

Knowledge And Perception Of Substance Abuse Among Teenagers In Selected Secondary Schools In Ajeromi Lga, Lagos State

Okwuikpo, Margaret Ihunanya¹, Chionye, Stella Chioma², Ajaegbu, Victoria Udo³, Maitanmi, Julius Olatade⁴, Leslie, Tabitha Amere⁵

¹RN, RM, BNSc, MSc. Lecturer, Maternal and Child Health Department, School of Nursing, Babcock University

²RN, RM, RPN, BNSc. School of Nursing, Babcock University

³BSc, MPH, Public Health Department, Babcock University

⁴RN, RM, RPHN, BNSc, PGDE, MSc. Lecturer, Community Health Nursing Department, School of Nursing, Babcock University

⁵RN, RM, RPHN, BNSc, PGDE, MSc. Lecturer, Community Health Nursing Department, School of Nursing, Babcock University

Abstract

Background

Teenagers are one of the most vulnerable groups to substance abuse, as the use and abuse of substances stands as one of the major social and public health issues facing most communities around the world. A high degree of social interaction today revolves around the ceremonial use of alcohol, or in some cases recreational use of substances. This has over time presented adolescents with a lot of social contexts where substances are abused, or used with a huge degree of social acceptance.

Objective

The study assessed the knowledge and perceptions of substance abuse among secondary school teenagers in Ajeromi-Ifelodun Local Government Area of Lagos State, Nigeria.

Methods

Cross-sectional descriptive research design was adopted, responses from 215 teenage students were obtained. These responses were analyzed using SPSS version 23 and results were presented in frequency tables with percentages, arithmetic mean, and charts, one-way ANOVA was used to test the hypothesis at 0.05 level of significance.

Results

The study showed that 87.9% of the students have high knowledge of substance abuse, 96.3% of the students have an overall positive perception of substance abuse. The three leading causes of substance abuse among teenagers identified were: the use of substances by friends, the curiosity and pleasure seeking behaviour on the part of teenagers, and poor parental supervision. Public school students have significantly higher knowledge of substance abuse than their private school mates ($F = 7.946; p = .005$).

Conclusion and Recommendations

The study revealed a high level of knowledge of substance abuse among teenage high school students and a positive perception towards the negative effect of substance abuse. Some factors influence substance abuse among teenagers irrespective of the perception. Thus parents and teachers are to continuously monitor and instruct students on good peer association and reinforce good behaviour and attitude towards substance use and abuse.

Key Words: Knowledge, Perception, Substance Abuse, Teenagers

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I. Introduction

Teenage stage has been identified as a developmental phase chiefly characterized by a high degree of experimentation, with psychoactive substances being one of the items that is largely experimented on. Several biopsychosocial peculiarities that come with pubertal development have been emphasized to predispose teenagers to either experiment with substances, use substances more frequently, or become substance dependents (Plate, Richards, & Ernst, 2016; Savage et al, 2018). The heightened levels of pleasure seeking and reduced behavioural inhibitions that characterizes teenagers, predisposes them to develop substance use problems especially when there is an early initiation of substance intake (Bernheim, Halfon, & Boutrel, 2013;

Jordan & Andersen, 2017). Hence, this stage has been identified as a vulnerable period of developing problematic substance intake patterns (Boerngen-Lacerda, 2016; Tagaki, Youssef, & Lorenzetti, 2016).

In every population, teenagers stand as one of the most vulnerable to substance abuse, as they are prone to either engaging in risky or experimental use of substances or developing problematic substance use patterns after prolonged or occasional use. The problems of substance abuse among this sub-population places huge ill-health and antisocial behavioural burdens on health systems and socioeconomic structures of countries worldwide. High and increasing prevalence rates of substance abuse among teenagers and the resultant health and social problems have been reported from several parts of the world (Jiloha, 2017; Mohamad, Mohammad, Ali, & Awang, 2018; Victor, Godwin, & Isah, 2018).

From the Center of Disease Control (2018), it is reported that by the 12th grade for USA teens, almost 67% of them have experimented with alcohol, 50% have experimented with cannabis, 40% have experimented with cigarettes, while almost 20% have experimented with prescription medicine. Lim, Lim, Teh, Kee, Khoo, Ganapathy, Ling, Ghazali, and Tee (2017) reported a smoking prevalence rate of 14.7% among Malaysian secondary school students, Rugendo (2016) reported 40.5% rate of alcohol use among secondary school students in Kenya. Nigerian teenagers are not exempted from this trend, varying prevalence rates of teenage substance use have been reported from several parts of the country, with different patterns of substance use with regards to sociodemographic variables as well as number and types of substances. Anyanwu, Ibekwe and Ojinnaka (2016) reported 32.9% prevalence of substance abuse among secondary school students in Abakiliki, Eastern Nigeria.

