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IPA, exploring drug abuse to cope with stress during  
youth and the effects of that in later life.

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## Declaration

DECLARATION: I hereby declare that this dissertation is the result of my own independent investigation under the supervision of my tutor. The various sources to which I am indebted are clearly indicated. This dissertation has not been accepted in substance for any other degree and is not being submitted concurrently for any other degree.

## Acknowledgements

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## Abstract

Adolescents face many different issues and problems during their adolescents and young adulthood such as academic and social demands with stress becoming more prevalent amongst adolescents and can lead to Issues such as; depression, fatigue, lack of appetite and anxiety. Adolescents therefore develop different coping strategies, these strategies can be maladaptive, as some adolescents turn to substance abuse in order to deal with stress. This can lead to problems such as HIV, delinquency and unwanted pregnancies. This paper proposed research to explore issues that result from substance abuse during adolescence, that occur later on in life. The study conducted semi-structured interviews on four participants. These interviews were analysed using the qualitative method of Interpretative phenomenological analysis (IPA). The results found that four superordinate themes were identified; stress, substance abuse, family and relationships and recovery. These themes were prevalent in all in the lives of the participants and were either the cause of or the repercussions of substance abuse during adolescents. Overall, this study has found similar findings that stressors at an early age can cause adolescents to turn to substance abuse to cope with the stress.

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## Introduction

Young people face many different issues and problems during their adolescents and young adulthood such as academic and social demands, as well as major life events such as divorce and the death of a family member (Leonard et al. 2015). For young people, these issues and life events can cause stress. This is defined as an external influence that can cause disruptions that threaten the physical, mental and emotional well-being of the individual (Franks, 1994; Dow, 2014; Braun et al., 2016). Which can lead to mental health problems such as posttraumatic stress disorder, depression and aggressive behaviour (Gerson and Rappaport, 2013). For young people, various aspects of their lives can be deemed as stressors such as family life and their social status among peers. Within in the family set up stressors can occur for various different reasons such as socioeconomic status, conflicts between family members and death. Academic workload can also cause stress amongst adolescents, with academic stress such as high workloads and tight deadlines. Furthermore, social stress also has an effect on adolescents. Developing relationships and daily social stressors such as interacting with peers and being in school during the week can cause stress for young people. With those who are lonelier showing increased social stress (Van Roekel, Ha, Verhagen, Kuntsche, Scholte, Engels, 2015). These stressors can lead to increased heart rate, blood pressure and lower life satisfaction and health problems in later life (Chappo, Suldo, Ogg, 2014, Zou et al. 2017)

## Prevalence of stress and statistics

Stress has become more prevalent amongst adolescents with studies worldwide showing that adolescents suffer from different forms of stress. The American Psychological Association (APA, 2014) stated that over 1018 reported high levels of stress with academic stressors such

as good grades and college possibilities being the cause alongside family and financial stressors. This can also be seen in studies across India, with one study showing that 55% of boys suffer from stress. As well as other studies finding that 89.7% of female students and 86.4% of male students suffer from academic stress. (Roy, Kamath, Kamath, Alex & Hedge, 2015; Watode, Kishore & Kohli, 2015) A study from Norway found girls scored higher on stress related to peer pressure, home life and conflict. However, boys stress related to school performance as well as stress from peer pressure (Moksnes, Espnes & Haugan, 2014). These studies found the stressors caused depression, fatigue and lack of appetite and anxiety amongst adolescent.

### Coping with stress

Stress has been shown to affect adolescents' mental health and overall well-being. This is due to an inability to cope with these stressors. Coping has been defined as changing behaviour to manage external or internal issues that go beyond the resources of an individual (Lazarus and Folkman, 1984). Research suggests that adolescents' cope with stress differently, for example tackling their problems productively with the support of friends and family (Frydenberg et al., 2004). Alternatively, some adolescents use non-productive or maladaptive coping strategies such as; ignoring the problem, or by blaming themselves for the stressors that they have (Frydenberg et al. 2004). Frydenberg and Lewis (2009) argue that coping strategies can depend on the stressor and by understanding how adolescents experience and react to the stressors around them can determine how effectiveness of these coping strategies (Zimmer-Gembeck and Skinner, 2008).

## Using Drugs to cope with stress

Adolescents therefore develop different coping strategies, some of and can, in fact, be more detrimental than the stress itself. This can be seen as some adolescents turn to drugs in order to ease these stressors. The self-medication model of addiction (West, 2005) suggests that the individuals are predisposed to addiction if they suffer from unpleasant states. This theory further suggests that substances are chosen not based on random choice but to cope with the particular issue or problem. West (2005) continues by stating that this maladaptive coping strategy can cause further stress when the individual is withdrawing from substances. West (2005) proposes that short-term situational issues such as chronic and environmental stressors as well as long-term trait problems that can be alleviated through self-medicating with addictive drugs.

These maladaptive coping strategies can be seen in Leonard et al. (2015) study that found that students used drugs and alcohol to cope with academic demands. Further evidence found that young people that to deal with larger stressors such as posttraumatic stressors i.e. death of a loved one or being homeless lead to increased misuse of drugs in order to cope with these stressors. (Ayerst, 1999; Peters et al., 2010). These studies show how adolescents turn to drugs as a way of coping stress, however, doesn't suggest why adolescents turn to substance abuse to cope with stress.

However, the expectancy theory (West, 2005) suggests that there is an expectancy that the drugs will numb the negative symptoms of life stressors and this will therefore outweigh the cost of taking drugs. Goldman and Darkes (2004) State that this expectancy can become part of a memory structure and will guide an individual's behaviour and become a moderator for future stress. This would, therefore, suggest that by relieving stress substance abuse, that this

would moderate adolescents' behaviour and provide them with an expectancy that drugs will relieve stress. Research suggests that those who used substance substances to cope with stress or avoid emotions express higher levels of positive expectancies, furthermore studies found that those who suffered from anxiety also believed that substances would provide more positive experiences (Cooper, Russel & George, 1988; Borges, Lejuez & Fenton, 2018).

