many types of psychological dependence on hallucinogens, short-term use was associated with higher levels of tolerance. There is no physical dependence; users of these drugs have reported experiencing flashbacks of extremely high anxiety a few weeks or even months afterward (UNDCP, 1992).

2.2.2. Stimulants

Stimulants are a class of drugs that hasten the transmission of signals between the brain and body. Any substance that activates improves or raises brain activity is referred to as a psych stimulant. Amphetamines, cocaine, coffee, and nicotine are among them. Kchat is one of the stimulant drugs, and it is widely used in east Africa and the Arabian Peninsula for its euphoric effect. The practice has a long history steeped in local traditions and customs. (Gutu et al., 2016).

2.2.3. Depressants: any chemical agents that inhibit or decrease the function or activity of a specific part of the body. These include alcohol, barbiturates, and benzodiazepines. (Alkattan et al., 2021).

2.2.4. Inhalants: Inhalants are volatile chemicals that emit chemical vapors and, like alcohol, may have brief psychoactive or mind-altering effects. Inhalants include a number of commonplace items, such as aerosols, plastic cement, paint, hair sprays, gasoline, certain glues, solvents, and different anesthetic gases. Even for brief periods of time, sniffing modestly concentrated inhalants can impair judgment, cause visual disturbances, and weaken reflex and muscle control. Accidental deaths occur from inhalants, mysterious suffocation, heart failure, or respiratory failure (UNDCP, 1992).

2.2.5. Narcotic Drugs: These are substances that chemically impair consciousness or make a person insensitive to pain. The term is typically used in reference to narcotic analgesics, such as opiates or opioids. According to Narcotic Substances (UNDCP, 1992) these drugs internationally include cannabis, cocaine, heroin, and morphine. Cocaine and heroin usage are relatively uncommon, and they are likely limited to a select few persons who can pay the costs associated with these habits. (Ayalew G. MOH and G., 1995)

2.2.6. Cannabis: The word "cannabis" refers to the wide range of psychoactive varieties of *Cannabis sativa*, the plant that is used to make marijuana. They include hashish (made from the plant's flowering heads), hashish oil, and marijuana leaves (also known as ganja in street lingo). Intoxication from cannabis can cause euphoria, limb lightness, and generally increased sociability. It affects immediate memory, coordination, and sense of time, among other complex, skilled tasks like driving. Alcohol and cannabis can occasionally be mixed, which can be synergistic. Frequent cannabis use can cause respiratory problems and raise the risk of lung cancer. (UNODCCP, 2000, P. 12). Around 400 distinct chemicals have been found in the cannabis plant, 61 of which are thought to have some psychoactive properties. THC, or delta-9-tetrahydrocannabinol, is the only one of these compounds that is known to be responsible for addiction.

2.2.7. Tobacco: any preparation made from the desiccated leaves of *Nicotiana tabacum*, a plant native to the world of nightshades that is now grown all over the world. Nicotine is the primary psychoactive ingredient. Along with alcohol, tobacco is one of the most widely used drugs for recreational purposes. It can also be chewed, eaten, or sniffed for its mild stimulant effects, though it is usually smoked in the form of cigars or cigarettes. Dependency is highly likely, especially when smoking. Long-term tobacco use, particularly when smoking, causes many preventable deaths, mostly from lung cancer and heart disease. Lung cancer risk has been continuously associated with being around other people's cigarette smoke. Apart from nicotine, tobacco smoke comprises several other harmful substances, primarily carbon monoxide and tar (UNODCCP, 2000, P.70).

2.2.8. Alcohol: Alcohol is a depressant, psychoactive and dependency stimulant, and it promotes euphoria, reduces anxiety, and makes people more social. At least seven different cancers have been linked to alcohol consumption, including the most prevalent cancers like breast and colon cancer in women. Alcohol, or ethanol, is a biologically active substance, and drinking any type of beverage that contains alcohol increases your risk of cancer (WHO, 2023).

2.3. A Global Overview of Drug Abuse Prevalence

According to a United Nations Office on Drugs and Crime study on the World Drug Report 2011, the production of cannabis leads all other illicit drugs in terms of volume produced, followed by the production of cannabis resin. Cocaine and heroin are the illicit drugs produced in the second-largest amounts. Production of stimulants similar to amphetamines appears to be equivalent to that of heroin (De Coning & Stølsvik, 2013). The World Drug Report further states that cannabis herb production takes place across all continents and in almost all countries. Indoor production of cannabis, in contrast, is

concentrated in developed countries in North America, Europe, and Oceania. There is no reliable trend information for cannabis herb production at the global level available.

Cannabis-herb seizures suggest a stable level of cannabis herb production globally (Mahder, 2014). Cannabis resin production is geographically more limited. Based on information on the origin of cannabis resin supplied by Member States, this seems to take place primarily in Morocco, mainly producing for the markets in West and Central Europe and North Africa, and Afghanistan, mainly producing for neighboring countries in South-West Asia and for the local market.

In East Timor-Leste, a study of 1790 teenagers found that 40.3% of them currently smoked cigarettes. Among those who currently smoke, 32.4% said they purchased their cigarettes from peddlers, 16.7% said someone else bought them, 13.7% said they borrowed, and 3.4% said they were stolen.

2.4. Ethiopian Overview of Drug Abuse Prevalence

According to the 2011 UNODC Global Drug Report, Ethiopia is one of the countries where drugs are transported. Ethiopia is ideally located in a region that offers easy access to Europe, Asia, and other parts of Africa, according to the Drug Abuse Assessment for the Ethiopian Health Center Team (2005) in a report by Gondar University. Additionally, Ethiopia has wide borders with five other countries, which increases the possibility of drug smuggling. Heroin has been moving from the Indian subcontinent to West Africa in recent years, then to Europe and North America. At the Addis Ababa International Airport, heroin traffickers have been frequently stopped and a sizeable amount (up to 20 kg) of the drug has been discovered.

2.5. Theoretical Perspectives on Youth Substance Abuse

2.5.1. Sociological Theories

Sociological theories emphasize the influence of social factors, such as peer pressure, on individuals' propensity to engage in substance abuse. Deviant behaviors were those that got in the way of society's desired or regular functioning. Conditions like crime, alcoholism, poverty, mental illness, prostitution, and other deviant acts labeled as "band persons or situations departing from expectations described in these terms are unwell (Destefano, 1983).

2.5.1.1. Structural-Functionalist Theory

Structural functionalists argue that drug abuse is a response to weakening societal norms. As Society becomes more complex, and as rapid social change occurs, norms and values become unclear and ambiguous, resulting in anomie (a state of normlessness). Anomie may exist at the societal level, resulting in social strains and inconsistencies that lead to drug use. Anomie produces inconsistencies in cultural norms regarding drug use. For example, although health care professionals warn of the dangers of alcohol and tobacco use, and advertisers glorify the use of alcohol, and tobacco. Anomie may also exist at the individual level, as when a person suffers feelings of estrangement, isolation, and turmoil over appropriate and inappropriate behavior. A youth whose parents are experiencing a divorce, who is separated from friends and family as a consequence of moving, or who lacks parental supervision and discipline may be more vulnerable to drug use because of such conditions. Thus, from a structural-functionalist theory, drug use is a response to the absence of a perceived bond between the individual and society and to the weakening of a consensus regarding what is considered acceptable.

2.5.1.2. Symbolic Interactionism

Symbolic interactionism focuses on the interaction of different social meanings connected to drug use. Therefore, drug use is seen as a behavior that arises from a person's interactions with other drug users, and learning how to take drugs is a result of these kinds of social interactions. It engages in a lot of attitudes that defend drug use and describe drug effects as pleasurable. This approach is used in the classic 1953 paper "Becoming a Marijuana User" by Howard S. Becker, which examines drug use. Most marijuana use, according to Becker, begins when a person is around friends who have previously used the drug. According to him, inexperienced marijuana users plan to keep smoking the drug. Exemplars of integration such as Becker, Lemert, and Goffman have traditionally included drug and alcohol abuse, suggesting that deviance can be understood as a category of activity or a collection of identities, roles, and lifestyles that involve running inconsistently in some areas and countering conventional society in others.(Williams, 1978). In summary, it was best to view deviance, like drug use, as a dynamic, on-going event with an entry point or beginning and, oftentimes, an endpoint or resistance (Cline, 1978, P. 84).

2.5.2. Psychological Theory

The focus of psychological theories is on the propensity of particular personality types to use drugs more frequently. Drug use as a way to relax, increase confidence, or relieve stress may be more common among those who are more vulnerable to anxiety. For instance, studies show that child maltreatment, particularly in females, promotes the usage of alcohol and drugs by adults in young people (Linda A. Mooney et al., 2011).

2.5.2.1. Social Learning Theory

The Social Learning Theory of Bandura (1977), also called the Social Cognitive Theory, provides a broad-band explanation for both desirable and undesirable behavioral outcomes. This theory focuses on the learning that occurs within the social context. According to this

theory, to acquire a behavior, first it proposes that young people learn social behaviors through a process of observation and imitation of the role models or prototypes and the consequences of their behavior. The social learning aspect of drug abuse can be related to parental modeling of drug related behaviors. Parental drug use has been shown to predict the initiation of drug use by youth, frequency of young people's marijuana use, and youth use of additional illegal drugs such as cocaine and barbiturates.

2.5.2.2. Psychopharmacological perspectives

Psychopharmacology is the study of substances that influence mental states and looks at how drugs affect behavior, cognition, and the central nervous system. Psychopharmacological perspectives on substance abuse among youth focus on the interactions between drugs and the brain, including how psychoactive substances affect neurotransmitter systems, brain function, and behavior in adolescents. Understanding these perspectives is crucial for comprehending the mechanisms underlying substance abuse, developing targeted interventions, and examining how drug use during the developmental stage can have long-lasting effects on brain structure and function, increasing the risk of substance abuse disorders (Meyer et al., 2022).

2.6. Antecedents of substance use

Youth drug use and abuse are influenced by a variety of factors. According to Seyoum and Ayalew (1995), some of these include psychological aspects, family-related factors, peer influence, mass media commercials, accessibility, and affordability. According to a study conducted in Ethiopia on substance use and related aspects (Tesfaye et al., 2014), a number of variables had a statistically significant correlation with substance use. A multivariate logistic model was used to examine the effects of potential confounding variables and found that depression, gender, and religion were statistically significant predictors of substance use.

2.6.1. Drug use behavior and demographic aspects

2.6.1.1. Age

Different literatures show that most youths start experimenting drugs at their early ages. According to the NACADA (2012), 20% of Kenyan youth aged 10-14 smoke, while this figure increases to 44% for youth aged 15-19 years and 69% for youth aged 20-24 years (NACADA, 2012). King'endo (2010) studied the rate of young people substance use among American eighth, tenth, and twelfth graders between the mid-1970s and the early 21st century. According to this study poll, 54% of Americans reported consuming an illegal substance at some point more than half their lives in 2000. The study found that the rate of substance use rose with age, peaking at 19.6% in those in the age range of 18 and 20. (Abajobir & Kassa, 2019)

2.6.1.2. Sex

Naturally, males excelled in drug use practices by forming a class where participation was a greater driver than females. Agazi (2009) reports that sociodemographic data on behaviors indicates most people who chew kchat are men, accounting for 15.6% of the study's total participants; only 0.02% of participants are female.

2.6.2. Family background

A strong family can work as a deterrent to drug misuse behaviors by fostering stable family dynamics such as improved parent-teen communication, closer family ties, and parental supervision. Parental drug use or attitudes that condone parental drug use may have an impact on children's substance use. Alcoholism and other substance abuse can have a variety of short- and long-term effects on adolescents and their families. For example, drug-

using teens are more likely to experience violence, accidents, early sexual activity, and unintended pregnancies (Lander et al., 2013).

2.6.3. Psychological Factors

Psychological aspects include, among other things, mental and behavioural patterns, personality traits, levels of self-esteem, and coping mechanisms. Several non-pathological elements may contribute to teenage substance addiction issues. Some young people turn to drugs as a result of the high mental stress associated with academic courses and the unrealistic expectations of professors and parents (Newcomb et al., 1986). Adolescents who have witnessed or suffered physical or sexual abuse are at increased risk for developing substance use disorders, including alcohol (Gorski & Miller, 1986).

