

OUTCRY AND CALL FOR RELIEF: EXPERIENCES AND SUPPORT NEEDS OF PARENTS WITH NYAOPE USERS

Jan Masombuka, Lulama Qalinge

The abuse of nyaope as a recent drug added to the market continues to increase at an alarming rate. This drug is causing devastation in previously designated Black townships. The negative consequences of this phenomenon affect users and their parents. This qualitative study looked at the experiences and support needs of parents of nyaope users. Eight parents of nyaope users were interviewed using semi-structured face-to-face interviews. Purposive sampling was used to choose participants. The findings indicate that parents of nyaope users are overwhelmed and cry out for professional help. This study recommends that therapeutic interventions be extended to parents of nyaope users.

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INTRODUCTION

The use of *nyaope* in South Africa has turned out to be a lethal weapon destroying young people throughout the country. According to Cronjé (2015:1), *nyaope* is a mixture of substances such as marijuana, low-grade heroin, cocaine and other additives such as rat poison and antiretroviral medication. It is usually sold in small parcels at R30 a portion and it all began in Pretoria (Limpopo Department of Social Development, 2013:32). *Nyaope* is a highly addictive drug and many who tried it out for fun initially found themselves addicted to it over time. However, the exact ingredients of *nyaope* are unknown because it differs from area to area and is called a different name in different areas. For example, in townships such as Soweto, Alexandra, Mamelodi and Soshanguve in Gauteng province this drug is known as *nyaope*. In Durban-Kwazulu-Natal (KZN) townships such as Umlazi, Kwa-Mashu and Inanda, *whoonga* refers to the same drug (Motsoeneng, 2018:1). Similarly, Gumede and Pillas (2019:5) found that in the Tshwane region this drug is called *nyaope* while in Durban-KZN the same drug is called “Sugars” or “wunga/whoonga”.

In 2017 the South African Community Epidemiology Network on Drug Use (SACENDU) reported concerns that the use of *nyaope* is escalating at an alarming rate (Dada, Burnhams, Erasmus, Parry, Bhana, Timol, Nel, Kitshoff, Weimann & Fourie, 2017:1). Mahlangu (2016:1) also noted that the use of *nyaope* by youths in the township has intensified. In a related study, Mokwena (2016:137) confirmed that *nyaope* is widely used by young people in predominately Black residential areas known as townships and users can be easily identified as they usually assemble in taxi ranks and shopping malls. Meel and Essop (2018:585) also note that *nyaope* is exclusive to South Africa and its use is common among young and unemployed black people from poor socioeconomic backgrounds. Moodley, Matjila and Moosa (2012:5) conducted a study at a secondary school in Atteridgeville, a township located south-west of the Pretoria central business district, and it revealed that the prevalence of *nyaope* use was estimated at 2.9%. Amplifying the point, a report by SACENDU indicates that in the Northern Region (comprising Gauteng, Mpumalanga and Limpopo provinces), the number of service users seeking treatment for the use of *nyaope* has increased markedly (Dada, Burnhams, Williams, Erasmus, Parry, Bhana, Timol, Nel, Kitshoff, Weimann & Fourie, 2015:2). The study conducted at the Hammanskraal office of the Department of Social Development (DSD) in the Gauteng province also confirmed that the office is bombarded with a high number of applications to admit *nyaope* users to treatment centres (Mahlangu, 2016:1)

According to Fernandes and Mokwena (2016:2), about 15% of South African teenagers abusing and addicted to chemical substances are mainly exposed to the *nyaope* drug. In 2018 SACENDU released a report highlighting that the use of *nyaope* continues to pose a problem, with 10% of users in KZN and 5% in GT admitted for *nyaope* use (Dada, et al., 2018:2). According to the SACENDU 2018 report, the majority of patients admitted for *nyaope* use in KZN (81%) were African Black, followed by Gauteng with 95% from the same population group (Dada et al., 2018). The significant increase of users addicted to *nyaope* puts additional strain on the government, quite apart from the burden on their

families, especially the parents who have to deal with the consequences of the behaviour on a daily basis. Regardless of the origin or extent of use, the burden of managing the problems associated with adolescent substance dependency inevitably fall on the family, particularly the parents (Hoeck and Van Hal, 2012:1).