### Prevalence of drug abuse in adolescence

Prevalence of the misuse of drugs has varied over time and by country with statistics stating that the use of drugs amongst adolescents had fluctuated varying from 66% in 1981, to 47% in 2008 and 49% in 2012 within the United States (Johnston, 2010; Johnston, O'Malley, Bachman and Schulenberg, 2012). Further studies have also found variation in prevalence amongst cultures in the United States finding that adolescent Hispanics are more prevalent in the misuse of illicit drugs in comparison to non-Hispanic white and African American counterparts (Prado, Szapocznik, Maldonado-Molina, Schwartz, Pantin, 2008). A study focusing on cannabis use in adolescents also found that in a sample of 5315 over one-fifth of the sample were occasional or regular cannabis users, the study also found that those that used cannabis also higher prevalence use for other substances such as tobacco and alcohol consumption (Taylor, Collin, Munafo, Macleod, Hickman, Heron, 2018). A further study also found a prevalence of drug abuse in Egypt with adolescents showing a misuse of the drug tramadol and also showing a prevalence of cannabis and alcohol use. The studies not only show that there is a prevalence of drug abuse within adolescent but also shows that drug abuse is also amongst different cultures and countries. These studies also coincide with the previous arguments as studies have shown a prevalence of both stress rates and drug misuse and theories linking the two together.

## The effects of taking drugs

However not only focusing on the reasons as to why youth turn to drugs such as chronic stress and major life events. It is also important to look at the effects that taking drugs has on young people. Studies have found that the impact of substance abuse can have a detrimental mental impact on a young person's physical and mental health as well as, their social life and prospects for the future (Shubert et al., 2011; Merkinaite et al., 2007; Klein et al. 2010; Kandel et al. 1986).

As previously mentioned drugs can have a detrimental effect on the physical and psychological well-being of an individual. Schubart et al. (2011) found that young people who took cannabis were likely to develop subclinical psychotic symptoms as well as negative and depressive symptoms. Furthermore, other studies have found that young people make up 45% of HIV cases worldwide and in Europe and Asia, 25% of injecting drug users are under the age of 20. These studies also found that those who participated in drug abuse such as ecstasy were also more likely to increase their risk of HIV in conjunction with low self-esteem (Merkinaite et al., 2007, Klein et al. 2010).

Studies have also shown that participating in drug abuse can also have detrimental ramifications that can lead into young adulthood. Kandel et al. (1986) found that young people who continued to take illicit drugs found problems such as increased delinquency, unemployment, divorce, unwanted pregnancy and a higher incidence of abortions in young women. This research not only shows that drug use not only has negative psychological and physiological repercussions but also impacts their social life and future prospects.

## Rational

Previous research, therefore, shows that young people deal with have numerous stressors such as chronic and major life stressors. Therefore adolescents may turn to illegal substances to help deal with these issues, this, in turn, can lead to subsequent health and social problems. However, the research fails to underline the longitudinal effects of substance abuse at such an early age. What impacts has this substance abuse had on their lives that may not have been present when they were younger? And by knowing this information would it provide a better understanding of how to prevent these effects in older age occurring?

This paper proposed research to explore issues that result from substance abuse during adolescence, that occur later on in life. This would provide a better understanding into the lives of those who have been affected by drugs and therefore would allow for better research into preventions for young people in the future.

## Method

### Design

The design of this study used the qualitative method of semi-structured interviews as the aim is to explore the experiences of the participants in relation to drug abuse during youth. Semi-structured interviews allow for predated open ended questions to be used in order to gather information on the research area that is being discussed but also allows for flexibility to ask questions during the interview based on the responses of the participant allowing to dig deeper into the experiences of the participants that were unforeseen (Longhurst, 2003).

## Participants

Participants were aged over 18, with the sample being aged from 26+ as this was a retrospective study and explored past experiences, the sample size will consist of 4 participants. Purposive sampling was used in collecting participants as it allowed for gain a sample from a certain cultural domain with experience in the research topic (Tongco, 2007). Participants were recruited through a recovery organisation in South Wales. From this sampling method, inclusion criteria were developed. Criteria consisted of individuals who participated in drug abuse during their adolescents in order to cope with stress. In order to gain access to this sample, the recovery organisation were contacted and an agreement was reached to collect the sample through their organisation.

## Materials

To ensure that the interviews enough information was collected an interview schedule was developed. This was developed by scripting questions based on research findings from the literature and to script questions that participants were able to divulge as much information as possible. This was done scripting the questions so that they were open ended (Gill, Stewart, Treasure & Chadwick, 2008). A consent form and information sheet were developed in order to establish fully informed consent from the participants. All these documents were created using Microsoft Word. To record the interviews, recording software on the iPhone was used. The interviews were entered into a password encrypted PC to protect the sensitive information before being transcribed again on Microsoft word.

## Procedure

Based on the aim of the study, the sample was provided by the recovery organisation themselves based on the inclusion criteria that was provided. A consent form and an information sheet were given to the participants before the interviews were conducted, this allowed them to be fully informed of the criteria that was required to participate and what the study would entail and the benefits and risks and then provide consent. The interviews were conducted in the recovery organisation. The responses were recorded in order to collect the data and the information collected was then later transcribed for analysis.

An interview schedule was created with questions based on the participants lived experiences of drugs, what lead them to use drugs as a coping strategy during their youth and the impacts it has on them now. An example of this would include "What stressors did you deal with during your youth and how did they affect you?" This allows for the participant to describe what was affecting them and go into description into how these possible stressors may have affected them. Not only were the questions open-ended to collect as much descriptive data as possible but also to establish and identify the general characteristics of the participants.

## Ethical Considerations

Ethics forms were approved for this study by Cardiff Metropolitan University on the 20<sup>th</sup> of March 2018. Ethically it was easier to collect data from adults as working with adolescents provides more ethical restrictions. Therefore the sample were required to be over 18.

