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### Assessing the Effects of Substance Abuse in Parenting: A Case Study of Chimwemwe Township of Kitwe, Zambia

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#### Abstract

This researcher was motivated to assess the effects of substance abuse on parenting and the impact it has on children in society and the Zambian community at large because of the devastating effects of substance abuse on individual users and their immediate families as it is prevalent not only in Zambia but the world at large.

The use of illicit substances has spread to almost every part of the globe. Every society around the world is affected by the overwhelming problem of substance abuse. Various difficulties affecting not only the person that abuses substances but also his or her family. The adverse effects of substance abuse on families and parenting is devastating affecting relationships, financial sources and health of individual users.

The purpose of this research study was to assess the effects

of substance abuse in parenting and objectives being; to investigate the prevalence of substance abuse among parents, to determine contributing factors to parental substance abuse and to examine the impact of substance abuse on parenting practices and behaviours in Chimwemwe Township of Kitwe, Zambia.

The study's findings on the prevalence of substance abuse among parents in Chimwemwe Township revealed that substance use, particularly of alcohol, cigarettes, and marijuana, was a significant issue affecting many families. A majority of parents surveyed reported using at least one type of substance, with alcohol being the most frequently used (58.82%), followed by cigarettes (39.71%) and marijuana (23.53%).

**Keywords:** Substance Abuse, Alcohol Consumption, Parenting, Illicit Substances, World Health Organisation

#### Introduction

Substance abuse refers to the harmful or hazardous use of psychoactive substances including alcohol. Thelma Chansa Chanda & Lufeyo Chitondo (July-August 2023) <sup>[37]</sup>.

The use of illicit substances has spread to practically every part of the globe. Every society is affected by the devastating problem of substance abuse. Various problems affecting not only the individual user, but also his or her family. The adverse effects of substance abuse on families and parenting is overwhelming. Relationships suffer, financial sources are depleted, healthcare costs increase and emotional stress escalates.

Alcohol consumption has been a part of Zambian culture for a long time. Zambia is one of the countries in Africa with highest alcohol intake. According to the World Health Organisation (WHO) health report of 2014, the 12-month prevalence of alcohol use disorders among Zambians above 15 years of age, including alcohol dependence and harmful use of alcohol is 7.9% of the male and 1.0% of the female population with an overall rate of 4.5% which is above the average of 3.3 % for the WHO African Region.

It is clear that alcohol and substance abuse affects every member of the family. Spouses of substance abusers are frequently affected in terms of both physical and mental health (Hurcom, Coppelo, & Orford, 2000) <sup>[15]</sup>. Children of alcoholics in particular, are at greater risk for behavioural, psychological, cognitive, or neuropsychological deficits (Johnson & Leff, 1999) <sup>[17]</sup>. Siblings of substance abusers are often at greater risk for substance abuse themselves (Vakalahi, 1999) <sup>[39]</sup>. More than 8.3 million under the age of 18 lived with at least one parent who was dependent on or abused an illicit drug during the past year

Substance Abuse and Mental Health Services Administration (SAMHSA). (2009) [36]. There is an extensive and reliable literature that has linked parental substance use disorder (SUD) to an increased risk in their children of SUD as adults (Orford & Velleman, 1990; Velleman & Orford, 1993a; Kendler, Davis, & Kessler, 1997; Merikanges & Avenevoli, 1998) [32, 40, 19, 26]. "Family environments in which a parent has an SUD are often characterized as traumatic, chaotic and unpredictable, and can in turn, have adverse consequences for children living in such families" (Velleman & Orford, 1993a; Kumpfer & DeMarsh, 1986; Kumpfer & Bluth, 2004) [40, 21, 20].

The use of illicit drugs has increasingly become a public concern in China in the last two decades (Liu *et al.*, 2020; Liu *et al.*, 2018) [24, 23] as revealed by the China National Narcotic Control Committee (CNNCC, 2018).

The number of children in the United States living with at least one substance-abusing parent is alarming. According to the 2012 National Survey on Drug Use, an estimated 7.5 million children, or 10.5% of the population 17 years of age and younger, live with at least one parent who abuses drugs or alcohol.

