Parental Conflict as Predictor of Drug Abuse and PTSD among Secondary School Students in Rivers State

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ABSTRACT: Parental conflict is a scourge that has ravaged society in so many forms. Many homes experience parental conflict at varying degrees and intervals. In some cases, partners have been burned with iron or hot metals, experienced fractured bones or skulls, broken teeth, bruises, sprains, abrasions, loss of consciousness, and, in some severe cases, a form of deformity or the ultimate: death. The children who see these nasty occurrences as well may have trouble sleeping because they keep having memories of these events that have occurred or are occurring. Children who live in homes where violent forms of parental conflict take place go on to become abusers of drugs and experience PTSD due to the recurring nature of the violence from childhood into adulthood. The study investigated parental conflict as a predictor of drug abuse and Post Traumatic Stress Disorder (PTSD) among secondary school students in Rivers State. A sample of 800 secondary students in Rivers State participated in the study. The study measured Parental Conflict using the Parental Conflict Scale (PCS), drug abuse using the Drug Abuse Screening Test (DAST-10), and PTSD using the PTSD Checklist (PCL-5). The data was analysed using linear and multiple regression. The outcomes of the study revealed that parental conflict significantly predicts drug abuse and PTSD. It is recommended that parents be taught about the impact their conflicts have on their children and about better conflict resolution methods. Also, parents who have anger problems should be taught anger management. Adolescents who have been identified as being dependent on substances and having symptoms of PTSD need to be retrained and restored.

KEYWORDS: drug abuse, PTSD, Parental conflict, Predict, Students.

INTRODUCTION

Parental conflict is seen as friction that results in a reduction in the association between the parents. These results may manifest in the use of abusive language, name-calling, labelling, and, in other cases, physical violence. When children identify a dispute that is taking place within their home, they identify the features of this dispute and the impact that this conflict may have on them. If they conclude that this dispute will impact them adversely, they try to determine the reason the conflict began in the first place and may eventually seek to apportion blame to the parties involved (Barthassat, 2014).

Kusekwa (2017) describes parental conflict as a vexation that is expressed openly, quarrelsome acts, and disagreements that take place between a husband and wife. When a couple is upset with each other and this displeasure is seen by other parties within the home, it is parental conflict. Also, when either party—husband or wife—commits contentious acts against the other, like shoving, slapping, threatening, or insulting, this is a case of parental conflict. Disruptions like these are often visible to other people living in that environment. Bhagat (2016) has described parents involved in conflict as having exchanges that are fraught with mutual negativity and criticism, threats, and intense bouts of rage. In some situations, it may not be outright fighting but may be displayed in the way they respond to questions or instructions given. When questions are asked and the responses are curt, full of insults and sarcasm, the relationship is said to be conflicted. Also, when the husband or wife is accustomed to responding to situations with bouts of rage and is highly critical of their spouse—nothing their spouses do is ever good or worthy enough; they never appreciate what is done for them—this is a clear indication of parental conflict.

In many cases, parental conflict is usually high in couples that experience domestic family cruelty; however, conflict may occur without resulting in a series of abusive behaviours where one partner tries to control the other or exercise their powers over the other (Australia’s National Research Organisation for Women’s Safety Limited (ANROWS, 2017). In some homes, one partner may develop feelings of suspicion or demand to know every single detail about their spouse. They insist on knowing what they are...
doing and who they are with at every point in time. Some even go to the extent of putting trackers on their spouse’s phones, cars, and other communication devices. These are things that bring up discord within the family.

Similarly, Parsa et al. (2014) postulate that parental disputes will have an impact on the behavioural patterns of an adolescent either directly or indirectly. This can happen directly as the children begin to model the detrimental or positive disagreement patterns that they see their parents display at home and their responses to stress or stressful situations. Indirectly, the adolescents then imbibe these friction resolution techniques, which become the norm for them. These models are then used in their connections with their peers. Dispute-ridden home leads to the legitimization of brutality—a situation in which all that live within that environment come to know and accept cruel conduct as a standard of living. Therefore, this becomes a commonly accepted method of communication and interaction among them. These children often face similar challenges in their relationships or marriages in the future. These individuals do not see anything wrong with a partner with whom they are in a relationship beating them up or verbally mistreating them. In some cases, they are not even the victims but the ones involved in the wrongdoing because they don’t know how to do better.