For parents, it is hard to learn that their young children are abusing this dangerous drug called *nyaope*. They blame themselves for having failed, because they were unable to execute their parental duties and feel responsible for their child's addiction. As a result of feeling shame and guilt, they continue to show love and carry out their parental responsibilities for their dependent child. Compounding the problem is lack of skills and knowledge regarding substance dependence as well as denial, and sometimes poor parenting; Hoeck and Van Hal (2012:7) state that some parents enable their child's drug abuse by providing them with money to buy drugs, not because they want to encourage the abuse, but they would rather have the child do it at home rather than on the streets, where they are exposed to all forms of danger. In the light of this parental love and need to protect their children, some parents are reluctant to press criminal charges against their own children, even though they had been victims of theft by their substance-dependent children. For the parents, dealing with the problem entails a trial-and-error process on a daily basis.

A study conducted with 21 parents from a long-term, family-based adolescent rehabilitation programme in Canada revealed that in practice parents felt unsupported by social workers and other social service professionals (Choate, 2015:469). In various ways, parents felt that social workers and other professionals had become allied with the substance-dependent youth because they refused to disclose information. Hoeck and Van Hal (2012:6) revealed that parents were generally dissatisfied with the contacts and services from the professionals, as they were unwilling to release information in order to protect the youth substance abusers' confidentiality. Furthermore, many parents described the confidentiality barriers as enabling secrets to be kept, thus making it harder to understand what the users' issues are and how to help. Most parents spoke about wanting information that would allow them to make sense of what was happening and how they could respond most effectively (Choate, 2015:469).

Although the abuse of *nyaope* has shaken local communities and has been widely reported on, there is a dearth of formal studies on the experiences and support needs of parents of *nyaope* users (Masombuka, 2013; Waine, 2015; Mathibela, 2017). Many studies have been carried out on the effects of drugs on children/youths and how to help them overcome the addiction (Gouws, Kruger & Burger, 2008; Nelson, 2012). However, very little has been written on the experiences and coping strategies of parents who have to live day in and day out with an addicted child (Mathibela, 2017; Groenewald & Bhana, 2016; Kalam & Mthembu, 2018). The study by Masombuka (2013:103) expressed the deep-seated pain that parents go through in trying to cope with *nyaope* addiction. Parents felt that nothing is done by the government and social workers to help them cope. It is against this background that this study seeks to explore the experiences and support needs of parents of *nyaope* users as they attempt to adapt and cope with the dependence of their young children. In the context of this study, parent refers to the mother, father, grandparents or adoptive parents who live with the *nyaope* user in the same household, while *nyaope* user refers to a child who is abusing or dependent on the drug.

The researchers adopted family systems theory as a theoretical base for the study. Family systems theory provides a comprehensive conceptual framework for understanding how emotional ties within the family of origin (including extended family members) influence the lives of individuals in the system (Walsh, 2014:113). Family systems theory emphasises involvement of the whole family when treating a deviant family member (Sutphin, McDonough & Schrenkel, 2013:502). Furthermore, family systems theory posits that when an individual family member uses or becomes dependent on substances, the rest of the family members are affected. Consequently, the normal functioning of the family as a system is disrupted, which may ultimately result in the breakdown of the entire system.

The mere fact of having a *nyaope* user in the family system might be an indication that the family ties are in a state of disequilibrium. Parents as nurturers feel compelled to assist in everything that affects their family and particularly their children. They will naturally try to do everything in their power to find the solution to their family problems to avoid the breakdown of the entire system. In many instances, parents feel helpless, because they are caught in the midst of a threat within the system that is breaking down as a result of an individual family member who is a *nyaope* user.