2.6.4. Peer Influence

Youths crave a sense of community and the approval and love of those closest to them. As a result, one may act in ways they otherwise would not have to fit in and win the approval of the group. When someone feels dependent, insecure, and low in self-esteem, this is more problematic. For young people who are uneasy, according to peer group standards gives them comfort and approval (Gorski & Miller, 1986). Peers can have an impact on cognitive aspects such as how someone views their own behavior, and peer influence encompasses situational elements like direct peer pressure and the value of socializing and group conformity, as well as cognitive elements like the perception of peers' behavior and the perceived drug use norms of the peer group (UNODCCP, 2000, p. 53). Youths who abuse alcohol and drugs often isolate and shame their peer, which makes it difficult for them to participate in clubs, community events, and group projects and prevents them from reaping the benefits of their actions. (Seyoum and Ayalew, 1995).

2.6.5. Mass media and advertising industry

According to Ondieki & Mokuu (2012), drug manufacturing, entertainment media, music, fashion, and advertising romanticize the drug lifestyle, which attracts young people and makes it easier for them to get involved. Family and leisure time are dominated by television, which influences attitudes, behaviors, and social interactions while frequently serving as a role model for younger viewers.

2.6.6. Accessibility and Affordability

According to Ondieki & Mokuu (2012), Kenya has become a transit point, and all types of drugs are cheap and readily available, so most adolescents in school settings can get them and afford them. Because it is grown in Kenya's Meru region, miraa is also easily accessible and reasonably priced. Other contributing factors include its open use and the pervasive "drug culture," which normalizes drug use in society.

2.6.7. Getting Enough Money

Getting enough money each month can influence youths to purchase and use substances and alcohol. The sufficient pocket money earned by small micro enterprises in three factory cement industries while sitting at home without any work every month is what the youth of Adea Berga district have in common as factors leading to drug abuse. Many adolescents in the Adea Berga are organized in the cement industry by small microenterprises and earn a lot of money from cement every month without doing any labor, which is a factor that leads young people to use substances and alcohol.

2.6.8. Traumatic Life Events

Papadopoulou et al., (2015) found that children who experience traumatic life events could have negative outcomes like substance abuse, criminal behavior, self-harm, and self-

and other-loathing. Children who have been abused physically or sexually may have exceptionally low self-esteem, which might hinder future socialization and lead them to believe that the world is inherently hazardous. According to Okari (2018), children who have experienced physical abuse frequently believe in merit punishment, which is why drugs are taken to treat the immediate emotional agony of the violence or the subsequent self-deprecation.

2.6.9. Knowledge of Substance Abuse

Lack of understanding about the dangers of such use has been linked to alcohol and drug dependence. Youths are more likely to start drinking and abusing drugs, substances, or other illicit drugs if they believe that using a particular drug occasionally is safe (Okari, 2018).

2.7. Consequences of Alcohol and Drug Abuse

Excessive alcohol or drug use poses a risk to one's physical or mental well-being, interferes with trustworthy interpersonal interactions, or makes it more difficult to fulfil duties to one's family, community, or job. Drug and alcohol abuse have a wide range of associated issues and effects (Rintaugu, E.G., et al. 2012). According to research, using drugs and alcohol not only affects how effectively the body functions right now but can also have long-term detrimental impacts on health and well-being. Alcohol can have a deleterious impact on nearly all bodily systems (WHO, 2010).

2.7.1. Physical Health Consequences

Youth alcohol and drug abuse has negative health effects, such as the risk of overdosing and injuries from auto accidents. Wechsler et al., (2004) claim that drug and alcohol abuse also encourages teenagers to engage in risky sexual behaviour with various partners while they are in school, which puts them at risk for HIV/AIDS. Young people who use drugs and

alcohol frequently take part in activities that increase their risk of sexually transmitted diseases. This could be using psychoactive substances, especially injectable ones, in real life or behaving impulsively and irresponsibly when under the influence of mood-altering drugs.(Brook et al., 1998).

2.7.2. Mental Health Consequences

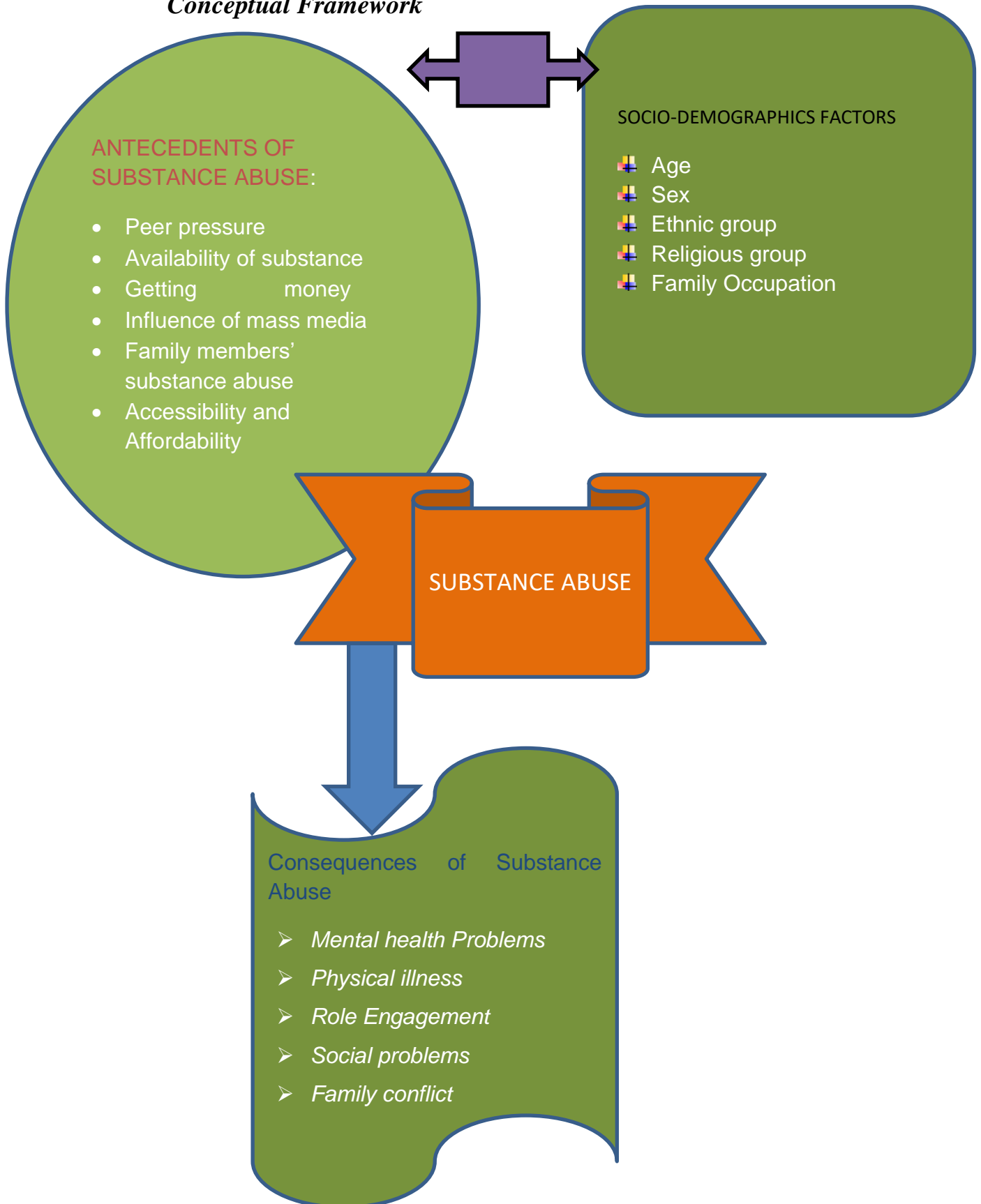
According to Deressa & Azazh (2011), alcohol and drug abuse can be the cause of youth mental health problems like depression, developmental delay, apathy, withdrawal, and other psychosocial issues. Young people who use substances are more likely than those who do not to experience mental health illnesses such as depression, conduct problems, personality disorders, thoughts of suicide, and other problems (Kebede, 2002) .

2.7.3. Role Engagement

The findings of various studies indicate that youth alcohol and drug abuse is linked to reduced group participation, avoidance of everyday activities, youth unemployment, and increased problems. This suggests that if youths lose involvement in their own roles, such as their environment, friends, and what they need, they may turn to substance abuse.

In summary, the identified gaps from the reviewed literature are that there is little data concerning commonly community based substances abused other than institutional-based studies in Ethiopia. The other is more of the study conducted around higher institutions of students with substance abuse than other community-limited levels. So, this study is designed to bridge the gap between the mentioned gaps.

Conceptual Framework



CHAPTER THREE

3.1. Research Methods

3.1.1. Philosophical Perspective

"A world view, or paradigm, is a fundamental set of beliefs that direct behavior." (Creswell 2007). Pragmatism offers a choice that includes both the positivist and social constructivist paradigms, with research questions determining how quantitative or qualitative methods are used that focus on specific things, developing reality, and better knowledge (Teddlie and Teshakkori, 2011). The positivist approach is a philosophical approach to scientific investigation that embraces objective knowledge obtained through first-hand observation, experience, and empirical evaluation using quantitative techniques like closed inquiry method research (Bashir et al., 2017). For a post-positivist, creating numerical examinations of people's behaviour becomes crucial. Furthermore, the social constructivist worldview has been selected to guide actions throughout this study because it acknowledges that people perceive reality differently and value the subjective interpretation of events (Samy & Robertson, 2017). From a constructivist perspective, the aim of the research is to obtain as much information as possible from the viewpoints of the participants regarding the situation that is being studied. In order to allow participants to create their own interpretations of a situation which are usually formed through conversations or interactions with others—the questions become more expansive and general. Since the researcher is paying close attention to what people say and do in their everyday environments, the more open-ended the questions are the better.

According to Creswell (2009), people turn to one another for seasoned perspectives about the society in which they reside and perform their jobs. During this procedure, they formulate unique interpretations of their experiences in relation to their personalities. The concept of

substance abuse attitudes in Ethiopia, specifically in Adea Berga District, was employed, along with the various reasons why adolescent people use drugs, the ways they use them, and their plans to quit.

3.1.2. Study Area

Adea Berga woreda is situated 70 kilometers from Addis Ababa in the Oromia region. The Adea Berga Woreda has a total area of 798.35 square kilometers (798.35 hectares). It is situated between 38° 17' and 38° 36' longitudes and 9° 12' 30" and 9° 37' latitudes. The minimum and highest temperatures can reach 10 °C and 25 °C, respectively, while the average annual rainfall ranges from 918 mm to 1368 mm. Adea Berga shares borders with the Muger River to the northeast, which divides it from the northshewa zone; in the southwest by Ejere; Meta Robi to the west; and in the Walmara to the south. As a district, substance abuse has become part of the tradition among people, especially among youths. The homemade liquor Arake, the homemade beer known as Tella, and the Teji honey bargain in Adea Berga Woreda are common ingredients in the three towns. Nowadays, the economic activities of the Adea Berga people are organized in three small micro industries on cement without work to earn enough pocket money from cement profits and work as drivers in the factory where young people are involved in daily consumption and sell things that contain drugs.

3.1.3. Research Design

The major aim of this research is to identify substance abuse among youths as well as its antecedents, consequences, and intention to stop using substances, in the three towns of the Adea Berga district, specifically in Enchini, Muger, and Olonkomi towns.

According to Moser & Korstjens (2018), a research design is a plan for selecting study subjects, study sites, and data gathering methods in order to answer the research questions.

Additionally, they imply that the goal of a well-designed study is to yield results that are accepted as reliable. One way to gather data for descriptive research is to send out questionnaires or conduct interviews with a sample of people. Using a questionnaire and an interview schedule, primary data from respondents was gathered for this study in order to learn more about the current state of the phenomenon and to explain "what exists" in terms of variables or conditions in a situation (Creswell, 2013).