Martin et al. (2018) observed that many times parents have disagreements on many issues, from finances—how to assign the scarce financial resources within the home—to child rearing methods. Many parents constantly engage in bickering over which correctional method should be used as situations arise within the home. Other times, it could be about the level of children’s participation in school and non-curricular activities as well as guidelines for behaviour. Daubs (2013) notes that when parental disagreement occurs frequently, in an intense manner, possibly involving acts of antagonism, and is protracted, children will have a more enormous response to it than if the conflict occurs less frequently and arguments are reduced. By imitating the parents’ conflict resolution methods, the children may learn that the best method of abating a disagreement is by exhibiting violent behaviour and acting out in destructive ways. Parental conflict poses a triple impact on children. Behaviourally or emotionally, it affects cognitive functioning and poses challenges in the long run. Children who witness their parents in pugnacious disputes have been known to be misanthropic, have low self-esteem, anxiety, depression, anger, and exhibit erratic conduct. In other cases, they are fearful and manifest characteristics that inhibit them. The way they interact with their peers and solve problems has also been affected (Mbuti, 2017). According to the United Nations Office on Drugs and Crime (UNODC, 2012), alcohol is the most abused substance by adolescents. This is because alcohol is a drug that is easily available to young people. This is closely followed by cannabis, combination concoctions, and prescription drugs. Report by the United Nations Office of Drugs and Crime (UNODC, 2018), an average of 246 million people had used a substance in the last 12 months. Also, the most commonly used substance in the world is cannabis. In Nigeria, the most commonly abused drugs are alcohol, marijuana, tobacco, opiates like tramadol and codeine, cocaine and crystal methamphetamine, inhalants, and solvent (glue). This is because of the accessibility of the substances to the users.

The researcher has observed that some mixtures are being created as substances out of common foods and even human waste. An example of this is a mixture of TomTom, a candy whose major ingredient is menthol, and LaCasera, which is an apple-flavoured soda drink. Young people would typically put some TomTom bars in the LaCasera drink and allow them to dissolve to form a syrup. This mixture is popularly referred to as "Laca Tom Tom." The effect of this is similar to taking dopamine-inducing illicit substances, and the users report experiencing extra bursts of zest. It is also a cheaper substance than cocaine and other commonly abused substances. In addition, there has been a widespread trend of people, both male and female, going to sewage points within their neighbourhood and inhaling dangerous gases that are emitted therein. This produces an intoxicating effect on those who inhale it. Other inhalants that are used are fuel and otherwise harmful gases.

Methamphetamine, known as mkpuru mmiri in Igbo or ice in colloquial lexicon, is a drug that gives a sense of exhilaration to those who ingest it. This substance alters the brain cells immediately, forcing them to produce and release dopamine into the blood stream. It helps its users regulate their mood and become alert and active. It causes the pupils of those who use it to dilate and it makes those who use the drug have a high sexual drive. It is a drug that is most commonly used in the South-Eastern part of Nigeria. According to Kulak and Griswold (2019), when substances are used by young people, it puts them at risk for high mortality, fighting, suspension and expulsion from school, low performance in school, brain damage, organ damage or breakdown, somatic illnesses and affective disorders like depression, engaging in criminal behaviour, and engaging in impulsive sexual activity.

Post-traumatic stress disorder (PTSD) is a disorder that develops in an individual who has gone through extremely startling, hazardous, and frightful occurrences. This individual may go through a variety of responses to the experience that they have had.
This is often regarded as normal, but when it becomes prolonged to the point where it affects the individual in a very negative way, it is disturbing. Individuals develop PTSD as a reaction to challenges of life that they must have been exposed to earlier in their lives, which could be abuse of any kind, accidents, an attack (robbery or other forms of brutality), sexual defilement, especially occurring in childhood, or witnessing the death of a loved one. Shortly after the life-changing incident, the person may exhibit behaviours that show that they have become disconnected from the incident that they experienced (Lange et al., 2022).

PTSD is a mental condition that develops as a result of a person’s subjection to tragic, painful, and terrible situations like war, devastating natural disasters, and death. It can result after exposure to a single event or a prolonged series of events, depending on the individual involved (Bisson, Cosgrove, Catrin, & Roberts, 2015). According to DSM-5 (APA, 2013), for a person to be said to have PTSD, they must have exhibited the symptoms for at least thirty days, and these symptoms must have distorted the individual's daily activities like school, work, or interactions with others within that time frame. Some of the symptoms of PTSD include: flashbacks, especially of the events that led to the trauma; unsettling thoughts; sweaty palms; an erratic heartbeat; frequently occurring dreams about the incident; negative thoughts about oneself; and an inability to control one’s mood or behaviour. In some cases, those who experience PTSD often present with other conditions like depression and anxiety disorders. Some may decide to actively avoid places and things that are associated with the event or incident—things that can trigger a recollection of the events. Others may lose their zest for life and stop doing things that they previously found interesting. These symptoms must be directly associated with the event that caused the distress (Davidson et al., 2014). Of particular note is that not every individual who has gone through a traumatic experience will develop PTSD. It may apply to some, but not all. PTSD can manifest several months to several years after the incident has occurred. However, a diagnosis can only be made one month after the incident has occurred (Haj-Yihai et al., 2019).