PROBLEM STATEMENT

Parents as natural care-givers are responsible for the behaviour of their children and as such automatically get affected when their children are dependent on drugs. In this regard, research conducted in relation to *nyaope* confirms that parents are significantly affected by the user's dependence (Mathibela, 2017; Mahlangu, 2016; Waine, 2015; Masombuka, 2013). Nonetheless, there is a dearth of formal studies on the experiences and support needs of parents of *nyaope* users. The study reported here on sought to understand the experiences and support needs of parents of *nyaope* users. It also looked at how parents coped and what support they would like to have. Parents of *nyaope* users feel dejected, discriminated and highly depressed.

PURPOSE

The purpose of the study was to explore the experiences and support needs of parents of *nyaope* user.

METHOD

The study was qualitative using exploratory and descriptive design. According to Creswell (2016:3), qualitative research follows the traditional ways of conducting the social, behavioural and health science research process and in this research process the researcher starts with a problem that needs to be solved, and then formulates a question which, if answered, will help address the problem. In the current study, an exploratory research design was used to explore the experiences and support needs of parents of *nyaope* users. In order to provide an accurate account of the knowledge and insight into the phenomenon under investigation, a descriptive research design was employed. For exploring the phenomenon of experiences and support needs of parents of a *nyaope* user, the following question was central: What are parents' experiences and support needs regarding their children's addiction to the drug *nyaope*?

Study settings

The study was conducted in Soshanguve, a black township in the north of Tshwane, in Gauteng province. It is noteworthy that the Soshanguve area is known to have a high prevalence of *nyaope* use (Conway-Smith, 2013:1; Mokwena, 2016:138).

Population and sample

The population comprised parents of *nyaope* users who reside in Soshanguve Township, in the Gauteng province. Because of time and financial constraints, the researchers could not afford to include all parents of *nyaope* users, hence the need for a sample. The study sample comprised eight parents of *nyaope* users.

Recruitment of the participants

Purposive sampling was employed to recruit participants from the researcher's caseload. Purposive sampling is a non-probability sampling method in which the settings and specific individuals within them are recruited by virtue of some angle of the experience related to the topic under study that might help the researcher to gain more insight into the topic (Thorne, 2016:98). The researcher owned a private practice. Only biological parents of *nyaope* users, who were willing to participate, reside in Soshanguve and have previously reached out to the researchers' private practice for professional assistance over a period of three years and who were conversant in English, Setswana and/or IsiZulu were included. The researchers' reason for including only such parents is based on the understanding

that as a result of their direct experience, they will be able to provide valuable and relevant information on the phenomena under investigation.

Data collection and analysis

Permission was obtained from the participants to record the interviews, which lasted between 45 minutes and 1 hour. Face-to-face semi-structured interviews following an interview guide were conducted to identify the concerns of the population. Fawcett and Pockett (2015:68) note that about 90% of all social science investigations use a form of interview to gather information from participants. The use of semi-structured interviews placed the participants in the position of expert on the problem. In this regard, Grinnell and Unrau (2011:306) noted that by employing semi-structured interviews, the interviewer or researcher is at liberty to explore in their own way and follow up interesting avenues that emerge in the interview.

In the current study no specific sample size was determined at the outset. According to Creswell (2016:110), sample size is determined by several factors, such as the complexity of the phenomenon being studied, the type of qualitative design used by the researcher, the richness and extensive use of data, and the resources being used. A sample size was determined by data saturation, which happened after eight parents were interviewed. Following the data saturation point, the data-analysis process commenced, which utilised Creswell's application of Tesch's framework for qualitative data analysis (Creswell, 2009:186). As guided by Tesch's framework, the researcher worked throughout the process of data analysis with the independent coder, who independently coded data and subsequently hold consensus discussions on the themes and sub-themes to be presented as research findings below. The data-analysis process was started by thoroughly reading all transcripts and noting key ideas that emerged. From all the transcripts, the most interesting document was chosen and read through carefully, noting ideas and thoughts in the margins. After completing the above steps for all the participants, a list of themes and subthemes was compiled. Three themes were identified and organized into sub-themes. Subsequently, the data material or storylines belonging to each theme were assembled in one place and a preliminary analysis was performed.