3.1.4. Research Approach

To improve the literary portrayal of the human experience, there are several methodologies that may be used to gather data and analyze it. Some of these approaches call for studying quantitative and qualitative research methods, while others combine the two.

For the study, the researcher employed both quantitative and qualitative approach. In order to assess youths substance use practices, the quantitative approach gathered data through the use of a structured questionnaire field that asked questions about a range of topics. Secondary data are collected from written documents, books, and registrars. During the qualitative research, useful information was attained through interviews, which mainly focused on the adolescent's substance abuse practices in the study area.

3.1.5. Target Population

Adea Berga woreda has thirty-nine kebeles and five city administrations. However, it was found impossible to deal with all kebeles and city administrations at the same time. Therefore, the researcher purposefully selected three town administrations, namely, Enchini, Mughher, and Olonkomi. During the selection, the researcher considers their geographic location, the existence of large and lively uses of substance abuse, considerable young

people; common respondents attributes depend on sex, age, religion, educational status, place of birth, family conditions, etc.

Table 3.1: Characteristics of the Three Towns in Adea Berga Woreda

S/N	Name of Towns	Sex		Total
		Male	Female	
1	Enchini	232	83	315
2	Mugher	173	86	259
3	Olonkomi	87	52	139
Total		492	221	713

Source: Three Towns of Adea Berga Woreda, 2023

3.1.6. Sampling technique

As far as the nature of this study is concerned, due to the absence of a sample frame, the researcher employed non-probability sampling techniques, which are convenience sampling for substance use youth from each of the three towns in the Adea Berga district between the ages of 15 and 30, including both sexes. The reason I wanted to focus on the age group of 15–30 is that there is no substance research on youth in Adea Berga Woreda as a whole, and youth in this age group are more likely to use substances. The harms and benefits are not quickly identified and returned because they and the groups are formed and earn enough money to get involved in substances because they are young people in this age group. Also, the researcher used the purposive sampling method in qualitative research, where the researcher selects a sample size from youths who use drugs to answer the research questions (Marshall, 1996).

Using the study's topic as the foundation for the section, the researcher chose a representative sample of people who could be a larger population and then gathered data on this group for a variety of reasons, including the difficulty of compiling a list of every participant, the study's intention to exclude the entire group from the samples, it is an easy method to access respondents, and the samples do have representative knowledge of the population of the study, at least to a greater percentage. This study involved participants from various locations, including kchat chewers stations, kchat market stations, shisha houses, a popular place and home for youth substance abusers, Video house, bus stations, individual homes, youth recreational site, and other substance use shops in their own shops where substances are used. Data was collected from respondents using purposive and convenience sampling, proportionately allocated to size, and continued until the desired sample size of 256 was reached from kchat chewers stations, kchat market stations, shisha houses, a popular place and home for youth substance abusers, video houses, bus stations, individual homes, youth recreational sites, and other substance use shops in their own shops where substances are used. For the purpose of selecting young people as respondents, the three towns of Adea Berga Woreda were purposefully and conveniently selected based on substance use among youths.

3.1.7. Sampling Size

Using Yamane's (1967) scientific formula, the sample size has been determined or chosen in order to obtain a valid and representative sample from the target population. Since the arrival of COVID-19 in Ethiopia, a total of 713 substance users have been identified in the three towns of Adea Berga Woreda, but no list names of young people who use substances have been registered. 713 respondents, or a sample of respondents from three towns in Adea Berga woreda, participated in the study on substance abuse among young people. The researcher made the following assumptions for this study: total population = 713, degree of

variability = 50% (maximum variability), Sampling error or margin error= $\pm 5\%$, confidence level = 95%.

The formula for sample size is: $n = \frac{N}{1+N(e)^2}$

Whereas n = sample size under investigation

N= size of population

e = Error margin

$$n = \frac{N}{1+N(e)^2} \quad n = \frac{713}{1+713(0.05)^2}$$

$$n = \frac{713}{1+713(0.0025)} = \frac{713}{1+1.7825}$$

$$n = \frac{713}{2.7825}$$

$$n = 256$$

Sample size for each town, such as Enchini 315, Mughher 259, and Olonkomi 139.

Table 3.2. Purposively selected sample of respondents from each town

S/N	Towns	Number of Youth substance use	Sample size		
			Male	Female	Total
1	Enchini	315	83	30	113
2	Mughher	259	66	27	93
3	Olonkomi	139	31	19	50
Total		713	180	76	256

Source: Three Towns of Adea Berga Woreda, 2023

3.1.8. Method of data collection

Data collection methods and tools used in this study included closed and open-ended questionnaires, interviews, and observational methods. The data collection processes employed both quantitative and qualitative approaches. The quantitative data was gathered using a closed questionnaire, and the qualitative data was gathered using techniques like observational methods and interviews that were guided.

3.1.8.1. Questionnaire

In order to gather quantitative data, a structured questionnaire covering items containing factual information about the social demographic characteristics of the respondents specifically, the youth's sex, place of residence, ethnic group, religious affiliation, family circumstances, reasons behind youth substance abuse, drug use behavior, and issues associated with substance abuse has been developed. To account for the respondents' limited language proficiency, the questionnaire was initially written in English and then translated into Afan Oromo, the native tongue, by an English language teacher. After a check, the translator returned to English to ensure equivalency. So to collect data successfully, the researcher has prepared both closed-ended and open-ended questions. A total of 256 questionnaires were administered to youths.

3.1.8.2. In-Depth Interview

Purposive sampling was used to identify nine (six males & three females) youths who experienced substance abuse from three towns. The study used structured interviews with open-ended questions to understand the issue from the participant's perspective and young people substance abuse among Adea Berga Woreda young people. The researcher was able to conduct face-to-face interviews with youth substance users who were selected through a purposive sampling of nine youths, six males and three females, from the three towns. The

guiding questions focused on drug abuse problems, consequences, and suggestions for action, and participants were asked for a suitable time and consent before the interview.

3.1.8.3. Direct Observation

In this method, the researcher has to take field notes on the behavior and activities of youths taking substance abuse. Direct observations concentrate on human behavior, natural environments, or actual events. The researcher watched how young people used drugs. The researcher also spent some time around kchat, shisha houses, pool houses, hotels where youths use substances, areas where youth use alcohol, and walking the streets with youths using substances. So this method was able to confirm their opinions, the places where they spent a significant amount of time, and the reasons behind their drug use.

3.1.9. Method of data analysis

The researcher analysed the data by using both qualitative and quantitative techniques. Quantitative raw data was arranged and processed after being gathered through questionnaires. These questions' responses were gathered with care and condensed. Qualitative data collected through interviews and observations was organized, and built on the findings in order to further explain substance abuse among young people. The statistical program data analysis was done using the IBM SPSS version 16 for Windows. Descriptive statistics were analysed using SPSS to analyze frequency distributions, cumulative percentages, graph presentations, and tables.

3.1.10. Quality Assurance

Scientific research methods are characterized by the absence of personal bias or prejudice, the determination of verifiable qualities of a phenomenon, the application of logical reasoning to guide the researcher's decisions, the orderly progression of the

investigation, and the assumption of internal consistency (Kothari, 2004). The face validity issues were addressed while conducting face-to-face interviews. Before beginning data collection, the validity of the measurements was ensured through peer reviews. In order to avoid personal biases, tape recordings of the interviews and transcription without adding personal interpretation was used. Through the use of multiple method techniques, verbatim accounts of participant language, low-inference descriptors, and other techniques, trustworthiness can be achieved by eliminating bias and improving the researcher's truthfulness of a proposition about some social phenomenon (Bashir et al., 2008). Accordingly, multiple data collection methods were employed to cross-check the collected data. Literal statements of participants and quotations were used in the analysis as well.

3.1.11. Ethical consideration

Research ethics in both quantitative and qualitative research involve participants, ensuring protection of interests and researcher-participant relationships. A letter from the AAU School of Social Work was given to the Adea Berga administration and Youth Office to get their consent. Throughout the investigation, the researchers were praised for their concern for people and their values. As Macqueen et al., (2005) established, the three key principles of autonomy, beneficence, and justice formed the foundation for this study. The data was stored in a secure location once it had been collected and analyzed. Confidentiality shall be preserved to the greatest extent practicable. Concerns about confidentiality and privacy were stated properly, as was anonymous expression. Another principle is beneficence, which involves a commitment to minimizing the dangers of research while maximizing the benefits to research participants. The study was about ensuring that any actions taken do not endanger the subjects. Before distributing the questionnaire and beginning the interview, the researchers clarified to each subject the voluntary nature of their involvement and that they could withdraw at any time. There is nothing that will cause you

any problems for participating in this research, and you will not be paid. Moreover, the issues of confidentiality were critically handled, and no participant's name or any status that gives a clue to identify the participant was used, and the data collected from the participants was summarized and interpreted collectively by using thematic analysis.

CHAPTER FOUR

4. Data Presentation and Results

This section discusses the finding of youth substance abuse, antecedents, consequences, and the intention to stop the youth in Adea Berga Woreda, specifically in three towns.

4.1. Demographic Characteristics and background of Participants

The demographic information of the participants includes their sex, place of origin, age, ethnicity, religion, work status, and residential status.

Table 1: Socio demographic Characteristics of Adea Berga Woreda young people (n=251)

variables	Value			frequency	Percent (%)
		Male(n=177)	Female(n=74)		
Sex					
Age	15-20	24	9	33	13.15
	21-25	87	42	129	51.40
	26-30	66	23	89	35.46
Place	Urban	96	56	152	60.96
	Rural	81	18	99	39.04
Religious	Orthodox	80	17	97	38.65
	Protestant	16	9	25	9.96
	Waqefata	63	43	106	42.23
	Muslim	12	4	16	6.37
	Others	6	1	7	2.79
Ethnicity	Oromo	120	41	161	64.14
	Amhara	44	23	66	26.29
	Tigre	7	2	9	3.59
	Guraghe	5	6	11	4.38
	Others	1	3	4	1.59
Participant work	Small microenterprise on cement	87	39	126	50.20
	Daily labourer	49	21	70	27.89
	Gov't employee	17	5	22	8.76
	NGO employee	6	1	7	2.79
	Private employee	18	8	26	10.36

Source: Administrated Questionnaire, 2023

There were 256 questionnaires distributed in all, and 251 of them were consistently and fully completed, resulting in a 98.05% response rate. Of the samples, 177 (70.52%) were male and 74 (29.48%) were female. Regarding their ages, the data reveals that a sizable fraction of research participants 129 (51.4%)—fall in the 21–25 year age range and that another significant portion 33 (13.15%)—fall between the 15–20 year range. The majority of the 152 respondents (60.6%) mentioned their hometown as being in an urban location. Waqefata made up roughly 106 (42.23%) of the study's participants, followed by Ethiopian Orthodox Christians with 97 (38.65%), and other believers, who are members of the aforementioned religions, with 7 (2.79%). About 64.14% of the respondents were speaking Oromo, with the next most common languages being Amharic (26.29%), Guraghe (11, 4.38%), and Tigre (9, 3.59%). Consequently, it can be said that the Oromo ethnic group made up the majority of the respondents. Small microenterprises in the cement industry accounted for 50.2% of the responding workforce, followed by day labourers at 27.9%. Numerous young people organized themselves in the cement industry because of the numerous cement companies in the neighbourhood, where they were able to make enough money each month without having to work and spend their work on drugs.

Table 2: Demographic Characteristics of Participant’s family

Variables	Value	Frequency	Cumulative percent
	Living together	147	57.77
	Divorce	58	23.11
Condition of the family	Death of one or both parents	37	14.74
	No response	9	3.59

Family's Occupation	Housewife	11	4.38
	Merchant	67	26.69
	Government employee	16	6.37
	Farmer	13	5.18
	Daily labourer	41	16.33
	Private employee	98	39.04
	NGO employee	5	1.99

Source: Administrated Questionnaire, September, 2023

The table two clearly demonstrates that, 147(57.77%) of the respondents' families were living together, 58 (23.11%) were living in a divorced household, 37 (14.74%) were young people whose parents had passed away, and approximately 3.59% of participants had given no indication of their current living situation. Regarding family occupation, 67 respondents (26.69%) working merchant, 98(39.04%) respondents reported working as private an employee. The findings revealed that the demographic characteristics of the participants' families indicated that most of them lived together, and the families lived based on private employment.