In South Africa, the prevalence of substance abuse is twice the global average, and the Western Cape (WC) is particularly disturbing with the highest prevalence of alcohol and drug use (Kadali & Thomas, 2013) [18].

According to Edmonds and Wilcocks (1995) [12], drug addiction is a very real problem in South Africa. He states that it affects people from all walks of life and can no longer be considered a localized problem. Jackson, Usher and O'Brien (2006) [16] found that the experience of having a family member that was addicted to drugs, especially a child, had a profound effect on other members of the immediate family as well as on the family relationships. Grohman (2007) [14] argues that the impact of drug addiction goes beyond the individual and the family, as the ripples thereof can also be felt in the larger community and economy.

In urban areas of Zambia, parental addiction to drugs has been on the ascent. Children whose parents are dependent on abnormal amounts of narcotics utilization regularly confront challenges in their scholastic work and frequently enlist low scores in their academics (Mwiti, 2006) [31]. Mulenga *et al* (2010:102) [30] posits that "substance abuse has become a human tragedy which has affected society at different levels. There are at individual, family, community and international levels."

## Materials and Methods

The study adopted a qualitative research method because of its ability to describe in-depth the common characteristics of the phenomenon that has occurred (Creswell 2009; Tavakoli 2012; Kasonde-Ng'andu 2014) and collect data on alcohol and drug abuse from the perspective of the households.

It targeted Chimwemwe which is a constituency of the National Assembly of Zambia which covers Garnerton and the Chimwemwe suburb of Kitwe in Kitwe District Copperbelt Province. The total population of Chimwemwe according to the 2022 Central Statistics Census and Housing Preliminary Report (www.zamstats.gov.zm) was at 166,283 consisting of 81,017 Male and 85,266 Female.

In this study the researcher purposively targeted a group of people believed to be reliable for the study i.e. parents who abuse substances and children with parents or guardians that

abuse substances. The researcher believed that these were key persons to provide information on any issue or problem related to substance abuse.

The study adopted primary and secondary data sources. Well-designed questionnaires were obtained from books, journals and previous researchers.

The researcher sought consent from respondents before administering the questionnaires. The researcher also assured the respondents of confidentiality on the information obtained from questionnaires and in-depth interviews. The information given will not be used for any other purpose than educational research.

## Results and Discussion

### Presentation of Results on Background Characteristics of Respondents (Parents)

**Table 1:** Age of Parents Respondents and Number of Children

Demographic	Category	Frequency	Percentage (%)
Age Group	25-35	8	13
	36-50	59	87
	<b>Total</b>	68	100
Gender	Male	35	51
	Female	33	49
	<b>Total</b>	68	100
Number of Children	1-3	40	59
	4-6	28	41
	<b>Total</b>	68	100

Table 1 presents the age distribution of respondents and the number of children they had. Eight (8) respondents representing 13% were aged between 25 and 35 years and Fifty-Nine (59) respondents representing 87% were aged between 36 and 50 years. This diversity in age allowed for analysis across different life stages, which was useful in examining how substance abuse may impact parenting differently depending on the age and generational context of the parents.

The minimum number of children was 1, while the maximum was 6. This data reflected a moderate to large family size, which may increase parental responsibilities and stress, factors that could intersect with substance abuse and its impact on parenting practices

**Table 2:** Gender of children respondents and their household size

Demographic	Category	Frequency	Percentage (%)
Gender	Male	10	50
	Female	10	50
	<b>Total</b>	20	100
Age Group	8-12	8	27
	13- 17	12	73
	<b>Total</b>	20	100
Household Size	2-4	7	35
	5-8	13	65
	<b>Total</b>	20	100

Table 2 shows that the gender distribution among the 20 children surveyed was evenly split, with 50% (10 children) identifying as female and 50% (10 children) as male. This balanced gender representation ensured that the perspectives gathered in this study reflected experiences and insights from both male and female children equally.

The age range of respondents spanned from 8 to 17 years, eight (8) respondent representing 27% were aged between 8 to 12 years while twelve (12) respondents representing 73%

were between 13 and 17 years. The above analysis indicated that the study captured a wide range of childhood and adolescent experiences. This age diversity allowed for observations on how different age groups may perceive and be impacted by parental substance abuse.