Participants were provided contact information for the researcher as well as contact information for the recovery organisation involved if they required additional support, as what was discussed was of a sensitive nature. Participants were informed they had the right to

refuse any questions that they were not comfortable answering, furthermore, they had the right to withdraw from the study at any point and also had a two-week window in which they could redact their participation once they had seen their transcript. Following ethical guidelines participants' anonymity was upheld by giving each participant a pseudonym in the transcript and that all data collection was only witnessed by the researcher and the supervisor, furthermore all data collected was protected by password encryption in order to keep all data protected and confidential.

### Method of Analysis

The study utilises a qualitative method, using semi-structured interviews in order to collect data. This data was then analysed using the qualitative method of Interpretative phenomenological analysis (IPA). IPA allows for better understanding of the complexity and the content of what the participant is trying to express. This also gives the ability to gain a more in-depth analysis of the participants' psychological world. In order to gain this insight, an interpretive relationship must be developed through thorough engagement with the transcript and the participant themselves. However all analysis in this report will be down to interpretation and therefore it is of vital importance that the findings are interpreted from an objective standpoint (Smith & Osborn, 2007).

This method was more beneficial to the aim of the study as the aim was to identify and understand the emotional and psychological effects of drug misuse during adolescence (retrospectively) as opposed to just identifying correlations using quantitative methods. Participants were asked to divulge as much information as possible in regards to their lived experiences with drugs and the world around them during their time as an adolescent and

now that they are older. IPA was then the most suitable method of analysis as it allows the researcher to explore the psychological world around them in relation to drug abuse.

## Findings

Through the data collection, four superordinate themes were identified. Stress and emotions, substance abuse, family and relationships, and recovery. The table below provides evidence of those themes.

Super-ordinate theme: Stress and emotions		
Emergent themes	Quotes	Page/ line no.
Stress caused by early childhood trauma	'my father got killed a week before my ninth birthday and uh that was the first start of any stress' – Danielle	1.9
	'I was abused by my stepdad when I was at home so my mother didn't believe me so she kicked me out so I was homeless' – Sarah	1.14
	'when I was 14 my parents died' – Nick	1.15
	'at seven or eight I was groomed by a family member and that went on for about five or six years' - Ryan	1.11
Drugs used to suppress emotions	'the only way that the drugs helped me is that it took me away from the situation that I was in it removed me from the situation I was in' – Danielle	2.66
Drug abuse to numb emotion	'so I found drink helped and the drug taking helped Psychologically when he used	2.92

Emotions repressed by substances	to beat me up it didn't hurt so much' – Sarah	2.101
Substances stunted emotion	'guilt comes in well I couldn't have that I couldn't have guilt could I so the only way was to use and drink more because you're burying it' - Nick  'Emotionally more I think I was more unaware of my emotions, because of the alcohol you lose contact with your emotions.' – Ryan	2.70

Super-ordinate theme: Substance misuse		
Emerging themes	quotes	Page/ Line no.
Types of substance misuse	'heroin and umm... cocaine those were the only two' - Danielle	2.73
Constant substance misuse	'I would substitute so if I didn't have drugs I would drink so pretty much every day' - Sarah	2.73
Emotionally reliant on drugs	'I just couldn't wait for the day to finish, to go home well not even to go home to go down the pub so just go to the pub or have a joint it didn't matter' – Nick	3.128
Substance abuse as a social lubricant	'I wanted to be more talkative be more confident and again at that age, I looked a bit older than I was, so issues of intimacy came up and alcohol was always part of that so the drinking and the drugs.' - Ryan	1.24
Physical harm caused by substance abuse	'I've got a lot of scarring and track marks because I could never ever find a vein so I would just hit and just hope for the best' - Danielle	3.121
Side effects of drug abuse	'yeah anxiety' - Sarah	3.141
Long-term effects of drug abuse	'short-term memory has gone pretty crap' - Nick	5.252
Substance became a support	'So to me, alcohol became the crutch to everything, if it didn't make things seem better it	2.88

	made them seem bearable.’ - Ryan	
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**Super-ordinate theme: Family and relationships**

Emerging themes	Quotes	Page/line no.
Stress of substance abuse on family	‘he was sniffing lighter gas so I said right, leave so he threw the phone at me and said if you want me to leave you will have to phone the police and I said fine that's what I'll do’ - Danielle	1.38
Stress of abusive relationship	‘I met somebody who said they would look after me and I went to live with them and that turned to be a really abusive relationship.’ - Sarah	2.51
Family breakdown caused by drug abuse and stress	‘I thought emotion wise it messed my head up equated love and pain as the same thing so I thought because my wife and the kids I had to make them not like me because my head was telling me they're gonna get hurt if they stay with me they're going to get hurt because something bad is going to happen I thought I should push them away.’ - Nick	2.92
Breakdown of family relationships	‘I'd say from the age of 18 I wasn't really part of my family.’ - Ryan	2.100
Repaired relationships with family	‘I have a good relationship with all the family and I have a brilliant relationship with my children’ – Danielle	4.177
Recovery allowed repairing of relationships	‘Now that you're clean have you and your son got a good relationship?’ ‘yeah, he’s in the army now that's good’ – Sarah	7.353
Ability to build and maintain new relationships	‘I met my wife five years ago, and to be able to hold a relationship’ - Ryan	8.409
Repaired family breakdown	‘Yeah, yeah massively, When I was in recovery my daughter turned to me and said I've got a magnet on my fridge ‘I've got my dad back’ - Nick	6.312