As Nigeria becomes increasingly integrated with the rest of the world in the wave of globalization, the media exposure of Nigerian teens and youths, and their acceptance of pop culture are all factors that favourably predisposes them to the use or abuse of substances, as part of being hip or trendy, and dealing with the stress of a more fast-paced life. Anyanwu, Ibekwe and Ojinnaka (2017) reported higher psychosocial dysfunction among Nigerian secondary school students in Abakiliki who abuse substances, with 47% of them being poly-substance users. It was reported that 38.1% of the study population of secondary school students in Kaduna State, Northern Nigeria, were using substances without prescription (Afuwai, 2016). In Southern Nigerian secondary schools in Rivers State, Inyang and Longinus (2016) reported alcohol and cigarette use rates of 14.7% and 27.06% respectively, for secondary school students. In Western Nigeria, Oluwole, Habibat, and Babatunde (2018) reported that 52.3% of the secondary school teenagers in Lagos, initiated substance use between the ages of 15 – 18, with peer influence being the major factor influencing adolescent's habitual drug use.

Lipari and Jean-Francois (2016) emphasized the fundamental role played by knowledge and perception of substances in the actual indulgence by an individual. Simango (2014) noted that the level of abuse by teenagers is affected by both individual and shared knowledge, attitudes and perceptions amongst teenagers, especially in an immediate peer network of friends or acquaintances. Appropriate and timely interventions to prevent early initiation of substance use among teenagers and subsequently prevent more problematic use as they become adults, must be designed on the basis of reliable information on their knowledge and perceptions of substance abuse. With the multiple channels of information that are accessible to teenagers, as well as the fluid nature of perceptions, it is imperative that studies are carried out from time to time to ascertain the level of knowledge of substance abuse among teenagers, as well as their perceptions. This study was therefore carried out to ascertain the level of knowledge and perception of substance abuse among in-school teenagers of selected secondary schools in Ajeromi-Ifelodun Local Government Area of Lagos State.

Research Questions

The following research questions provided guidance for the study:

1. What is the level of knowledge of teenage secondary school students about substance abuse?
2. What is the perception of teenage secondary school students about substance abuse?
3. What are the factors that significantly contribute to teenagers' indulgence in substance abuse?

Hypothesis

H₀₁: There is no significant difference in the level of knowledge of substance abuse between teenagers in public secondary schools and teenagers in private secondary schools.

II. Methods

The study utilized a cross-sectional descriptive research design. The study was carried out in four selected secondary schools (2 public schools and 2 private schools) in Ajeromi-Ifelodun LGA. These schools were selected on the basis of having the largest student populations in Ajeromi-Ifelodun LGA. The study targeted students in the senior classes (SS1-3). Krejcie and Morgan (1970) formula for determining sample size was used in determining the sample size; $s = \frac{x^2 * NP(1-P)}{d^2(N-1) + x^2P(1-P)}$. Then, sample size of 235 respondents were recruited via simple random sampling technique across the three levels of classes in the various schools.

Instrumentation/Validity and reliability of instrument:Self-structured questionnaire was used for the data collection process. Face and content validity of the instrument were ensured by the researchers and other experts in health sciences, a test re-test was done to determine the reliability with Pearson correlation coefficient of 0.9 which was considered reliable enough.

Data analysis:Data retrieved were coded and analyzed using the SPSS version 23.Frequency, mean, percentages and standard deviation were used to describe respondents’ demographic characteristics and to answer the research questions asked. One-way ANOVA and t-test was utilized in testing the hypotheses. All statistical decisions were made at 0.05 level of significance.

Ethical Considerations and procedure:The Ethical Committee of Babcock University gave the ethical approval before the study was carried out. The school authorities where the study was carried out also gave consent to allow their students participate in the study. The survey was made optional for the students and those who took part in the survey consented to participation. The students were also assured of their anonymity, and their responses treated confidentially.

III. Results

Out of the 235 copies of questionnaire distributed in the study, 215 copies were successfully returned and used for the analysis.