In this study, trustworthiness was assessed according to the four criteria developed by Guba and Lincoln (in Krefting, 1991). Trustworthiness is described by Butler-Kisber (2018:57) as the cornerstone of all qualitative studies and is defined by transparency, persuasiveness and plausibility. Trustworthiness in this current study was guaranteed by ensuring that all the information collected from all participants was their "self-reporting" about their experiences and perceptions in relation to the topic under investigation. To enhance the credibility of this study, various interviewing techniques such as listening, observation, probing, restating and summarising were used. Furthermore, the principle of triangulation was employed by ensuring that the data was collected from multiple sources, namely different parents with *nyaope* users. In addition, semi-structured interviews and participant observations were used to collect data from participants. The principle of peer examination was also employed by consulting with the colleagues who are experts in the field of qualitative research at the Department of Social Work of the University of South Africa (UNISA), in order to gain more knowledge and guidance.

Ethical considerations

Ethical clearance for the study was obtained from the Research and Ethics Committee of the Department of Social Work at UNISA. It is noteworthy that although participants were recruited from a private practice of a researcher, none of the participants had an ongoing therapeutic relationship with the researcher for the past three years. Furthermore, to avoid or minimize the risk of no coercion or undue influence, and ensuring that participants had the freedom to decide if they want to participate or not, the researchers ensured that the process of signing the informed consent form was facilitated by an independent professional person. Thereafter, the independent professional person handed all signed informed consent forms over to the researcher, who arranged individual appointments with the respective parents to allow the actual data-collection process to take place. In addition, before the start

of the interview, all participants gave oral consent and explicitly confirmed their availability to the researcher. Participants were informed of their rights to withdraw from the study at any time if they felt uncomfortable. All participation was voluntary and their identity was kept confidential. The interview tapes were stored in a safe place.

FINDINGS

The findings of the study are presented in the following section.

TABLE 1
PROFILE OF THE PARENTS WHO PARTICIPATED IN THE STUDY

Relationship to the <i>nyaope</i> user	Age	Marital status	Employment status	Race
Biological mother	30	Single	Employed	Black
Biological mother	35	Married	Employed	Black
Biological mother	39	Single	Employed	Black
Biological mother	40	Married	Unemployed	Black
Biological mother	54	Divorced	Employed	Black
Biological father	59	Married	Employed	Black
Biological mother	59	Married	Employed	Black
Biological father	66	Married	Retired	Black

In terms of the racial profile, all participants were black with ages ranging from 30 to 66 years. In terms of the gender, the majority of the participants were women. Only two of the participants were men. In terms of the marital status, five of the participants were married and two were single. Only one of the participants was divorced. With regard to the employment status, the majority of participants were employed. Out of the eight participants, six were employed and one was unemployed. Another one of the participants was retired; this was the participant aged 66. The employment status of the participants indicates that most of the parents of the *nyaope* users are working, which could indicate that their absence from home results in lack of supervision. The themes for discussion that emerged from the analysed data are indicated in Table 2.

TABLE 2
THEMES AND SUB-THEMES

Theme 1	Sub-themes
Parents' experiences with <i>nyaope</i> user	<ul style="list-style-type: none"> • Not knowing the new person • Financial burden
Theme 2 Parents' feelings about <i>nyaope</i> user	<ul style="list-style-type: none"> • Call for relief
Theme 3 Support needs of parents	<ul style="list-style-type: none"> • Need for programme for parents of <i>nyaope</i> users • Need for fellow parent companion • Need for support from the police

Theme 1: Parents' experiences with *nyaope* user

All parents were asked to express their experiences with the *nyaope* user and two sub-themes were reported: not knowing the 'new' person and financial burden. In general, all parents experienced the situation with the *nyaope* user as a struggle to contend with.