Superordinate theme: Recovery		
Initial support for recovery did not work	'I withdrew myself and 10 days into withdrawal off the methadone I started to be ill and so I went back to CU and said look I'm really ill and they said oh we can make you feel better within 20 minutes we can give you a prescription and I said well no I don't want another prescription I haven't gone through 10 days of suffering and going through withdrawal symptoms to start again so I left and I went back home and just dealt with it my own way.' - Danielle	2.84
Coping mechanisms as recovery	'with the tools I've learnt here, new no breathing exercises, psychologically talking to myself on bad days, saying you know I'm going to be ok, it's going to be ok with it breathe through it.' - Sarah	3.145
Failed recovery	'for a start, I asked for help in the wrong area in 2002, so I went for the assessment and they just said stop going to pubs which was a wonderful cheers mate and that was a doctor so to me that just gave me the green light there was nothing they could do' – Nick	5.216
Beginning of emotional recovery	'It wasn't my guilt it wasn't my fault. Umm and then I think at that point wow, ok what else can I do but then it was just a conscious decision to give it a go great see how it turns out' - Ryan	6.318
Recovery has made them a stronger person	'yes I am a stronger person for coming through that umm and the influences this had on me' - Danielle	5.217
Recovery helped with stress	'that was good because it helped with the abusive relationship and the domestic violence, I sort of the forgave	5.256

	him, if you like that took the power away that was good for me' - Sarah	
Rewards for recovery	'I'm always saying we need to reward ourselves positively, it's not the same one but the first thing I bought myself when I stopped drinking was a watch it might not seem it's expensive but it was an £80' - Ryan	9.437
Benefitted from certain support	'the main thing they've given me is that it sorted my head out because I put in for proper counselling and it went on and on and on and I was lucky because we're not trained counsellors but because it is peer lead, they've lived it they know, and they've sorted my head out' - Nick	5.261

(Table 1. Superordinate themes)

Above is a table which identifies the four main superordinate themes of the findings. All themes will be set out individually breaking down each theme and identifying where these themes impacted the lives of the participants from adolescents till now. Pseudonyms were used to protect the identities of the participants and their families.

### Stress and emotion

For all participants, stress and negative emotions can be identified early on in their lives, with all participants suffering from traumatic events during their childhood and early adolescents.

For Danielle early stressors began at nine years old with the loss of her father just before her 9<sup>th</sup> birthday, Danielle states:

*'My father got killed a week before my ninth birthday and uh that was the first start of any stress cuz they literally wanted to bury my father on my birthday'*

Before continuing:

*'None of us as a family have ever come to terms with it you get to a stage where it's just acceptance and... and that's what you have to do.'*

For Sarah the stressors in early life were different. Sarah States that:

*'I was abused by my stepdad when I was at home so my mother didn't believe me so she kicked me out so I was homeless.'*

She later goes on to say that she was '13' at the time and that:

*'I don't even know how I ate, I used to have a banana, a pint of milk and a Mars bar everyday'*

For Nick the stressors started at the age of 14 during early adolescents:

*'When I was 14 my parents died my father died on November the 11th and my mother died on December the 23rd the same year'*

Ryan's stressors began at the age of seven when he was groomed by a family friend:

*'At 7 or 8, I was groomed by a family member and that went on for about five or six years I was 14 when it's stopped happening'*

For all participants, they highlighted the initiating or first stressors in their lives. All stated that the impact of these would continue impact on them and that they continue to suffer from very stressful situations or further emotional issues. However on interpreting the interviews most of their future stressors can be attributed to these incidents that occurred at these points in their lives.

For Danielle the stressors continued to impact her life as she had her first child at 17:

*'I had my eldest son very young umm because he arrived early so I had him just before my 17th birthday'*

After that she then lost her husband to suicide after an argument involving the police:

*'he was sniffing lighter gas so I said right leave so he threw the phone at me and said if you want me to leave, you will have to phone the police and I said fine that's what I'll do well I phoned the police and told the police umm I wanted him to leave and he wouldn't and about 5 or 6 weeks after the police called and said he killed himself'*

For Sarah the stressors continued once she was homeless and found herself in another abusive relationship:

*'I met somebody who said they would look after me and I went to live with them and that turned to be a really abusive relationship.'*

The stress for Nick continued later on in life when the stress of losing his parents caused him to develop a mind-set:

*'In my head, I have turned everything around the way I because I thought emotion wise it messed my head up equated love and pain as the same thing.'*

The stress Ryan later endured as a result of the grooming caused emotional stunting:

*'I couldn't have a relationship with someone my own age or even slightly older I went out with women that were mostly 10 years older than me.'*

Stressors developed in early childhood and adolescence has had a detrimental impact and on the participants. For all of the participants, the major life stressors have had longer lasting effects with participants going on to be homeless, dealing with future stressors such as suicide or becoming emotionally stunted through loss or sexual abuse. This shows that stress has not only impacted them during adolescents but has followed through into young adulthood and further on. Furthermore, due to fact that these stressors had further consequences on the futures of the participants, it goes without question that the support during their childhood was not there and would further lead to maladaptive coping strategies.

### Substance misuse

As a way of dealing with the stressors they endured during childhood and adolescence, all participants used substances a way of dealing with these stressors

Danielle states that she was introduced to drugs by her husband:

*'I got married to him when I was 21 he umm he introduced me to drugs'*

She then later goes on to state how the drugs helped her during stressful periods in her life while also listing the substances she used in order to help cope with stress:

*'The only way that the drugs helped me is that it took me away from the situation that I was in.'*

*'Heroin and umm... cocaine those were the only two'*

Substance abuse became harmful to Danielle with long-term use leaving her with scars:

*'I've got a lot of scarring and track marks because I could never ever find a vein so I would just hit and just hope for the best'*

Sarah was first introduced to drugs by people she mixed in with while she was homeless

*'I started mixing them with the wrong people I started taking tablets'*

This was used as a way of dealing with her emotions:

*'It blanked out thought that was going on in my head.'*

Substance abuse then got worse as she ended up in an abusive relationship:

*'It all escalated as I started taking amphetamines and cocaine'*

Substance abuse from an early age left Sarah with issues later on in life:

*'Yeah anxiety' and 'maybe a bit paranoid'*

With Nick, substance abuse started around the age of 14 after the death of his parents:

*'So I was 14 taking cans and drinking in school'*

*'You're talking 71/72 so then you're all smoking dope so I did so you know you were drinking smoking'*

The substance abuse was used as a way of calming emotions and also used as a social tool in order to fit in with the specific peer group involved with substance use:

*'Well it chilled me out for a start but I also had somewhere to fit in because I didn't I didn't sort of much fit in with my age group'*

As Nick got older substances were used as a way of suppressing unwanted emotion:

*'Of course, guilt comes in well I couldn't have that I couldn't have guilt could I so the only way was to use and drink more because you're burying it'*

Eventually, the substance abuse increased even more:

*'I just went bonkers well I was smoking dope well then there was speed then when I moved out and moved to Swansea I was drinking and taking speed all time.'*

Eventually, Nick was left with long-term effects of substance abuse

*'Short-term memory has gone pretty crap'*

For Ryan substance abuse started alongside the grooming where his abuser would give him cannabis and alcohol:

*'I think I had an early introduction into alcohol and cannabis at 7 or 8 I was groomed by a family member'*

Alcohol and substance abuse was then used as a social lubricant:

*'I wanted to be more talkative be more confident and again at that age, I looked a bit older than I was, so issues of intimacy came up and alcohol was always part of that so the drinking and the drugs.'*

Substance was also used to stunt emotion:

*'Emotionally more I think I was more unaware of my emotions, because of the alcohol you lose contact with your emotions. Whatever the emotion is I will use alcohol for it, so if I ever felt down I would have a drink if I felt angry.'*

However, substance abuse was used in order to commit attempted suicide

*'I would say there were several half-hearted suicide attempts... I had overdosed on paracetamol only because I was lucky at the time and somebody found me.'*

The substance abuse also caused frequent visits to A&E and law enforcement

*'I think the impacts were frequent visits to A&E from either fighting or falling umm few encounters for the justice system, a few nights in the cells'*

For Ryan the substance abuse caused long-term damage:

*'I've got cerebellar atrophy I said 'what does that mean?' my cerebellar is wasted due to alcohol'*

For all participants, the substance abuse formed a similar pattern throughout their lives. Their initial introduction to substances from someone within their lives. Followed by the use of substance to repress emotions or to fit in with someone. This was then followed by long-term substance abuse which lead to issues such as escalating substance use and moving to more harmful substances. In the case of Ryan, substance abuse lead to social disorder or physical harm. For all participants, the use of substances led to long-term damage, with some participants suffering from scarring, physical damage or loss of functions. In the case of Sarah, she has suffered from mental problems such as anxiety and paranoia, overall the results have shown that substance abuse has had short-term benefits in the replacement of proper forms of support, with suppressing emotions and acting as a coping mechanism for their stressors. However, for all participants, substance abuse has also lead to other problems for them and has left them with long-lasting effects long after becoming clean.

## Family and Relationships

Over the course of the interviews, it became apparent that the effects of drug abuse had on the families of the participants and the subsequent strain it had on both the participants and the families.

For Danielle strain upon her family in terms of substance abuse started with her husband:

*I got up and umm he was sniffing lighter gas so I said right leave so he threw the phone at me and said if you want me to leave you will have to phone the police and I said fine that's what I'll do.*

The strain on her family became much worse came later when she found out that her husband then later killed himself leading to emotional distress from her child:

*'The police called and said he killed himself so more stress on top which our son said 'is it' went into his bedroom and made a hole in his cupboard door.'*

Eventually, Danielle's own substance abuse would lead to the breakdown of her family with her son's moving in with her mother:

*'it got to a situation where my children would always go to my mum's for Sunday dinner and my eldest son broke down and said to my mum and my sister I don't want to go back I don't want to live there anymore.'*

Eventually, after getting clean, Danielle was able to repair her relationships with her family and her children:

*'I have a good relationship with all the family and I have a brilliant relationship with my children.'*

For Sarah her relationship with her family broke down really quickly with her mother forcing her to become homeless:

*‘So my mother didn't believe me’*

Her mother chose to believe that her stepdad was not her:

*‘So she kicked me out.’*

For her relationships became worse by entering an abuse relationship

*‘I went to live with them and that turned to be a really abusive relationship.’*

Her relationship with her mother eventually become partly fixed, however, Sarah still lives in resentment of her mother:

*‘Yeah but I do not hardly see her... I'm still resentful for it’*

Her drug abuse also causes a breakdown in her relationship with her son

*‘It just messed my whole life up I couldn't eat properly I couldn't function without it I was near death because of it I lost my son over it.’*

But eventually managed to repair her relationship with her son once she got clean:

*‘Yeah, he's in the army now that's good.’*

Nicks relationship with his family broke down after his substance abuse caused him to push his family away:

*‘I had to make them not like me because my head was telling me they're gonna get hurt if they stay with me they're going to get hurt because something bad is going to happen I thought I should push them away.’*

The breakdown of his family then caused more substance abuse issues for Nick

*'when I split up from Lyn That is when I just went bonkers well I was smoking dope well then there was speed than when I moved out and moved to Swansea I was drinking and taking speed all time.'*

However, during his recovery Nick was able to repair relationships with his children:

*'When I was in recovery my daughter turned to me and said I've got a magnet on my fridge I've got my dad back, I don't need medication because I've got that on my fridge and I look at it every morning, my son still not great but it's far better far better.'*

For Ryan the breakdown from his family started during his early teen years when he believed that he was looked down upon from his family:

*'I wouldn't say that I was shunted by the family but I perceived it that way, I wasn't right to be part of the family'*

Substance abuse would then lead to the breakdown of his family as he got older

*'It became my drink, I was spending too much I was always out, there was violence but violence on both sides, umm and that relationship broke down.'*

However, after getting clean Ryan was able to reconnect with his family:

*'My mum died 2 years ago. But I really felt part of the family, being able to be there for her, between us there seven of us, so we had a rota mine was, my definite part of the rota was Tuesday afternoons... so with I'm right now with my brothers and sisters'*

Furthermore, he was able to repair relationships with his children.

*'My children are back in my life'*

Overall, all the participants saw relationships breakdown within their family dynamic due to the participants' substance abuse with all participants relationships with their children breaking down and in Ryan's case a breakdown with the rest of his family. However, with Sarah, the breakdown of her family relationships resulted in her substance abuse, but also similar to the other participants was the cause of the breakdown in the relationship between her and her son. For all participants, once they became clean they were able to repair the relationships with their families and their children. However again with Sarah's relationship with her mother due to the circumstances of their breakdown meant that there is still strain on their relationship and her mother's lack of acknowledgement for the issue still leaves resentment between the two. Overall substance abuse caused strain within their families, however, this was not lasting as once they were clean all participants were able to repair to some degree all family relationships.

