

Impact of Single Parenting on Adolescent Drug/Substance use: Mutare Psychotherapy Clinics, Zimbabwe.

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Abstract:

There has been an increase in the number of single parent (SP) homes due to various reasons amongst being divorce, death and separations of all kinds. SP therefore has become a phenomenon that warrants attention and investigations. Previous studies have found SP strongly correlated to adolescent drug/substance use. This study therefore, investigated the impact of single parenting on adolescent drug/substance use in the Mutare region of Zimbabwe amongst 3 psychotherapy clinics on the subjects that reported for support. This study has three objectives which are to assess if SP contributes to adolescent drug/substance use, assess if maternal SP and paternal SP have different impact to adolescent drug/substance use and finally to proffer recommendations to single parenthood. A qualitative research design was used for this study. Document analysis and structured questionnaires were employed as data collections methods. The study sample included a total of 30 subjects, 19 from single parent homes and 11 from double parent homes. Data was analyzed thematically and presented in narrative tabulation with hypothesis testing. The results of the findings were that SP does impact adolescent drug/substance use with more numbers of adolescents (n=19) from single families using drugs than those from both parent families (n=11) with a t-test value of $t = 1.07$ with a significance value of 0.05. More so, results indicate that adolescents from maternal SP (n=12) are more into drug use than those from paternal SP (n=7) with a $t = 6.71$ and a significance value of 0.05. The recommendations were for SP to create time for children and the government to formulate policies that empowers the SP for a stable and sustainable life.

Key Words: adolescent; single parenting; impact; drug/substance; use

Introduction

Research has shown that adolescents from single parent homes exhibits higher risk behaviors than those from 2 parent homes. Adolescence being a phase of development, emerges around puberty (from approximately age 10) and continues until the achievement of adult social and economic independence in which, pubertal transitions coincide with other significant transitions in the social context, such as family, peer, and school transitions that provide opportunities and expectations to establish relationships with teachers and peers and to reduce time spent under the direct supervision of parents or caregivers (Gelan, 2016). Adolescence is a critical period for the development of healthy behaviors and lifestyles.

According to Hemovich et al, 2019, "single parent is a person who lives with a child or children and who does not have a spouse or live-in partner. Reasons for becoming a single parent include divorce, break-up, and abandonment, death of the other parent, and childbirth by a single person or single-person adoption. A single parent family is a family with children that is headed by a single parent." Research is showing millions of families being run by one parent, mostly a woman. Single mothers therefore, in most cases, are left with the care of children and likely to have mental health issues, monetary burdens, live in a poorest community, and lack of social support which all affects the growth of an adolescent. According to Kroese 2021, "the percentage of single-parent families has been consistently high over the past few decades in western countries. In the European Union and the United States, respectively 15 and 27% of the children grow up in a single-parent family" Eurostat 2016 has asserted that, "one parent-child relationship has significant impact on the development or prevention of risky



adolescent health behaviors. Although there are many behaviors that might be considered risky, the Centers for Disease Control and Prevention (CDC) has identified six health risk behaviors as being particularly salient for the development of optimal health one of importance in this research being alcohol and drug use.”

Kroese et al, 2021, highlighted “many dimensions of the adolescent- one parent relationship that might influence adolescent health and developmental outcomes, as well as the development of risky health behaviors. Such components include parental warmth versus coldness, acceptance versus rejection, structure versus chaos, autonomy versus control, involvement versus detachment or neglect, strictness versus permissiveness, consistent versus inconsistent discipline, and connection versus distance. Specific parenting behaviors that have been found to influence adolescent health and risky health behaviors include type of discipline (consistent versus inconsistent), level of parental involvement, level of parental monitoring, type of communication and parenting style.” Living in a single parent family therefore, becomes strongly correlated with delinquency and drug use amongst adolescents in Africa. The situation is as well worldwide. The United Kingdom Office for National Statistics has reported that “children of single parents, after controlling for other variables like family income, are more likely to have problems, including being twice as likely to suffer from mental illness. Both British and American researchers show that children with no fathers are three times more likely to be unhappy, and are also more likely to engage in anti-social behavior, abuse substances and engage in juvenile delinquency.”

