



Assessing the impact of peer pressure on drug abuse among youths: A study of enugu youths

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Abstract

This study investigates the effect of peer pressure on drug abuse among youth in Enugu, a city in southeastern Nigeria. To achieve the research objectives, qualitative data were collected, analyzed, and interpreted using Focus Group Discussions (FGDs) and Key Informant Interviews (KIIs). A purposive sampling technique was employed to select 18 participants, comprising 12 street-involved youth and 6 staff members from both governmental and non-governmental organizations involved in youth-focused programs. The study identified five major themes aligned with its objectives: (1) the role of peer pressure, (2) forms of peer pressure, (3) commonly abused drugs among street youth, (4) factors contributing to youth living on the streets, and (5) the impact of drug abuse on youth and its relation to peer pressure in educational settings. Findings revealed that peer pressure significantly influences drug use behavior among street youth, often manifesting in both positive and negative forms. Substances such as khat, cigarettes, alcohol, shisha, and glue (benzene) were among the most commonly abused, while drugs like hashish, marijuana, cocaine, and heroin were also reported in specific areas. Contributing factors to street life and drug abuse included poverty, family breakdown, deviant behavior, parental loss, and peer influence. Furthermore, the study highlighted the consequences of drug abuse, which include mental health challenges, social and economic instability, physical harm, substance dependence, and psychological disorders. The findings emphasize the urgent need for targeted interventions that address peer group dynamics and provide supportive services for vulnerable youth populations in urban centers like Enugu.

Keywords: Drug, drug abuse, enugu, peer pressure, youth

Introduction

A common trait among many street-involved youth is the widespread abuse of substances. As noted by Adlaf *et al.* (1996) ^[1], substance abuse is a global phenomenon intricately linked to street life, with individuals using various drugs for multiple reasons. While the type and quantity of substances vary, they are often harmful and have long-term damaging effects on the body and mind.

Johnson *et al.* (2005) ^[2] suggest that substance abuse among street youth is driven by a desire for group acceptance, coping with harsh living conditions, and for recreational purposes. The United Nations Office on Drugs and Crime (UNODC, 2014) ^[3] highlights a global rise in drug abuse, with approximately 230 million people—about 5% of the world's adult population—reported to have used illicit drugs at least once in 2010. In neighboring Kenya, Maithya (2009) ^[4] found that children as young as 11 to 13 years were already engaged in drug abuse—an act that is not only criminalized but also viewed as morally unacceptable in many African cultural contexts.

Street children and adolescents, often found in both urban and rural areas at all hours of the day, are frequently exposed to violence, exploitation, drug use, and criminal activity. Substance abuse remains a central issue for organizations supporting street youth, as overcoming addiction is crucial for reintegration and rehabilitation. Studies such as Wittig, Wright, and Kaminsky (1997) ^[5] reveal that youth often begin with easily accessible substances like alcohol and tobacco before progressing to more dangerous drugs, thereby escalating their risk.

Peer pressure plays a major role in the initiation and continuation of drug use. Brown *et al.* (1986) ^[6] define peer

pressure as the feeling of being urged or influenced by peers to engage in particular behaviors. Adolescents, in their quest for acceptance and belonging, often go to great lengths to meet peer expectations. The Nigerian Ministry of Labour and Social Affairs (MOLSA, 2004) ^[7] identifies peer and community influence as key environmental factors pushing young people onto the streets.

Street youth, more than their peers in stable environments, often crave social acceptance from fellow street dwellers. To avoid isolation in an already harsh lifestyle, they frequently imitate peer behaviors, including drug use, as a way to fit in. As the World Health Organization (WHO, 2014) ^[9] notes, engaging in risky behaviors such as substance use is often a means of gaining peer approval in street communities.

1. Negative Consequences of Peer Pressure

Lindgren (1980) ^[10] argued that peer pressure can lead youth to make poor, impulsive decisions. Influenced by negative peer groups, some youth tend to live moment to moment, lacking concern for the long-term consequences of their actions. According to Berndt (1996) ^[11], such youth often underestimate the dangers of drug and alcohol abuse and maintain a false sense of immunity to its effects.

Muuss (2000) ^[12] observed that despite widespread awareness of the harmful effects of smoking and substance abuse, some adolescents continue risky behaviors, believing they are personally shielded from the consequences. Peer-influenced youth often neglect academics, exhibit rebellious behavior, dress in socially unacceptable ways, and engage in truancy and delinquent acts (Coleman, 1991) ^[13].