Table 1: Socio-Demographic data of respondents

Items	PRIVATE SCHOOL STUDENTS N = 112	PUBLIC SCHOOL STUDENTS N = 103	TOTAL N = 215
	f (%)	f (%)	f (%)
AGE (years)			
13 – 15	40 (18.6)	3 (1.4)	43 (20.0)
16 – 18	67 (31.1)	95 (44.2)	162 (75.3)
19 and Above	5 (2.35)	5 (2.35)	10 (4.7)
GENDER			
Male	63 (29.3)	50 (23.3)	113 (52.6)
Female	49 (22.8)	53 (24.6)	102 (47.4)
CLASS			
SS1	29 (13.5)	1 (0.5)	30 (14.0)
SS2	59 (27.4)	0 (0.0)	59 (27.4)
SS3	24 (11.2)	102 (44.4)	126 (58.6)
SOCIO-ECONOMIC STATUS			
Low Income	20 (9.3)	9 (4.2)	29 (13.5)
Middle Income	85 (39.5)	85 (39.5)	170 (79.1)
High Income	7 (3.2)	9 (4.2)	16 (7.4)
FAMILY BACKGROUND			
Monogamous	72 (33.5)	83 (38.6)	155 (72.1)
Polygamous	40 (18.6)	20 (9.3)	60 (27.9)
ONE OR BOTH PARENT USING SUBSTANCES			
No	86 (40.0)	89 (41.4)	175 (81.4)
Yes	26 (12.1)	14 (6.5)	40 (18.6)
USING INTERNET-ENABLED PHONE			
No	12 (5.6)	21 (9.7)	33 (15.3)
Yes	100 (46.5)	82 (38.2)	182 (84.7)
LIVING WITH BOTH PARENTS			
No	23 (10.7)	25 (11.6)	48 (22.3)
Yes	89 (41.4)	78 (36.3)	167 (77.7)
BOTH PARENTS STILL MARRIED			
No	23 (10.7)	15 (7.0)	38 (17.7)
Yes	89 (41.4)	88 (40.9)	177 (82.3)

Table 1 indicates that there was a fair distribution of students across the private and public schools, with 112 (52.1% of) students coming from the private schools. Majority of the respondents 162 (75.3%) were within the 16 – 18 age group. The gender distribution of the study showed that there were slightly more males (113; 52.6%).

Table 2: Knowledge on Substance Abuse

S/N	Items	PRIVATE SCHOOL STUDENTS n = 112		PUBLIC SCHOOL STUDENTS n = 103		TOTAL n = 215	
		No f (%)	Yes f (%)	No f (%)	Yes f (%)	No f (%)	Yes f (%)
1	There are some substances called psychoactive substances that can alter the mood of a person that takes it.	4 (1.9)	108 (50.2)	2 (0.9)	101 (47.0)	6 (2.8)	209 (97.2)
2	Intake of substances above recommended amounts is substance abuse.	3 (1.4)	109 (50.7)	3 (1.4)	100 (46.5)	6 (2.8)	209 (97.2)
3	Intake of substances that have been declared illegal is substance abuse.	6 (2.8)	106 (49.3)	2 (0.9)	101 (47.3)	8 (3.7)	207 (96.3)
4	The regular intake of alcohol beyond the recommended limit is substance abuse.	8 (3.7)	104 (48.4)	4 (1.9)	99 (46.0)	12 (5.6)	203 (94.4)
5	The regular intake of medical drugs like Panadol or Paracetamol in large amounts without a prescription is substance abuse.	17 (7.9)	95 (44.2)	4 (1.9)	99 (46.0)	21 (9.8)	194 (90.2)
6	Marijuana is an illegal drug in Nigeria.	5 (2.3)	107 (49.8)	3 (1.4)	100 (46.5)	8 (3.7)	207 (96.3)
7	The intake of Tramadol and Codeine without a prescription is substance abuse.	20 (9.3)	92 (42.8)	2 (0.9)	101 (47.0)	22 (10.2)	193 (89.8)
8	Tobacco is a legal product, but it is a dangerous substance.	0 (0.0)	112 (52.1)	2 (0.9)	101 (47.0)	2 (0.9)	213 (99.1)
9	The uncontrolled intake of substances that are even legal is substance abuse.	6 (2.8)	106 (49.3)	2 (0.9)	101 (47.0)	8 (3.7)	207 (96.3)
10	The intake of substances by adolescents as my age mates is a serious problem facing society today.	1 (0.5)	111 (51.6)	2 (0.9)	101 (47.0)	3 (1.4)	212 (98.6)
TOTAL		70 (3.3)	1050 (48.8)	26 (1.2)	1004 (46.7)	96 (4.5)	2054 (95.5)

From table 2, proportionately more of the students responded correctly to the items on the knowledge of substance abuse, showing that more students have a correct conceptual knowledge of substance abuse. For item 1 bordering on knowing if "some substances are psychoactive and alter mood states," 97.2% of the respondents said "yes". Finally, aggregate responses from both the private and public school students showed that 95.5% of the responses were correct.