Studies by Kwok-Kei et al, 2015, suggest that “45% of older adolescents have tried an illegal drug, nearly 90% have tried alcohol and nearly 40% smoke. Fifteen studies were reviewed that examined relationships between parenting styles and adolescent use of drugs and/or alcohol.” Findings from several researches indicates that adolescents whose parents are divorced, separated or from a single parent had an increased risk for drinking, smoking, and/or using drugs. Conclusively, the family plays a vital role in shaping adolescent behaviors.

According to Baumrid et al, 2018, “the illicit use of drugs has been recognized to be a growing and burdensome public health issue particularly among young adults in high-income countries and recently in developing countries. The global deaths caused directly by the use of illicit drugs have increased by 60% from 105,000 deaths in the year 2000 to 168,000 deaths in 2018. Mental health disorder among youths aged 10–24, which accounts for about 2% of global deaths, has been linked to illicit drug use.” According to the United Nations Office on Drugs and Crime (UNODC), “Nigeria is one of the current highest consumers of cannabis and amphetamine in Africa, followed by countries like Zimbabwe.” Nevertheless, studies on recreation drug use in Nigeria and Zimbabwe are scarce and existing studies have focused on high school students and mostly on the use of alcohol. In Zimbabwe, researches by Muhle 2020 and Zirima 2012, focused more on single parenting and academic performance of children and household structure and academic performance of children, respectively. There is therefore no paucity of studies examining the influence of family structure on drug use among adolescents and young adults in Zimbabwe. This study therefore, fills this gap by examining the role of SP on drug/substance use among adolescents.

The present study investigated the associations between single parenting and drug/substance use among psychotherapy patient adolescents in Mutare. For instance, Ambert 2006 indicated that “since it appears that the rate of single parenthood will not decrease in the coming years, it is important to carefully consider the consequences of growing up in a single-parent family.” Research suggests, amongst others, that growing up in a single-parent family has negative effects on children’s emotional well-being, cognitive development, and school performance (e.g. Bradley & Corwyn, 2002; Chapple, 2013; De Lange et al., 2014; DiPrete & Eirich, 2006; McLanahan & Sandefur, 1994). Adlaf et al (1996) reported that single-parent adolescents were 103%, 53% and 66% more likely to become heavy smokers, heavy drinkers and illicit drug users, respectively.” Moreover, research suggests that children in different types of single-parent families show different types of poor adjustment demonstrating differences of children raised in single mother family and that of single father family. Thus, many studies demonstrate that growing up in a single-parent family entails risks that jeopardize adolescents’ future life chances, (Psychology, Crime and Law 2021). However, contradictory findings have also been reported where no relationship was found between adolescent drug uses in some single parenting families.

A number of theoretical models have been proposed to explain the relation between single-parent families and a range of youth outcomes, including crime. This research focused on social control theory that suggests that “adolescents participate in crime because they (1) lack strong affective attachments to their parents, (2) lack a development of a stake in conformity that increases commitment to conventional norms, (3) do not engage in conventional activities, and (4) do not develop a belief that conventional norms deserve respect” (Hirschi, 1969). Hirschi, 1969 originally argued that, “the strength of the attachment of the children to their parents is the most important factor in increasing or decreasing the chances of children showing criminal behavior. For instance, weaker attachment bonds to their parents might stimulate children to spend more time in criminogenic settings instead of with their parents.” Gottfredson & Hirschi 1990 shows “this could imply that children in single-parent families might show more delinquency because firstly, they possibly have a less strong attachment to one or both parents. Second, single-parent families are, by their very nature, social settings that hamper the establishment of conformity because one of the parents is absent and therefore unable to provide proper control, supervision, and socialization of the child. This deficit would result in a higher likelihood of engagement in criminal behavior. Strong levels of attachment are difficult to maintain when one of the parents is absent, the multiple demands single parents have to cope make it more difficult for them to spend time with their children, increasing the opportunities for the children to engage in negative behaviors, such as drug/substance use. Third, the economic strain model focuses on how the lack of resources may mediate the effects that single-parent families have on adolescent criminal and academic behavior (see Amato & Keith 1991) Fourth, the family crisis model focuses on the processes involved in family disruptions rather than on the family structure itself. This model suggests that family disruptions are important determining factors of the well-being of the children. For instance, experiencing a parental divorce or separation causes psychological distress, emotional resentment, and social tension in children. The emotional resentment of the children towards their parents may



decrease the level of family attachment and increase the children's criminal behavior. Children in two-parent families and children born to a single parent are expected to show less criminal behavior, because these children do not experience a family disruption crisis." Having argued and highlighted all this it is imperative to test if single parenting has an impact on adolescent drug use in Mutare.