Not knowing the ‘new’ person

All participants reported that the person whom the user had been prior to *nyaope* abuse faded away. Parents experienced parenting the ‘new’ person as complex and demanding. This new person was at all times irritable, oblivious and ill-mannered. Participants described how their families were being torn apart because of this ‘new’ person. They reported having to take unimagined steps such as asking the users to leave the family home and thus wishing them dead. The participants indicated defeat and difficulty in knowing the ‘new’ person as expressed below:

“It is difficult to understand the person that my child has become and I am not able to manage this ‘new’ person.” He has been a humble and well-behaved child but now he is disrespectful and ill-mannered towards everyone.”

“I am not able to relate to my boy since he started abusing nyaope. He has become a totally ‘new’ person. He cares for nothing and everybody but nyaope.”

“Nyaope has made him a ‘new’ person, he is a total stranger. He is rude and irritable. Our efforts of talking to him about his negative attitude were fruitless.”

“I lost the person that I knew as my child. Nyaope has changed him a lot. His behaviour is completely uncontrollable and it is difficult for me to deal with him.”

Mokwena and Huma (2014:359) elucidate this phenomenon, contending that users admitted that *nyaope* takes over their lives in that when they become dependent users, getting the next fix is the only thing that occupies their time. Waine (2015:86) contends that a child who is addicted to chemical substances becomes disobedient and fails to do their household duties according to house rules, as expected and thus poses a challenge for parents to manage. In the study on the experiences of parents who have to deal with adolescent alcoholism and drug addiction, Choate (2015:466) noted that parents stopped seeing the child that they had known before the use of drugs and consequently the child’s life prior to drug use began to disappear and new influencers emerged. For parents, it was more challenging to manage the ‘new’ person who emerged as a result of drug use. Mokwena (2016:140) further noted that *nyaope* users expressed disapproval and dislike of what they have become and thus had negative views about themselves and their lives because of their use of *nyaope*. Similarly, Mathibela and Skhosana (2019:92) found that the parents struggled to understand what was happening to the substance-abusing adolescent.

Financial burden

Participants reported that they experience a financial burden as the *nyaope* users steal from them. All the participants reported that their *nyaope* users are constantly stealing valuable items at home and in the community to maintain their addiction. This left the parents with a great sense of loss and financial burden, because assets that have been stolen needed to be constantly replaced by them. Mahlangu (2016:53) confirmed *nyaope* users start to steal at home in order to secure money to feed their dependence, thus making the financial burden for their significant others enormous, because valuable assets are lost. Similarly, Mathibela and Skhosana (2019:93) found that parents are frustrated about the enormous financial losses they had experienced and in particular having to buy the same things as their substance-abusing adolescent continued to steal them. For participants, this experience was overwhelming and was expressed in the following comments:

“This child steals anything and everything at home and in the community and I am constantly carrying the financial burden of replacing the goods that he has stolen.”

“I am struggling financially because he constantly steals groceries, clothes and anything that he can lay his hands on.”

“I am tired of paying never-ending debts. It is really tough for me financially.”

In relation to this point, Mokwena and Huma (2014:358) noted that the combination of poverty, unemployment and the addictive nature of *nyaope* results in the users' stealing anything that they can lay their hands on, including shoes, blankets and meat from their families. Waine (2015:100) postulated that parents incur extra expenses related to the treatment of their children who are addicted to chemical substances. Groenewald and Bhana (2016:659) added that parents' financial burden includes the actual cost of the rehabilitation programme, travelling to and from the treatment centre and damage to property as a consequence of the adolescents' substance-abuse behaviour. Mathibela (2017:76) confirm that parents are frustrated about the financial burdens as a result of the losses they had experiences and in particular having to buy the same things over and over again as their chemical substance-abusing teenagers continued to steal them. In Mathibela's (2017:112) opinion, other parents incur a financial burden from giving money to buy chemical substances in a hope and belief that a teenager would not bother to commit crime and they would even pay the drug lords. The behaviour of the 'new' person tended to destabilize the family as a system. As a result of this, the boundaries of the family become tight as the family begins to withdraw from other systems in the environment.