The above table also shows that seven (7) respondents were in a household between 2 to 4 members and 13 respondents (65%) had 5-8 household members. The minimum number of household members reported was 2, while the maximum was 8. This variability in household size provided context for understanding family dynamics and support structures, which may influence children’s experiences and coping mechanisms related to parental substance abuse.

Below Fig 1 outlines the educational levels among respondents, showing a wide range of educational backgrounds. The largest proportion of respondents, 39.71% (27 individuals), have attained a tertiary-level Certificate or Diploma. This is followed by 19.12% (13 individuals) with a Bachelor’s Degree, 17.65% (12 individuals) with only a Primary/Basic school certificate, and 23.53% (16 individuals) with a Secondary school certificate. These

educational levels may provide insights into how background knowledge and awareness affect parental attitudes and responses to substance abuse issues within the household.

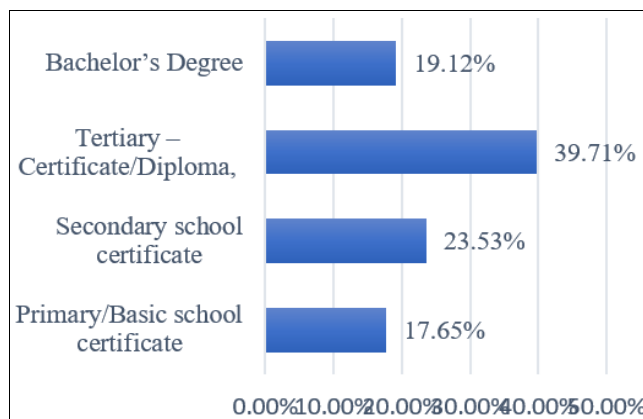


Fig 1: Education Level of Parents

Table 3: Prevalence of Substance Abuse among Parents

substance	Frequency of Use	Percentage (%)	Non-Users	Percentage (%)	Remarks
Alcohol	40	58.82	28	41.18	Alcohol is the most commonly used substance, likely due to cultural and social acceptance.
Cigarettes/ Isunko	27	39.71	41	60.29	A significant portion of parents also reported cigarette use.
Weed/Marijuana/ Ichamba	16	23.53	52	76.47	Marijuana plays a role in the substance use patterns among some parents, though less common.
Heroin	0	0.00	68	100.00	No respondents reported using heroin, likely due to limited accessibility or social stigma.
Cocaine/ Crack/ White Powder	0	0.00	68	100.00	Similar to heroin, no use of cocaine/crack was reported among respondents.
Codeine and Cough Syrups	10	14.71	58	85.29	Codeine and cough syrups are used recreationally by a small portion of respondents.

From the research findings Alcohol was the most commonly used substance, with 58.82% (40 out of 68) of respondents admitting to its use, while 41.18% (28 respondents) reported not using it. This high prevalence may indicate that alcohol was culturally or socially more accepted, potentially influencing its widespread use among parents in the community. Cigarette or "Isunko" use was reported by 39.71% (27 respondents), while 60.29% (41 respondents) indicated they did not use it.

Marijuana ("Ichamba") usage was reported by 23.53% (16 respondents), suggesting that while less common than alcohol, it still played a notable role in the substance use patterns of some parents.

None of the respondents reported using heroin or cocaine/crack, indicating that these more potent and potentially stigmatized substances were not prevalent among this sample group. This absence may reflect limited accessibility, cultural views, or other barriers.

A lower prevalence for codeine and cough syrups used recreationally was noted, with 14.71% (10 respondents) reporting usage, while 85.29% (58 respondents) did not use these substances.