Objectives of The Study

1. Investigate results of SP to two parenting impact to adolescent drug/substance use.
2. Comparing results of adolescents from maternal SP families and paternal SP families that are using substances.
- 3 To recommend preventative and interventions measures to drug use amongst adolescents from SP families.

Statement of The Problem

Children's behavior is manifested, learned, encouraged, and suppressed within the confines of the family. Parents' roles in the family environment have primarily been to prepare children for adulthood through rules and discipline. The influence of parenting during adolescence continues to affect behaviors into adulthood (Hoskins, 2014). Research has shown that adolescents from single-parent households are more prone to academic failure, delinquent behaviors, including drug and other substance use (Muhle 2020, Zirima 2012, Mudhovzi & Zirima 2011). According to Muhle 2020, "children are supposed to live with both biological parents, when this fails children do not get necessary guidance and sometimes these children become wayward by skipping or dropping out of school" and end up engaging in substance use. This research therefore is done to find the impact SP has on adolescent drug use and necessary measures to hamper this problem.

Research Questions

1. Does single parenting have an impact on adolescent drug use at Mutare Psychotherapy Clinics (MPC)?
2. Is there a relationship between type of single parenthood and adolescent drug use?
3. Is there a relationship between single parenting and adolescent drug use?

Hypothesis

Ho: There is no significant impact of single parenting on adolescent drug substance use at MPC.

Ho: There is no significant difference of mother headed SP to father headed SP to adolescent drug substance use at MPC.

Methodology

Design

A co-relational study design was used to examine the relationship between SP and adolescent drug use. The design reveals that all the participants in the study have information and experiences that bears upon the research questions that were being investigated and the design is important to obtain more good understanding.

Population

A population can be defined as all people or items which the characteristic cue wishes to understand (Lewin, 2005). Therefore, the target population of this study includes all drug substance clients that have been coming for psychological therapy at MPC which comprises of 3 clinics in the region. N=50 comprising of both clients from SPH and DPH.

Sample & Sampling Technique

A Stratified Random sampling was used to select participants from the population. A sample of 30 clients was selected from the population using the Krejcie & Morgan Table, 1970. This study employed purposive sampling in selecting respondents for interview and responding to the questionnaire. In this study, respondents were chosen based on their willingness and capacity to answer to the questionnaire especially for the single parented children.

Data Collection Instrument

Data collection instruments are the very important components of this research including the validity and reliability of the instruments developed in order to attain the aforementioned objectives.

1. Questionnaire

The study will utilize a self-administered questionnaire to collect data, prepared in English and translated into Shona, the mother language. Gathering information using questionnaires is time efficient and economical. In this research, the questionnaires comprised both of close ended and open ended questions to strengthen the validity of the data. These questions are quick for respondents to answer and are easy to analyze using statistical techniques, enabling comparisons to be made across groups (Lewin, 2005). Question types include: dichotomous questions (yes/no), Likert scale questionnaire items were 1=strongly disagree, 2= Disagree, 3= No opinion, 4= Agree, 5= strongly agree.

2. *Document Analysis* was used in selecting the sample from the client's biographical information.

Data Analysis

This study was designed by qualitative research methods using document review technique. This kind of study aim to depict the past or present as it exists (Karasar, 2008). Qualitative research offers a flexible working environment for researchers, giving flexibility and getting in-depth information (Yildirim and Şimşek, 2008). Descriptive tables, t-test hypothesis testing with mean, standard deviation and alpha were attained to analyze the data and to answer all basic research questions investigating the relationship between single parenting and adolescent's drug use.

Data Collection Procedures

In order to answer the basic questions raised, the self administered questionnaires will be prepared in English and Shona based on the literature review and some adaptations from prior researches. Informed consent was given to the participants



for the purpose of the study and each participant had a right to participate and withdraw from the study at any given time and no personal information of any subject was to be released. Each participant filled consent forms and permission granted to use documents analysis for the study.