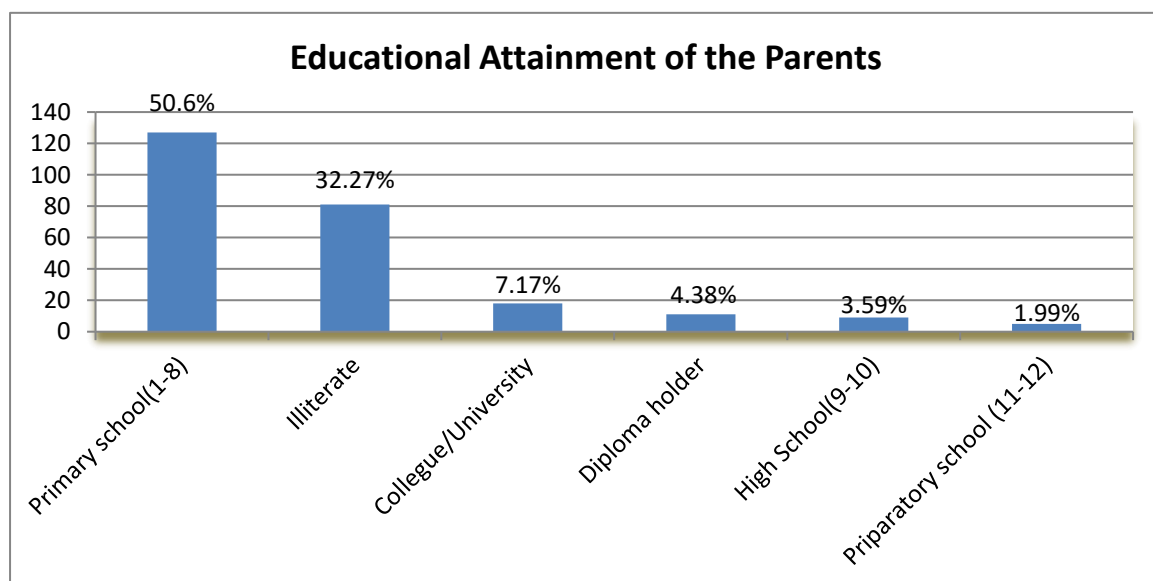


Figure 1: Respondent’s parent educational attainment of the Adea Berga Woreda (n = 251), September, 2023.

Figure 1 clearly demonstrates that the respondents' parents' level of education is 127 (50.60%) in primary school, followed by parents who are illiterate, who make up 81 (32.27%) of the total respondents, and 18 (7.17%) who are from universities. According to figure 1, it is possible to assume that more than half of adolescent parents have completed high school.

Table 3: Responses of family member’s substance abuse

		Frequency	Percent
Who abuse substances from your family?	Father only	96	38.25
	Mother only	24	9.56
	Mother and father	39	15.54
	Brother & sister	18	7.16
	All of them	21	8.37
	None of the above	53	21.12

Source: Administrated Questionnaire, September, 2023

As can be seen in Table three, 96 (38.25%) of the respondents are parents who use drugs. 36.65% of respondents indicate that their parents do not engage in substance misuse of any kind, whereas 159 respondents (63.35%) report that family members use any type of drug. The finding revealed that the most common drug users in the participants' families were the fathers, and most of the family members of the participants used drugs & others.

Table 4: Responses associates during drug abuse

		Frequency	Percent
With whom do you take the drug?	With parents	69	27.49
	With friends	116	46.22
	With sibling	29	11.55
	With any one	17	6.77
	Non response	20	7.97
Total		251	100.0

Source: Administrated Questionnaire, September, 2023

According to Table 4, about 46.22% of respondents take drugs with their friends, 27.49% of respondents use drugs with their parents, 11.55% use drugs with their siblings, and 6.7% use drugs with anybody else. According to these results, drug use behavior is more common with age mates. One can argue that peer pressure has undeniable influence on drug use behavior.

Table 5: Source of influence to drug habit

		Frequency	Percent
What is the source of influence over your drug habits?	Family	53	21.12
	Peers	81	32.27
	Area where I live	103	41.04
	Others	14	5.57

Source: Administrated Questionnaire, September, 2023

As table 5 shows, the major reasons identified by young people for their substance abuse habits in the area where I live account for 41.04%, 32.27% are caused by peers, followed by 21.12% by family, and the remaining 5.57% are identified by others. Their area of residence and friends are seen as sources of influence for their drug use, followed by their family.

Table 6: The place where young people usually use the substances

		Sex		Frequency	Percent
		Male	Female		
Where do you usually use the substances?	While watching volleyball	21	6	27	10.76
	At a home	22	17	39	15.54
	At kchat bet & bar	73	25	98	39.04
	At friend's house	52	21	73	29.08
	In public places	9	5	14	5.58

Source: Administrated Questionnaire, September, 2023

Table 6 shows that 98 (39.04%) of young people who use drugs do so most frequently in a kchat bet bar, followed by 73 (29.08%) of them who use drugs at a friend's house, and the rest 15.54% who use drugs at home, 10.76% who use drugs while watching volleyball, and 14 (5.58%) who use drugs in public. As the result shows, most participants utilize substances in kchat bet' and bar and friend house settings, which may be due to the socially acceptable norm of substance abuse or because substances abuse such as chewing kchat and consuming

alcohol in these areas are well acceptable to a large number of the population.

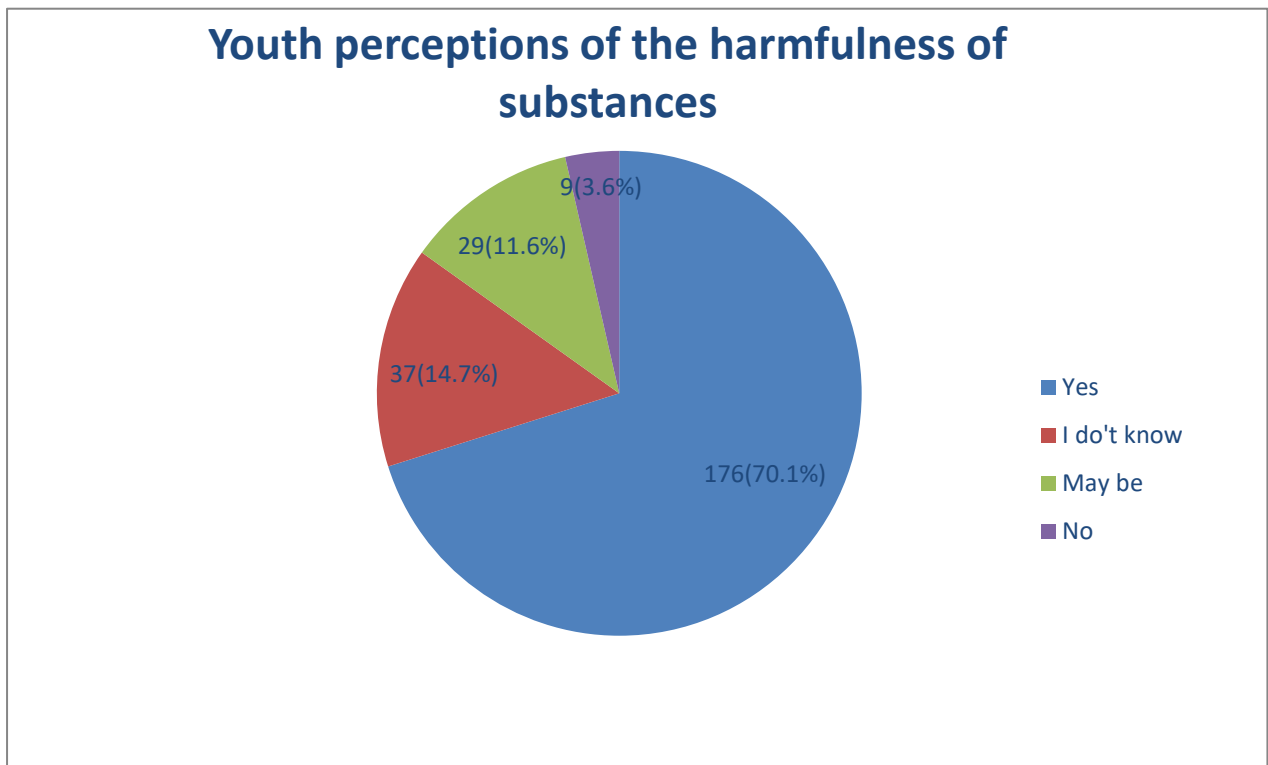


Figure 2: Youth Perceptions of the Harmfulness of Substances, Adea Berga Woreda (n = 251), September, 2023

Regarding perceptions of the harm associated with substance use, 70.1% of the woreda young people who use drugs thought that some of the drugs were harmful if and when used; 11.6% of the youth said they were unsure and others said they may be harmful; 14.7% said they were unaware of the effects on their health; and the remaining 3.6% said it was not at all harmful.

Table 7: Respondents source of money to buy drugs

		Frequency	Percent
What is source of money to buy substances?	From small microenterprise on cement in Dangote and Mughher factory cement	113	45.02
	Friends give me	36	14.34
	Parents give me	22	8.76
	Do business	76	30.28
	Stealing	4	1.60
Total		251	100

Source: Administrated Questionnaire, 2023

Table 7 clearly shows that 113 (45.02%) of the respondents get enough money for their pockets each month from small cement-based microenterprises, 76 (30.28%) from running their own businesses, 36 (14.34%) from friends, and 22 (8.76%) from their parents. In order to meet their needs, the remaining 1.6% of respondents steal from friends, parents, and acquaintances. As the result demonstrates, youth's major source of money to buy substances is getting enough money for their pockets each month from small cement-based microenterprises.

Table 8: Availability of drugs

		Frequency	Percent %
How do you access drugs?	It is difficult to get & expensive	29	11.55
	Cannot get	16	6.37
	Easy to get & cheap	147	58.57
	Non response	59	23.51
Total		251	100

Source: Administrated Questionnaire, 2023

As per the availability of substances in the surroundings of the users, the above table 8 clearly showed that 58.57% (147 in number) respond positively to the availability of substances and the ease of access to them in a neighborhood setting. However, just 29 (11.55%) people said it was difficult to access the substance of their choice, particularly things like shisha and hashish, and 16 (6.37%) people said they couldn't get it on their own. Therefore, the availability of the drugs has an impact on the users and on those who are initiated to experiment with them.

Table 9: Main types of drugs abused by youths

		Frequency	Numbers in percent
What are the main types of drugs abused by youths?	Alcohol	83	33.07
	Kchat	61	24.30
	Tobacco(Cigarette)	6	2.39
	Hashish	49	19.52
	Shisha	31	12.35
	Cannabis	7	2.79
	Kchat & alcohol	11	4.38
	Kchat & cigarette	3	1.20

Source: Administrated Questionnaire, 2023

The preceding table clearly demonstrates that 83 (33.07%) drink alcohol, 61 (24.30%) chew kchat, 6 (2.39%) smoke tobacco (cigarettes), and 49 (19.52%) smoke hashish. 31 (12.35%) smoke shisha, and 2.79% smoke cannabis. Beside this, most of the youth abuse more than one substance at the same time. 11 (4.38%) of the youths take kchat and alcohol, and 3 (1.20%) take kchat and cigarettes. More young people drink beer and use kchat; some also use hashish and shisha.