Theme 2: Parents' feelings about *nyaope* user

The participants generally felt that the situation became tougher by the day, thus making them feel helpless and useless. Participants felt that as the more the user's addiction progressed, they felt more out of control. In 2013 the researcher completed a research study on "Children's addition to the drug *nyaope* in Soshanguve Township: Parents' experiences and support needs." This study confirmed that parents felt helpless, intimidated, miserable, ashamed and desperate about their children's addiction to *nyaope*. In addition, the study confirmed that parents find it difficult and struggle to cope and manage their children who abuse *nyaope* substance (Masombuka, 2013:103). Choate (2015:468) noted that the parents dealing with adolescent alcoholism and drug addiction saw their lives beginning to fall into a pattern of chaos and as such the whole of the family system was impacted upon detrimentally. As a result of the immense burden of managing a *nyaope* user, there was growing desperation and an increased call for relief by parents.

Call for relief

According to Choate (2015:468), parents dealing with adolescent alcoholism and drug addiction reported an increased inability to cope effectively, but they also found that reaching out for help could be less than useful at times, adding to the pressures to cope. Participants expressed their desire to wean the user off *nyaope*, but they felt they did not have the skills and capacity, hence they needed any form of help they could get. This is addressed by Waine (2015:106), who indicates that professionals need to direct their intervention not only to the user but to their parents as well, because they feel helpless. Participants mentioned being forced to make unpleasant adjustments in the family in order to survive, which resulted in them feeling more helpless as the situation became tougher by the day. Furthermore, they mentioned that their desire and efforts to assist their children to escape from abusing *nyaope* were fruitless. The following direct quotes attest to this:

"The burden of assisting my child alone is unbearable. I wish someone or something can relieve me from this burden."

"I felt helpless and call for help because when I tried to reach out, no one is showing interest."

Parents expressed a strong urge to redeem their addicted children but they are not able to do so, hence a call for relief and assistance. Choate (2015:472) points out that at times, the intervention programmes are ineffective, leaving parents dealing with adolescent alcoholism and drug addiction in dire need for more resources that will enable them to deal with their children and bring in changes in their lives.

Need for programme of parents of *nyaope* users

Participants shared that being a mother or father to a child abusing *nyaope* is frustrating, demanding and overwhelming, as they partly feel responsible for their children's behaviour. Participants indicated

they felt left alone to sink or swim. This is expressed by Groenewald and Bhana (2016:656) in indicating that parents feel a sense of responsibility and blame themselves for their children's drug abuse.

Some parents felt they need the social workers to do something. Some felt they need the government to come up with programmes to protect them from their children since they are at times in danger of being assaulted by them. This happens mostly when they refuse to give out money. Some felt that they need to be empowered to cope with their situation. Expanding on this aspect, Orford, Velleman, Copello, Temploton and Ibanga (2010:36) contend that emotional support, good information and material help is an invaluable resource for affected family members who are having to deal with a significant other with a substance-abuse problem. The participants expressed this in the following manner:

“As a parent, I feel compelled to assist and support my child. Therefore, I need a programme that can educate me to understand, support and cope with this child.”

“Managing [a] nyaope user needs special skills, I believe a programme for parents will add value in assisting my child and myself.”

I wish social workers could do something to help us as parents. We feel alone and very lonely.”

In this regard, Van der Westhuizen, Alpaslan and De Jager (2011:364) confirmed that the family of the drug user lacks knowledge about recovery from chemical addiction, and the need to make services available to them as well. Similarly, Mahlangu (2016:70) confirmed that the significant others need to be educated with regards to giving support to the *nyaope* user. In addition, parents need professional help to improve communication among different subsystems within the family in order to strengthen the family system.