Table 3: Level of knowledge about substance abuse

Knowledge Group Based on Scores	Frequency (f)	Percentage (%)
Low Knowledge (10 – 15)	4	1.9
Moderate Knowledge (16 – 18)	22	10.2
High Knowledge (19 – 20)	189	87.9
Total	215	100.0
Mean	19.55	
Maximum score	20	
Minimum score	14	
Range	6	

Table 3 presented the categories of knowledge and the mean score for the overall knowledge level. 189 (87.9%) of the participants had high knowledge. The overall mean score showed that there is high level of knowledge of substance abuse among teenage secondary school students.

Table 4: Perception about Substance Abuse

S/N	PERCEPTION OF SUBSTANCE ABUSE	SD f (%)	D f (%)	A f (%)	SA f (%)
1	Using substances can help someone deal with difficult times of life.	129 (60)	50 (23.2)	29 (13.5)	7 (3.3)
2	Using substances is a cool way of having fun and relaxing.	96 (44.6)	93 (43.3)	20 (9.3)	6 (2.8)
3	Using substances increases self-esteem and makes one more confident.	107 (49.8)	68 (31.6)	28 (13.0)	12 (5.6)
4	Using substances such that, one does not harm anyone else is not really bad.	51 (23.7)	92 (42.8)	60 (27.9)	12 (5.6)
5	Provided someone can control herself or himself, using substances is	59 (27.4)	102	38 (17.8)	16 (7.4)

	not that bad.		(47.4)		
6	Taking some substances to feel high once in a while is not that bad.	79 (36.7)	79 (36.7)	46 (21.4)	11 (5.1)
7	The use of substances to enhance performance is not really bad.	93 (43.3)	82 (38.1)	31 (14.4)	9 (4.2)
8	The bad effects of using substances are temporary, they will go away with time.	129 (60.0)	55 (25.6)	22 (10.2)	9 (4.2)
9	People who use substances have more friends.	85 (39.5)	48 (22.3)	55 (25.6)	27 (12.6)
10	Using substances is a good way to make friends in social situations.	93 (43.3)	67 (31.2)	39 (18.1)	16 (7.4)
11	I tend to see people who use substances like marijuana and cigarettes as criminals.	10 (4.7)	41 (19.1)	64 (29.8)	100 (46.5)
12	I tend to see people who use substances like alcohol and tramadol as irresponsible.	7 (3.3)	25 (11.6)	85 (39.5)	98 (45.6)
13	The costs of using substances outweighs the benefits.	9 (4.2)	25 (11.6)	112 (52.1)	69 (32.1)
14	The behaviours caused by substance abuse is usually unacceptable.	85 (39.5)	48 (22.3)	55 (25.6)	27 (12.6)
15	I get irritated when talking to someone who is smelling of drink, cigarette, and marijuana.	4 (1.9)	12 (5.6)	68 (31.6)	131 (60.9)
16	A lot of restrictions should be placed on substances being used in public places.	6 (2.8)	16 (7.4)	64 (29.8)	129 (60)
17	The fun and pleasure that substance use brings usually lead to problems.	8 (3.7)	23 (10.7)	70 (32.6)	114 (53.0)
18	I keep my distance from people who drink and smoke.	7 (3.3)	9 (4.2)	104 (48.4)	95 (44.2)
19	The use of substances on TV programmes should be censored	5 (2.3)	19 (8.8)	85 (39.5)	106 (49.3)
20	Substance abuse has destroyed many youths, their families and homes.	20 (9.3)	8 (3.7)	40 (18.6)	147 (68.4)

From table 4, it can be seen that respondents strongly agreed and agreed more to perception questions 1-10 than they strongly disagreed or disagreed, also questions 11-20 showed that their responses strongly agreed and agreed more than they disagreed.

Table 5: Summary of Perception about Substance Abuse

Perception	Frequency	%
Negative Perception (0 – 29)	8	3.7
Positive Perception (30 – 60)	207	96.3
Total	215	100.0
Mean score	44.90	
Maximum score	58	
Minimum score	26	
Range	32	

Table 5 depicts the overall perception of the respondents, whether positive or negative using the aggregate perception scores of the students ranging from 0 – 60. Students who scored between 0 – 29 were taken to have negative perceptions, while those who have positive perceptions had scores ranging from 30 – 60. The study showed that 207 (96%) students have positive perceptions of substance abuse with scores ranging from 31 – 58.