One of the male 18-year-old in-depth interview respondents said that:

"I do these three things every single day: I drink alcohol, smoke cigarettes, and chew kchat. Peer pressure, drug accessibility, and even having money in my pocket are the problems here, as I end up using anything and everything. Kchat and alcohol depend on my personal standard of living, or accordingly, as what is available ranges from low to high quality. Regarding the price of a bundle of kchat in Enchini City, the majority of those interviewed stated that the type of kchat will determine how much a bundle costs. Thus, even if I lose money most of the time, I often engage in bad-quality chat on a low-standard station and drink "Areke," "Teji," or "Tella" to break my mirqana. I do this sometimes while chewing good-quality kchat and drinking good alcohol like beer, wine, and gin.

The female respondents in the in-depth interview gave priority to chewing kchat over smoking shisha

"Khat and Shisha are my favourite substances. After I chew kchat, I use Shisha because it breaks my mirqana" lasts for a long time, and the talk during the chewing ceremony is wonderful. If I chew I forget my problems for a long time. If I chew, I don't remember my problems, such as social norms, which take me as social taboo or shame.

The data collected from in-depth interviews and quantitative analysis indicates that the youths have a relatively similar preference for substances and would like to take them daily. However, there are surprising differences in their preferences regarding how they would like to take the substances; some would rather smoke shisha while chewing, others would smoke a cigarette after chewing kchat, and still others would smoke while taking alcohol.

Additionally, preferences vary with regard to when it is best to chew, smoke, and drink. After

chewing kchat to break mirqana, some people like to smoke it, some in the middle of the day, and still others prefer to drink alcohol. A few participants say that kchat chewing is good. I chew kchat separately or alone, and it helps me get energy.

Table 10: Youth substance abuse and family living conditions

It was hypothesized that substance abuse has a relationship with the condition of the family. Chi-square was utilized to assess their relationship.

					<i>Asymp. Sign.</i>			
					<i>Total</i>	<i>Value</i>	<i>Df</i>	<i>(2-sided)</i>
		Not	Substance		X^2			
		substance	use					
		use						
Condition of the parents	Living together	57	90	147	2.785	3	.426	
	Divorced	16	42	58				
	Death of one or both parents	11	26	37				
	No response	3	6	9				
	Total	87	164	251				

As table 10 clearly shows, 147 of the respondents report living together, and 42 come from parents who got separated. It was imagined that substance abuse has a relationship with the condition of the parents. The result does not disprove the null hypothesis. There is no significant association between parental conditions and their substance abuse status ($X^2 = 2.785$, $DF = 3$, $P\text{-value} > 0.05$). This means that the condition of the parents has no role to play in relation to substance abuse.

Table 11: Respondents' decisions to stop using drugs

		Frequency	Percent
Valid	Yes	113	45.0
	No	47	18.7
	May be	56	22.3
	Don't know	35	13.9
Total		251	100.0

Source: Administrated Questionnaire, 2023

A key factor in the management of dangerous substance use is the intention to stop. It forecasts actual behaviour change, so the table above shows that 45.0% of youths said they would stop using substances in the future, regardless of the negative effects. Another 22.3% said they might, and another 13.9% said they were unsure or confused about whether to use substances in the future. The remaining 18.7% of respondents state that they do not intend to cease using social drugs in the future. In addition, many of the participants reported that using substances caused health problems. We will also decide to give it up for the future because it has exposed us not only to health and physical illness but also to economic illness. According to the findings, young people knowingly or unknowingly intend to stop using substances in the future for various reasons, and some have not yet decided.

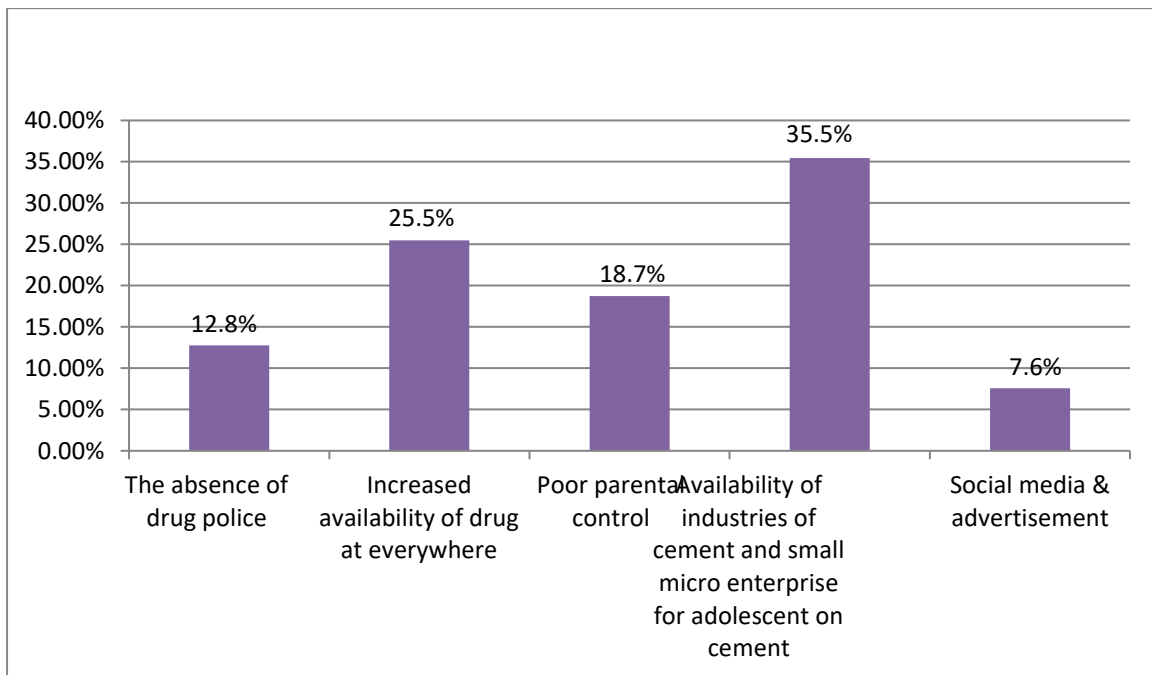
Table 12: Respondents concerning kchat chewing

		F	P%			F	P%
Do you chew kchat?	Yes	175	69.72	Why do you chew kchat?	To socialization	51	20.32
	No	76	30.28		Wisdom of excitement	11	4.38
					To pass time	28	11.16
					To stay awake	31	12.35
					I am addicted	39	15.54
					To have pleasant relation	91	36.25

Source: Administrated Questionnaire, 2023

Table 12 demonstrates that 175 respondents (69.72%) chew kchat, while the remaining 76 (30.28%) do not. According to this finding, the majority of young people in Adea Berga Woreda consume kchat for a variety of reasons. On the other hand, 51 (20.32%) respondents said they chewed kchat to socialize, 31 (12.35%) to stay awake, 39 (15.54%) to get addicted, and 91 (36.25%) said they did it to have good relationships. The main reason why many young people use kchat is that it is used as a way to socialize, stay alert, and forget the bad memories of their life situation. It is normal to, after chewing, drink alcohol and smoke cigarettes.

For example, one participant from designed interview with a 19-year-old youth said, *Chewing chat is necessary because we are addicted to them, and it is necessary to kill time*". The primary motivations for chewing kchat were social interaction, pleasurable relationships during free time, and addiction to the drug.



Source: Administrated Questionnaire, 2023

Figure 3: The Reasons for Participants Increased Drug Use in Three Towns of Adea Berga Woreda (n = 251), 2023

According to figure 3 above, the main causes of rising drug use in the three towns of Adea Berga were the presence of four cement industries and the opportunity for young people to start small microbusinesses in the cement industries (35.5%), increased accessibility of drugs and easy access to money (25.5%), lax parental supervision of youths (18.7%), the lack of local substance use police (12.8%), and social media and advertising (7.6%). According to the results, the young people are organized in small micro enterprises through the job creation office and earn enough money monthly to spend their work on drugs, and mostly drivers come to the district from different areas and carry drugs and use them with young people living in the factory area. According to the findings, young people are more likely to participate in substance abuse because youths without jobs have made drugs their occupation by organizing small micro-enterprises through cement distribution in Dangote and Muger factories, earning up to 12,000 to 20,000 per month. For example, in terms of the main causes of rising drug use among young people, the participants were reported as the following:

"I have realized the main thing is that the availability of drugs in Ethiopia and the fact that chat is sprouting everywhere have made us users more likely to use it together in an area close to where we live. The cement factories in our district organized us on cement through the Job Creation office, and we earned a lot of money every month, which enabled us to buy everything we needed, including drugs." (28-year-old male substance abuser youth)

A 24-year-old female commented on the causes of youth substance abuse:

The availability of drugs, earning enough financial gain, and peer pressure. Merchants are the ones who take the initiative to advertise both legal and illicit substances and

provide customers with access to hidden places. Their concern is only for the benefits they collect, and they don't care about the generation, and if some friend falls into bad habits himself first, not to encourage his good friend to continue with good habits but to share all his bad habits, and simulation creates pressure but doesn't say this will hurt you.

Table 13: The reason to drink alcohol

		F	P%
Why do you drink alcohol?	To forget my problem	49	19.52
	To pass the time	41	16.33
	I am addicted	74	29.48
	To socialization	58	23.11
	To fight depression	29	11.55

Source: Administrated Questionnaire, 2023

As table 13 shows clearly, 49(19.52%) of the participants drink alcohol to forget their problem, 41(16.33%) to pass the time, 74(29.48%) drink alcohol because of addicted, 58(23.11%) to socialization and the remaining 29(11.55% of respondents drink alcohol to fight their depression. From this finding, the majority of Adea Berga Woreda young people drinking alcohols for the reasons of addicted with alcohol, to socialization with their friends and to forget their problem.

Table 14: Responses of youths about their average days of drinking alcohol

		F	P%
On average how frequently do you drink alcohol?	Occasionally(1-3permonth)	54	21.51
	Always/daily	81	32.27
	Often (2-4) per week	107	42.63
	Rarely (on holiday)	9	3.59

Source: Administrated Questionnaire, 2023

Table 14 clearly demonstrates that 54 (21.51%) respondents drink alcohol occasionally, 81 (32.27%) drink daily, 42.63% drink often (2-4) per week, and 9 (3.59%) of the respondents drink alcohol only on holidays. Drinking alcohol and smoking cigarettes is something many adolescents use as coping mechanisms to kill time and erase unpleasant memories of their living situations. For example, some of the participant adolescents said that, *“Drinking alcohol is important to kill time, socialize with their friends, and forget their problems.”*

Another interviewee reported their feelings before starting to use substances, with kchat, beer, wine, alcohol, tobacco, and shisha/ganja being named as the first of the most abundant intoxicants in the city. As soon as I started playing, I enjoyed the substance activity and continued to use it with my friends. My older brother and his friend used to drink alcohol and chew kchat in our town. I was staying with them for a different time. We utilize these substances with each other whenever we want because some youths work with the cement, Dangote, and Mughher drivers. Drivers carry these drugs from other places and consume them since they are readily available and inexpensive in the town. There are several social media platforms that advertise alcohol; therefore, it is easy to be lucky.

For the question, "**You know what substance abuse means? Mention substance abuse.**" The youth participants expressed their views on the interviews as substance abuse is any substance, such as the abuse of prescription and illegal drugs or the excessive use of alcohol, homemade local drinks, and alcoholic beverages by youths. It also includes everyday uses such as tobacco products and kchat products. Mention substance abuse. In response to this question, a number of interviewees stated that the most widely used substances in our city are Areke, Tella, and Teji, as well as beer, wine, tobacco, kchat, shisha, etc.

A 23-year-old male gambler in a chat house responded in the following manner to questions about which of the substances mentioned above he used.

Nowadays, I mainly use kchat, cigarettes, and beer drinks like meta, dashn, bedele, etc. I also use shisha, which comes to us from other cities occasionally.

Similarly, a 16-year-old adolescent male put forward that:

I use any substance abuse with this, and at this time, among them, I use Teji, Areke, and tobacco, and when I have enough money, I use alcoholic beverage products like beer and other substances like shisha.

According to many participants, when asked **at what time they use the substances**, they stated that they primarily use them after three in the morning, from nine in the afternoon until late at night. Some participants also said that they use it whenever they need it and whenever they meet and call each other. They said that the time they use substances is mostly in the afternoon.