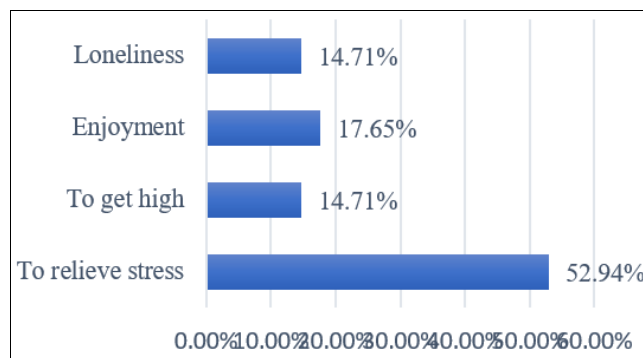
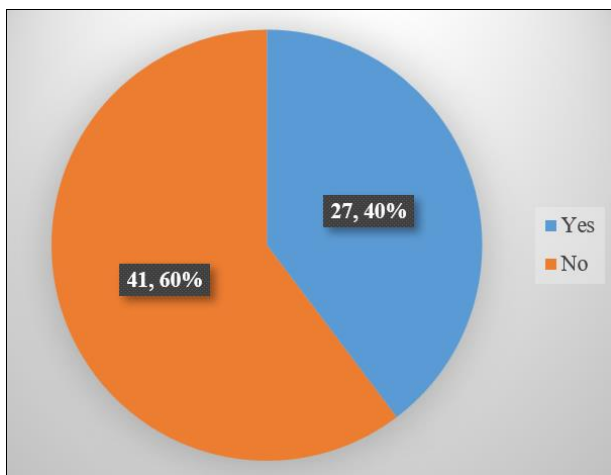


Fig 2: Reasons for Substance Use

Fig 2 explores the reasons parents used substances. The most common reason cited, by 52.94% (36 respondents), was stress relief. This suggested a strong correlation between substance use and coping mechanisms for stress, which could be rooted in social or economic pressures. Other reasons included enjoyment (17.65%, 12 respondents), loneliness (14.71%, 10 respondents), and a desire “to get high” (14.71%, 10 respondents). These

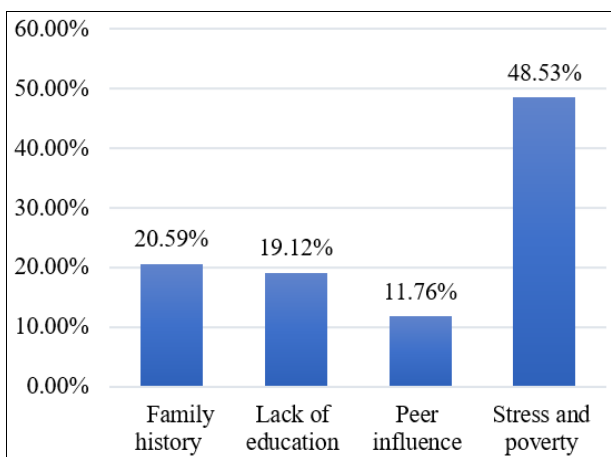
findings underlined the potential role of mental health and social well-being in influencing substance use among parents.

**Presentation of Results Based on Contributing Factors to Substance Abuse among Parents in Chimwemwe Township**



**Fig 3:** Family History of Mental Health Issues

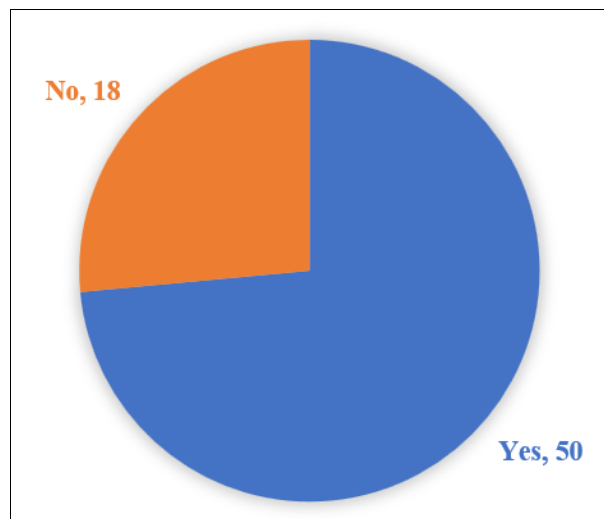
Fig 3 shows that 39.71% (27 respondents) reported a family history of mental health issues, whereas 60.29% (41 respondents) did not. The presence of mental health issues in the family may be a contributing factor to substance abuse, as individuals in such environments might have fewer coping resources and could turn to substances as a means of managing stress or emotional challenges.