Clasen and Brown (1985) ^[14] found that peer groups can pressure teens into defying parental authority, avoiding academic responsibilities, stealing, and engaging in other antisocial behaviors. Gray (1991) ^[15] further noted that such groups may encourage youth to defy teachers, destroy property, and deceive or distance themselves from parental figures.

Statement of the Problem

Street-involved youth face a myriad of challenges, one of the most pressing being the lack of stable shelter. Without a secure home, they are exposed to constant danger—ranging from physical and sexual abuse to robbery and even murder. For girls especially, life on the streets is perilous, as they are more vulnerable to gender-based violence.

These difficult living conditions push many street youth toward substance abuse, which they claim helps them manage emotional distress and offers a temporary escape from the brutal realities of life on the streets. However, the consequences of drug abuse are far-reaching. In addition to the physical toll—such as malnutrition, poor hygiene, and health deterioration—street youth often suffer from psychological trauma and social alienation.

According to Uddin Talukder *et al.* (2015), the combination of environmental hardship, peer influence, and lack of family support significantly contributes to the prevalence of drug abuse among street youth. Addressing this issue requires a deeper understanding of the role peer pressure plays in shaping youth behavior, particularly in vulnerable and underserved populations like those living on the streets of Enugu.

Let me know if you'd like the next sections (e.g., objectives, methodology, literature review) rewritten in the same tone.

Thank you for sharing the text. Here's a rewritten version of your Literature Review and Theoretical Framework for improved clarity, coherence, and academic tone, while preserving your intended meaning:

Literature Review

For decades, children and adolescents have roamed the streets of Nigerian cities. Government reports confirm that many of these children have lived and worked on the streets for over half a century. Traditionally, the family has been regarded as the primary unit responsible for the upbringing, protection, and development of children. However, due to socio-economic and political challenges, this responsibility is often neglected, exposing children to greater hardship (FSCE, 2003) ^[17].

In Nigeria, many children are left unsupervised and uncared for, often becoming street dwellers due to poverty, parental death, neglect, or migration from rural to urban areas. FSCE (1999) ^[18] notes that urbanization and complex societal issues—such as poverty, unemployment, rapid population growth, family disintegration, and internal migration—have significantly contributed to the growing number of street children. According to the Ministry of Labour and Social Affairs (MOLSA, 2004) ^[7], poverty, domestic violence, school dropouts, and the pressure to support oneself or one's family are among the most prominent causes of street life.

Urban areas across developing countries, including Nigeria, are witnessing a surge in the population of street children (MOLSA, 1993). In a 2007 study supported by UNICEF, MOLSA estimated that approximately 150,000 children and youth were living on the streets of Nigerian cities, with

about 60,000 in Enugu alone (UNICEF, 2012). This crisis is not the result of a single factor but rather a combination of economic, social, political, and cultural issues that push children into street life. Lalor (1999) ^[20] highlights reasons such as poverty, parental loss, peer influence, and the need for independence.

Accurate data on street youth remains elusive due to their transient lifestyle and lack of permanent residence (Petel, 1990, in Pietkiewicz, 2012) ^[21]. Nonetheless, UNICEF (2011) ^[19] reports that of the 1.2 billion people living in poverty globally, approximately 650 million are children.

1. Perceptions of Street Youths

Street youth represent a growing urban concern, requiring urgent international attention. Research confirms their presence in both developing and developed nations, although their exact numbers are difficult to determine due to their mobility. In 1998, UNICEF estimated that over 100 million children worldwide lived on the streets, with only about 20 million being completely disconnected from their families.

These children lack essential needs such as nutrition, healthcare, education, and safety (UNICEF, 2007) ^[22]. Once on the streets, they experience extreme and chronic poverty, leading to social exclusion and vulnerability (Conticini & Hulme, 2006). Without access to adequate social services, these youth face physical harm, poor reproductive health, substance abuse, and limited opportunities for personal growth and development.

Drug and alcohol abuse further compound the dangers these children face. Many engage in criminal behavior as a direct result of substance dependency, leading to frequent encounters with the juvenile justice system (Human Rights Watch, 2005). Socioeconomic conditions in Nigeria, particularly widespread poverty, have strained family structures and reduced adult-child bonding, which contributes to the rise in street youth populations (UNICEF, 2012).