Table 6: Factors contributing to Substance abuse

S/N	Items	SD N (%)	D N (%)	A N (%)	SA N (%)	Mean Response	t-value	p-value	Remark
1	The use of substances by parents and family members.	10 (4.7)	66 (30.7)	64 (29.8)	75 (34.9)	1.95	7.167	.000	Significant
2	The use of substances by peers and friends.	6 (2.8)	22 (10.2)	76 (35.3)	111 (51.6)	2.36	16.180	.000	Significant

3	Divorce by parents or a broken home.	16 (7.4)	82 (38.1)	21 (9.8)	96 (44.7)	1.92	5.758	.000	Significant
4	The portrayal of substance abuse by movies and songs as trendy and fun.	20 (9.3)	42 (19.5)	75 (34.9)	78 (36.3)	1.98	7.303	.000	Significant
5	Curiosity and the need for fun on the part of adolescents.	7 (3.3)	20 (9.3)	101 (47.0)	87 (40.5)	2.25	14.501	.000	Significant
6	Widespread availability of substances.	8 (3.7)	37 (17.2)	61 (28.4)	109 (50.7)	2.26	12.760	.000	Significant
7	Poor parental supervision.	8 (3.7)	32 (14.9)	67 (31.2)	108 (50.2)	2.28	13.412	.000	Significant
8	Easy accessibility of substances to adolescents.	11 (5.1)	60 (27.9)	68 (31.6)	76 (35.4)	1.97	7.551	.000	Significant
9	Coming from a polygamous home.	49 (22.8)	79 (36.7)	41 (19.1)	46 (21.4)	1.39	-1.510	.133	Not significant
10	Poor learning environment in school	46 (21.4)	46 (21.4)	63 (29.3)	60 (27.9)	1.64	1.819	.070	Not significant

Table 6 depicted 10 different factors proposed to contribute to substance abuse among teenagers. The mean responses were used to measure the extent of the influence of these factors. As can be seen, only factor 9 bordering on a student coming from a polygamous home had a mean response of 1.39, which falls below the 1.5 critical mean. The significance of the causation by the factors was determined using the one-sample t-test. Thus, the mean responses on the extent of causation as reported by the students were compared to the 1.5 critical mean to produce both t-values and associate p-values.

Table 7: ANOVA Test Comparing Mean Knowledge Scores of Public and Private School Students on Substance Abuse

VARIABLE	RESPONSE CATEGORY	MEAN KNOWLEDGE SCORE	LEVENE STATISTIC	F	P	REMARK
School Type	Public School	19.75	11.009 (0.001)	7.946	0.005	Significant Difference
	Private School	19.38				

Table 7 showed the mean difference and the level of significance in the mean scores of public school students and private school students, ANOVA test revealed a significant difference in the knowledge of substance abuse between the two schools.

Testing of Hypothesis

There is no significant difference in the level of knowledge of substance abuse between teenagers in public secondary schools and teenagers in private secondary schools.

As shown in table 7, the students from the public secondary schools on the average (19.75) know more about substance abuse than their counterparts in the private secondary schools, with an average knowledge score of 19.38. Statistical analysis of this difference using one way ANOVA (p-value of 0.0005) showed that there is a significant difference in the level of knowledge of substance abuse between teenagers in public and private schools. The null hypothesis was rejected.

IV. Discussion of findings

This study revealed that the knowledge of substance abuse among secondary school teenagers is both accurate and high, the good conceptual understanding of what substance abuse is and the effect it has on the users. Table 3 showed that out of the 215 students sampled, 187 (87%) had high knowledge of substance abuse, 22 (10.2%) had moderate knowledge and only 4 (1.9%) had low knowledge of substance abuse. This result is similar to the reports of Ezeokoli *et al.* (2017) where as much as 91.7% of school teenagers were reported to have adequate knowledge of substance abuse. It also corroborates the result obtained by Masibo *et al.* (2013) that 98.5% of secondary school students have high knowledge of the effects of substance abuse. This study also agreed with the findings of Ajala and Oduremi (2018), they found that as much as 81% of students understood both the legal and conceptual meanings of substance abuse. It is also in line with the findings of Haddad, Shotar, Umlauf and Alzyound(2010) and that of Silas and Seeta (2016), their studies revealed that 70.5% and 78% of

secondary school teenagers respectfully had good knowledge of substance abuse and were well aware that substance abuse is a problem faced by their peers.