**Fig 4:** Main Reasons for Substance Abuse

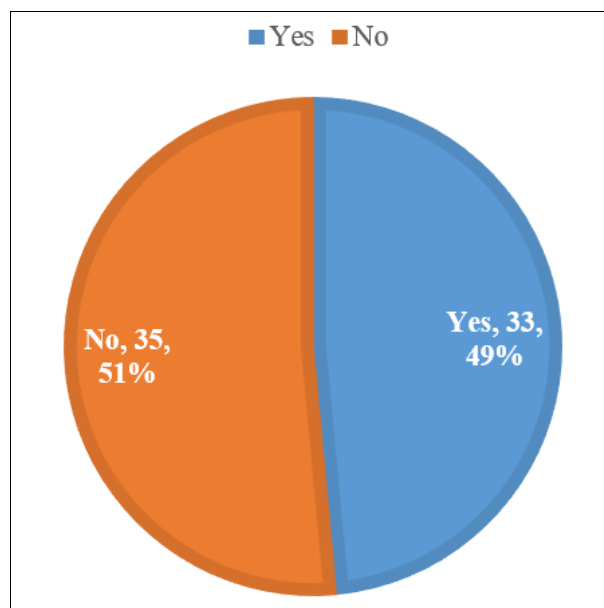
Fig 4 presents the main reasons respondents believed contributed to parental substance abuse. The highest factor, noted by 48.53% (33 respondents), was “stress and poverty,” followed by “family history” (20.59%, 14 respondents) and “lack of education” (19.12%, 13 respondents). Peer influence was noted by 11.76% (8 respondents). These findings suggested that economic hardships, family patterns, and limited education were viewed as key factors contributing to substance use among parents.

**Presentation of Results Based on the Impact of Substance Abuse on Parenting Practices**



**Fig 5:** Behavioural Changes in Children

As shown in Fig 5, 73.53% (50 respondents) observed behavioral changes in their children due to their substance use, while 26.47% (18 respondents) did not. This high percentage underscored the visible impact of parental substance abuse on children, possibly manifesting as behavioral challenges, emotional responses, or changes in social behaviors.



**Fig 6:** Changes in Children’s Academic Performance

Fig 6 reveals that 48.53% (33 respondents) noticed changes in their children’s academic performance linked to their substance use, while 51.47% (35 respondents) reported no such changes. The almost equal distribution suggested that while some children may struggle academically due to parental substance abuse, others may maintain stable performance, potentially due to various support systems or resilience.



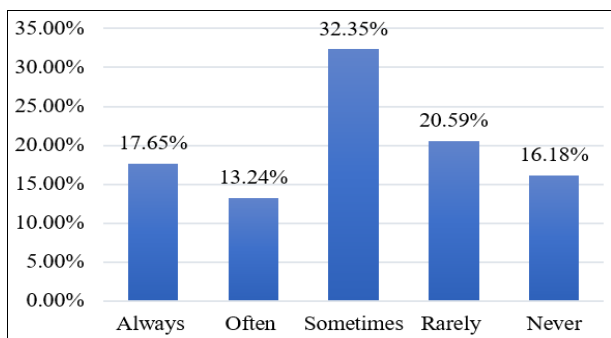


Fig 7: Emotional Availability to Children

Fig 7 addressed emotional availability, with only 17.65% (12 respondents) indicating they were “always” emotionally available to their children while using substances. Conversely, 20.59% (14 respondents) reported “rarely” being available, and 16.18% (11 respondents) stated “never.” The largest portion (32.35%, 22 respondents) mentioned “sometimes” being emotionally available. This variability in emotional availability indicated that substance use may significantly disrupt parent-child emotional connections, leading to inconsistencies in support and affection.