Many street youth resort to begging or menial labor such as carrying luggage to survive. Orphans, especially those affected by HIV/AIDS, are particularly vulnerable and often turn to street life as a last resort (UNICEF, 2007) ^[22].

Studies have confirmed high levels of substance abuse among street youth. One study revealed that 56.2% abused khat, 51.9% consumed alcohol, 46.8% used tobacco, and others sniffed glue or used marijuana. Of the youth surveyed, 32.2% were heavy users (multiple uses per week), 28.4% were light users (once or twice a month), and 41.9% were former or occasional users.

Another study by Godanna (1999), involving 1,780 randomly selected high school students, showed drug experimentation began predominantly between the ages of 15 and 19. The most commonly used substances included alcohol (49.6%), khat (40%), tobacco (20.7%), and marijuana (11%). A more recent youth tobacco survey conducted in 25 Enugu schools in 2003 indicated that 10.1% of students had tried smoking, with 9% currently using some form of tobacco (DACA, 2005) ^[23].

Theoretical Framework

Clark (2009) ^[26] defines a peer as “a special relationship between two or more individuals of similar status.” Peer pressure, then, refers to the influence exerted by individuals within a peer group to conform to shared behaviors, norms, or

values. This pressure can manifest positively or negatively, depending on the group's practices and values. For instance, if a youth is surrounded by peers who smoke or use drugs, resisting that behavior becomes increasingly difficult.

Peer pressure plays a pivotal role in shaping youth behavior, particularly among street children who seek validation and acceptance in an often hostile environment. As members of peer groups spend time together, they adopt similar habits, behaviors, and attitudes—even if these are harmful.

Social Learning Theory, developed by Bandura (1971) [27], provides a strong foundation for understanding how behaviors—positive or negative—are acquired through observation and imitation. According to Bandura, people often adopt behaviors they observe in others, especially when those behaviors appear to be rewarded. In peer groups, this dynamic is evident: if drug use or aggressive behavior leads to social acceptance, others are more likely to emulate it.

Naidoo and Wills (2009) [28] emphasize the role of risk and protective factors in determining behavioral outcomes. Risk factors increase the likelihood of substance abuse, while protective factors serve as buffers. These dynamics are especially relevant during adolescence, a developmental stage when young people are particularly susceptible to peer influence (Hemphill *et al.*, 2011; Arteaga *et al.*, 2010) [29].

Early initiation into substance use—particularly before age 15—is associated with a higher risk of long-term dependency and adverse health outcomes (Goldberg, 2012) [31]. The World Health Organization (2007) confirms that substance abuse can lead to aggression, injury, unsafe sexual behavior, and psychological disorders.

Among the various substances, cannabis remains the most widely abused worldwide, with approximately 4% of adults using it (Goldberg, 2012) [31]. Fontes *et al.* (2011) [32] found that marijuana use before age 15 may impair brain function and increase the risk of depression and psychosis later in life.

Materials and Methods

To achieve the objectives of this study, a **qualitative case study design** was employed. This method was deemed appropriate due to the study's focus on the lived experiences of street youth involved in drug abuse within the Enugu metropolis. As Denzin and Lincoln (2008) explain, qualitative research seeks to interpret phenomena within their natural contexts and aims to explore the meaning of social actions, relationships, and lived experiences from the perspective of participants.

By adopting a case study approach, the research aimed to investigate how peer pressure influences drug use among street youth. This design allowed for an in-depth understanding of participants' personal experiences, attitudes, and perceptions. According to Hancock, Windridge, and Ockleford (2007) [33], qualitative studies aim to explore how and why particular phenomena occur in the real world, offering insights that structured quantitative approaches may overlook. Yin (2011) [34] also emphasizes that case studies are ideal for capturing the views and opinions of participants under real-world conditions.

This study employed purposive (non-probability) sampling, selecting individuals who were best positioned to provide relevant insights. Due to the transient nature of street youth and the difficulty in locating a random sample, participants were chosen based on their accessibility and relevance to the

research questions. As Howitt (2000) notes, non-probability sampling allows researchers to identify and engage participants who meet specific criteria—in this case, street youth actively involved in substance use.