This finding however contradicts the result of Haddad *et al.* (2010), in their study that assessed knowledge of substance abuse among high school students in Jordan, their study reported that high school students lacked in-depth knowledge of substance abuse, the finding of the current study also contradicts that of Divya, Radhakrishnan, and Anu-Chithra (2018) where the level of knowledge of substance abuse among high school teenagers in India was found to be moderate.

The study revealed that the majority (96.3%) of the secondary school students had positive perception of substance abuse, most students disagreed that using substances is a cool way to have fun, they agreed that the costs of using substances outweighs the cost. This is in line with the results of Divya et al (2018), their study found that majority (67%) of the adolescent students had favorable attitude expressed towards the negative effects of substance abuse, this also agrees with Nagar and Hamad (2018) who found that is not a popular opinion among teen students that the occasional use of substances is not really dangerous, it also corroborates the opinion of Masiboet al. (2013) that most students do not see the potential benefits of using substances, and do believe that there is great harm from abusing psychoactive substances.

The teenage high school students in this study perceived the use of substances as destructive, which conflicts the popular opinions reported by De Freitas and Luis (2015) among Brazilian high school students that substance abuse is fashionable, and can be used to boost confidence when talking to the opposite sex. This study found that the students agreed with the banning of the use of substances in public places as well as censored media portrayal. This contradicted the findings of Gostang et al. (2017), wherein 73.6% of students did not agree to the banning of cigarettes.

The result of the study indicated that peer use of substances is the most significant factor that predisposes teen students to abuse substances. In similar findings based on a chi-square analysis, Akanni and Adayanfo (2015) showed peer use of substances as the most significant correlate of teenagers' use of tobacco, alcohol, cannabis and caffeine. This result is also in tandem with the findings of Simango (2014) and Bawa (2015) that peer pressure is the leading cause of substance abuse among the teen students. Curiosity and pleasure seeking disposition of the teenagers was found to be the second leading cause of substance abuse among teenagers. This is in line with the finding of Geramian et al. (2012) that the explorative tendency of adolescents is a huge predisposing factor to substance abuse among them. Bawa (2015) also indicated from empirical findings that curiosity of adolescents makes them susceptible to substance abuse. In similar findings, Bassi et al. (2017) identified curiosity as the leading reason why adolescents abuse substances, followed by peer pressure. The absence of parental supervision was the 3rd leading factor that causes teen students to abuse substances. This is in line with the findings of Lacey, Zilanawala, Webb, Abell and Bell (2016) that absence of parenting predisposes children to use alcohol and smoke in early adolescence. Also, it corroborates the results of Berge, Sundell, Ojeghan and Hakasson (2016) that neglectful parenting can lead to adverse substance use outcomes for adolescents.

It was revealed that students from the public secondary schools have significantly higher knowledge about substance abuse compared to their contemporaries in private secondary schools. The comparative studies on knowledge of substance abuse between both private and public schools are largely not existent. However, there is evidence that knowledge of students about substance abuse does differ across several groupings of students. Geramian et al. (2012) noted that high school adolescents in the urban areas have significantly higher levels of knowledge about the types of substances, as well as their effects, compared to the counterparts in the rural areas. The significantly higher knowledge of substance abuse among the public school students compared to the private school students contradicts the finding of Geramian *et al.* (2012) as most schools in the rural areas tend to be public schools than private schools.

V. Conclusion and Recommendations

In conclusion, this study revealed a high level of knowledge of substance abuse among teenage high school students and a positive perception towards the negative effect of substance abuse. Nonetheless, peer influence, curiosity on the part of teenagers and poor parental supervision continues to drive unacceptable levels of substance use and increasingly contributes to abuse of substances among teenagers, irrespective of the perception they may have.

Thus, it is recommended that teenage students should be encouraged to pick their friends and peers wisely, given the impact one's peer network has on the likelihood to use and abuse substances. Schools can leverage on the parent-teacher association meetings, to keep parents informed on the need for parental supervision and the huge role played by parental presence and care in adolescents' interaction with substances. Lastly, preventive interventions should be put in place with the aim of providing age appropriate information at early adolescence, in order to help teenagers develop healthy perceptions and equip them with the right

information that tells them how to avoid substance abuse when they start getting exposed to social contexts where substances are used.

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