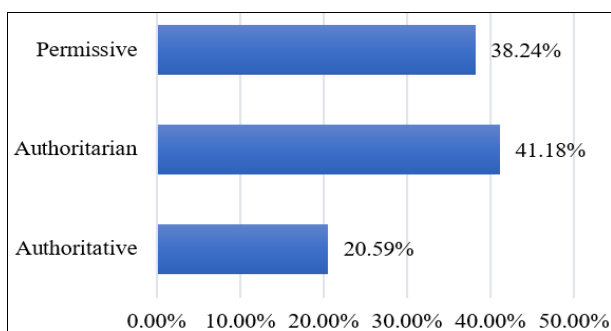


Fig 8: Parenting Style

As shown in Fig 8, the majority of respondents identified their parenting style as authoritarian (41.18%, 28 respondents), followed closely by permissive (38.24%, 26 respondents), with a smaller portion adopting an authoritative approach (20.59%, 14 respondents). The prevalence of authoritarian and permissive styles may suggest a divergence in discipline and control among parents dealing with substance abuse, potentially affecting consistency and emotional connection with children.

**Presentation of Results Based on the Impact of Substance Abuse on Parenting Practices (Children’s Perspective)**

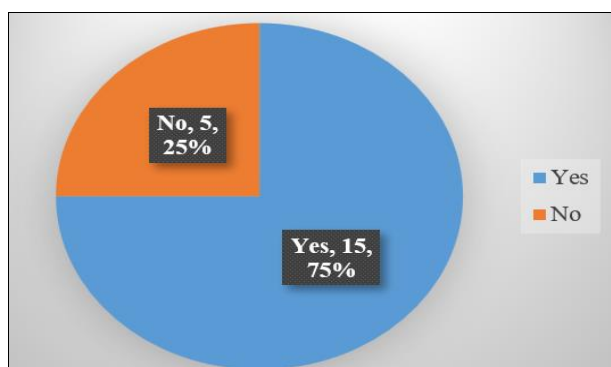


Fig 9: Perception of Substance Use Impact on Parental Care

Fig 9 - reveals that 75% (15 out of 20 children) felt that substance use affected how their parents took care of them, while 25.% (5 children) did not perceive any impact. This high percentage suggested that most children recognized changes in their parents’ caregiving behaviors when substance use was involved, indicating a noticeable shift in parenting practices as perceived by the children.

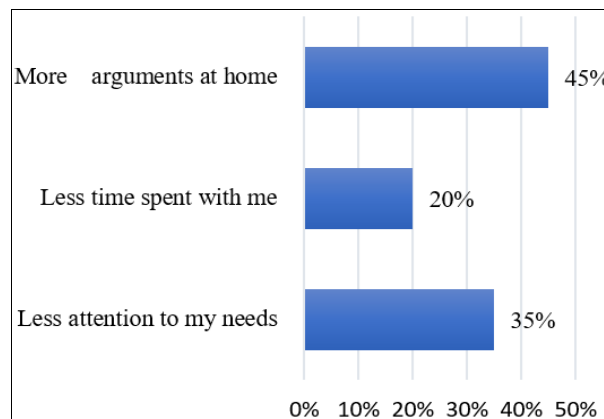


Fig 10: Specific Ways Substance Use Affects Parental Care

Among those who believed substance use affected parental care, Fig 10 provides insights into the specific impacts. The most commonly observed effect, noted by 45.00% (9 children), was “more arguments at home,” followed by “less attention to my needs” (35.00%, 7 children). Additionally, 20.00% (4 children) reported that their parents spend “less time” with them. These responses highlighted the primary ways in which children perceived that substance use interfered with effective caregiving, including reduced emotional presence, increased household tension, and less dedicated time with their parents.

**Discussion of Results Findings on the Impact of Substance Abuse on Parenting Practices**

The results of this study revealed that substance abuse had a profound impact on parenting practices among parents in Chimwemwe Township, affecting both the quality of parent-child interactions and the stability of the household environment. Perspectives from both parents and children illustrated how substance use disrupted emotional availability, disciplinary roles, and the overall caregiving dynamics within families. The findings indicated that substance use significantly affected the type of parenting style adopted by parents. A large percentage of parents identified their parenting style as either authoritarian (41.18%) or permissive (38.24%), with fewer reporting an authoritative style (20.59%). Substance use likely contributed to these extremes: While some parents may adopt a stricter, more controlling approach under the influence, others may become more lenient or disengaged. Children’s responses supported this, with many reporting that their parents displayed inconsistent behavior, sometimes being more withdrawn or overly strict, leading to confusion and a lack of stability in the parent-child relationship. Emotional availability was also a critical issue affected by substance abuse. Only a small proportion of parents reported being “always” emotionally available to their children while using substances. The majority, however, noted limited availability, with 32.35% reporting they were “sometimes” available, while others mentioned “rarely” or “never”