Presentation of Results with Discussion

1. Document Analysis

A. Does SP have an impact on adolescent drug/substance use at MPC?

Age	Frequency SPA	Frequency DPA	Total	Percentage
15-19	6	3	9	30
20-25	8	4	12	40
25-30	5	4	9	30
TOTAL	19	11	30	100
Percentage	63.33	36.67		

Table1. Demographic characteristics of participants

Source: Document Analysis 2021

The analysis above shows participants of age ranging from 15-19 were 9 (30%), using drug/substances. Of the 9 participants, 6 were single parent children, way above half of the total age group. Similarly, 8 participants out of 12 in the 20-25 categories were from single parent homes. The same goes in the last range of 20-25 age groups which reveals 5 participants out of 9 being single parents children. The age group between 20- 25 has the highest percentage 40%, a targeted group for the study for expressing the challenges experienced in single parenting and to understand the effects of single parenting to their mental health. Overly, the demographic representations from the document analysis is indicative of the fact that single parent children 63.33% have high risks of mental health disorders and in this case substance abuse. This finding coincide with research by Bahati, 2016 who found that of the most users of drugs in Tanzania, the highest percentage of users are adolescents although falling in the 10-17 age groups. The findings therefore answers the main question of this research where single parenting definitely impact adolescent drug use and at MPC. Family cohesion is an important protective against deviant and problem behaviors amongst adolescents. This is evidenced by an only 36.67% of children from both parent families being affected by drug use. Cohesion is the degree of family connection between family members which in this case is disrupted by single parenthood. However, it must be noted that from the findings drug use amongst adolescents almost run parrrell in the age group 25-30years. This is a stage of young adulthood where most adolescents begins to question their behaviors and taking a step back to refocus on the future as adulthood responsibilities are ushered into their lives. In addition most of them would not seek for psychological help, hence their numbers few. Clearly put by Damm & Dustmann 2014, the family crisis model, which “focuses on the processes involved in family disruptions rather than on the family structure itself.” They suggest “this process of the family disruptions are important determining factors of the well-being of the children and deviant behaviour.” Hence, higher numbers of adolescent drug use fall in the early stages 18-25 years of life, where they experience the family disruption at a tender developmental stage rather than later stages 25-30 years of adolescent life. The document analyses

therefore has proved single parenting does impact adolescent drug substance use and amongst the MPC population.

B. Is there a relationship between type of single parenting and adolescent drug use at MPC?

	Father-headed Adolescents	Mother-headed Adolescent	TOTAL
	7	12	19
Percentage	36.84	63.16	100

Table2: Demographic characteristics of participants

Source: Document Analysis 2021

The table above does indicate a relationship between types of SP affecting adolescent drug use. Few adolescents from father headed families 7 are being affected by drug use in comparison to 12 adolescents from mother headed families using the same drugs. 63.16% of children from single mother family are engaging in drugs more than those from single father family 36.84%. These findings conclude that children from single mother families are at a higher risk of substance use than those from single father headed families. Maternal SP therefore is more closely relate to adolescent drug substance use more than paternal SP. Gaps between parents and children and as well an inadequate parental support increase the likelihood that youth will engage in deviant or externalizing deviant behaviors and one being substance use. However, research has also indicated if a single mother has the capacity to play both roles in the adolescent’s life and able to provide, the likelihood of an adolescent engaging into drugs becomes less. The chances are as slim as a child raised in a double parent home (Kwoi-Kei, 2018).