Need for fellow parent companions

The findings by Hoeck and Van Hal (2012:11) suggest that parents of substance-abusing young people benefit from joining support groups, particularly in terms of the emotional and social support they receive from their peers, the practical information they obtain and the changes in coping mechanisms they can make.

From the participants' point of view, formal support structures such as the fellow parent companion could assist them to cope with the user. Participants noted that although they often knew fellow parents of *nyaope* users from the community, they were scared to seek the necessary help and support based on preconceived notions, notwithstanding the fact that they all experienced similar emotions. Participants believed that they could benefit from the companionship of fellow parents coordinated by a social worker. The participants expressed themselves as follows:

“I will appreciate support and help from fellow parents who share the same concerns about children abusing nyaope.”

“I wish we have fellow parent support.”

In relation to this point, Liddle and Gordon (in Masombuka, 2013:110) state that drug abuse should be addressed by a number of systems in the environment such as people who play vital roles in the lives of adolescents, such as schools, churches, school counsellors, social workers, psychotherapist, community and different professional specialties, whose contribution will result in the appropriate developmental outcome of each teen. Kirst-Ashman (2017:296) asserts that through self-help programmes such as Parents Anonymous, parents are able to learn from fellow parents and can discover how others are experiencing stress and coping. Parents are able to use Parents Anonymous for mutual support and to improve their communication skills. It is concerning, however, that such groups as Parents Anonymous are not yet available in South Africa. However, in South Africa there is an organization called Al-Anon, which offers mutual support groups for family members struggling with an alcohol-dependent family

member. It is important to note that mutual support group such as Al-Anon are unheard of or not always available in townships such as Soshanguve.

Need for support from the police

Participants expressed concern that although the police are, amongst other things, expected to deal with corruption and protect people against any criminal activities, this was not always the case. Instead, some of the police officers are involved in corrupt dealings with drug dealers. This, in turn, undermines the efforts by the law enforcement authorities in the fight against drug abuse. Participants indicated that they have lost hope in reporting people who are selling *nyaope* in their community to the police, because of resistance from some of the police officers who are involved in corrupt activities with the drug dealers. Furthermore, participants noted they were confident that the positive involvement of the police in a war against drug abuse would add significant value. The following narratives substantiate the participants' needs for police support:

“Police should stop taking bribes from drug dealers and start to protect us. We expect police to do something positive when we report the drug lords and users.”

“I wish police could be supportive. They must always be vigilant in Soshanguve and take steps against drug lords in our community. We need their help all the time.”

“Though some of the police try to help, most of them do not show any commitment to helping us.”

In this regard, Mathibela (2017:119) confirmed that some of the police officers are working with the drug lords in the communities, hence it becomes difficult to remove drugs from the communities. Bribes are given to the police officers and they turn a blind eye to the crimes committed by the drug lords for a price. In a related study, Waine (2015:101) found that some of the police officers encouraged parents to drop criminal cases that were opened against their children who were addicted to chemical substances.

DISCUSSION

The results of this empirical study indicate that *nyaope* abuse has negative effects not only on the user, but also on the family as a holistic system, especially the subsystem of mother/father. From the study it is clear that parents of the *nyaope* user bear the brunt of looking after or living with a *nyaope* user on daily basis. Based on the comments quoted, it is also clear that parents of the *nyaope* user experienced the situation as being personally very difficult and overwhelming to contend with. Parents felt that they do not have sufficient skills and capacity to deal with their *nyaope*-abusing children, hence a call for relief and support. From the profile of the participants, it is clear that abuse of *nyaope* cuts across all types of families.

The study also confirmed that there is not much done for the parents of *nyaope* users. Parents are ignored and left alone to sink or swim. Social workers seem not to be committed to developing programmes or projects directed at helping parents and families of *nyaope* users. This is aggravated by lack of commitment from the police to deal with the drug lords in the townships. Parents of *nyaope* users lack financial resources as the little they make is taken by the user and what they have is stolen by the user to feed the addiction. Police normally fail to deal with such cases because the drug user is normally released back into the streets to continue stealing to get the next fix. In other instances, parents enable the user by giving money to buy *nyaope* with the hope that the user will not steal from anyone (Mathibela, 2017:112). This compounds the continuous financial burden of parents. Consequently, parents could not keep up with their financial obligations.