The study was conducted in Enugu, selected for its accessibility and prevalence of street youth. A total of 18 participants were involved: 12 street youth and 6 staff members from relevant government and non-governmental organizations. The selection ensured diverse perspectives, including both individuals directly affected and professionals engaged in intervention or support services. To reach participants, the researcher coordinated specific data collection dates to account for the mobility of street youth and minimize participant loss.

Data Analysis

Data were analyzed using **thematic analysis**, a common approach in qualitative research for identifying, analyzing, and reporting patterns within data. Once interviews and focus group discussions were completed, the recordings and field notes were carefully transcribed. According to Lacey and Luff (2007) [35], transcription is a critical step in qualitative research as it converts spoken words and observations into analyzable text.

To ensure accuracy, all transcribed data were cross-checked against the original recordings. This step helped maintain consistency in meaning and avoid misinterpretations during translation or transcription. Themes were then developed based on recurring patterns in participants' responses, aligned with the research objectives.

Results and Discussion

A total of 18 participants were included in the study: 12 street youth and 6 staff members from NGOs and government institutions. These participants were selected from Gullele's Woredas 7 and 8 within Enugu. Of the 12-street youth, 6 took part in in-depth interviews and 6 participated in a focus group discussion. The remaining 6 participants—comprising trained staff—provided professional insights through key informant interviews.

Among the 12-street youth, 50% were male and 50% were female. Their ages ranged from 17 to 28 years, with an average age of 22.9 years. Educational backgrounds varied significantly: 2 participants were illiterate, 3 had completed up to Primary 4, 2 up to Primary 6, 3 up to Primary 8, and 2 had completed up to Junior Secondary (Grade 10).

In terms of marital status, 2 of the street youth were married while 10 were single. Seven participants were born in Enugu, while five migrated from other regions. Religious affiliation was also diverse: Orthodox Christianity was most represented (58.3%), followed by Protestantism (33.3%) and Islam (8.5%).

The involvement of NGO and government staff added depth to the study. Their contributions provided institutional perspectives on the challenges of peer pressure and drug abuse among youth, as well as the limitations of existing intervention programs.

The findings suggest that peer pressure plays a significant role in influencing substance abuse among street youth. Participants reported that peer groups not only normalized drug use but often initiated and encouraged it as a means of gaining acceptance. The social environment on the streets fosters dependency, with many youths stating they started using substances to "fit in" or "cope with stress."

Table 1: Demographic Characteristics of Street Youth Participants

Respondent	Sex	Educational Background	Marital Status	Place of Birth	Religion	Participation Mode
Int. 01	M	Grade 10	Single	Enugu	Orthodox	Interview
Int. 02	M	Grade 7	Single	Enugu	Orthodox	Interview
Int. 03	M	Grade 4	Single	Enugu	Orthodox	Interview
Int. 04	F	Illiterate	Single	Enugu	Protestant	Interview
Int. 05	F	Grade 8	Single	Enugu	Orthodox	Interview
Int. 06	F	Illiterate	Single	Enugu	Protestant	Interview
FGD 07	M	Grade 8	Single	Enugu	Orthodox	Focus Group
FGD 08	M	Grade 4	Single	Abia	Protestant	Focus Group
FGD 09	M	Grade 4	Single	Enugu	Muslim	Focus Group
FGD 10	F	Grade 4	Married	Abakaliki	Protestant	Focus Group
FGD 11	F	Grade 6	Single	Enugu	Orthodox	Focus Group
FGD 12	F	Grade 10	Married	Abakaliki	Orthodox	Focus Group

Table 2: Demographic Characteristics of NGO and Government Staff Participants

Code	Sex	Age	Educational Background	Years of Experience	Marital Status	Place of Birth	Religion	Participation Mode
FGD01	M	45	Master's	10	Married	Enugu	Orthodox	Focus Group
FGD02	M	38	Bachelor's	5	Married	Enugu	Protestant	Focus Group
FGD03	M	33	Bachelor's	5	Married	Enugu	Orthodox	Focus Group
FGD04	F	26	Bachelor's	5	Single	Nazareth	Orthodox	Focus Group
FGD05	F	28	Bachelor's	6	Married	Enugu	Orthodox	Focus Group
FGD06	F	40	Master's	8	Married	Enugu	Protestant	Focus Group

Summary: Among the professionals, two held Master's degrees while four held Bachelor's degrees. Five participants were born in Enugu and one in Nazareth. Four were Orthodox Christians and two were Protestants. Five were married, while one was single. The average age and work experience were 35 years and 5.5 years, respectively.