2. Questionnaire

A. Does single parenting impact adolescent drug use?

Question	Single-father headed	Single Mother-headed	Double parent Adolescent
I am from a single/double parent home	7	12	11
Parent-child interaction			
I interact well with my parents	2	1	6
My parents help me with my education	4	2	9
My parents supervise my school work	3	1	6
I spend more time with my parents when at home	3	2	7
Parental support/Involvement			
My parents are able to provide for my well-fare and education	5	2	10
I have a good environment at home for study	2	1	7



I do complete my tasks at home	3	2	9
I do follow a curfew at home	3	1	7
My parents monitor what I do	3	2	9
Peer Group involvement			
I enjoy spending time with my friends	6	9	11
My parents know who I associate with	5	3	5
I do show seriousness with my behavior when with friends	3	1	3
I enjoy discussing my future more with my friends	6	10	8

Table3: Participants' Responses

Source: Field data 2021

The above summary questionnaire clearly reveals how single parenting negatively impacts into adolescent drug use. From the above table it is clear less numbers are associated with children from single parent homes. These children experience less and poorer interaction with parents, less parental support and involvement in what they do and education, less monitoring, breaking of set boundaries at home, spending more time with friends that influence them in decision making and behavior modification. For instance, 4 out of 19 adolescents from single parents only show seriousness with their behaviors when with friends in comparison to 8 out of 11 from both parent homes. The majority does not follow given rules at home, only 4 out of 19 do abide the guiding rules whereas the case is different with adolescents from double parent homes where 7 out of 11 do follow the given rules. Of note, only 5 out of 19 adolescents from single parent families are closely monitored of parents a huge different with adolescents from both parents families 9 out of 11 being closely monitored. Of note, 16 adolescents from SP spend most time with friends as compared to 8 from intact families. These few discussed instances are highlighting how single parenting does impact adolescent drug use. Lacking adequate parental support, may emotionally deprive children, they see a need to become self-sufficient at a tender age, settling for friends and emotional loneliness in their relationships which secures a fertile ground for addictions and other deviant behaviors. Baumrid, 2018 supported by highlighting “single parents may not have sufficient resources for extracurricular activities and other opportunities that help children to focus on positive activities instead of criminal behaviors. Furthermore, reduced income may force single-parent families to move to lower-income neighborhoods, exposing the children to potentially contagious higher levels of peer delinquency than in higher income neighborhoods.” A close research was done by Orchongor 2014, in South Africa where he found lack of child parent interaction, parental support and peer influence amongst adolescents from single parent homes led to all deviant behaviors including drug use. Thus, SP does negatively impact adolescents into drug/substance use.

B. Is there a relationship between types of SP and adolescent

drug use?

From the above Table 3 it is clear children from single mother headed families are more into drug substance use than those from single father families. Research has shown that a father figure in the home represents authority and obedience to set rules the children have to follow. 1 child out of 12 from single mother families follow set rules compared to 3 out of 7 from single father families. 1 out of 12 from single mother is serious with how he behaves with friends compared to 3 from single father families. 2 from single mother families are monitored in what they do and get help with homework and tasks compared to 5 out of 7 from single father families monitored and being provided for. This supports how lack of resources and no education on single mothers fails them to support their children in every way. Idowu A, 2020 study in Nigeria has shown that “the presence of a father is protective against drug use. The presence of fathers is important for adolescents and particularly boys.” Kwoi-kei, 2018 found similar results in Hong Kong amongst adolescents drug users. The research used a questionnaire on family structure and found “strong association of drug use with paternal families than maternal. The finding concluded the associations are due to poorer communications in the maternal families, slackened boundaries, economic challenges of the mother, lack of education and unemployment and lack of communication with the absent father amongst other variables.” Hence the number of adolescents using drugs is few from father headed families. Relative to intact families, children of single-parent families generally are more likely to be resource deprived especially in female-headed households and receive less intense and less consistent monitoring, all of which have been associated with adolescent drug use (Amato and Keith, 1991). There is therefore, a relationship between types of single parent to adolescent drug use with results showing that maternal single parent homes are affected more with drug substance use than paternal.

Hypothesis Testing

The following null hypothesis will be tested.

1. *H₀*: There is no significant impact of single parenting on adolescent drug substance use at MPC.
2. *H₀*: There is no significant difference of mother headed SP to father headed SP to adolescent drug substance use at MPC.