When a person has PTSD, it makes them extremely vigilant about sounds, sights, and their environment. They may find it difficult to fall and remain asleep for extended periods of time. It can make them irritable and cranky. The recurring nature of parental conflict as well as the violence associated with it can make the children who witness it have recollections that trouble them and try to run away from these realities by trying substances. It is against this backdrop that this study was initiated.

**Aim and Objectives of the Study**

The aim of this study is to investigate parental conflict as a predictor of drug abuse and PTSD among secondary school students in Rivers State. Specifically, the study intends to:

1. Investigate to what extent parental conflict jointly predicts drug abuse and PTSD among secondary school students in Rivers State.
2. Find out to what extent parental conflict predicts drug abuse among secondary school students in Rivers State.
3. Identify to what extent parental conflict predicts PTSD among secondary school students in Rivers State.

**Research Questions**

The following research questions guided the study:

1. To what extent does parental conflict jointly predict drug abuse and PTSD among secondary school students in Rivers State?
2. To what extent does parental conflict predict drug abuse among secondary school students in Rivers State?
3. To what extent does parental conflict predict PTSD among secondary school students in Rivers State?[H]

**Hypotheses**

The following null hypotheses were tested at the 0.05 level of significance and were formulated to guide this study:

1. Parental conflict does not significantly predict drug abuse and PTSD among secondary school students in Rivers State.
2. Parental conflict does not significantly predict drug abuse among secondary school students in Rivers State.
3. Parental conflict does not significantly predict PTSD among secondary school students in Rivers State.

**METHODS**

This study is a correlational study that is used to determine and establish possible relationships between variables in this study, which are parental conflict, drug abuse, and PTSD. This study was conducted in Rivers State, in the South-South geopolitical region of Nigeria.
area of Nigeria. A sample size of 800 secondary school students was used for this study. The participants in this study were both male and female, from junior high to Senior secondary. The sample size was derived through a multi-stage process. The Parental Conflict Scale (PCS) was used to measure parental conflict. It is a 48-item self-report measure that seeks to measure constructs such as conflict resolution methods (constructive or destructive), the frequency of the conflict's transfer of aggression, and self-blame. The PCL-5 was used to measure PTSD in the students, while the Drug Abuse Screening Test (DAST-10) was adapted and used to measure drug abuse in the students. The instrument was administered directly with the assistance of the class teachers and research assistants. A total of 800 questionnaires were distributed to the students. Of the 800 questionnaires that were distributed to the secondary school students, 783 copies were retrieved after they were completed. Simple linear regression and multiple regression were used to analyse the data generated from the research instruments.

RESULTS

Results of the study are hereby presented tables to show the findings:

**Hypothesis one:** Parental conflict does not significantly predict drug abuse and PTSD among secondary school students in Rivers State.

**Table 1:** summary of multiple Regression Analysis on the extent to which parental conflict predicts drug abuse and PTSD among secondary school students in Rivers State

<table>
<thead>
<tr>
<th>R</th>
<th>R²</th>
<th>Adj. R²</th>
<th>Std. Error</th>
<th>Unstandardised Error</th>
</tr>
</thead>
<tbody>
<tr>
<td>0.933</td>
<td>0.871</td>
<td>0.870</td>
<td>2.656</td>
<td>1.001</td>
</tr>
</tbody>
</table>

Model

ANOVA

1 Regression 7033.615 1 7033.615 13.119 0.005 0.00b rejected

Residual 5497.241 782 170.571

Total 42530.856 783

From the analysis of variance in Table 1, R = 0.933 and R² = 0.871. Adjusted R² = 0.870, while the unstandardized B = 1.001. From the regression square (R²) value, it is evident that parental conflict explains only about 0.87% of the variance of drug abuse and PTSD among senior secondary school students in Rivers State. The unstandardized B value also indicates that for every one unit increase or decrease in values for parental conflict, there is a corresponding 1.001 unit increase or decrease in drug abuse and PTSD among the students. The analysis of variance associated with the regression also reveals the sum of squares for the regression and residual to be 7033.615 and 5497.241, respectively. The mean squares were 9258.404 and 70.571, respectively. F = 13.119, and the sig value = 0.00. Since the calculated F (p = 0.000.05) is less than 0.05 alpha, the null hypothesis is rejected. Hence, the predicting variable: parental conflict significantly predicts drug abuse and PTSD.

**Hypothesis Two:** Parental conflict does not significantly predict drug abuse among secondary school students in Rivers State.