### Recovery

Over the course of the interviews, the final super-ordinate theme that became recurrent was Recovery. For Danielle recovery began when the breakdown of her family as her children left the family home:

*'that's when I decided to get clean I just thought I was devastated over losing my children and devastated that I traumatised them so much through my misuse and I decided that I am not doing this anymore'*

Danielle tried programmes to try and get off by struggled to use those methods:

*'I ask to be put on a withdrawal programme so they put me on a methadone programme so I was on methadone for six months but I thought I don't want to be on methadone anymore so I withdrew myself, and 10 days into withdrawal off the methadone I started to be ill.'*

Eventually, Danielle was able to recover from drug addiction on her own:

*'It was a struggle, to begin with, but for me, it was the only way that I could, I could, could get away from it and the program'*

Danielle has now been clean for a while:

*'Six, seven, six and a half years'*

She now uses her past to help others suffering from abuse by working with a centre

*'I explain what the centre is about as a centre as a whole and I always say we've got an open door policy and we only ask that people do not attend under the influence and that anybody is welcome at any time.'*

For Sarah, the turning point for deciding when to get clean happened when she had a brain haemorrhage:

*'I was about 25 I went to award to detox, to the point where I was shaking every day it was a terrible time and then I came out but this place wasn't around I had nowhere to really go for help and then I sort of relapsed and carried on taking them and then I had my brain haemorrhage.'*

Sarah now helps out at a centre which helps her through her recovery:

*'Just tell them my story really we all just really relate to one another we've all got different stories we've all got our own journey but all you can do is sort of not advise but, but try and understand the similarities were all going through'*

Sarah has now been clean for a while:

*'5 years'*

Recovery also helped her to overcome her past struggles:

*'It helped with the abusive relationship and the domestic violence, I sort of the forgave him, if you like that's took the power away that was good for me.'*

For Nick, the turning point for him to get clean came when he got bad news from his doctor:

*'9 years ago I was diagnosed with COPD and emphysema so I was in the doctor's got up went to leave and said I couldn't do it no more.'*

For Nick this wasn't the first time he looked to get help, however, that attempt was unsuccessful:

*'For a start, I asked for help in the wrong area in 2002, so I went for the assessment and they just said stop going to pubs which was a wonderful cheers mate and that was a doctor so to me that just gave me the green light there was nothing they could do.'*

Now Nick is currently recovering from substance abuse with a centre

*'My thought process it's still kind of messed up pretty quick. Because everything could be going great and I turn things around for no reason whatsoever I don't know you know and it's through the help with the centre because the problems with drug and alcohol abuse, the main thing they've given me is that it sorted my head out.'*

Nick has now been in recovery for a while.

*'17 months'*

For Ryan the turning point came when he was told that he had Cerebellar atrophy:

*'I think I just I think I had enough, I was 40 years old I had nothing had tried in the past to do things for my family and for my children, I couldn't do it for anybody else I've had to do it for me, and what did I want I wanted more than I had had I wanted more positivity I wanted some positive if anything'*

However, for Ryan, there was also attempts that were unsuccessful:

*'So I tried I thought I would go to AA, tried AA for a brief period, it kept me of the drink for a brief period but it didn't stop me you know, I tried just stopping on my own but that last a couple of weeks.'*

When Ryan does attempt to become clean he found that was an emotional struggle:

*'I had to know I can manage any situation as they came through, terrifying, I was terrified, up to about a year or 18 months sober, the changes ahead of me were terrifying'*

Ryan then goes on to talk about how support helped his recovery:

*'I think peer support has been a huge part so being around before the Centre, I volunteered with people in recovery of substance misuse, I used to give presentations around it, umm so that built my confidence, and built my self-esteem, finding out that it just hasn't happened to me and that bad things happen to other people and they've gotten through it'*

For all the participants, their recovery seemed all follow a similar narrative. For all participants, there was a moment that finally tipped them into the mind-set that they needed

to get help to deal with their substance abuse, for most participants it was due to detrimental health that was caused by their substance abuse, with Danielle being the exception and getting help for the sake of her children. For all participants, they struggled at some point with trying to get clean, whether it be struggling with withdrawal or due to relapsing. Furthermore, Ryan also continues to describe the emotional struggles of getting clean. For all participants, in the end, they ended up working with a centre and for most participants used their stories to help others. Overall recovery is seen as an important theme in their lives as it shows the turning point in their lives and influences the choices for their future.

## Discussion

From previous findings, the aims of this research were to explore the issues that result from substance abuse during adolescents, how it affected the participants then, how it has affected them now and how they have got to this point in their lives. The results gave an in-depth insight into the lives of those who have suffered as a result of substance abuse in their adolescents. From the transcripts, four superordinate themes were identified; stress and emotion, substance abuse, family and relationships, and recovery. These four themes identify where the participants started with the initial stressors that pushed them towards substance abuse and how the substance abuse helped as a maladaptive coping strategy, for example, one participant's initial stress occurred when he was 14, after losing both of his parents. As a result, the participant moved towards substance abuse as a way to calm his emotions.

The superordinate theme of substance abuse identified the substances they used and how they came into contact with them, as well as the impacts the substances had on them at the time and the impact the substances had later on in life. Danielle got involved with drugs through

the people she was in contact with while she was homeless, this then escalated during her abusive relationship. The substance abuse eventually left her with anxiety issues and paranoia.

The superordinate theme of family identifies the struggles and the breakdowns of the relationships with the participants and their families, this is seen in one participant's interview where her children emotionally broke down due to the substance abuse and removed themselves from the family home. This is seen with other participants too, once the participants had recovered from their substance abuse and addictions they were able to repair their relationships with their families and children.

The final superordinate theme that was identified was recovery, this is seen as the turning point as to when they wanted to quit using substances, as well as outlining their struggles with battling addiction and what they have done since their recovery. It was found that most participants found their turning point after they were diagnosed with severe conditions with some being down to their substance abuse. All participants ended working with a recovery centre to help others and were using that as a way to help themselves.