From the comments made by the parents regarding the need to be supported by the police, the researchers concluded that parents are not satisfied with the type of support they get and that police need to improve their service delivery in order to gain the confidence of parents. Furthermore, it is evident that there is a disjuncture between parents' attempt to tackle the scourge of *nyaope* abuse and

some police corrupt activities with the drug dealers. Although parents reported no help and support from the police, they believe that collaborative efforts by the police and parents of the *nyaope* user will bear positive fruit in dealing with the user's dependence.

From the parents' point of view, formal support structures that are coordinated by social workers, such as the fellow parent companions, could assist them to cope with their children as the users. Many parents believe that such partnerships coordinated by social workers will be ethically driven to guarantee confidentiality. Additionally, parents believe that a programme for parents of *nyaope* users will go a long way in assisting them to effectively manage their children. Furthermore, it is essential to note that the findings of this study may not represent general views of the community, because this study was based only on the views of parents who could afford the services of a social worker in private practice.

CONCLUSIONS

The study shows that the dependence on *nyaope* is a cross-cutting phenomenon as not only the user is affected but the parents as well. Furthermore, the study shows that parents of *nyaope* users have a strong urge to assist their children to rid them of their dependence on the drug, but are ill-equipped and incapable of dealing with the behaviour of their children. The experience of dealing with the *nyaope* user is overwhelming and more difficult by the day for parents as they helplessly watch the lives of their children deteriorate steadily. To a parent, it is like watching your child die, and there is absolutely nothing you can do. The situation is compounded by lack of support and resources to empower parents to cope with the situation. Parents of *nyaope* users need assistance and support, and this means that professionals should intervene not only with the user but also extend support to parents as well. Equally, this study concludes that parents of *nyaope* users may benefit from fellow parent support. An empowerment programme for parents of *nyaope* users could pave a way towards helping parents understand the addiction and learn to cope from day to day. This study concludes that parents are under enormous financial pressure resulting from the lifestyle of the *nyaope* user.

RECOMMENDATIONS

The results of this empirical study confirm parents of *nyaope* users feel dejected and need any form of help they can get. It is therefore recommended that special programmes be developed by social workers and other social service professionals to empower and protect parents living with a *nyaope*-dependent child on a daily basis. Counselling needs to be readily available to parents to improve their coping capacities and to assist them to deal with the trauma they have experienced because of the users' involvement with *nyaope*. Since the study was limited only to the Soshanguve township, it is recommended that a broader study including different townships be conducted to compare emerging patterns in a range of townships. This study was based only on the views of parent who could afford the services of a social worker in private practice, and as such, it is recommended that similar study be undertaken to incorporate the views of all other parents at grassroots level within the different affected townships.

In line with Chapter 4 of the Prevention of and Treatment for Substance Abuse Act 2008, the recommendation is made that it should be mandatory for interventions to preserve and support parents and families by identifying and seeking solutions to the problem of their substance-dependent significant others. It is also recommended that policy-makers should look at legislation that can support and protect the family as a system against *nyaope* users, as well as other children who are dependent on other substances, drug lords and corrupt police officers. Furthermore, policy-makers should also pass legislation addressing how parents can be supported in dealing with *nyaope* users and other children who are dependent on other substances. In intensifying the fight to combat substance dependence, the recommendation is made for the South African Police Service (SAPS) to introduce a special agency or unit to deal specifically with *nyaope* and other substance-related crimes as well as corrupt police officers who are involved in drug-related activities with the drug lords. For future research, it is recommended that a broader study in different townships and in other social service organisations be conducted to gain a greater understanding of the phenomenon under study.

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