**Table 2:** summary of linear regression analysis on the extent to which parental conflict predicts drug abuse among secondary school students in Rivers State

<table>
<thead>
<tr>
<th>R</th>
<th>R²</th>
<th>Adj. R²</th>
<th>Std. Error</th>
<th>Unstandardised Error</th>
</tr>
</thead>
<tbody>
<tr>
<td>0.035</td>
<td>0.01</td>
<td>-0.01</td>
<td>7.326</td>
<td>0.251</td>
</tr>
</tbody>
</table>

Model

ANOVA

1 Regression 123.310 1 123.310 8.810 0.005 0.00b rejected

Residual 42407.546 782 256.873

Total 42530.856 783

From the analysis of variance in Table 2, R = 0.035 and R² = 0.01. Adjusted R² = -0.01, while the unstandardized B = 0.053. From the regression square (R²) value, it is evident that parental conflict explains only about 0.1% of the variance of drug abuse among secondary school students in Rivers State.
abuse among senior secondary school students in Rivers State. The unstandardized B value also indicates that for every one unit increase or decrease in values for parental conflict, there is a corresponding 0.251 unit increase or decrease in drug abuse among the students. The analysis of variance associated with the regression also reveals the sum of squares for the regression and residual to be 123.310 and 42407.546, respectively. The mean squares were 123.310 and 256.873, respectively. F = 8.810, and the sig value = 0.00. Since the calculated F (p = 0.000.05) is less than 0.05 alpha, the null hypothesis is rejected. Hence, the predicting variable, parental conflict, significantly predicts drug abuse.

**Hypothesis Three:** Parental conflict does not significantly predict PTSD among secondary school students in Rivers State.

**Table 3:** Summary of analysis of linear regression on the extent to which parental conflict predicts PTSD among secondary school students in Rivers State

<table>
<thead>
<tr>
<th>R</th>
<th>R²</th>
<th>Adj. R²</th>
<th>Std. Error</th>
<th>Unstandardised Error</th>
</tr>
</thead>
<tbody>
<tr>
<td>0.113</td>
<td>0.013</td>
<td>0.010</td>
<td>15.935</td>
<td>0.172</td>
</tr>
<tr>
<td>Model</td>
<td>Sum of sq. df</td>
<td>Mean sq. f</td>
<td>α</td>
<td>sig</td>
</tr>
<tr>
<td>ANOVA</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>Regression</td>
<td>1144.745</td>
<td>1</td>
<td>1144.745</td>
</tr>
<tr>
<td>Residual</td>
<td>41386.111</td>
<td>782</td>
<td>253.938</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>42530.856</td>
<td>783</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

From the analysis of variance in Table 4.3, R = 0.113 and R² = 0.013. Adjusted R² = -0.010, while the unstandardized B = 0.172. From the regression square (R2) value, it is evident that parental conflict explains only about 0.01% of the variance of PTSD among senior secondary school students in Rivers State. The unstandardized B value also indicates that for every one unit increase or decrease in values for parental conflict, there is a corresponding 0.172 increase or decrease in PTSD among the students. The analysis of variance associated with the regression also reveals the sum of squares for the regression and residual to be 1144.745 and 41386.111, respectively. The mean squares were 1144.745 and 253.938, respectively. F = 4.520, and the sig value is 0.00. Since the calculated F (p = 0.000.05) is less than 0.05 alpha, the null hypothesis is rejected. Hence, the predicting variable: parental conflict significantly predicts PTSD.

**DISCUSSION**

The results of the analysis revealed that parental conflict significantly predicts drug abuse. Based on the study, the respondents revealed that of the 783 responses collected, about 569 (72.66%) of them were abusing drugs actively. The substances that they were most dependent on were marijuana and mixtures. The respondents were not keen on revealing the composition of the mixtures that they took. They could be turning to substances to help them forget their present predicament, feel numb, and feel good. In extreme situations where the adolescents have attempted to use substances as an escape without success, after the effect of the substance wears off, they are brought back to reality.

The adolescents that indicated positive for PTSD had as the most prevalent symptom: recollection of the incident that happened (n = 671, 85.69%), increased heartbeat and anxiety while these thoughts take over their mind (n = 506, 64.62%), and withdrawing from people and activities of interest (n = 420, 53.63%). These outcomes buttress the fact that parental conflict has more far-reaching impacts on the children who live in such homes than can be imagined. Most times, attention is placed on the subjects of the conflict alone—father and mother—in providing resolution, not taking into consideration the children who have to deal with the after-effects of the conflicts.

**RECOMMENDATIONS**

Based on the findings of the study, the following recommendations are made:

1. The children of high-conflict homes especially need to be given the requisite attention by way of counselling and therapy in order to teach them the correct methods of conflict instead of what they have observed being modelled by their parents. They must also be tested and reclaimed through psychotherapy from the substances and their effects that they have been involved in.
2. That Government at all levels should undertake programmes where parents will be taught how destructive parental conflict patterns affect their children and contribute to incidents of drug abuse and PTSD among teenagers.

3. Parents should be taught by volunteers from the Ministry of Education and religious communities how to effectively manage conflict among themselves so that they are able to model good behaviour for the children to copy, which will lead to a reduction in the cases of drug abuse in the communities.

REFERENCES