4.2. Consequences of substance abuse by youths

Substances have an impact not only on the user's body but also on their daily lives, their capacity for multidirectional thought, and society as a whole. The study also investigates

whether there are any health issues among the young people being studied in the three towns of Adea Berga that are connected to social drug use and cement factory drivers. Substance abuse affects not only their physical and social well-being but also their emotional and psychological well-being.

Table 15: Consequences of substance abuse

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid Physically injured	32	12.7	12.7	12.7
Arrested and losing friends	37	14.7	14.7	27.5
Loss of interest in hobbies and daily activities	23	9.2	9.2	36.7
Emotional distress and sense of hopelessness	57	22.7	22.7	59.4
Mental illness	18	7.2	7.2	66.5
Loss of appetite and sleep issues	46	18.3	18.3	84.9
Social disapproval and neglect	29	11.6	11.6	96.4
Others	9	3.6	3.6	100.0
Total	251	100.0	100.0	

Source: **Administrated Questionnaire, 2023**

The above table 15 shows that the consequences of substance abuse experiences include emotional distress and a sense of hopelessness (22.7%), loss of appetite and sleep issues (18.3%), being arrested and losing friends (14.7%), being physically injured (12.7%), social disapproval and neglect (11.6%), and only 3.6% of them have faced other consequences of their experiences.

Some participants said that, as opposed to those who earn enough money to use substances, money problems or lack of money is a common problem due to drug use, and the study participant said that substance use has a psychological impact on their lives. Interviews

have been made with the young people by raising a question “**Do you face consequences as a result of your substance abuse?**” According to the respondents, the consequences of substance abuse such as alcohol, chewing kchat, smoking cigarettes, shisha, and other drugs include physical conflicts, injuries, loss of interest in hobbies and activities, depression, personality changes, aggression, and an inability to motivate oneself to do anything.

In-depth interviews found that some circumstances might occasionally be psychologically unstable and give people a sense of mental freedom. Most of the respondents claimed that when they achieve the "mirqana" state by simply chewing kchat, they begin to reflect on the past and future in great detail and get melancholy, which causes them to feel uncomfortable and unstable emotionally even when they try to prevent it. Additionally, they claimed that "mirqana" related insomnia makes him even more gloomy and anxious, disturbing them in the morning.

Some youths who use substances are not visited by close and distant relatives, friends, and neighbours as expected during holidays, during illness, and when they need emotional support. Hence, youths who use drugs feel emotionally neglected. One respondent said he thought substance use had more detrimental than beneficial physical effects. A 27-year-old male was physically abused by the vendors of Areke and Tella. They were on good terms for a while, but the youth male conspired to rape her, and while she was at home drinking alcohol drunkenly, he conspired to rape her daughter. She immediately locked the door, and the girl's mother called the youth male a lazy and beat the youth male with a large stick. A few youths also shared histories of physical abuse. Youths who abused drugs and alcohol felt helpless and vulnerable to their physical abusers, just like in cases of emotional abuse.

One 29-year-old male shared:

I used to prepare beautiful feasts to celebrate the holidays in my home with my family, neighbors, and friends. The celebration of this holiday since 2014, since I started using all kinds of substances and I have issues with using substances with parents but not being approached by neighbours, has been discontinued. During the holidays, we spent the holidays with only my wife. Because I used substances, the relatives and neighbours we used to spend the holidays with despised us.

One interview participant expressed his view that the health consequences were greater after using substances, as follows:

"On Cross Meskel Eve of 2016, seven of my friends and I went to a fun hotel with adventurous substances. After drinking a lot of alcohol and other drugs, we passed each other, insulted people, and told the security guards that this was an alcoholic and that their minds were taken away, and she did not know what to say. They told the city security guards that they were ABO shane supporters; we stayed until we entered the police station and felt so despised that a substance user was so despised after the drunkenness passed."

4.3. The reasons behind beginning and continuing substance abuse

The main reasons for regular users to start using substances are peer pressure and being like them, the availability of substances, social media pressure, frustration and stress at home, being funny, and intellectual recreation. A number of participants also mentioned the lack of jobs and the money coming into the account from the cement industry without doing anything, and some even mentioned that they used to pick up chewing skills from Dangote and Mughar cement industry car drivers who crossed the border into the city. Also, some of

the other main reasons mentioned by some of those who participated in the interview for substance users to continue were peer pressure and imitation, the availability of substances in the study area, social media pressure, adolescent hangouts that are not available due to security reasons, spending time using things, taking advantage of the current desperation because of the security situation, and the drivers from the Mughher and Dangote factories from the border who bought us cement even when we lost money to support us to continue using things.

The findings of the study address the question, **what are the reasons for starting to use substances and reasons for continuing taking substances abuse?** Respondents' informant feedback indicated that adolescents in Mughher were generally using substances due to environmental challenges; interaction with found substances, starting as fashion shows, copying others, being away from parent and on a new environment, social media pressure, limited youth for recreation, enough money coming per month into the account from the cement industry without doing anything, negative peer pressure, and lack of knowledge.

One 21-year-old male commented as follows:

The lack of young people entertainment areas in the Mughher city and having to organize all the youths on the cement with one eye kind of uses my time in unnecessary places like drinking alcohol, gambling, stealing, and using substances.

A 26-year-old female commented:

When I asked why victims use these things, she replied, "We learned from various social media through TV and YouTube, exercised it, and gradually experienced it. She said that once they become addicted, they need determination, knowledge about the harms of substance abuse, and a great deal of time to stop using substances unless God helps us."

CHAPTER FIVE

5. Discussions, Conclusion and Recommendation

5.1. Discussions

This study identified substance abuse among youths, causes, consequences, and the intention to quit using substances in the three towns of the Adea Berga district, specifically Enchini, Muger, and Olonkomi town. Millions of people, particularly youths, are impacted by substance use, which also significantly increases the burden of psychological and social challenges on Ethiopia's larger society.

The results of the research indicated that in the three towns of Adea Berga Woreda, youths most frequently abused alcohol (33.07%), chewed Kchat (24.30%), smoked Hashish (19.52%), smoked Shisha (12.35%), smoked Cannabis (2.79%), and smoked tobacco (cigarettes) (2.39%). Apart from the prevalence, this is connected to Lukoye Atwoli's 2011 findings from Kenyan secondary schools, which indicated that the most frequently abused substances were Alcohol (42.9%), Kchat (20.8%), Cigarettes (19.8%), and Cannabis (14.3%). Other studies in Shakiso town in Ethiopia by Berhanu Bonora in 2020 found that Alcohol (12.0%), Kchat (15.2%), Cigarettes/tobacco (7.9%), and other illicit substances shisha (9.9%) were used and abused.

The prevalence of higher consumption of alcohol, kchat, shisha, and cigarettes in comparison to other drugs may be attributed to their legal, cultural, and social acceptance. In particular, alcohol may be the case because, when used in moderation, it does not have the same negative effects on one's health as other drugs; it is widely accessible and mostly consumed in establishments that adapt to young people, such as pubs; and it is more socially acceptable than other drug kinds. The people who attend advertisements and watch social

media advertisements are very excited and enjoy drinking alcohol. Young people can readily purchase kchat, cigarettes, alcohol, shisha, and other substances due to their lack of control and easy availability.

According to the findings of this study, compared to followers of other religions, Waqefata and Orthodox believers were more likely to use illicit substances. Among the participants in the study, 106 respondents (42.3%) identify as Waqefata believers, 97 respondents (38.96%) as Orthodox Christians, 25 respondents (9.96%) as Protestants, 16 respondents (6.37%) as Muslims, and the remaining 7 respondents (2.79%) as adherents of other religions. Results from the findings suggest that young people of any religion are exposed to substance abuse. Since early youth is when people are most likely to confirm things easily, the age group with the highest frequency of substance abuse behaviour is twenty-one to twenty-five. Approximately 70.52% of the youths involved in these studies are male, and 29.48% are female. This is consistent with the results of Abera Getachew and Mary Philip's 2019 study, Undergraduate Students at Madda Walabu University, which found that 58.3% of respondents were between the ages of 21 and 25, and 74.7% of participants were male youths, with the remaining 25.3% being female youths.

The findings in this study indicate that youths use substances with their friends (46.22%) and parents (27.49%). From the results, many youths use drugs simply because of the environmental pressures of the environment in which they live, and their peers did it in order to gain the acceptance of their friends and social circles around them. The findings of a study revealed by Assefa Henok in 2015 were related to the current results.

Similarly, the qualitative results indicated that most youths who start substance abuse do so due to peer pressure and being like them, the availability of substances, social media influence, and to get relief from frustration and stress at home. This result indicates that the

main influencing factors for adolescent involvement in drug use were peer pressure, the availability of substances, and the influence of social media. Comparing with quantitative research results conducted among Addis Ababa University students, it appears that peer pressure and the accessibility of substances are contributing factors for substance abuse (Henok, A. 2015). It showed that friends and availability substances had supportive effects on youth students' drug use behaviour. Drug abuse was found to be more common among youths whose parents or friends were abusing drugs than in those who did not. According to the results, it demonstrates that youths main source of funds to buy substance abuse shows that youths on the parts of Job Creation Office organize Dangote cement factory on small cement enterprises from earning enough money in their pockets every month without work (46.02%), from running their own businesses (30.28%), 14.34% from friends, and 8.76% from their parents.

In a qualitative study, almost all respondents responded that for the reason to use substances there is a phrase, "My friend, & my friends"

According to the researcher, who gained information from the interviewer, when they got money by earning enough money in their pockets every month without work from Dangote cement factory on small cement enterprises, they used to start to join their friends from the neighbourhood, and they took me to a "kchat bet" with them. We used to chew "kchat." Then they also took me to a "Tella bet" to drink tell and Areke for breaking mirqana with them. Then the monthly pocket money was enough, and without the help of my friend, I would go to "kchat bet" and "Tella" bet because the substance around us was cheap and easy to get.

Moreover, the findings in this study indicated that were 71.31% of respondents who used chewed kchat and 28.69% who did not chew kchat. According to the study's findings, the

main reason why many young people in Adea Berga Woreda use kchat is that it is used as a way to have pleasant relations, to socialize, to get addicted, to stay awake, to experience excitement, to pass time, and to forget their bad memories. The current study was in agreement with the results among youths in Robe town in the Hawasa University study (Muhammed, 2016). These indicate that the reason for chewing kchat was to serve as a means of stress relief, social bonding, and alertness while also promoting relaxation with friends.

In addition, based on this study, the reasons for youths drinking alcohol were to forget their problems (19.52%), to pass the time (16.33%), for addiction reasons (29.48%), for socializing (23.11%), and the remaining 11.55% of people drink alcohol to prevent their depression. In support of this quantitative data, the majority of respondents in the study's in-depth interview emphasized that drinking alcohol is important to kill time, socialize with their friends, and forget their problems. Similarly, in this study, the average frequency of youth alcohol consumption among the respondents was 42.63% frequent times per week, 32.27% per day, 21.51% occasional alcohol drink, and 3.59% of the respondents drinking alcohol only on holiday.

Based on the study findings, the reasons participants increased substance use in the three towns of Adea Berga Woreda were the presence of four cement industries and the opportunity for young people to start small microbusinesses in the cement industries (35.5%), increased accessibility of drugs and easy access to money (25.5%), poor parental supervision of youths (18.7%), the lack of local substance use police (12.8%), and social media and advertising (7.6%). The majority of youths were organized into small microenterprises through the job creation office and earn enough money monthly to spend their work on drugs, and mostly drivers come to the district from different areas and carry drugs and use them with young people living in the factory area.

The results show that there is nothing more exciting than knowing that a majority of youths understand the harmful effects of these substances and should quit in the future. These results suggest that, considering the harmful effects of substance use, 45.0% of youths will stop using substances in the future. 22.3% of youths were in doubt about quitting drugs, and the remaining 18.7% said it was not harmful at all because they thought it was harmless to use substances. Besides, the intention to stop is not only a critical factor in harmful substance use but also predicts actual changes in substance withdrawal behaviour. In an in-depth qualitative study, 66.67% of participants indicated an intention to stop using these harmful substances, despite the prevalence of peer pressure. However, the majority of abusers intended to stop their abusive use.