feeling emotionally present. From the children's perspective, this emotional detachment was deeply felt, with many observing that their parents provided less attention to their needs and spent less quality time with them. This lack of emotional support and presence was detrimental to children's emotional development and overall well-being, potentially impacting their sense of security and self-worth. The data further revealed that substance abuse disrupted disciplinary roles within the household. While 47.06% of parents reported that the father was the primary disciplinarian, others indicated that discipline was inconsistent, with roles that varying between both parents, the mother alone, and other family members. This inconsistency, as noted by both parents and children, contributed to an unpredictable environment that may lead to confusion and increased household tension. Children reported that substance use often led to more arguments at home and created a volatile atmosphere, affecting their sense of safety and stability.

Children's perspectives also highlighted the emotional impact of these disciplinary changes. Many children expressed feelings of fear or sadness when witnessing their parents under the influence, particularly during instances of heightened anger or conflict. This household instability due to substance use affected not only the children's perception of authority but also their respect and trust in their parents' ability to provide a stable and nurturing environment. The study's findings suggested that substance abuse compromised parents' ability to fulfill caregiving responsibilities effectively. A significant number of children (75.00%) believed that substance use affected their parents' caregiving abilities, with specific issues like "less attention to my needs" and "more arguments at home" being commonly reported. These perceptions indicated that children recognized the influence of substance abuse on their parents' focus, patience, and availability, ultimately impacting their emotional and physical needs.

Furthermore, many children reported experiencing confusion, sadness, and fear as emotional responses to parental substance use. The prevalence of these emotions underscored the indirect effects of substance abuse on children, as they often internalized the conflict and stress present in the household. Emotional distress in children could lead to long-term impacts on their mental health, academic performance, and social relationships, illustrating how substance use affected not only the parent-child relationship but also the child's broader development.

The impact of substance abuse on parenting practices in Chimwemwe Township highlighted a cycle of emotional and behavioral disruption within families. Substance use reduced parents' ability to provide consistent, nurturing care, leading to compromised emotional support, disciplinary inconsistencies, and increased household conflict. From the children's perspective, these disruptions eroded trust in their parents, reduced their sense of security, and fostered negative emotions like fear, confusion, and sadness. The findings underscored the need for interventions that targeted both substance abuse and parenting support. Community-based programs that offered counseling, parenting education, and emotional support for substance-affected families could mitigate these impacts by helping parents develop healthy coping mechanisms, maintain stable disciplinary practices, and enhance emotional availability. Additionally, providing resources and safe spaces for

children affected by parental substance use could improve their resilience and emotional well-being, helping them cope with the challenges posed by a substance-affected household environment.

### Conclusion

The findings of this study revealed that substance abuse had a profound impact on parenting practices among parents in Chimwemwe Township, affecting both the quality of parent-child interactions and the stability of the household environment. Perspectives from both parents and children illustrated how substance use disrupted emotional availability, disciplinary roles, and the overall caregiving dynamics within families.

The study further illuminated the pervasive effects of substance abuse on parenting practices and family dynamics within Chimwemwe Township. The prevalence of substance use among parents, particularly of alcohol, cigarettes, and marijuana, revealed an entrenched issue that was impacting not only individual well-being but also the health of the family unit as a whole. Parents frequently cited stress, economic hardship, and social pressures as primary motivations for substance use, suggesting that substance abuse often served as a coping mechanism for underlying challenges.

The study's results underscored the role of substance abuse in eroding family stability and, consequently, the well-being of children.

Children's perspectives provided invaluable insight into the indirect effects of parental substance use on their well-being and coping mechanisms. The study found that many children felt emotionally neglected and fearful, with responses such as confusion, sadness, and even shame frequently mentioned. The lack of reliable emotional support and attention could hinder a child's development, affecting their self-esteem, academic performance, and relationships with peers.

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