This study found similar findings of Ayerst (1999) and Peters et al. (2010) whereby turning to substance abuse as a way to cope with their major life stressors such as homelessness and loss of family members. Findings from one participant who used substances as a social lubricant and as a way of dealing with day to day emotions such as anger and depression are similar to findings of Leonard et al. (2015) who found that young people will use substances as a way of dealing with chronic normative stressors such as emotion and try to fit in with peer groups.

The findings also correlate with the expectancy theory (2005) where it is suggested that there is an expectancy that the substances they are taking are expected to relieve them of their stressors. This can be evidenced in this study, as all the participants had expectancies that the

substances they were taking would relieve them of their stressors by, either making themselves feel numb or providing feelings of confidence and expecting these substances to make more socially accepted. This also correlates with Cooper et al. (1988) with substances having positive expectancies. This can be seen in this study with one participant using the substances to avoid emotions of guilt and believed that taking substances would help avoid that guilt.

It also had similar findings to the study conducted by Shubert et al. (2011) in which they found that young people who took cannabis were likely to develop psychotic symptoms as well as depression. This can be seen in one of the participants in this study who developed depressive symptoms after smoking cannabis from the age of seven. However even though these studies show similarity it is hard to distinguish in this study whether or not the cannabis had any contribution to the participants depressive symptoms as from the age of seven they were being sexually abused by a family friend up until the age of 14 Furthermore, the participant was also consuming alcohol at a young age which could also be a factor in the depression. Therefore even though the studies share a similarity, it cannot be determined whether or not the depressive symptoms were caused by the cannabis or just something that coincided with the substance abuse.

Similarities were also found between this study and a study conducted by Kandel et al. (1986) in which the ramifications of drug abuse led to increases in delinquency, unemployment, divorce and unwanted pregnancy. Within this study, it was found that one participant had several altercations with law enforcement and also lost their job. One participant suffered massively from a divorce and another had a child at the age of 17, however, it is unclear whether or not it was a planned pregnancy. Furthermore, another participant was homeless at the age of 13 and was unable to attend school, therefore, having a negative impact on their future prospects. Overall both studies share a lot of similar findings. However, one difference

between their study and this one is that there were findings of abortions amongst any of the participants and no signs of any unwanted pregnancy.

### Reflexive analysis

Upon reflection, there are several different aspects to this study that need to be addressed as to what worked effectively, what could be done differently if this study could be conducted again and where to go in the future. First of all one aspect that is to be analysed is my role as the researcher. I decided to forego this study as I wanted to challenge stereotypes about young people and adolescents in regards to drug abuse in that I believed that from what I saw in news stories and other places that young people are reckless and only want to drink and take drugs. I believed that there must be more to this than what is said and decided to explore that and possibly challenge that. I believe that in my role as a researcher, I was able to remain objective in what the participants were saying, even though a lot of the stories were of a very sensitive nature. Personally, some of the answers at times were hard to listen to as a lot of what was said was very emotional. However both I and the participants remained composed and respectful.

Upon reflection, I would change some of the questions on the script as I believe in hindsight that they were too similar. Also, there were times during one interview where I lost my pacing and had to take a moment to think of what direction to take the interview in which is why a better set of questions would have been beneficial. However, as the script was semi-structured I believe that some of the questions that were asked in response to the participant were able to gain insight into some of the more personal sides of the participants and give a detailed insight into their lives. That being said, upon reflection there are some answers that

in hindsight I wish I had explored a bit deeper into to gain a better understanding as to what these individuals had experienced.

The use of IPA was personally the best choice for this study. This allowed me explore the lived experiences of the participants and due to the quantity and quality of the detail of the answers, interpreting their answer was very straight forward. However transcribing it proved to be difficult at times as the recording device used did not pick up everything as clearly as I would have liked.

For future research, it would be beneficial to see if there are any further long-term effects from drug abuse with the elderly community, this is due to the fact that all the participants now suffer from conditions caused by drugs or suffer from emotional or mental issues such as anxiety or short-term memory. Therefore it may be interesting in the future to see if these conditions get worse as the people reach old age or to see if there is a correlation between substance abuse at an early age and health problems at old age. Furthermore, it may also be worth looking at the support that is available to young people in terms of getting the support they need to help avoid situations that these participants found themselves in.

## Conclusion

In conclusion, previous theories and studies have identified reasons for why adolescents turn to substance abuse at an early age in order to cope with stress. This study has found similar findings to support these theories, in finding that the major life stressors at an early age can cause adolescents to turn to substance abuse to cope with the stress whether it be sexual abuse or the loss of a parent. This study has further highlighted the importance of supporting adolescents at a young age so that they do not turn to substances. This study has also further

highlighted the issues substance abuse has on the physical and mental well-being of adolescents as they get older and impact it has on their families during adolescence and in the future. This study has also highlighted the effects it has when they are older and the importance recovery has on rectifying family relationships as well as physical and mental wellbeing. Further research is necessary into the further longitudinal effects of substance abuse in old age as well as the support around young people today in order to avoid this lifestyle.

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## Appendices

### Appendix 1.

#### Interview script questions

This is a semi structured interview so some questions may come from responses of the participant and therefore will not be listed here.

#### Background questions

As stated by agreeing to this study, you used drugs during your youth as a way of coping with stress.

How old were you when you started and what drugs did you use?

What stressors did you deal with during your youth and how did they affect you?

Why did you turn to drugs as a way of coping with these stressors?

How did the drugs make you feel when you were taking them and did they have any after effects?

Did taking the drugs in question cause any problems for you? If so what were they?

#### Present Questions

Are you still participating in drug use?

How has taking drugs affected you now?

I.e. physically, mentally, life prospects etc.

Are any of the issues that were apparent then still apparent now?

Has it caused any issues that were not present during your youth?

In hindsight what would you have done differently and what advice would you give the younger generation that may be in the position that you were once in?