From quantitative results, the most common consequences of substance abuse are psychological distress and a sense of hopelessness, loss of appetite and sleep issues, being arrested and losing friends, and being physically injured. According to the study, the majority of respondents to the in-depth interview stressed that the consequences encountered by youths who abuse substances were physical conflict and injuries, depression, personality changes, and aggression. Participants in in-depth interviews described possible physical health consequences of substance use, such as the hangover the person felt after using alcohol and drugs, weight loss, the duration of alcohol and substance abuse, and damaged physical appearances due to substance abuse. Similarly, the respondents stated that the adverse impacts of the substance abuse behavior were insulting other youths, saying rude things to family, elders, and others, doing things they regret later in the emergency, even in the city, and being ignored and provoked.

The qualitative study emphasized that the psychological impacts of substance use can include depression, conduct problems, frustration, being ignored, sense of hopelessness, and a lack of meaning in life. The results of the present study were consistent with the Michael D.

Newcomb and Thomas Locke Springer US study from 2005. These indicate that the psychological consequences of substance abuse include depression, mood disorders, conduct problems, anxiety, and suicide attempt.

5.2. Conclusion

This study aimed to substance abuse among youths, the causes, consequences, and their intention to stop using substances in the three towns in Adea Berga woreda. The conclusions from the study's major findings are presented in this section.

Accordingly, the most commonly used major types of substance abuse by youths in the three towns of Adea Berga Woreda were alcohol, kchat, smoke hashish, shisha, cannabis, and cigarettes. The study has identified factors that influence youths to engage in substance abuse during their lifetime, including peer pressure and being like them, the presence of substances, social media influences, getting enough pocket money from small microenterprises on cement, and frustration and depression at home. This result indicates that the main influencing factors for youth involvement in drug use were peer pressure, the availability of substances, and the influence of social media.

Youths in Adea Berga who abuse substances have been encountering problems such as physical conflict, injuries, depression, personality changes, aggression, mental illness, health, and social issues that have dealt with issues that negatively affect their lives. This study indicates that a significant proportion of youths expressed a high intention to quit substance abuse, indicating their awareness of the harmful effects of substance abuse and their desire to change their behaviour.

5.3. Recommendations

This portion presents some possible recommendations drawn from the key findings of this study.

- ❖ Youth is often sensitive and vulnerable, and the Adea Berga Woreda Job Creation Office should not only organize young people in small microenterprises to earn only money but also audit the money they earn every quarter to move them to the large enterprise level. Keeping track of their monthly income from the organization will enable youths to earn enough money to refrain from using drugs and think about their future lives.
- ❖ The government policies and programs should work on the cases of youth substance abuse, and the designed strategies to combat substance abuse should be implemented at the Federal, Zone, and Woreda levels.
- ❖ All educational segments should incorporate curriculum that covers the causes, nature, and consequences of substance abuse, as well as all related harms. In fact, substance issues are included as a topic in some specific courses but not at the required standard level.
- ❖ The Woreda Youth and Sports Office can organize various awareness-raising activities for youths about the nature and consequences of drug use, not only for their health and lives but also for their families and the future of the country. It can also provide places for adolescent people to live and things that can develop their minds to work on them to turn away from things that harm the minds of young people.
- ❖ It is necessary to work hard on preventive advertisements on various social media against drugs such as alcohol, shisha, hashish, kchat, and others, and also keep an eye on the availability of these drugs in the outlets.
- ❖ Policymakers should focus on legalized drugs, and laws should be amended at the community level to control substances and establish a substance-free atmosphere.

- ❖ Further research should be done on the behavioral and psychological conditions of substance abusers with increased vulnerability to the initiation, continuation, or exacerbation of substance use, as well as the factors that influence their intention to stop thinking.

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Consent Form

STUDY TITLE: Substance abuse practices, their antecedents and consequences, and youths' intentions to quit using substances in the three towns of the Adea Berga district, specifically in Enchini, Mughher, and Olonkomi town.

RESEARCHER DETAILS:

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PURPOSE OF STUDY: To determine the antecedents, consequences, and intention to stop substance abuse among youths in Adea Berga Woreda

I have read the study information sheet and had the opportunity to ask questions.

1. I understand that my participation is voluntary and that I am free to withdraw myself or my data at any time, without giving any reason, and without any adverse consequences.
2. I understand who will have access to the personal data provided.
3. I understand how personal data will be stored and what will happen to the data at the end of the project
4. I understand how the research will be written up and published.

5. I understand how to raise concerns or make a complaint.

6. I agree to have my voice recorded.

7. I consent to the use of direct quotes.

8. I agree to take part in the study.

Name of participant:

Signature: _____ Date:

Name of researcher: Abera Diriba

Signature: _____ Date:

ANNEXES

ANNEX 1

General Instruction for the Questionnaire

You are not expected to write your name and making√ sign in the box for closed ended questions and write your opinion for open ended questions on the space provided. Dear respondents for the success of this research you are kindly requested to fill your genuine answers for the questions.

I. Questions Related to Background Information

1. Age 1.15-20 2.21-25 3.26-30
2. Sex 1.Male 2, Female
3. Place of Birth 1.Urban 2.Rural
4. Ethnic group 1.Oromo 2.Ahmara 3.Tigre 4.Guraghe
- 5.If others specify _____
5. Religious affiliation 1.Orthodox 2.Protestant 3.Muslim
4. Waqefata 5.If others specify_____
6. Work 1.small microenterprise on cement 2.Daily labourer 3.Governments employee 4.NGO employee 5.Private employee

II. Factors related to parent conditions

7. What is the condition of your parent? 1. Living together 2 .Divorce
3. Death of one or both parents

8. With whom do you live at present? 1. with one's parents 2. With one's brother and sister 3. With father only 4. With mother only 5. With relatives 6. With peers, friends or co-workers

9. What is the educational attainment of parent? 1. Illiterate 2. Primary school (1-8) 3. High school (9-10) 4. Preparatory school (11-12) 5. Diploma holder 6. Colleagues/University

10. What is the family occupation? 1. Housewife 2. Merchant 3. Farmer 4. Government employee 5. NGO Employee 6. Daily labour 7. Private Employee

11. Do you have positive parental role models? 1. Yes 2. No

12. When you and your parents fail to meet their expectations, do you prefer discussion and advice over physical force? 1. Yes 2. No

13. Do you live through high level of family conflict? 1. Yes 2. No

14. Do any of your family members' abuse substances such as kchat, alcohol, tobacco, etc.?

1. Yes 2. No

15. Who abuses substances in your parent? 1. Mother only 2. Father only 3. Father and mother 4. My brother and sister 5. All of them 6. None of the above

III. Factors Related to Substance abuse

16. How often do you take substances? 1. Daily 2. Twice a week

3. Three times a week 4.As needed

17. At what age did you first try substances? _____

18. With whom do you take the substance? 1. With parents 2.With friends
3.With siblings 4.With anyone

19. What is the availability of substances? 1. It is difficult to get and expensive
2.Can't get 3.Easy to get and cheap 4.No response

20. What is the source of influence over your substance habits? 1. Family 2.Peers
3. Area where I live 4.If others specify _____

21. Where do you usually use the drugs? 1. While watching volley ball 2.At home
3.At kchat bet & at bar 4.At friend's house 5.In public places

22. What is your source of money to buy drugs? 1. From small microenterprise on cement
2.Friends give me 3.parents give me 4.Do business 5.Stealing

23. Do you perceive drugs as harmful? 1. Yes 2.No 3.May be
4. Don't know 5.No response

24. Can you perform your routine activity without using drug? 1. Yes 2.No

25. Did your drug use cause a health, social, legal, or financial problem in the last six months? 1. Yes 2.No

26. Which of the following consequences have you experienced due to substance abuse?

1. Physical injuries 2.Arrested and loosing friends 3.loss of interests in hobbies and daily activities 4.Emotional distress and sense of hopelessness

5. Mental illness 6. loss of appetite and sleep issues 7. if others specify _____

27. Do you chew kchat? 1. Yes 2. No

28. If yes, why do you chew kchat? 1. To pass time 2. Wisdom if excitement

3. To stay awake 4. I am addicted 5. To have pleasant relaxation

6. to socialization

29. How long have you been chewing kchat? 1. Four month 2. Four month-1 year

3. For 1-3 year 4. Greater than three years

30. With who chew do you chew kchat? 1. Always alone 2. usually with dangote drivers 3. usually alone 4. Always with others

31. Do you drink alcohol? 1. Yes 2. No

32. Why do you drink Alcohol? 1. To forget my problem 2. To pass the time

3. I am addicted 4. To socialization 5. To fight depression

33. On average how frequently do you drink alcohol? 1. Always (daily)

2. Occasionally (1-3) per month 3. Often (2-4) per week 4. Rarely (on holiday)

34. Do you smoke cigarette? 1. Yes 2. No

35. Which of the following substances have you ever used in your life? 1. Alcohol (Areke,

Beer, Teji, Tella, Wine...) 2. Kchat 3. Tobacco (Cigarette) 4. Hashish

5. Shisha 6. If others specify _____

36. Why do you think drug use is increasing in your Woreda? 1. The absence of drug police

2. Increased availability of drug at everywhere 3. poor parental control

4. Availability of industries of cement and small micro enterprise for adolescent on cement

5. Social media & advertisement

37. Do you want to quit taking the drug? 1. Yes 2. No 3. May be

4. Don't know 5. No response

IV. Questions for an In-depth, Semi-structured Interview

1. You know what substance abuse means? Mention substance abuse.
2. Which of the substances mentioned do you use?
3. At what time do you use the substance?
4. Mention how you feel after using the substances?
5. Have you ever thought to quit abusing substances?
6. Do you face any risks or consequences as a result of your substance abuse?
7. What are the reasons to start using substances and reasons for continuing taking substance abuse?

Checklist for the Observation on youth substance abuse

Observation on youth substance abuse	Activity	Description	Repetition	Implication
Types of substance abuse used by youth, and with whom and where they use	Identify the most commonly abused substances by youth			
	Assesses with whom youth take the substance			
	Observe where youth usually use the drugs			
Point out the source of youth income to buy substances and reasons to start using substances	Identify source of income to buy drugs			
	The way youth start to use substances			
	Availability of substances			
Consequences of substance abuse on youths and willingness to stop	consequences due to substance abuse			
	Look at young people who use substances physically, socially, behaviourally, and mentally			
	Willingness to stop taking the substances in the future			

Unka Hayyama

MATA DUREE QORANNOO: Gochaalee fayyadama qoricha sammuu hadoochu, dursaa fi bu'aa isaanii, fi dargaggoonni magaalota sadan aanaa Ada'aa Bargaa keessatti, keessumaa magaalaa Incinnii, Mugar, fi Olonkomii keessatti wantoota fayyadamuu dhiisuuf yaada qaban

Waa'ee Qorataa Bal'inaan:

Abera Diriba

Barataa digirii Lammaaffaa Mana Barumsaa Sooshaal Woorkii keessatti

Yunivarsiitii Addis Ababaa

QUNNAMTII:

Bilbila: 251 921145860

Teessoo imeelii: aberadiriba65@gmail.com

KAAYYOO QORANNOO: Dursa, bu'aa fi yaada fayyadama wantoota sammuu hadoochu dargaggoota magaalaa sadan Aanaa Ada'aa Bargaa keessatti dhaabuuf qaban murteessuuf

Waraqaa odeeffannoo qo'annichaa dubbisee gaaffii gaafachuuf carraa argadheera.

1.Hirmaannaan koo fedhii kootiin akka ta'ee fi yeroo barbaadetti, sababa tokko malee, fi bu'aa badaa tokko malee ofii koo ykn daataa koo baasuuf bilisa ta'uu koo nan hubadha.