Findings on Peer Pressure and Street Youth Drug Abuse

Discussions with both street youth and key informants revealed that peer pressure plays a significant role in influencing substance abuse among street youth. Three primary functions of peer influence emerged:

- 1. Sense of Belonging and Protection:** Many street youth turn to peers for companionship and safety. They view their peers as substitute family members—offering protection, emotional support, and shared survival strategies. As participants noted, street life is bearable only because of the solidarity they find within their peer groups.
- 2. Initiation and Continuity of Drug Use:** Peer groups often initiate members into drug use, with substances such as glue, cannabis, cigarettes, and alcohol used communally. One participant (Int. 03, aged 18) shared: "I started living on the streets at a young age. I had friends who used drugs and, being around them, I began to use them too. It started small but now I depend on them—to feel less hungry or cold."
- 3. Guidance—Both Positive and Negative:** While peer influence is mostly negative, positive peer pressure was also noted. One female participant (Int. 05) stated: "My friends tell me not to get drunk because it could lead to rape and pregnancy. They advise me on how to avoid getting pregnant. We're all trying to survive, and adding another mouth to feed won't help."

Professionals from NGOs and government agencies supported these observations. One professional (FGD 03) stated:

"Most peer influence is negative because these youths don't go to school, so there's limited exposure to positive behaviors. Their environment reinforces the wrong choices."

Another professional (FGD 04) described two types of peer pressure:

- **Pull Factor:** Youth are attracted to the perceived freedom of street life and drug use, especially compared to the restrictions at home.
- **Push Factor:** To survive and be accepted in street society, youth adopt behaviors (like drug use) that conform with group norms.

She added: "No one chooses to become an addict. But when they come to the streets and see others using, they feel compelled to fit in. Even how people respond to them changes—someone might refuse to give money to a clean, sober youth but offer money to one who appears to be on drugs."

Conclusion

Findings from both Key Informant Interviews (KI) and Focus Group Discussions (FGD) revealed that peer pressure significantly influences the behaviors and decisions of street youth, particularly regarding substance abuse. Three core dimensions of peer influence were consistently identified: emotional support and belonging, behavioral modeling, and social regulation.

Many street youths reported turning to street life as a result of peer influence. The presence of trusted friends provided a sense of safety, emotional connection, and identity within peer groups. The street environment often becomes a surrogate family, offering a network of informal "siblings" with whom they share daily survival and social experiences. This aligns with Brown (1990), who categorized peer influence into four domains: direct peer pressure, indirect peer modeling or association, normative regulation, and the structuring of opportunities. The current study found clear evidence of all four types, with participants often engaging

in risky behaviors such as drug use to align with group expectations or norms. As noted by Velleman, Templeton, & Copello (2005) ^[36] and Hundleby & Mercier (1987) ^[37], adolescents tend to mirror the behaviors of peers engaged in deviant acts, confirming the role of indirect peer influence through association.

Moreover, the literature also distinguishes between active and passive forms of peer pressure (Graham, Marks, & Hansen, 1991; Read *et al.*, 2005) ^[38]. Passive peer influence occurs when individuals imitate group behavior or adopt group norms unconsciously. Active peer influence, on the other hand, involves direct encouragement or pressure to engage in specific behaviors. Findings from this study show that street youth experience both types. Many are directly offered substances by peers (active influence), while others adopt substance use patterns simply by observing and participating in group routines (passive influence).

Ellickson, Tucker, Klein, & Saner (2004) ^[39] support this, emphasizing that direct offers of substances are strong predictors of adolescent drug use. Similarly, Duncan, Duncan, & Stryker (2002) ^[40] found that peer encouragement—defined as the number of close friends who promote substance use—is a critical factor in predicting engagement in risky behavior. In this study, nearly all participants reported having been encouraged by peers, at least once, to use substances or engage in other inappropriate actions.

In summary, the findings reaffirm the powerful role that peer dynamics play in shaping the behaviors, decisions, and identities of street youth. Peer pressure, whether subtle or overt, supportive or destructive, continues to be a central factor influencing substance use and broader behavioral patterns among this vulnerable population.

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