## Appendix 2.

### Super-ordinate theme of stress and emotions clustering

Stress and emotion interview 1
Stress caused by early childhood trauma
Stress of having child at early age
Stress of substance abuse on family
Stress caused by being around substances
Drugs used to suppress emotions
Emotional situation causes change
Long term emotional strain
Stress and drugs issues cause changes in self

Stress and emotion interview 2
stress of early childhood trauma
Emotions of anger and neglect
Stress of living conditions
Emotions of anger
Stress of abuse and dangerous relationships
Negative emotions when not on substances
Drug abuse to numb emotion
Stress caused by life stressor and near death
Stress of abusive relationship
Emotions of resentment
Relieved of adolescent stress
Held onto negative emotions
Emotionally more open
Recovery helped with stress
Stress at that time is hard to reflect upon
Stress cause mature growth
Stress of adolescents impacted childhood education
Substance abuse is caused emotional issues later on.
Substance misuse causes negative emotions towards family breakdown

Stress and emotion interview 3
stress caused by early childhood trauma
stress caused by lack of support
lack of emotional support
stress of loss and substance abuse caused maturity
Emotional trauma
Emotions repressed by substances
Stunted emotions
Emotionally reliant on drugs
Drug abuse caused stunted emotions
Emotional change

Mentally and emotionally tired and hit rock bottom emotionally
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Emotionally recovering
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Stress and emotion interview 4
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Stress caused by early childhood trauma
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Stress over sexual identity
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Stress led to substance abuse
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Stress of sexual abuse led to substance abuse
---

Emotionally stunted by childhood stress
---

Substance stunted emotion
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Stress due to current issues effecting society
--

Emotionally impacted by breakdown
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Substance abuse and emotional turmoil led to suicide attempts
---

Emotionally burdened by guilt and shame over abuse and sexuality
--

Stress and emotions led to further substance abuse
--

Stress of abuse did not change mind-set till later in life
--

Beginning of emotional recovery
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Emotional struggle of recovery
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Emotionally more positive
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Emotionally more developed
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### Appendix 3.

#### Superordinate theme substance misuse clustering

Substance misuse – interview 1
Drugs used during stressful period
Stress of substance abuse on family
Drugs cause conflict on family
Stress caused by being around substances
Drugs used to suppress emotions
Drug abuse escalates
Physical harm caused by substance abuse
Drug effects on self and family
Drug influences future plans
Supports others to support themselves through drug issues
Stress and drugs issues cause changes in self
Final thoughts show negativity towards substance abuse

Substance misuse – interview 2
Substance abuse as a coping mechanism
Negative emotions when not on substances
Constant substance misuse
Drug abuse used as protection
Drug abuse to numb emotion
Side effects of drug abuse
Side effects of substance misuse
Long term effects caused by substance abuse
Substance abuse has caused emotional issues later on.
Family breakdown due to substance abuse
Substance misuse causes negative emotions towards family breakdown

Substance misuse – interview 3
substance abuse to dull emotions
Substance abuse caused by peer relations
substance abuse used a social lubricant
stress of loss and substance abuse caused maturity
Family breakdown caused by drug abuse and stress
Emotionally reliant on drugs
Relationships help drug abuse
Relationships altered drug abuse
Drug abuse caused stunted emotions
Drug abuse caused illness
Long term effects of drug abuse

Substance misuse – interview 4
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Drug abuse at early age
Substance abuse as social lubricant
Became dependent of substance
Substance abuse became prominent
Substance stunted emotion
Stress of sexual abuse led to substance abuse
Substance and stress caused sexual maturity
Substance became a support
Substance abuse used as an excuse
Substance abuse and emotional turmoil led to suicide attempts
Substance abuse caused visits to hospital
Substance stunted relationships
Substance endangered wellbeing
Maintained appearance under the influence
Substance abuse became life focus
Stress and emotions led to further substance abuse
Breakdown in relationships due to substance abuse
Substance abuse became too much to handle
Breakdown in living and relationships due to substances
Became ill due to substance abuse
Physical and mental damage caused by substance abuse
Impacts of substance abuse on family
Physical damage of substances

## Appendix 4.

Superordinate theme – family clustering

Family & relationships interview 1
Stress of substance abuse on family
Drugs cause conflict on family
Family strain
Family support
Family breakdown
Drug effects on self and family
Repaired relationships with family

Family and relationships interview 2
Stress of abuse and dangerous relationships
Stress of abusive relationship
Struggling family relationships
Lack of family support from mother
Support from new family
Family support was needed to help recover in hindsight
Family breakdown due to substance abuse
Recovery allowed repairing of relationships

Family and relationships interview 3
Family breakdown caused by drug abuse and stress
Breakdown in family due to emotions and drug issues
Relationships help drug abuse
Relationships altered drug abuse
Family breakdown
Recalling family death
Repaired family breakdown

Family and relationships interview 4
Stunted relationships
Breakdown of family relationships
Substance stunted relationships
Breakdown in relationships due to substance abuse
Breakdown in living and relationships due to substances
Repairing of family connections
Impacts of substance abuse on family
Abstinence helped fix family relationships
Family wary of relapse
Ability to build and maintain new relationships

## Appendix 5.

Superordinate theme – recovery clustering

Recovery interview 1
Initial support for recovery did not work
Struggled with recovery
Helps others with substance problems due to their recovery
Recovery has made them a stronger person

Recovery interview 2
Coping mechanisms as recovery
Recovery through comfort of others
Recovery by helping others
Support helps recovery
Recovery helped with stress
Relapse lead to recovery

Recovery interview 3
Failed recovery
Emotionally recovering
Benefitted from certain support
In need of support to stay in recovery
Final thoughts after recovery

Recovery interview 4
Failed recovery
Beginning of emotional recovery
Realisation of need to recovery for own benefit
Emotional struggle of recovery
Recovery caused loss of comforts
Working with others helped recovery
Family wary of relapse
Pride in recovery
Rewards for recovery
Final thoughts of how to help other in need of recovery

## Word count declaration

Abstract	186
Introduction	1592
Method	928
Findings	4835
Discussion	1628
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