Variable	N	Mean	SD	t-cal	t-crit	Df
SP Family	19	4.47	4.66	1.07	+/- 2.101	18
DP Family	11	8.82				

1. Table 4: t-test difference of drug substance use amongst adolescents from SPF and DPF.

Alpha: 0.05

The above statistical table illustrates that SP does impact adolescent drug substance use. A t-cal of 1.07 was obtained from a critical value of +/-2.101. The results fall in the rejection region. This implies we reject the *H₀* and accept the *H₁* which states there is a significant impact of SP to adolescent drug substance use at MPC. More so, the mean differences of adolescents from each home category support the *H₁*. The mean score for DPF is 8.82 higher than that from SPF which is 4.47. Higher mean scores



indicate a less likelihood of adolescents in that group being affected by drug use. The results augurs well with research by Usarkli 2018, Baumrid 2018, Kroese 2021 all points to single parenting impacting adolescent drug use. Kroese, 2021, findings of many researches done showed that 27 studies reported a positive relation between single-parent families and crime, 4 showed no statistically significant relation, 0 studies showed a negative relation.” The argument being children from single families are twice likely to suffer from mental illnesses that lead to deviant behaviors. Idowu 2020, further argued by saying, “living in one's parent household may influence the amount of time spent with the child and may also influence closeness to the child that may continue even when the youth leaves the home. Individuals who did not live with both their parents due to deaths or divorce may have missed out on some of the critical parental lessons capable of shaping their later life behaviors.” Furthermore the economic strain model focuses on how the lack of resources may mediate the effects that single-parent families have on adolescent criminal behavior (see Amato 2000). Thus having argued, single parenting therefore does impact adolescent drug substance use. However there are instances where Kroese, 2021, found “single-parent families may be just as effective in producing positive child outcomes as two-parent families as long as strong family attachments are maintained”

Variable	N	Mean	SD	t-cal	t-crit	Df
Mother-headed SP	12	3.08	3.03	6.71	+/- 2.201	11
Father-headed SP	7	6.86	-4.79			

2. Table 5: t-test difference of types of single parenting on adolescent drug substance use.

Alpha: 0.05

The results of the table reveals a t-cal value of 6.71 and a t-crit value of +/-2.201, thus the t-cal values are falling in the rejection region. We therefore reject the H_0 and accept the H_1 which states that there is a significant difference of mother-headed SP to father-headed SP to drug substance use amongst the adolescents at MPC. Thus adolescents from single mother parenting are affected more with drugs and substances than their counterparts. In addition, father-headed adolescents have a higher mean score value of 6.86 compared to 3.08 from mother headed SP. Conclusively; this implies a significant difference of types of SP to adolescents drug substance use. Children from maternal SP are more prone to use substances than those from paternal SP. A similar research was done in Hong Kong by Kwok-Kei et al 2018. “A total of 32,961 Hong Kong students participated in the Youth Smoking Survey in 2003-4. An anonymous questionnaire was used to obtain information about family structure, daily duration of parent-child conversation, smoking, alcohol drinking and drug use. Non-intact families were associated with substance use among Hong Kong Chinese adolescents. More-so, apparently stronger associations with substance use in paternal than maternal families were probably mediated by the poorer communication with the father.” Conclusively, and in the revised version of social control theory, Gottfredson and Hirschi 1990 suggest that “strong levels of attachment are difficult to maintain when one of the parents is absent due to multiple demands single mother parents have to cope which make it more difficult for them to spend time

with their children, increasing the opportunities for the children to engage in negative behaviors, such as drug/substance use.” There is therefore a relationship between types of single parenting and adolescent drug use with adolescents from single mother families being affected the most.

Study Limitations

The study only looked at the variable single parenting to adolescent drug use. However it may be interesting to look at the genetic influences, environmental factors, the whole ecological system in understanding adolescent drug use and that it is minimized. In addition, the small sample size and geographical area of the study challenges the research generalization to the country.

Conclusion

Single parenting is an increasing phenomenon in today's world due to increased rates of divorce, separations, deaths and decisions to be single by parents. This study has shed light that single parenting impact adolescent drug use. The findings from the document analysis and the questionnaire administered with statistical results, related literature and theories all supports that single parenting leads adolescent to engage in drug use with high numbers of adolescents coming from single mother families than single father families. Few instances have been found in researches done where single parenting yielding positivity to adolescents as in an intact family.

Recommendations

Basing on the research done the following recommendations are given:

1. Single parents should set up a time to spend with their children at home communicating to understand feelings and challenges being facing.
2. The separated parent should support the children and as well make time for them.
3. The Government should set plans, policies and rules to support single parent families and empower them economically in order to improve life.

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