2. Daataa dhuunfaa kenname eenyu akka argatu naaf gala.

3. Daataan dhuunfaa akkamitti akka kuufamuu fi dhuma piroojektichaa irratti daataa maal akka ta'u nan hubadha

4. Qorannichi akkamitti akka barreeffamee maxxanfamu naaf gala.

5. Akkamitti yaaddoo kaasuu ykn komii dhiyeessu naaf gala.

6. Sagaleen koo akka waraabamu walii gala.

7. Caqasoota kallattii fayyadamuuf hayyama nan kenna.

8. Qo'annoo kana irratti hirmaachuuf waliin gala.

Maqaa Hirmaataa:

Mallattoo: _____ Guyyaa: _____

Maqaa qorataa: Abarraa Dirribaa

Mallattoo: _____ Guyyaa: _____

Dabalata

Dabalata 1

Qajeelfama Waliigalaa Gaaffilee

Maqaa kee barreessuun sirraa kan hin eeggamnee fi gaaffilee cufamaa ta'aniif saanduqa keessatti mallattoo \surd gochuu fi gaaffilee banaa ta'aniif yaada kee bakka kenname irratti barreessuu si irraa eegamu. Kabajamtoota deebii kennitan milkaa'ina qorannoo kanaaf deebii dhugaa gaaffileef kennitan akka guuttan kabajaan isin gaafanna.

Gaaffiiwwan Odeeffannoo Duubbee Waliin Walqabatan

1. Umurii 1.15-20 2.21-25 3.26-30
2. Saala 1.Dhiira 2.Dhalaa
3. Iddoo dhalootaa 1.Magaalaa 2.Baadiyyaa
4. Sabummaa 1.Oromoo 2.Amaaraa 3.Tigree 4.Guraagee
5. Yoo kan biraa jiraate adda baasi _____
5. Garee amantaa 1.Orthodoksii 2.Pirootestaantii 3.Musliima
4. Waaqeffataa 5. Yoo kan biraa jiraate adda baasi _____
6. Gahee Hojii 1.Hojetaa guyyaa 2.Hojetaa Mootummaa
- 3.Hojetaa mit-mootummaa 4.Hojii dhuunfaa

II.Gaaffilee Wantootaa Haalota Maatii waliin walqabatan

7. Haalli waliin jireenya maatii keetii maal fakkaata? 1. Walwaliin jiraatu
2. Walhiikanii ykn adda bahanii jiraatu 3. Tokkoon isaanii du'aniiru 4. Maatiin lachanu du'aniiru

8. Eenyu wajjin jiraatta ati yeroo ammaa kana? 1. Abbaa, Haadha bira
- 2.Obboleessaa fi obboleettii waliin 3. Abbaa qofa bira 4. Haadha bira qofa
5. Fira waliin 6. Hiriya fi namaan wajjin hojedhu waliin
9. Sadarkaan barnoota maatii kee maalii? 1. Kan hin baranne 2. Sadarkaa tokkoffaa
3. Sadarkaa lammaaffaa kan xumuran 4.Dippiloomaa 6. Digirii Tokkoffaa
7. Digirii Lammaaffaa fi isaa ol
10. Hojiin Maatii maal ture? 1. Haadha manaa 2.Daldalaa 3.Qonnaan bulaa
4. Hojetaa Mootummaa 5. Hojetaa mit-mootummaa 6.Dafqaan bulaa/hojetaa guyyaa 7.Hojii dhuunfaa
11. Maatiin kee fakkeenya gaarii siif ta'anii jiruu? 1. Eeyyee 2. Lakki
12. Yeroo ajaja Maatii keetii fudhachuu dhiiftu humnaan si reeburra yeroo fudhatanii si gorsuu filatuu? 1. Eeyyee 2. Lakki
13. Maatii sadarkaa baay'ee wal lolan keessa jiraattaa? 1. Eeyyee 2.Lakki
14. Maatiin kee wantoota sammuu namaa hadoochan kanneen akka Jimaa, alkoolii, tamboo fi kkfn ni fayyadamuu? 1. Eeyyee 2.Lakki
15. Maatii kee keessaa eenyutu wantoota araada nama qabsiisan fayyadama? 1. Haadhakoo qofa 2.Abbaakoo qofa 3. Abbaa fi haadhakoo 4.Obboleessaa fi obboleettiikoo 5.Hunduu ni fayyadamu 6. Homtuu hin fayyadamu

III.Haalota Wantoota araada nama qabsiisaniin wal qabatan

16. Wantoota araada nama qabsiisan hagam hagamiiin fayyadamta?

1. Guyyaa guyyaan 2.Torbaniitti yeroo lama 3.Torbaniitti al sadii

4.Yeruman barbaadeetti

17. Wantoota araada nama qabsiisan yeroo jalqabaaf yaalte umuriin kee meeqa ture? ____

18. Wantoota araada nama qabsiisan eenyu faana fayyadamta? 1.Maatiikoo waliin

2.Hiriyootakoo waliin 3.Firootakoo wajjin 4.Namuman arge waliin

19. Argamni wantoota araada nama qabsiisanii maal fakkaata? 1. Argachuun rakkisaadha

2.Hin argamu 3.Salphaatti argama 4.Deebiin hin kennamne

20. Wantoota araada namatti ta'an akka fayyadamtu kan si dirqisiise maddi isaa maali?

1. Maatii 2.Hiriyoota 3.Iddoo ani jiraadhu 4.Ka biroo yoo

jiraate adda baasi _____

21. Wantoota araada namatti ta'an kana eessatti fayyadamta? 1. Osoon kubbaa miilaa boolii

ilaalaa jiruu 2.Manatti 3.Mana jimaa/caatii 4.Mana hiriyaa kootti

5.Bakka hawaasni jiran daandii cinaatti

22. Maddi maallaqa ittiin wantoota araada namatti ta'an ittiin bittu eessaayi?

1. Intarpiraayizii maayikiroo xixiqqan simintoo irratti gurmaa'uun 2.Hiriyoota koorraa

3.Maatiikoorraa 4.Hojii hojjedhu irraa 5.Hatuun

23. Wantootni araada namatti ta'an kun miidhaa qaba jettee yaaddaa? 1. Eeyyee

2.Lakki 3.Tarii qabaachuu danda'a 4.hin beeku 5.deebiin hin jiru

24. Hojiiwwan xixiqqoo osoo wantoota araada nama qabsiisan hin fayyadamiin raawwachuu

ni dandeessaa? 1. Eeyyee 2.Lakki

25. Ji'oota ja'an darban keessatti qoricha sammuu hadoochu fayyadamuun keessan rakkoo

fayyaa, hawaasummaa, seeraa ykn maallaqaa uumeeraa? 1. Eeyyee 2. Lakki

26. Sababa qoricha sammuu hadoochu fayyadamuutiin bu'aa armaan gadii keessaa isa kami?

1. Miidhaa qaamaa 2. hidhamuu fi hiriyyaa dhabuu 3. fedhii hojii bohaartii fi

sochii guyyaa guyyaa dhabuu 4. Dhiphina miiraa fi miira abdi kutannaa

5. Dhukkuba sammuu 6. fedhii nyaataa fi dhimma hirriba dhabuu

7. Kan biroo yoo ibsaa _____

27. Jimaa/caatii ni qamaataa? 1. Eeyyee 2. Lakki

28. Eeyyee yoo jette, maaliif qamaataa? 1. Yeroo ittiin dabarsuuf 2. Hiriyoota kootti

makamuuf 3. Hirriibni akka na hin qabneef 4. araada waan natti ta'ee

5. boqonnaa namatti tolu argachuuf

29. Yeroo hagamiif jimaa/caatii qamaate? 1. Ji'a afur 2. Ji'a afurii hanga waggaa

tokkoo 3. Waggaa tokkoo hanga waggaa sadii 4. Waggaa sadii oliif

30. Eenyu faana jimaa/caatii qamaata? 1. Yeroo hunda kophaakoo 2. Darbee darbee

konkolaachisaa dangootee wajjin 3. darbee darbee kophaakoo

4. Yeroo mara namoota biraa waliin

31. Alkoolii ni dhugdaa? 1. Eeyyee 2. Lakki

32. Maaliif alkoolii dhugda? 1. Rakkoo na muudate ittiin irraanfachuuf 2. Yeroo

ittiin dabarsuuf 3. Araada isaa waanan qabuuf 4. hiriyoota ittiin simachuuf

5. Yaaddoo/gadda ofirraa ittisuuf

33. Giddugaleessaan alkoolii hagam dhugda? 1. Yeroo mara 2. Darbee darbee (ji'aan

1-3) 3. yeroo baay'ee (torbaniitti 2-4) 4. Yeroo ayyaanaa

34. Tamboo ni xuuxxaa? 1. Eeyyee 2.Lakki

35. Kanneen armaan gadii keessaa isa kam fayyadamtee beekta jireenya kee keessatti? 1.

Alkooliil (Araqee, Biiraa, Xajjii, Farsoo, Wayinii...) 2. Jimaa 3.Tamboo

4.Hashiishii 5.Shiishaa 6.ka biraa yoo jiraate ibsi_____

36. Sababiin wantoota araada nama qabsiisan fayyadamuun akka naannoo kanaatti dabalaa

jiru maalii jettee yaadda? 1. Seerrootni wantoota araada nama qabsiisan laafaa ta'uu

2.Argamni wantoota araada nama qabsiisanii bakka hundatti waan baayyatuuf

3.To'annoon maatii laafaa ta'uu 4.Walitti dhufeenyi maatii fi ijoollee baay'ee laafaa

ta'uu 5. Wantootni araada nama qabsiisan miidiyaa garaagaraan beeksifamuu

37. Wantoota araada namatti ta'an kana dhaabuu ni barbaaddaa? 1. Eeyyee 2.Lakki

3.Tarii 4. Hin beeku 5. Deebiin hin jiru

IV.Gaafannoo Afaaniffaa

1. Wantoota araada nama qabsiisan beektaa? Isaaniis maal faa akka ta'an ibsi.

2. Wantoota araada nama qabsiisan ibsite keessaa isaan kam fayyadamtee beekta?

3. Wantoota sammuu namaa hadoochan kana yeroo akkamii fayyadamta?

4. Wantoota araada namatti ta'an erga fayyadamtee kaatee booda maaltu sitti dhagahama?

5. Wantoota araada namatti ta'an kana dhaabuuf yaaltee beektaa?

6. Sababa qoricha sammuu hadoochu fayyadamuu keetiin balaa ykn bu'aan si mudate maalii?

7. Sababoonni wantoota fayyadamuu jalqabuu fi sababoonni qoricha sammuu hadoochu fayyadamuu itti fufuu maal fa'a?

Tarree sakatta'iinsaa Ilaalcha fayyadama qoricha sammuu hadoochu dargaggootaa

Tajaajila fayyadama wantoota sammuu hadoochu dargaggootaa irratti	Hojii/sochii	Ibsa	Irra deddeebi'uu	Hiika
Gosoota fayyadama qoricha sammuu hadoochu dargaggoonni itti fayyadaman, fi eenyu waliin fi eessatti akka	Wantoota dargaggoonni baay'inaan itti fayyadaman adda baasuu			
	Dargaggoonni wantoota kana yeroo hunda eessa eessatti akka ta'e adda baasuu			
	Dargaggoonni yeroo baay'ee qoricha kana eessatti akka fayyadaman ilaaluu			
Madda galii dargaggoonni wantoota bitatanii fi sababoota wantoota fayyadamuu jalqabuu	Madda galii qoricha bitachuuf adda baasuu			
	Akkaataa dargaggoonni wantoota itti fayyadamuu jalqaban			
	Argamuu wantootaa ilaaluu			
Bu'aa fayyadama qoricha sammuu hadoochu dargaggoota irratti fiduu fi fedhii dhaabuuf qaban	bu'aa sababa fayyadama wantoota sammuu hadoochaniin dhufu ilaaluu			
	Dargaggoota wantoota qaama, hawaasummaa, amala, fi sammudhaan fayyadaman ilaaluu			
	Fedhii gara fuulduraatti wantoota sana fudhachuu dhiisuu			